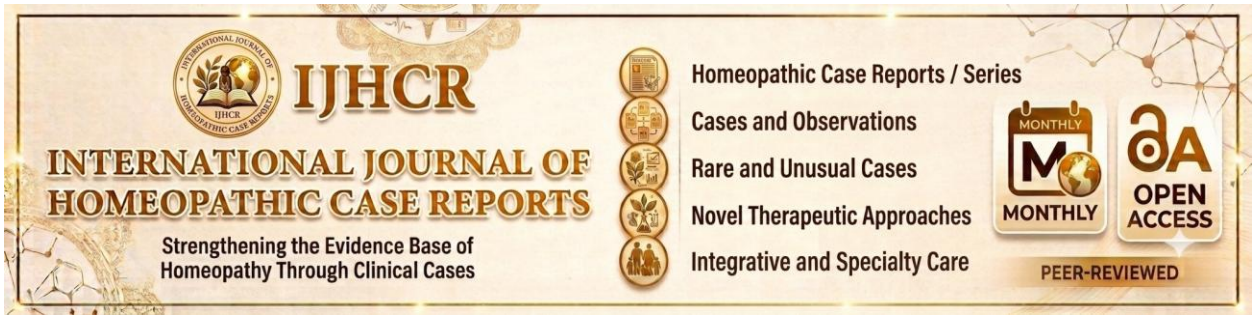

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Successful Management of Chronic Palmar Psoriasis with Endocrinal disturbances: A Case Report at Dr Batra's

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Abstract

Background

Palmoplantar psoriasis (PPP) is a chronic inflammatory variant of psoriasis affecting the palms and soles. It is characterized by erythema, hyperkeratosis, scaling, fissuring, pain, and functional disability that markedly impair quality of life. Nail involvement and metabolic comorbidities such as diabetes mellitus, obesity, hypertension, and thyroid dysfunction are frequently associated with chronic psoriasis. Despite topical corticosteroids, keratolytics, systemic immunomodulators, and biologic therapies, many patients experience recurrent exacerbations and incomplete remission. Individualized homoeopathy considers the constitutional characteristics of the patient in addition to the clinical diagnosis while selecting the similimum.

Case Presentation

A 44-year-old male presented with chronic palmoplantar psoriasis of 5–6 years' duration characterized by erythematous, hyperkeratotic plaques over both palms and soles with silvery-white scaling, painful fissures, and nail involvement affecting one toenail. The lesions progressively worsened since 2023 despite prolonged conventional treatment. Associated illnesses included hypothyroidism treated with Thyroxine 50 µg since 2015 and recently diagnosed Type 2 Diabetes Mellitus managed with metformin. Constitutional evaluation

revealed a disciplined, analytical, emotionally controlled individual with a history of grief and marked change from an aggressive to a more calculating personality. Based on constitutional analysis, **Natrum muriaticum** was prescribed.

Outcome

Serial follow-up demonstrated progressive reduction in erythema, scaling, fissuring, and itching. By June–July 2026, palmar lesions had improved by approximately **80%**, while plantar lesions also demonstrated marked improvement. Glycaemic control remained satisfactory (HbA1c 6.4%), thyroid profile remained stable, and lipid parameters were within acceptable limits.

Conclusion

This case demonstrates sustained improvement in chronic palmoplantar psoriasis associated with metabolic comorbidities following individualized constitutional homoeopathic treatment integrated with lifestyle modification.

Keywords: Palmoplantar psoriasis, Psoriasis, Natrum muriaticum, Homoeopathy, Type 2 Diabetes Mellitus, Hypothyroidism

Introduction

Psoriasis is a chronic immune-mediated inflammatory skin disorder affecting approximately 2–3% of the global population. Palmoplantar psoriasis represents a localized yet functionally disabling variant characterized by persistent erythematous plaques, thick adherent scales, fissures, and recurrent painful exacerbations involving the palms and soles.

Patients frequently experience impaired manual function, difficulty walking, occupational limitations, and considerable psychosocial distress. Nail changes are common and may indicate more severe disease. Increasing evidence also demonstrates a strong association between psoriasis and metabolic syndrome, particularly diabetes mellitus, dyslipidaemia, obesity, hypertension, and thyroid dysfunction.

Although conventional management includes topical corticosteroids, vitamin D analogues, keratolytics, phototherapy, systemic immunosuppressants, and biologics, complete remission remains challenging and recurrence is common.

Homoeopathy adopts an individualized constitutional approach by evaluating mental characteristics, hereditary predisposition, physical generals, and systemic associations rather than treating the skin lesions alone.

This report describes successful constitutional management of chronic palmoplantar psoriasis associated with Type 2 Diabetes Mellitus and hypothyroidism.

Case Presentation

A 44-year-old male presented to **Dr Batra's® Positive Health Clinics** with complaints of psoriasis involving both palms and soles for approximately six years.

Initially, the lesions were mild but gradually increased in extent and severity. Since 2023, the disease had shown progressive worsening despite prolonged allopathic treatment.

The patient complained of:

- Thick erythematous plaques
- Silvery-white scaling
- Painful fissures over palms and soles
- Dryness
- Occasional itching
- Difficulty during daily manual activities

Nail involvement was observed involving one toenail.

No definite seasonal aggravation or amelioration was reported.

Associated Complaints

The patient was a known case of:

- **Hypothyroidism** since 2015
- **Type 2 Diabetes Mellitus** diagnosed approximately one year earlier

Current medications included:

- Thyroxine 50 µg daily
- Metformin 500 mg daily

Previous Treatment

The patient had received prolonged conventional dermatological treatment before seeking homoeopathic management.

Treatment included topical medications with only temporary relief, followed by recurrence.

Past History

No history of:

- Tuberculosis
- Major surgery
- Hospitalization
- Significant infectious disease

Past history was otherwise non-contributory.

Family History

Family history revealed significant metabolic disorders.

Father:

- Hypertension
- Diabetes mellitus
- Carcinoma oesophagus (expired in 2002)

Mother:

- Hypertension
- Diabetes mellitus

Among ten siblings, eight were diagnosed with diabetes mellitus, suggesting a strong hereditary predisposition toward metabolic disease.

There was **no family history of psoriasis**.

Personal History

Appetite was normal.

Craving:

- Chicken

Thirst:

- Increased
- Approximately 3–4 litres/day
- Preference for cold water

Perspiration:

- Profuse
- Mainly over the face
- Non-offensive

Sleep:

- Refreshing
- Seven to eight hours

Dreams:

- Anxious

Thermal state:

- Ambithermal

Seasonal preference:

- Winter

Bowel and bladder habits were normal.

Life Space

The patient belonged to a supportive family.

His father managed a fisheries business until his demise due to carcinoma oesophagus.

The patient described his upbringing as stable without major hardship.

He was married with two children.

Professionally, he was well settled and denied significant occupational stress.

He acknowledged that earlier in life he had an aggressive temperament. Over the years, he consciously modified his behaviour and became more analytical, preferring to assess situations calmly before reacting.

Mental Generals

The constitutional assessment revealed several characteristic features.

The patient was emotionally reserved and preferred not to express personal emotions openly.

He admitted experiencing grief following the loss of his parents, although he rarely discussed it.

Initially aggressive by nature, he consciously transformed himself into a calm, calculating individual who preferred rational decision-making over impulsive reactions.

He analysed situations carefully before responding.

He was responsible, practical, disciplined, and emotionally controlled.

Physical Generals

- Appetite normal
- Increased thirst
- Desire for cold water
- Craving for chicken
- Profuse perspiration over face
- Refreshing sleep
- Anxious dreams
- Ambithermal
- Preference for winter

Clinical Examination

General examination revealed a moderately built adult male.

Dermatological examination demonstrated:

- Bilateral symmetrical erythematous hyperkeratotic plaques involving both palms and soles
- Thick silvery-white scales
- Painful fissures
- Moderate hyperkeratosis
- Dryness
- Mild tenderness over fissures
- Nail dystrophy involving one toenail

No evidence of psoriatic arthritis was present.

Investigations

Laboratory Findings

Investigation	**Result**
HbA1c	**6.4%**
Estimated Blood Glucose	137 mg/dL
Total Cholesterol	146.1 mg/dL
Triglycerides	127.2 mg/dL
HDL	39.2 mg/dL
LDL	81.46 mg/dL
VLDL	25.44 mg/dL
T3	1.50
T4	6.95
TSH	3.4
SGOT	71.3 U/L
SGPT	136.1 U/L
Hemoglobin	14.7 g/dL

The laboratory findings indicated satisfactory glycaemic control and stable thyroid function during treatment, with elevated liver enzymes requiring dietary counselling and monitoring.

Diagnosis

Primary Diagnosis

Chronic Palmoplantar Psoriasis with Nail Involvement

Associated Conditions

- Type 2 Diabetes Mellitus
- Hypothyroidism

Differential Diagnosis

- Chronic palmoplantar eczema
- Hyperkeratotic hand eczema
- Tinea manuum
- Palmoplantar keratoderma
- Palmoplantar psoriasis

Case Analysis

The patient presented with chronic localized psoriasis involving the palms and soles associated with significant metabolic comorbidities, namely Type 2 Diabetes Mellitus and hypothyroidism. The disease was characterized by progressive hyperkeratosis, silvery scaling, painful fissuring, and nail involvement, resulting in considerable functional discomfort despite conventional therapy.

Constitutional evaluation revealed an emotionally reserved individual with a history of unresolved grief, disciplined behaviour, analytical thinking, and marked emotional control. The physical generals included increased thirst, profuse facial perspiration, craving for chicken, refreshing sleep, and anxious dreams.

Considering the constitutional totality, hereditary predisposition, mental characteristics, and chronicity of disease, **Natrum muriaticum** was selected as the constitutional similimum.

Totality of Symptoms

Mental Generals

- Ailments from grief
- Introverted
- Emotionally reserved
- Previously aggressive, now calm and analytical
- Thinks before reacting
- Responsible
- Disciplined
- Practical

Physical Generals

- Appetite normal
- Increased thirst

- Desire for cold water
- Craving for chicken
- Profuse perspiration over face
- Refreshing sleep
- Anxious dreams
- Ambithermal
- Preference for winter

Particular Symptoms

- Chronic palmoplantar psoriasis
- Erythematous plaques
- Silvery white scales
- Painful fissures
- Nail dystrophy
- Mild itching
- Associated Type 2 Diabetes Mellitus
- Associated hypothyroidism

Evaluation of Characteristic Symptoms

The following symptoms were considered most characteristic during constitutional analysis:

Mental Characteristics

- Long-standing unresolved grief
- Introverted personality
- Reserved emotional expression
- Calm after previous aggressive temperament
- Analytical nature
- Thinks before acting

Physical Characteristics

- Increased thirst
- Cold water preference
- Facial perspiration
- Refreshing sleep
- Chicken craving

Particular Symptoms

- Palmoplantar psoriasis
- Hyperkeratotic lesions
- Silvery scales
- Fissuring
- Nail involvement

Repertorial Analysis

Remedies	nat-m.	phos.	sulph.	bell.	ign.	lach.	op.	ph-ac.	hyos.	lyc.	plat.	puls.	sep.	stram.	acon.	anac.	cocc.	nat-c.	nux-v.	rhus-t
Serial Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Symptoms Covered	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Intensity	7	7	7	6	6	6	6	6	5	5	5	5	5	5	4	4	4	4	4	4
Result	3/7	3/7	3/7	3/6	3/6	3/6	3/6	3/6	3/5	3/5	3/5	3/5	3/5	3/5	3/4	3/4	3/4	3/4	3/4	3/4
Clipboard 2																				
SKIN - PSORIASIS																				
SKIN - DRY	2	3	3	3	1	2	3	2	2	3	2	2	2	3	2	2	1	2	1	2
MIND - AILMENTS FROM - grief	4	3	1	2	4	3	2	3	2	1	2	2	2	1	1	1	2	1	2	1
MIND - INTELLECTUAL	1	1	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1

Kent's Repertory was consulted using the characteristic constitutional symptoms.

Selected Rubrics

Mind

- Mind; Ailments from grief
- Mind; Reserved
- Mind; Introversion
- Mind; Intellectual
- Mind; Calmness after anger

Skin

- Psoriasis
- Dry eruptions
- Scaling
- Cracks
- Hyperkeratosis

Generalities

- Thirst increased
- Perspiration face
- Sleep refreshing

The repertorial result showed **Natrum muriaticum** as the leading remedy, followed by **Phosphorus**, **Sulphur**, **Belladonna**, and **Ignatia**.

Remedy Differentiation

Natrum muriaticum (Selected Remedy)

Natrum muriaticum closely corresponded with the constitutional picture.

Characteristic features included:

- Ailments from grief
- Reserved personality
- Introversion
- Emotional suppression
- Calm exterior
- Analytical thinking
- Increased thirst
- Chronic skin disease
- Autoimmune tendency

The patient also demonstrated a gradual emotional adaptation after grief, making Natrum muriaticum the closest constitutional similimum.

Phosphorus

Phosphorus was considered because of increased thirst and skin involvement.

However, the patient lacked the typical open, affectionate, fearful, and extroverted personality associated with Phosphorus.

Sulphur

Sulphur covered chronic psoriasis and scaling.

However, the patient lacked:

- Heat aggravation
- Untidiness
- Standing aggravation
- Philosophical disposition

Therefore Sulphur was ruled out.

Belladonna

Belladonna covered inflammatory erythema but did not correspond constitutionally.

Ignatia

Ignatia was considered because of grief.

However, the patient's grief had become chronic and silent rather than acute and contradictory.

Prescription

Constitutional Remedy

Natrum muriaticum 200C

Selected because of:

- Ailments from grief
- Reserved emotions
- Introverted personality
- Analytical disposition
- Chronic autoimmune skin disease

Acute Prescription

Supportive local management included:

- Dr Batra's Skin Soothing Kit
- Dietary counselling
- Lifestyle modification

Miasmatic Analysis

The case demonstrated a **mixed Psoro-Sycotic background**.

Psoric Features

- Dryness
- Scaling
- Itching
- Chronic inflammation

Sycotic Features

- Hyperkeratosis
- Thick plaques
- Nail involvement
- Diabetes mellitus
- Hypothyroidism

Follow-up

Table 1. Chronological Follow-up

Date	Clinical Findings	Outcome
September 2025	Psoriatic flakes reduced. Digestion and sleep good. HbA1c 6.4%. Thyroid profile stable.	Initial improvement documented
October 2025	Palmar erythema and scaling reduced slightly. Physical activity advised.	Mild improvement
January 2026	Mild increase in lesions during previous two months with moderate erythema and scaling.	Temporary relapse
February 2026	Scaling reduced. Fissures improved. Mild itching. Metformin continued.	Clinical improvement

April 2026	Thickness and scaling reduced further. Mild nocturnal itching. Skin soothing kit advised.	Progressive improvement
June 2026	Palmar lesions approximately **80% improved**. Plantar lesions improved but moderate scaling persisted. Generalized urticarial rash developed at night; investigations advised.	Marked improvement
July 2026	Scaling, fissures and itching markedly reduced over palms and soles. Repeat investigations advised.	Sustained improvement

Table 2. Laboratory Follow-up

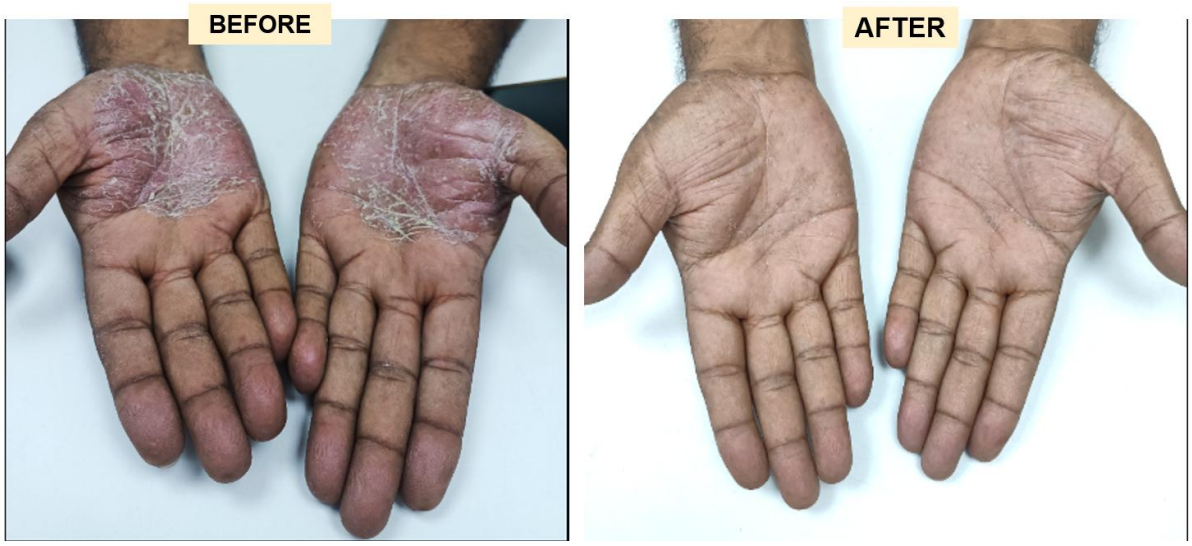
Investigation	**Result**
HbA1c	**6.4%**
Estimated Blood Glucose	137 mg/dL
Total Cholesterol	146.1 mg/dL
Triglycerides	127.2 mg/dL
HDL	39.2 mg/dL
LDL	81.46 mg/dL
VLDL	25.44 mg/dL
TSH	3.4 mIU/L
Hemoglobin	14.7 g/dL

These investigations demonstrated satisfactory metabolic control during treatment.

Clinical Outcome

At the end of follow-up:

- Approximately **80% improvement** in palmar lesions.
- Significant reduction in erythema.
- Marked reduction in silvery scaling.
- Fissures largely healed.
- Minimal itching remained.
- Nail disease remained stable without progression.
- Diabetes remained controlled (HbA1c 6.4%).
- Thyroid profile remained stable on replacement therapy.
- Daily activities improved because of reduced pain and cracking.



Discussion

Palmoplantar psoriasis is a chronic inflammatory dermatosis characterized by recurrent erythema, hyperkeratosis, fissuring, and scaling that significantly impair manual function and ambulation. Compared with plaque psoriasis, palmoplantar involvement is often more resistant to treatment because of the thicker epidermis and repeated mechanical trauma. Metabolic disorders such as obesity, diabetes mellitus, dyslipidaemia, hypertension, and thyroid dysfunction are increasingly recognized as common comorbidities that contribute to chronic systemic inflammation.

In this patient, palmoplantar psoriasis coexisted with **Type 2 Diabetes Mellitus** and **hypothyroidism**, both of which have been associated with persistent inflammatory activity. Constitutional assessment revealed a characteristic personality marked by emotional reserve, introversion, unresolved grief, and a shift from previous aggression to a calm, analytical disposition. These mental features, together with the physical generals, strongly supported the prescription of **Natrum muriaticum**.

During follow-up, objective improvement was observed in the extent and severity of palmar lesions, with an estimated **80% reduction**, accompanied by marked improvement in scaling, fissuring, and itching. The patient also maintained satisfactory glycaemic control and stable thyroid function throughout treatment. While lifestyle advice, ongoing treatment for diabetes and hypothyroidism, and skin care measures may also have contributed to the outcome, the sustained constitutional improvement suggests a possible supportive role for individualized homoeopathic treatment within an integrative management approach.

As this is a single case report, no causal relationship can be established. Well-designed prospective controlled studies are needed to evaluate the effectiveness of individualized homoeopathic treatment in palmoplantar psoriasis and associated metabolic disorders.

Health-Related Quality of Life (HRQL)

At presentation, painful fissures and scaling interfered with walking, manual activities, and daily work. As treatment progressed, reduction in fissuring and erythema improved comfort during routine activities. The patient reported better confidence in social interactions and

greater ease in performing occupational tasks because of reduced discomfort and visible improvement in the lesions.

Patient Perspective

"Earlier, my palms and soles were dry, cracked, and painful, making everyday work uncomfortable. After treatment, the scaling and cracks reduced considerably. I am now much more comfortable while walking and using my hands, and my skin continues to improve."

Learning Points

- Palmoplantar psoriasis is frequently associated with systemic metabolic disorders such as diabetes mellitus and hypothyroidism.
- Constitutional assessment may identify important mental and physical characteristics beyond the dermatological diagnosis.
- Objective follow-up with clinical photographs and laboratory investigations strengthens case documentation.
- Long-term constitutional homoeopathic treatment integrated with lifestyle modification may be associated with sustained improvement in selected patients.
- Regular monitoring of associated metabolic diseases remains an essential component of comprehensive patient care.

Conclusion

This case demonstrates successful long-term management of **chronic palmoplantar psoriasis with nail involvement** in a patient with associated **Type 2 Diabetes Mellitus** and **hypothyroidism** using individualized constitutional homoeopathic treatment. **Natrum muriaticum**, selected on the basis of the patient's constitutional characteristics and history of unresolved grief, was associated with marked clinical improvement, including approximately **80% reduction in palmar lesions**, healing of fissures, reduction in erythema and scaling, and improvement in quality of life. Stable glycaemic control and thyroid function were maintained throughout follow-up. Although conclusions regarding efficacy cannot be drawn from a single case, this report supports further investigation of individualized homoeopathic treatment as an adjunctive approach in chronic palmoplantar psoriasis through larger prospective clinical studies.

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