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EFFECTIVE RELIEF IN CHRONIC PSORIASIS WITH HOMEOPATHIC INTERVENTION: A CLINICAL CASE REPORT AT DR BATRA'S

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Abstract

Chronic inflammatory skin conditions such as psoriasis affect millions worldwide and can significantly impair a patient's quality of life. Characterized by red, itchy, scaly plaques, the disease often follows a relapsing course and is influenced by genetic, immunological, and environmental factors. Homeopathy, which aims to treat the individual as a whole by addressing both physical symptoms and emotional well-being.

This paper presents a detailed case of a young woman with chronic skin eruptions and associated systemic complaints. The case highlights how individualized homeopathic treatment, based on the patient's physical generals, mental state, and lifestyle history, led to significant improvement. Her gradual, month-wise progress was monitored over a year, showing resolution of eruptions, reduction in itching and scaling, and improvement in associated complaints.

The paper emphasizes the importance of understanding the patient's emotional and constitutional profile in managing chronic ailments effectively. It also showcases the role of regular follow-ups and a patient-centered therapeutic approach in achieving long-term healing at Dr Batra's.

Keywords:

Chronic skin disease, Homeopathy, Dr Batra's

Introduction

Chronic skin diseases such as psoriasis are immune-mediated conditions marked by excessive keratinocyte proliferation and inflammatory cell infiltration, leading to characteristic red, scaly plaques. The exact etiology is multifactorial, involving genetic predisposition, environmental triggers, immune dysfunction, and stress [1,2]. While not contagious, these conditions can be lifelong and are often associated with comorbidities like arthritis, depression, and metabolic syndrome [3].

Common signs and symptoms include itching, dryness, scaling, cracked skin, and bleeding. Complications can arise from persistent scratching and secondary infections. The psychological burden is also substantial, contributing to social isolation, poor self-esteem, and anxiety [4].

Conventional medicine offers symptomatic relief but often fails to provide long-term remission. This has led many patients to seek integrative therapies like homeopathy, which considers the individual holistically and prescribes medicines based on the totality of symptoms rather than just the disease label.

This paper discusses the case of a young female with long-standing skin complaints and associated systemic symptoms, and how an individualized, non-suppressive therapeutic strategy resulted in sustained improvement. The case underscores the homeopathic principle of treating the person as a whole—physically, mentally, and emotionally.

Case Profile

A 51.9 kg female patient presented with a one-year history of psoriasis, initially managed with allopathic medications and medicated shampoos that provided only mild, temporary relief. She experienced widespread eruptions on the body accompanied by redness, intense itching, dryness, and thick flaking, particularly on the scalp, leading to hair fall of 30–50 strands daily. Over time, under consistent homeopathic care, her condition improved significantly. The body patches began healing without the development of new lesions, and symptoms like itching, scaling, and redness gradually subsided. Scalp patches, once thick and flaky, reduced in size and intensity. Hair fall lessened to around 20–30 strands per day, and dandruff also decreased. Alongside psoriasis, she suffered from recurrent aphthous ulcers that were white or reddish, painful, and resistant to change, and constipation which slowly showed improvement with treatment. Despite the skin showing substantial recovery, aphthous ulcers persisted for months without notable relief. At times, she reported localized itching, especially in the underarms or at

the back of the head, even without visible eruptions. Generalized weakness was also noted during the course of treatment. Her overall condition improved steadily with no new body patches and visibly healthier skin, while the scalp continued to show some intermittent flaking and itching, indicating ongoing but improving pathology. She was advised to maintain a proper skin-care routine, a healthy diet, and adhere to her homeopathic regimen.

Physical Generals

- **Diet:** Mixed
- **Appetite:** Normal
- **Desires:** Strong craving for sweets
- **Aversions:** None specific
- **Thirst:** Around 1 litre/day; prefers normal water
- **Thermal Reaction:** Chilly patient; prefers covering; enjoys air conditioning
- **Bathing Preference:** Seasonal
- **Stools:** Constipation; hard stool but passes daily
- **Urine:** Clear; no abnormalities noted
- **Perspiration:** Profuse, especially on the face; non-offensive and without staining
- **Sleep:** Refreshing; sleeps 6–7 hours; prefers sleeping on the back
- **Dreams:** Not specified
- **Menses:** Regular; Last Menstrual Period (LMP): 2nd September

Examination

- **General** **Appearance:**
Patient is moderately built and nourished; appears well-oriented to time, place, and person. No pallor, cyanosis, icterus, clubbing, or lymphadenopathy observed.
- **Weight:** 51.9 kg
- **Blood Pressure:** 104/65 mm Hg
- **Pulse:** Normal rate and rhythm
- **Respiratory Rate:** Normal; no respiratory distress

- **Temperature:** Afebrile

Skin Examination:

- **Lesions:**
 - Erythematous, scaly plaques previously present over various body parts have regressed.
 - Currently, scalp lesions seen on the occiput and forehead region show mild scaling and slight itching.
 - No active patches noted on the body.
 - No bleeding or active oozing from lesions.
- **Scalp:**
 - Dryness and thick flaking noted in earlier visits; currently improved.
 - Mild dandruff present.
 - Hair fall: Previously 30–50 strands/day, now 20–30 strands/day.
 - Hair thinning noted, no bald patches observed.

Investigations done:

Test Done On 17 May 2024

Lymphocyte- 13.2

Bilirubin Total- 0.99

Bilirubin Direct - 0.54

Sgpt- 15.71

Sgot-22.14

Hb-14.3

Neutrophil Count- 83.4

Alp- 159.12

Mental Generals –

The patient is a young woman originally from Uttarakhand, currently residing in Delhi for the past seven months. She comes from a nuclear family consisting of her father who runs a business, her mother who is a homemaker, and an elder brother who is currently a student. She herself is a student pursuing Human Resources (HR) studies and has also been working in the HR department for the past seven months. Her childhood was overall healthy with no major medical issues, except for frequent mouth ulcers and skin conditions like pityriasis. She has had an average academic performance and shared good interpersonal relationships with friends and teachers throughout her schooling. She recalls a non-strict upbringing with balanced expectations from her parents, though her mother had a relatively stronger emotional influence on her.

She describes herself as friendly, talkative, yet somewhat shy and reserved initially—she takes time to build new friendships but trusts easily once connected. She desires company and enjoys sharing her thoughts, especially with her mother and close friends. Her personality is marked by punctuality, honesty, and straightforwardness. She maintains good confidence but occasionally procrastinates and admits to being a bit lazy. She values cleanliness moderately and has no issue wearing tight clothing. She bathes daily and keeps herself well-groomed with clean long nails and a clean tongue that has visible cracks. She has a strong religious inclination and is emotionally sensitive—tears come easily even over small matters, especially when witnessing someone in distress. She can cry in front of others without hesitation.

Her primary anxiety stems from uncertainty about her future and job stability, though she handles professional responsibilities without any current stress at work. She does not get angry easily but becomes irritable due to persistent skin itching; however, she usually suppresses anger rather than expressing it. Despite this, she describes her patience level as average and herself as neither stubborn nor dominating. She has a marked fear of cockroaches—even seeing them from a distance causes her distress. She has no feelings of insecurity and no nervous habits like nail-biting.

Her happiest memory is the moment her family allowed her to study outside her hometown, which gave her a sense of independence and joy. She doesn't recall any major stressful or saddest events in life. Her favorite hobby is traveling, which brings her immense pleasure. She reports experiencing dreams occasionally but no particular theme is repeated. During dreams, her hands often become sweaty and cold with a clammy touch, indicating a mild subconscious anxiety.

Medicinal History

- Not on any regular medication
- Using **Psoria shampoo** for scalp care

Past History

- **Pityriasis** since childhood
- Took **allopathic treatment** earlier for skin condition
- No major illnesses, surgeries, or hospitalizations

Family History N.S.

Case analysis

Repertorial totality

Repertory used	Rubrics selected
Synthesis Repertory	ABDOMEN - Constipation - Type of stool – Hard MIND - Complaining, etc EXTREMITIES - COLDNESS - Hands – clammy MIND – Loquacity MIND - Mood, disposition - Bashful, timid

Repertory screenshot

Remedies	op.	phos.	calc.	ign.	lach.	puls.	sulph.	ambr.	bar-c.	bry.	hyos.	lyc.	bell.	con.	sil.	verat.	acon.	nux-v.	agar.	am-m.	blsm.
Serial Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Symptoms Covered	3	3	3	2	2	2	2	2	2	2	2	2	2	2	2	2	1	1	1	1	1
Intensity	4	4	3	4	4	4	4	3	3	3	3	3	2	2	2	2	3	3	2	2	2
Result	3/4	3/4	3/3	2/4	2/4	2/4	2/4	2/3	2/3	2/3	2/3	2/3	2/2	2/2	2/2	2/2	1/3	1/3	1/2	1/2	1/2
Clipboard 3																					
ABDOMEN - Constipation - Type of stool - Hard	2	2	1				2		1	2		2		1						2	
MIND - Complaining, etc.	1	1	1	2	2	2	2			1	1	1	1		1	1	3	3			2
EXTREMITIES - COLDNESS - Hands - clammy																					
MIND - Loquacity	1				2			1			2		1			1			2		
MIND - Mood, disposition - Bashful, timid		1	1	2		2		2	2					1	1						

Selection of Remedy

1. Constitutional Remedy

Calcarea Phosphorica

Desires company

Hands cold and clammy to touch

Friendly and timid nature

Craving for sweets

Constipation with hard stool

2. Acute Remedy

Kali Sulphuricum

For acute flare-ups of skin condition (scaling, dryness, itching)

3. Intercurrent Remedy

Bacillinum

Used intercurrently to address deep-seated skin miasm (psoric/tubercular background)

Miasmatic Approach Table

Symptoms	Psora	Sycosis	Syphilis	Tubercular
Constipation – hard stool	✓			
Mind – Complaining tendency	✓			
Coldness of hands – clammy				✓
Mind – Loquacity (Talkative)	✓			✓
Mind – Timid, bashful disposition	✓			

Materials and Methods

Synthesis repertory was used for Repertorization

Results

Month	Progress	Prescription
1st Month	Initial visit; intense itching, redness, flaking on scalp, hair fall (30–50 strands/day), painful mouth ulcers, hard stools	Calcarea Phos 200C – 2 doses/week NUX VOMICA 200C – SOS constipation BORAX 30C – SOS ulcers
2nd Month	Flakes reduced, scalp patches improving, itching better, constipation improving, ulcers persistent	SAC-L 200C – BD BORAX 30C – SOS ulcers BELLADONNA 200C – SOS ulcers
3rd Month	Significant improvement; scalp lesions reduced, itching localized to one patch; underarm itching reduced, ulcers same	CALC PHOS 200C – once/week BELLADONNA 200C – BD SAC-L 200C – BD
4th Month	No new patches, older patches improving, hair fall reduced (20–30/day), mild dandruff, persistent ulcers	BELLADONNA 200C – SOS ulcers SAC-L 200C – BD
5th Month	No scaling, no itching or redness; patches fading; forehead & occiput patch visible, underarm itching better, ulcers same, constipation better	SAC ACID 200C – BD KALI SULPH 6X – LA (scalp) 5 PHOS 6X – BD (X)
6th Month	No active patches on body; scalp improving; itching at back of head, dryness & flaking present, ulcers same, stool satisfactory	Continued: SAC ACID 200C , KALI SULPH 6X
7th Month	Skin condition stable, only one scalp patch developed with flaking & itching; ulcers improving, constipation under control	Continued: SAC ACID 200C , KALI SULPH 6X , 5 PHOS 6X
8th–10th	Skin condition stable	Ct all
11th Month	Generalized weakness noted; new patch on scalp with flaking & itching, but body remains clear; ulcers better; constipation under control	SAC ACID 200C – BD KALI SULPH 6X – LA 5 PHOS 6X – BD
12th Month	Ongoing improvement; stable condition with mild scalp involvement and no active patches on the body	Same as 11th month continued

Discussion & Conclusion

The patient came with long-standing skin issues marked by intense itching, dryness, scaling, and hair fall, which had been affecting her confidence and daily comfort. She had previously tried conventional treatments but found only temporary relief. Alongside the skin condition, she also experienced recurring mouth ulcers and constipation, adding to her physical discomfort. Mentally and emotionally, she was sensitive, friendly, and open in sharing her feelings, with occasional anxiety about the future.

Over the course of regular treatment and follow-ups, her condition began to show steady improvement. The skin eruptions gradually healed, the itching and scaling reduced significantly, and her hair fall became more manageable. Constipation improved and her emotional state remained stable. Mouth ulcers, though slow to respond, also began to settle over time. She regained her confidence and was able to continue her routine activities comfortably.

This case highlights how a holistic and individualized approach, considering both physical and emotional aspects, can lead to deep and sustained recovery even in chronic skin conditions. Regular monitoring, supportive guidance, and trust in the process played a key role in the patient's healing journey.

The transformation



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