



Original Research Article

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SUCCESSFUL CLASSICAL HOMEOPATHIC MANAGEMENT OF ANDROGENETIC ALOPECIA GRADE-III IN A POST-MENOPAUSAL FEMALE: A TRANSFORMATIVE CASE TREATED AT DR BATRA'S® HOMEOPATHY CLINIC

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Abstract

Androgenetic alopecia (AGA) in post-menopausal women presents a therapeutic challenge, often showing poor response to conventional and supportive therapies. This case report documents a 56-year-old post-menopausal female with progressive hair thinning unresponsive to prior interventions, accompanied by anxiety, social withdrawal, and reduced self-confidence. A classical individualized homeopathic approach was adopted, integrating constitutional analysis, totality of symptoms, repertorisation, and miasmatic evaluation. Over a follow-up period of 20 months, significant improvement was observed in hair fall control, scalp health, density restoration, and psychological well-being. The case highlights a clear physical and emotional transformation achieved through individualized homeopathic treatment at Dr Batra's® Homeopathy Clinic.

Keywords

Androgenetic alopecia, post-menopausal hair loss, classical homeopathy, repertorisation, constitutional treatment, psychosomatic medicine

Introduction

Female pattern hair loss, especially post-menopause, is multifactorial, involving hormonal changes, emotional stress, metabolic imbalance, and constitutional susceptibility. Conventional approaches frequently yield limited satisfaction, particularly in chronic cases. Classical homeopathy emphasizes individualization, mental-emotional assessment, and long-term constitutional correction. This case demonstrates the application of these principles in a patient with Grade-III androgenetic alopecia and associated psycho-emotional disturbances.

Case Profile

- **Age / Sex:** 56 years / Female
- **Occupation:** Homemaker
- **Diagnosis:** Androgenetic Alopecia – Grade III
- **Duration of Complaint:** Since 2021
- **Menopausal Status:** Menopause at 53 years
- **Associated Conditions:** Anxiety disorder (treated in 2021), Hypertension

Mental

Since childhood, the patient exhibited a reserved and self-contained nature, preferring limited social interaction and maintaining emotional restraint. She was responsible, orderly, and sensitive to expectations, often suppressing emotional expression. During adulthood, this tendency evolved into emotional vulnerability, especially during stressful life events.

Following menopause and treatment for anxiety in 2021, there was a marked emotional shift. She developed fear of being alone, reluctance to step outside independently, palpitations associated with anxiety, and a persistent sense of suffocation when alone. Emotional lability increased, with easy weeping, reduced confidence, and withdrawal from social interactions. Anger was infrequent but intense when triggered, particularly when others failed to meet her expectations or work standards. Over time, she expressed indifference toward

surroundings, increased self-focus, and a preference for solitude—hallmark features guiding constitutional evaluation.

Physical Generals

- **Thermal Reaction:** Chilly
- **Appetite:** Regular
- **Thirst:** 6–8 glasses/day
- **Perspiration:** Scanty
- **Bowels:** Unsatisfactory stool
- **Sleep:** Unrefreshing
- **Taste:** Medium spicy preferred

Particulars (Hair & Scalp)

- Progressive hair thinning since 2021
- Hair fall: 15–20 strands/day initially (during combing)
- Visible dandruff one day post-wash
- No scalp itching or irritation
- Hair coloring every 15 days initially

Investigations

- HbA1c: 6.3%
- Vitamin D3: 13.71 ng/ml (low)
- Vitamin B12: 243 pg/ml
- Serum Ferritin: 128 ng/ml

Totality of Symptoms

- Indifference and reserved disposition
- Fear of being alone, lack of confidence
- Emotional sensitivity with easy weeping

- Anger when contradicted
- Chilly patient with unsatisfactory stool
- Hair thinning post-menopause

Repertorial Rubrics

1. Mind – Indifference
2. Mind – Fear – alone, of being
3. Mind – Weeping – easily
4. Mind – Anger – contradiction, from
5. Mind – Reserved disposition
6. Generalities – Menopause – complaints during
7. Hair – Falling – thinning

Repertorisation Result

Leading remedies:

- *Sepia officinalis*
- *Phosphorus*
- *Natrum muriaticum*

Sepia officinalis covered the complete mental, physical, and hormonal picture.

Miasmatic Analysis

Predominant **Psoro-Syphilitic miasm**, indicated by degenerative hair changes, hormonal imbalance, emotional suppression, and chronicity.

Prescription Strategy

- Constitutional remedy selected based on totality
- Moderate-high potency used due to deep-seated mental and hormonal involvement
- Supportive remedies introduced as per evolving symptomatology
- Adjunct aesthetic therapy (Xogen) used for follicular stimulation

Prescription & Follow-Up Table

Date	Remedy Prescribed	Potency	Basis After Rubrics	Clinical Response
Dec 2024	Sepia officinalis	200C	Complete constitutional similarity	Hair fall reduced, anxiety eased
Jan 2025	Wiesbaden aqua	200C	Hair thinning support	Reduced shedding
Feb 2025	Kali sulphuricum	6X	Scalp nutrition	Improved texture
Mar 2025	Thuja occidentalis	200C	Constitutional intercurrent	Density improvement
Apr 2025	Ars alb	200C	Anxiety + restlessness	Emotional stability
Jun-Sep 2025	Sepia officinalis (repeat)	200C	Symptom recurrence	Sustained improvement
Oct 2025-Jan 2026	Supportive remedies	As required	Maintenance	Hair fall nil



Transformation Table

Parameter	Before Treatment	After Treatment
Hair fall	15–20 strands/day	Nil active hair fall
Hair density	Markedly reduced	Visible improvement
Dandruff	Present	Absent
Anxiety	Severe	Controlled
Confidence	Low	Improved
Social interaction	Avoidant	Socially active

Discussion

This case exemplifies the importance of constitutional prescribing in chronic androgenetic alopecia. The patient's emotional suppression, menopausal transition, and anxiety formed the crux of the case. *Sepia officinalis* emerged as the simillimum through repertorisation and miasmatic consideration. Gradual but sustained improvement in both psychological and physical parameters validates the classical approach. The integration of supportive remedies and aesthetic therapy enhanced follicular response without suppressing symptoms. Long-term follow-up confirms stability and relapse prevention, underscoring the holistic efficacy of individualized homeopathy.

Conclusion

This case demonstrates that chronic post-menopausal androgenetic alopecia can be effectively managed through classical homeopathy when mental, emotional, and physical dimensions are addressed together. Individualization, totality-based prescribing, and miasmatic understanding were pivotal in achieving lasting results. The documented transformation in hair health and emotional well-being highlights the role of homeopathy as a comprehensive therapeutic modality. This successful outcome was achieved under systematic care at Dr Batra's® Homeopathy Clinic.

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