



HOMOEOPATHIC MANAGEMENT IN CASES OF CONTACT DERMATITIS USING BOENNINGHAUSEN'S CHARACTERISTICS MATERIA MEDICA AND REPERTORY BY C. M. BOGER- A STUDY

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ABSTRACT

Background: Contact dermatitis (CD) is a type of eczema triggered by contact to a particular substance. Itching, rash, dryness of skin, burning or stinging, blisters are some common sign and symptoms of contact dermatitis. Homoeopathy works upon the holistic approach so proper case taking of the patient, is done and medicine is prescribed accordingly.

Objective: To ascertain the efficacy of Homoeopathic Medicines in treatment of cases of Contact dermatitis.

Method: 50 cases were included in the study as per inclusion and exclusion criteria, at the OPD of Dr. M.P.K. Homoeopathic Medical College, Hospital & Research Centre, Jaipur. These were enrolled for the prospective interventional trial. Detailed case taking of the patient and analysis & evaluation of the symptoms were done. Then repertorisation was done using Boenninghausen's Characteristics & Repertory and similar medicine in proper dose and potency was prescribed. At least 6 follow-ups of the patient was done from 2- 14 days as per the severity of complaints.

Result: In the study out of 50 cases, 21 cases (42%) were in the age group of 21-30 years. Maximum cases i.e., 32 cases (64%) were females. The maximum incidence as observed in housewives i.e. 15 cases (30%). The predominance of itching as a symptom, was present in 28 cases (56%). 29 cases (58%) showed irritant contact dermatitis. The medicine which was prescribed for the maximum number of times was *Sulphur* i.e., in 16 cases (32%). 11 cases (22%) showed relative improvement. 37 cases (74%) showed moderate improvement. Thus, in total of 48 cases (96%) showed the positive results.

Conclusion: Homoeopathic medicines are quite effective in the treatment of cases of contact dermatitis and BCCR is a great tool having wide range of rubrics related to contact dermatitis and is useful in the selection of remedy.

Key words: Contact dermatitis, homoeopathy, Boenninghausen's characteristics and repertory, individualised homoeopathic medicine.

INTRODUCTION

Contact dermatitis is a type of eczema triggered by contact to a particular substance. Eczema is a group of conditions that cause skin to become irritated and dry. ^[1] It is more prevalent in women than men and in the age group of 45-65 years. ^[2] It is of 3 types allergic contact dermatitis, irritant contact dermatitis and photocontact dermatitis. **Allergic contact dermatitis** is a type of delayed allergic reaction. It appears as a itchy rash a day or two after skin is exposed to an allergen. Fragrances, poison ivy, etc are the common causes whereas, **irritant contact dermatitis**, which accounts for 80% of all contact dermatitis, occurs when skin cells are damaged by exposure to irritating substances, such as solvents, detergents, soaps, bleach, etc. ^[3] **Photocontact dermatitis** is a toxic or allergic reaction that may occur when certain chemicals are applied to the skin and subsequently exposed to the sun. Some sunscreens, such as oxybenzone, coal tar products, insecticides and disinfectants are the common causes. ^[4] People who are at a risk of developing CD are those who are indulged into certain occupations like food service workers, cosmetologists, health care workers, agricultural and outdoor workers, building cleaning and maintenance workers, painters, mechanics, metalworkers, construction workers. ^[5]

Common sign and symptoms of contact dermatitis include itchy skin (often intense), excessive burning and stinging pains, rash, excessive dry and tender skin, and oozing blisters.^[6]

It is easy to recognise contact allergy and no specific tests are necessary. However, taking a good history including information on the work environment, hobbies, products in use and sun's exposure helps in finding the diagnosis. Common diagnostic tests include open application test, patch tests and fungal scrapings of the skin for their culture.

Avoiding contact with dermatitis causing agents by wearing gloves, socks, or covering the affected part, is necessary. In conventional mode of treatment certain drugs like emollient creams, topical/ oral steroids, oral antibiotics, phototherapy or immunosuppressive agents are used.^[7] However Homoeopathy works on the holistic approach and on the basis of individuality. Thus, employment of proper homoeopathic remedy, which bears similarity with the symptoms of the patient, as a whole is used to cure cases of contact dermatitis.^[8] Moreover homoeopathy has proved itself to be an effective

mode of treating the contact dermatitis. ^[9] 'Boenninghusen's Characteristics and Repertory by CM Boger (BBCR)' is having large number of particular rubrics related to skin. Special emphasis on concomitants, modalities and time modalities are a great help in repertorising the cases of contact dermatitis. ^[10]

OBJECTIVE

To ascertain the efficacy of Homoeopathic Medicines in treatment of cases of Contact dermatitis.

MATERIALS & METHODOLOGY

Study setting: O.P.Ds. of Dr. M.P.K. Homoeopathic Medical College, Hospital & Research Centre, Jaipur.

Study design: Prospective interventional trial

Sample size: 50 cases were included in the study as per inclusion and exclusion criteria.

Inclusion criteria:

Diagnosed or undiagnosed Cases of Contact Dermatitis were included, irrespective of their age, sex, caste, religion & duration of illness, having clinical presentation and history of CD.

Exclusion criteria:

Cases without proper follow-up were excluded from the study.

Diagnostic criteria:

Clinical history & examination of skin was done.

Case taking:

Cases were selected by purposive sampling. Detailed case taking of the patient and analysis & evaluation of the symptoms were done following homoeopathic principles. Then repertorisation was done by using Boenninghausen's Characteristics and Repertory by Dr. C. M. Boger and medicine was selected on the basis of Repertorial analysis. Selection of dose & potency was done following homoeopathic principles and follow-up of the patient was done from 2- 14 days as per the severity of complaints, at least 6 follow up were taken for each case.

OBSERVATION & RESULT

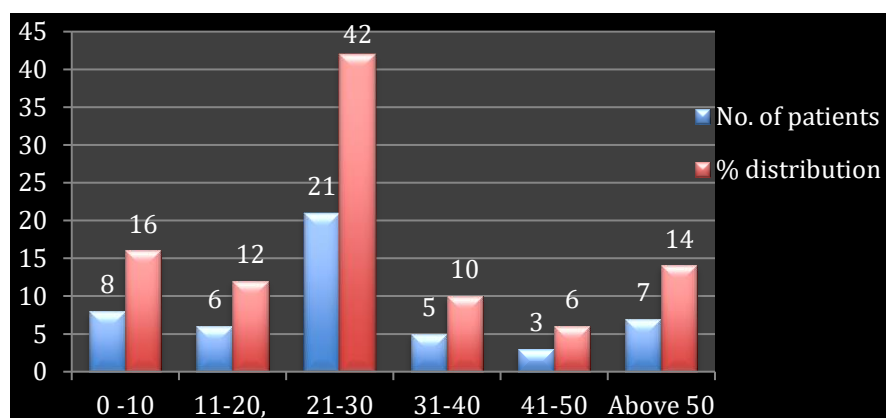


Figure- 1: Graphical representation according to Age Incidence

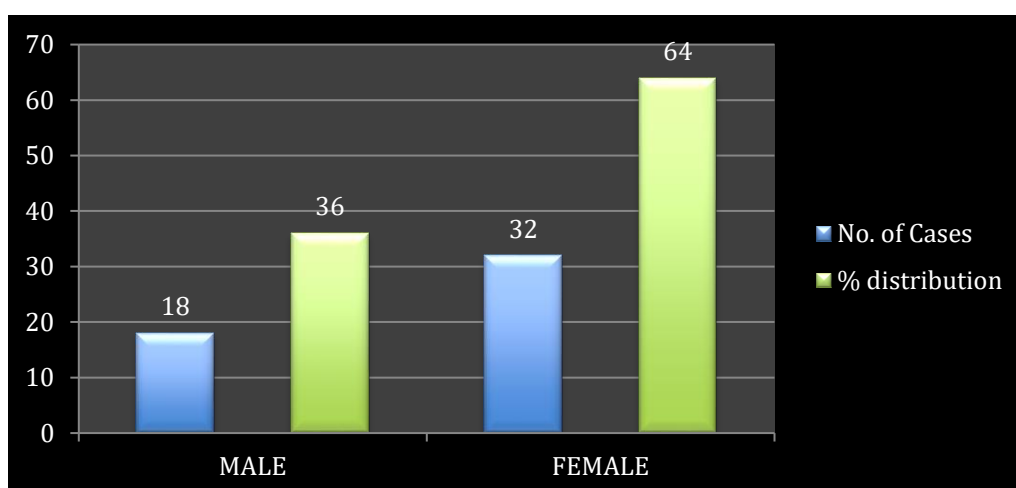


Figure- 2: Graphical representation of Sex Incidence.

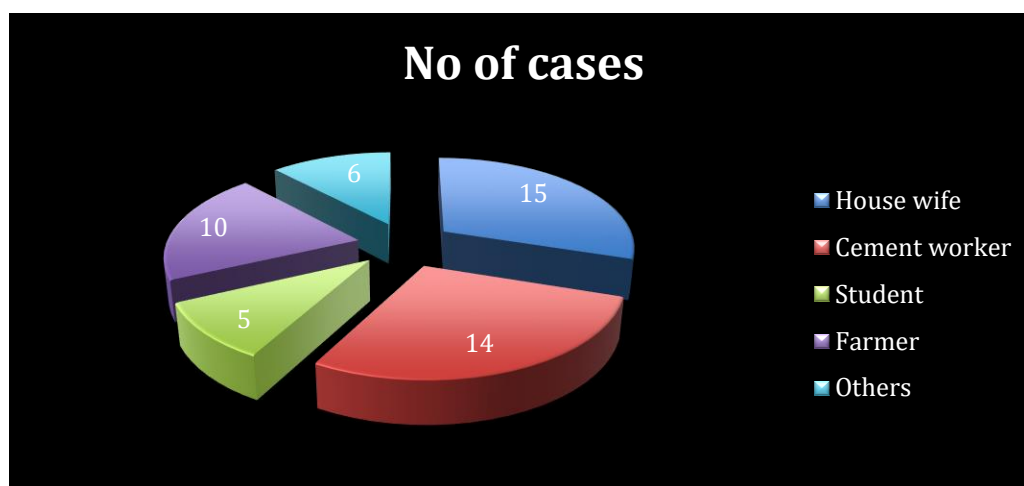


Figure- 3: Graphical representation according to Occupation

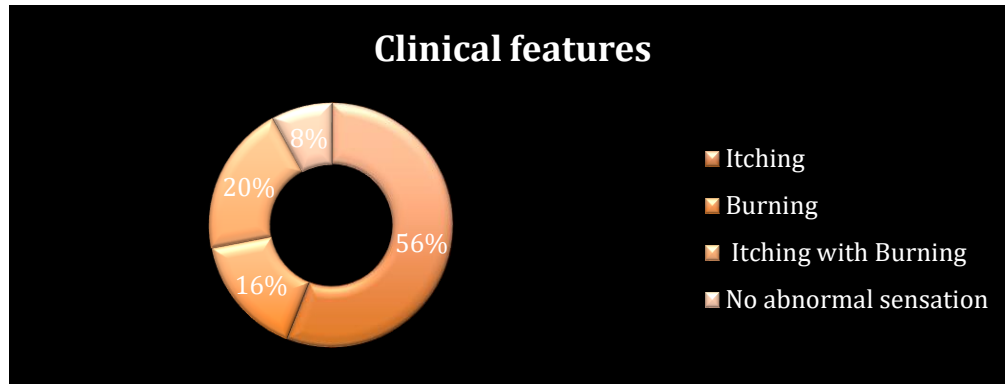


Figure- 4: Graphical representation of clinical features.

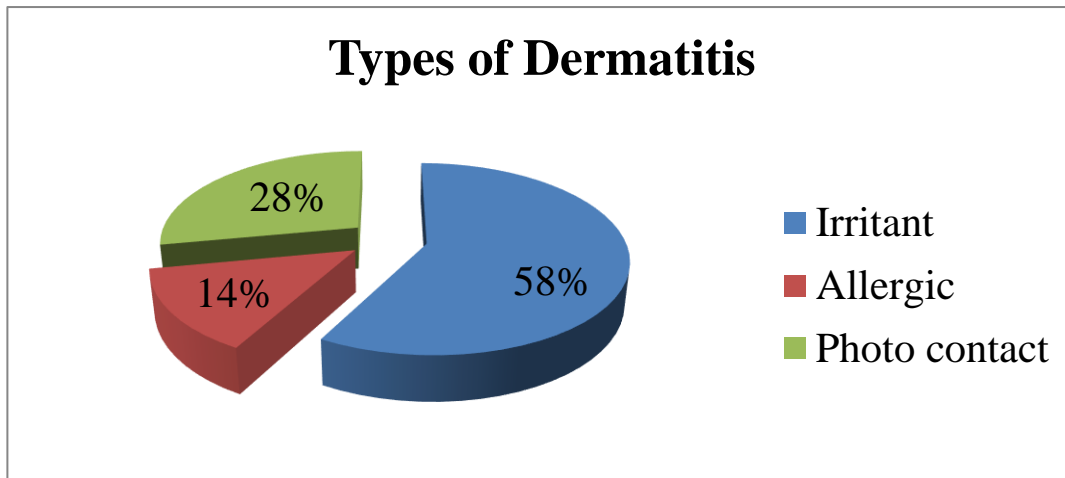


Figure- 5: Graphical representation of Types of Contact Dermatitis

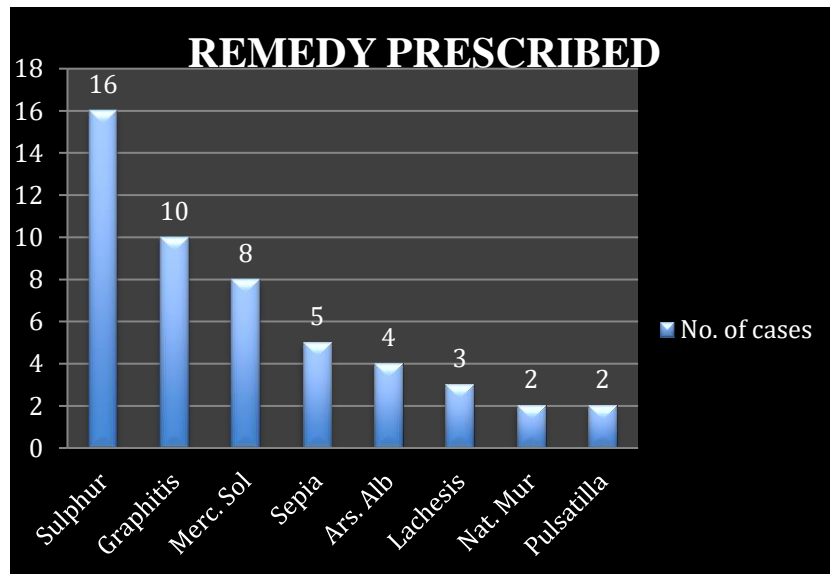


Figure- 6: Graphical representation of Indicated Medicines.

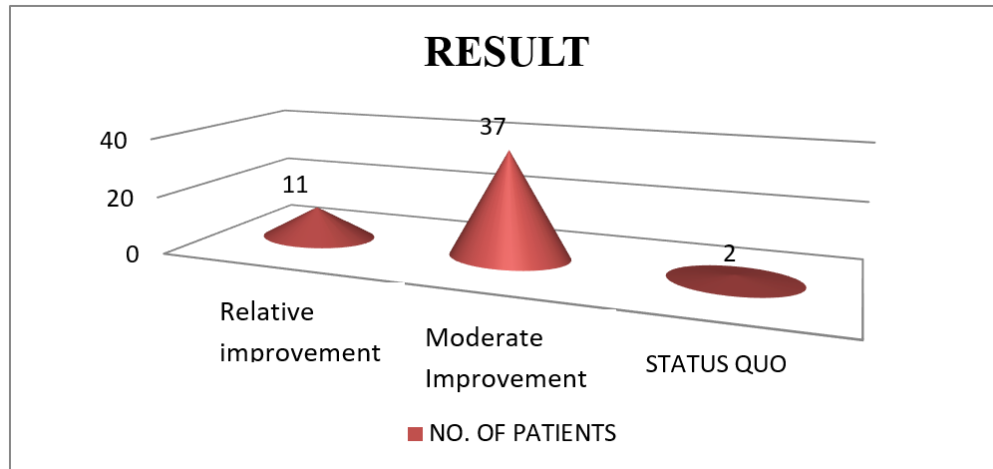


Figure-7: Graphical representation of Result obtained

DISCUSSION

In this study it was seen that out of 50 patients, maximum number cases of contact dermatitis were observed in the age group 21-30 years i.e. 21(42%), whereas minimum incidence i.e. 3 (6%) was observed in the age group 41-50 years. This does not support the previous study, the reason behind this may be the sample, which was drawn from a particular population and also the small sample size. [2]

The percentage of females suffering with contact dermatitis were more i.e. 32 cases (64%) in comparison to male patients i.e. 18 cases (36%). This supports the previous studies. [2] This may be due to the reason that there is a frequent use of cosmetics, artificial jewellery, bindi, detergents, by females. Also there is a lack of proper hygiene in housewives and moreover sensitive skin of females make them vulnerable for the contact dermatitis.

In this study, maximum incidence was observed in housewives i.e. 15 cases (30%) whereas in cement workers also showed a higher incidence i.e. 14 cases (28%) because cement contains chromate, which is one of the most common sensitizers.

The study showed the predominance of itching as a symptom in 28 cases (56%). Burning along with itching was reported in 10 cases (20%), followed by burning alone in 8 cases (16%). This shows predominance of those clinical features, which indicates the presence of CD. [6]

Various types of contact dermatitis were seen during the study among which maximum cases were observed of irritant contact dermatitis i.e. 29 cases (58%) followed by photocontact dermatitis i.e. 14 cases (28%). Whereas only 7 cases (14%) was of allergic contact dermatitis, which supports the previous study. [3]

In this study, *Sulphur* was prescribed in maximum no. of cases i.e. 16 (32%), second being *Graphitis* which was prescribed in 10 cases (20%), *Merc.Sol* in 8 cases (16), *Sepia* in 5 cases (10%), *Ars Alb* in 4 cases (8%), *Lachesis* in 3 cases (6%) and *Nat Mur.*, *Pulsatilla* were given in 2 cases each (4%).

It was seen that, out of 50 cases, 11 cases (22%) showed relative improvement. 37 cases (74%) showed moderate improvement i.e., a total of 48 cases (96%) showed the positive results. This may be due to fully applying the principles of homoeopathy in each and every case.

CONCLUSION

It is observed that homoeopathic medicines are quite effective in the treatment of the cases of contact dermatitis and *BBCR* is a great tool having wide range of rubrics related to contact dermatitis and is useful in the selection of remedy.

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CONFLICT OF INTEREST

NIL.

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