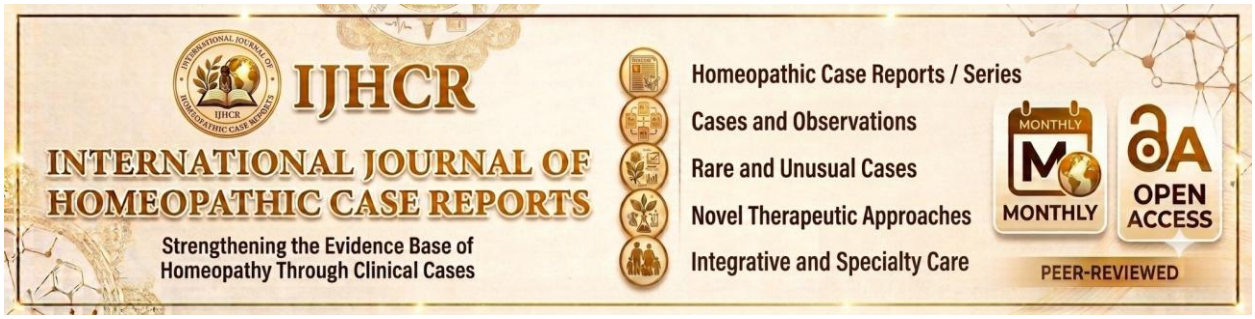

Volume 1, Issue 1, August 2026 **Category of Article: Case Report**

Article ID: CR13IJHCR3422

DOI: https://doi.org/10.5281/zenodo.21848441

Homoeopathic Management of Facial Seborrhoeic Dermatitis Following Emotional Bereavement: A Case Report

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Abstract

Seborrhoeic dermatitis is a chronic relapsing inflammatory dermatosis involving sebaceous gland-rich areas, commonly presenting with erythema, greasy scaling, itching, and dandruff. Facial involvement often produces cosmetic concerns that significantly affect young adults. Emotional stress, altered immunity, and Malassezia colonization are recognized contributors to disease exacerbation.

This case report describes a **22-year-old female** who presented with bilateral hypopigmented flaky facial patches of four months' duration associated with dryness, intermittent itching, facial erythema after sun exposure, dandruff, and scalp itching. Detailed constitutional evaluation revealed unresolved grief following the premature loss of her father during the COVID-19 pandemic, increased emotional maturity, reserved expression of emotions, strong sense of responsibility towards her mother, and sensitivity towards the suffering of others. Repertorial analysis supported **Natrum muriaticum** as the constitutional remedy, while **Ferrum phosphoricum 6X** was prescribed as an adjunctive tissue salt.

Following individualized homoeopathic treatment, the facial lesions improved progressively with complete resolution of itching, erythema, acne, and scaling, resulting in restoration of normal skin appearance and significant improvement in quality of life.

Keywords: Seborrhoeic dermatitis, Facial dermatitis, Natrum muriaticum, Dandruff, Individualized homoeopathy, Case report.

Introduction

Seborrhoeic dermatitis is a chronic inflammatory disorder affecting areas rich in sebaceous glands, including the scalp, face, retroauricular regions, and upper trunk. It commonly presents with erythematous scaly plaques accompanied by pruritus, dandruff, and recurrent exacerbations.

Although the exact pathogenesis remains uncertain, increased sebaceous activity, altered immune responses, Malassezia species colonization, genetic predisposition, and psychological stress are considered important contributing factors.

Facial seborrhoeic dermatitis is particularly distressing because of its cosmetic visibility and frequent relapses. Conventional treatment usually consists of topical corticosteroids, antifungal agents, calcineurin inhibitors, moisturizers, and medicated shampoos. However, recurrence after discontinuation of therapy is common.

Homoeopathy emphasizes individualized constitutional prescribing based on the patient's mental, emotional, physical, and pathological characteristics rather than disease diagnosis alone.

The present case illustrates successful management of chronic facial seborrhoeic dermatitis using individualized constitutional homoeopathic treatment.

Case Presentation

A **22-year-old female teacher** presented with complaints of **hypopigmented flaky patches involving both sides of the face** for approximately **four months**.

The lesion initially appeared over the **left side of the face**, followed within one month by similar involvement of the opposite side.

The patches were associated with:

- Fine scaling
- Dryness
- Occasional itching
- Redness after sun exposure
- Facial redness after bathing

The patient also complained of recurrent acne during weather changes, severe dandruff, and scalp itching.

She had never received any treatment for the facial lesions because they were initially mild and cosmetically insignificant. However, gradual progression prompted consultation.

Examination additionally revealed **mild nail pitting involving both thumbs**.

History of Present Illness

Approximately four months before consultation, a small hypopigmented flaky patch developed over the left cheek.

Within one month, similar lesions appeared over the right side of the face. The lesions gradually became more noticeable and were associated with intermittent itching, dryness, and erythema following sun exposure.

She also reported chronic dandruff with scalp itching and occasional acne flare-ups during seasonal weather changes.

There was no history of similar lesions elsewhere on the body.

Past History

- Recurrent upper respiratory tract infections for 3–4 years (currently asymptomatic).
- Recurrent sneezing.
- No previous dermatological treatment.
- No surgical history.
- No major medical illness.

Family History

- Father expired due to COVID-19 infection.
- Mother diagnosed with psoriasis and arthritis.

Personal History

Parameter	Findings
Diet	Mixed diet
Appetite	Good
Desire	Sweets +++, spicy food ++, fast food
Aversion	None specific
Thirst	Low (3–4 glasses/day)
Perspiration	Profuse, non-offensive
Sleep	Refreshing
Dreams	None significant
Menses	Regular, painless

Mental Generals

The patient was the only child and remained deeply attached to both parents.

Following the **death of her father during the COVID-19 pandemic**, she consciously suppressed her own grief to emotionally support her mother. She became considerably more mature and responsible at a young age, started taking tuition classes to contribute financially, and gradually developed a stronger emotional bond with her mother.

Although naturally sensitive, she rarely expressed her emotions openly and seldom cried, believing she should remain emotionally strong for her family.

She reported feeling controlled during childhood because of parental restrictions and recalled resentment when denied social freedom. She remained particularly empathetic toward individuals experiencing emotional hardship, especially her cousin whose parents had divorced.

She avoided confrontation with authority figures despite recognizing unfair behavior and preferred maintaining harmony. Recently, she developed a greater desire for companionship but continued to share emotions with only a few trusted individuals.

She described herself as patient, tolerant, emotionally resilient, and socially responsible.

Clinical Examination

General examination revealed:

- Healthy young female.
- Bilateral hypopigmented scaly facial patches.
- Mild erythema.
- Fine scaling.
- Mild xerosis.
- Dandruff over scalp.
- Scalp itching.
- Mild bilateral thumb nail pitting.
- No lesions elsewhere on the body.

Investigations

Routine investigations were advised:

- Complete blood count.
- Serum Vitamin B12.
- Serum Vitamin D3.
- Thyroid profile.
- Serum IgE.

At the time of initial evaluation, investigations had not yet been performed.

Diagnosis

Primary Diagnosis

- Facial seborrhoeic dermatitis.

Associated Findings

- Scalp seborrhoeic dermatitis (dandruff).
- Nail pitting.
- Recurrent acne.

Differential Diagnosis

- Seborrhoeic dermatitis.
- Facial psoriasis.
- Pityriasis alba.
- Chronic contact dermatitis.
- Discoid lupus erythematosus.

Case Analysis

The patient presented with chronic bilateral facial seborrhoeic dermatitis associated with dandruff, scalp itching, occasional acne, and nail pitting.

The constitutional characteristics included unresolved grief after the loss of her father, emotional suppression, increased responsibility at an early age, reserved expression of emotions, sympathy toward others, desire for companionship, and marked craving for sweets. The physical generals included low thirst, profuse perspiration, and recurrent dandruff.

Repertorial analysis demonstrated several closely related remedies; however, the complete constitutional picture corresponded most closely with **Natrum muriaticum**, particularly because of unresolved grief, emotional reserve, silent suffering, and increased maturity following bereavement.

Ferrum phosphoricum 6X was prescribed as supportive therapy according to the clinical presentation.

Totality of Characteristic Symptoms

Mental Generals

- Ailments after grief (death of father).
- Emotionally reserved; does not express emotions easily.
- Increased sense of responsibility at a young age.
- Sympathetic towards others' suffering.
- Sensitive nature.
- Mild yielding disposition.
- Timid while confronting authority figures.
- Fear of injections.
- Fear of insects.

- Desire for company.

Physical Generals

- Craving for sweets (+++).
- Desire for spicy food.
- Low thirst (3–4 glasses/day).
- Profuse, non-offensive perspiration.
- Appetite good.
- Refreshing sleep.
- Mixed diet.
- Regular painless menses.

Particular Symptoms

- Bilateral hypopigmented flaky facial patches.
- Dryness of facial skin.
- Occasional itching.
- Redness after sun exposure.
- Redness after bathing.
- Dandruff with scalp itching.
- Acne during weather changes.
- Mild nail pitting.
- Recurrent allergic tendency.

Repertorial Analysis

Repertorization was carried out using Hompath Zomeo software after considering the characteristic mental generals, physical generals, and particular symptoms.

Selected Rubrics

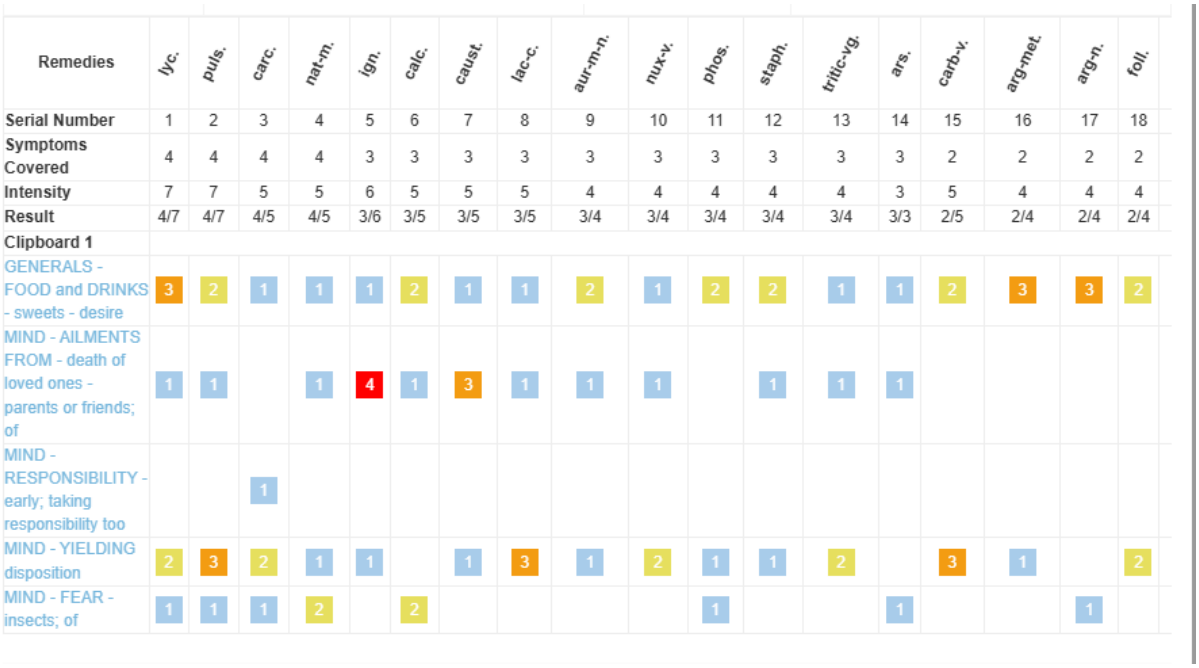
- Generalities – Food and drinks – Sweets – Desire.
- Mind – Ailments from death of loved ones.
- Mind – Responsibility, early taking.
- Mind – Yielding disposition.
- Mind – Timidity.
- Mind – Fear of insects.

Leading Remedies

Remedy	**Result**
Lycopodium	**4/7**
Pulsatilla	**4/7**
Calcarea carbonica	4/5
Natrum muriaticum	4/5

Remedy	Result
Ignatia	3/6
Calcarea phosphorica	3/5
Causticum	3/5
Aurum muriaticum	3/4

Although Lycopodium and Pulsatilla scored highest on repertorization, the patient's complete constitutional picture of **silent grief following her father's death, emotional suppression, increased maturity, reserved nature, inability to express emotions, and internalized suffering** corresponded most closely with **Natrum muriaticum**, which was selected as the constitutional remedy.



Remedies	lyc.	puls.	carc.	nat-m.	ign.	calc.	caust.	lac-c.	aur-m-n.	nux-v.	phos.	staph.	tritic-vg.	ars.	carb-v.	arg-met.	arg-n.	foll.
Serial Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Symptoms Covered	4	4	4	4	3	3	3	3	3	3	3	3	3	3	2	2	2	2
Intensity	7	7	5	5	6	5	5	5	4	4	4	4	4	3	5	4	4	4
Result	4/7	4/7	4/5	4/5	3/6	3/5	3/5	3/5	3/4	3/4	3/4	3/4	3/4	3/3	2/5	2/4	2/4	2/4
Clipboard 1																		
GENERALS - FOOD and DRINKS - sweets - desire	3	2	1	1	1	2	1	1	2	1	2	2	1	1	2	3	3	2
MIND - AILMENTS FROM - death of loved ones - parents or friends; of	1	1		1	4	1	3	1	1	1		1	1	1				
MIND - RESPONSIBILITY - early; taking responsibility too			1															
MIND - YIELDING disposition	2	3	2	1	1		1	3	1	2	1	1	2		3	1		2
MIND - FEAR - insects; of	1	1	1	2		2					1			1			1	

Remedy Differentiation

Natrum muriaticum

Natrum muriaticum was prescribed because the patient's constitutional picture centered around unresolved grief after the loss of her father, emotional reserve, inability to express emotions freely, increased responsibility at a young age, longing for companionship despite emotional withdrawal, and sensitivity hidden beneath a composed exterior. The craving for salty and spicy foods, recurrent dandruff, and chronic skin involvement further supported the prescription.

Ignatia amara

Ignatia was considered because of grief following bereavement. However, the patient did not exhibit the acute emotional variability, contradictory behavior, or hysterical manifestations typically associated with Ignatia. Her grief had become chronic and internalized.

Pulsatilla

Pulsatilla covered the yielding disposition and emotional sensitivity but was ruled out because the patient did not openly seek consolation or express her emotions. Instead, she suppressed her grief and assumed greater responsibility.

Lycopodium

Lycopodium scored highly during repertorization but lacked the central theme of unresolved grief and emotional suppression that dominated the constitutional picture.

Prescription

Stage	Prescription
Constitutional remedy	**Natrum muriaticum 200C**
Supportive medicine	**Ferrum phosphoricum 6X**
Follow-up	Placebo during continued improvement

Supportive Advice

- Regular scalp hygiene with mild shampoo.
- Adequate hydration.
- Vitamin D, Vitamin B12 and CBC evaluation.
- Avoid unnecessary cosmetic products causing irritation.
- Use sunscreen during prolonged sun exposure.
- Balanced nutritious diet.

Miasmatic Analysis

The case predominantly demonstrated a **Psoro-Tubercular miasmatic background.**

Psoric Features

- Dryness.
- Scaling.
- Itching.
- Seborrhoeic dermatitis.
- Dandruff.
- Allergic tendency.

Tubercular Features

- Early emotional maturity.
- Recurrent respiratory complaints.
- Nail pitting.

- Strong family history of autoimmune disease.
- Progressive spread of facial lesions.

Follow-up

Duration	Clinical Progress
1 Month	Itching reduced considerably; occasional facial redness persisted.
2 Months	Facial scaling reduced; no progression of lesions; sleep remained refreshing.
3 Months	Significant improvement in hypopigmentation; acne absent; itching resolved; redness markedly reduced.
Final Follow-up	Facial skin almost normal with no active scaling, itching, acne, or erythema. Patient adjusted well to her new teaching profession.

Clinical Outcome Assessment

Clinical Parameter	Baseline	Final Follow-up
Facial hypopigmented patches	Bilateral	Markedly reduced
Scaling	Moderate	Absent
Dryness	Moderate	Minimal
Itching	Occasional	Absent
Facial redness	Frequent after sunlight	Absent
Acne	Recurrent	Absent
Dandruff	Severe	Markedly reduced
Scalp itching	Present	Absent
Nail pitting	Mild	Stable
Overall cosmetic appearance	Poor	Significantly improved

Health-Related Quality of Life (HRQL)

The facial lesions initially caused cosmetic concern and reduced self-confidence, particularly after she began working as a teacher. Persistent dandruff, facial erythema, and visible hypopigmented patches affected her comfort during social interactions. During treatment, progressive improvement in facial appearance, disappearance of itching and acne, and reduction in redness significantly improved her confidence. She adapted comfortably to her teaching profession and reported greater satisfaction with her appearance and overall well-being.

Patient Perspective

"Initially, I ignored the patches because they were not very noticeable, but gradually they became more visible and affected my confidence. After treatment, the itching, redness, acne, and scaling disappeared, and the patches became much lighter. I feel much more comfortable while teaching and interacting with people."

Learning Points

- Facial seborrhoeic dermatitis should be evaluated along with associated scalp involvement and nail changes.
- Constitutional prescribing should incorporate significant emotional events, particularly unresolved grief.
- Family history of autoimmune skin disease may influence long-term susceptibility.
- Objective serial follow-up helps document gradual improvement in chronic inflammatory facial dermatoses.
- Individualized homoeopathic treatment, combined with appropriate skin care, may reduce disease recurrence and improve cosmetic outcomes.

Discussion

Seborrhoeic dermatitis is a chronic relapsing inflammatory dermatosis that commonly affects sebaceous gland-rich areas such as the face and scalp. Psychological stress and emotional disturbances are recognized precipitating factors in susceptible individuals. In the present case, facial dermatitis developed after a prolonged period of emotional adjustment following the premature loss of the patient's father during the COVID-19 pandemic. The patient demonstrated marked emotional maturity, silent grief, increased family responsibility, and suppression of emotions, which formed the central constitutional theme.

Constitutional analysis indicated **Natrum muriaticum**, while **Ferrum phosphoricum 6X** was prescribed as supportive therapy. Over three months of treatment, progressive improvement was observed in facial erythema, scaling, itching, dandruff, and acne. No menstrual flare-ups or further disease progression occurred, and the patient successfully adapted to her new role as a school teacher. The favorable clinical outcome suggests that individualized constitutional management, along with lifestyle advice and skin care measures, contributed to sustained remission and improvement in quality of life.

Conclusion

This case demonstrates the successful management of **facial seborrhoeic dermatitis associated with scalp involvement** using individualized constitutional homoeopathic treatment. **Natrum muriaticum**, selected on the basis of the patient's constitutional characteristics and unresolved grief, was associated with marked improvement in facial lesions, dandruff, erythema, itching, and overall cosmetic appearance. The case highlights the importance of constitutional assessment, long-term follow-up, and individualized treatment in managing chronic inflammatory facial dermatoses.