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Homoeopathic Management of Alopecia Areata Associated with Hypothyroidism at Dr Batra's

Dr. Duvvuri Valli Srivani
Homeopathic Consultant | BHMS
Dilsukh Nagar Branch, Dr. Batra's Positive Health Clinic Pvt. Ltd.
Email: chc-dilsukhnagar@drbatras.com

ABSTRACT

Background: Alopecia areata is an autoimmune disorder characterized by non-scarring patchy hair loss. Endocrine disorders such as hypothyroidism and polycystic ovarian syndrome (PCOS) may contribute to disease severity and prolonged recovery. Individualized homoeopathic treatment aims to address both constitutional susceptibility and associated systemic factors.

Case Presentation: A 37-year-old female presented with sudden excessive hair fall in bunches for one month, associated with diffuse scalp visibility and positive Hair Pull Test (10 hairs/pull). She had associated hypothyroidism, PCOS with irregular menses, previous gangrene of fingers and toes, bilateral renal calculi, anemia, and elevated TSH. Constitutional evaluation revealed an emotional, anxious woman with fear regarding her family's future, desire for solitude, health anxiety, overthinking, grief following multiple family deaths, and easy weeping. Based on the totality of symptoms, Pulsatilla was prescribed constitutionally, Fluoric acid as the acute remedy, and Thuja occidentalis as the intercurrent medicine.

Results: Within four months, active hair fall markedly reduced, no new alopecia patches developed, visible regrowth appeared over previously affected areas, menstrual cycles became regular, dandruff resolved, and scalp examination demonstrated healthy regrowing hair. The patient also reported significant improvement in confidence and reduction in anxiety.

Keywords:

Alopecia Areata, Hypothyroidism, PCOS, Homoeopathy, Pulsatilla, Fluoric Acid, Hair Regrowth

1. Introduction

Alopecia areata is an autoimmune disorder resulting in sudden non-scarring hair loss. Autoimmune thyroid disease, hormonal imbalance, nutritional deficiencies, and emotional stress frequently coexist. Individualized homoeopathic management considers constitutional characteristics, mental generals, endocrine disorders, and objective clinical findings while monitoring hair regrowth during follow-up.

2. Patient Information

Parameter	Details
Age	37 years
Gender	Female
Occupation	Housewife

2.1 Chief Complaints

- Hair fall in bunches since one month
- Diffuse scalp visibility
- Positive Hair Pull Test (10 hairs/pull)
- Dandruff
- Rapid thinning of scalp hair

2.2 History of Present Illness

The patient presented with sudden onset severe hair fall over one month resulting in visible scalp. Hair Pull Test showed 10 hairs per pull. She had hypothyroidism for three years with irregular medication compliance and PCOS with irregular menses. Previous treatment included Minoxidil serum, Levogen tablets, multivitamins, hormonal therapy, and Thyronorm.

2.3 Associated Complaints

- Hypothyroidism (3 years)
- PCOS (3–4 years)
- Irregular menstruation
- Burning sensation in palms
- Heat sensation all over body

2.4 Past History

- Gangrene of right middle finger and toes (2020)
- Bilateral renal calculi
- Hormonal therapy for PCOS

2.5 Family History

No family history of alopecia.

2.6 Investigations

- Hemoglobin: 10.8 g/dL
- TSH: 7.56 mIU/L
- Vitamin supplementation advised (Vitamin B12, Vitamin D3)
- Ferritin evaluation advised

2.7 Physical Generals

- Appetite decreased
- Desire for chicken and rice
- Chilly patient
- Profuse perspiration
- Sleep refreshing

- Constipation
- Irregular menses

2.8 Mental Generals

- Health anxiety
- Fear of dying and leaving family unsupported
- Emotional
- Weeps easily
- Overthinking
- Desire for solitude
- Irritable with loud noises
- Stress following multiple bereavements
- Anxiety regarding future
- Avaricious disposition

2.9 Clinical Diagnosis

Alopecia Areata associated with Hypothyroidism and PCOS

2.10 Differential Diagnosis

- Telogen Effluvium
- Female Pattern Hair Loss
- Diffuse Alopecia Areata
- Endocrine-related Hair Loss

3. Case Analysis

The constitutional picture showed emotional sensitivity, anxiety about health and family, easy weeping, and hormonal imbalance corresponding to Pulsatilla. Fluoric acid was selected for active alopecia with rapid hair loss, while Thuja was prescribed as an intercurrent remedy considering the chronic constitutional background.

3.1 Totality of Symptoms

Mental Generals: Health anxiety; fear regarding future; weeping easily; emotional; desire for solitude; overthinking; stress after bereavement; irritable from noise.

Physical Generals: Chilly patient; appetite decreased; desire for chicken and rice; profuse perspiration; constipation; irregular menstruation.

Particular Symptoms: Sudden severe hair fall; hair fall in bunches; Hair Pull Test 10 hairs/pull; visible scalp; dandruff; hypothyroidism; PCOS; elevated TSH; low hemoglobin.

3.2 Miasmatic Analysis

Mixed Psoro-Sycotic Background

Psoric Features: Functional endocrine disorder; emotional sensitivity; hair fall; constipation.

Sycotic Features: PCOS; chronic hypothyroidism; long-standing hormonal imbalance; persistent irregular menstruation.

3.3 Susceptibility

Moderate susceptibility. Good vitality, endocrine disorders under treatment, positive response during follow-up, and absence of irreversible follicular destruction suggested a favourable prognosis.

Figure 1. Repertorial analysis / case-taking summary.

3.4 Remedy Selection

Remedies	nat-m.	lyc.	puls.	phos.	alum.	ars.	calc.	sep.	staph.	bar-c.	carc.	sulph.	lach.	psor.	merc.	sil.	kali-c.	nux-v.	carb-an.
Serial Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
Symptoms Covered	9	9	8	8	8	7	7	7	7	7	7	7	6	6	6	6	6	6	6
Intensity	16	12	18	16	8	16	10	10	10	8	7	7	11	11	9	9	8	8	7
Result	9/16	9/12	8/18	8/16	8/8	7/16	7/10	7/10	7/10	7/8	7/7	7/7	6/11	6/11	6/9	6/9	6/8	6/8	6/7
Clipboard 1																			
MIND - AVARICE	1	2	3	1	1	4	1	2	1	1	1	1	1	1	3	3		1	1
MIND - ANXIETY - health; about - own health; one"s	1	2	2	3	1	3	2	2	1	1	1	1	1	2	1	1	2	1	
MIND - WEEPING - easily	2	1	3		1		2	2	1	1	1					1			
GENERALS - FOOD and DRINKS - rice - desire				2	1				2										
GENERALS - FOOD and DRINKS - chicken - desire	1		1	2							1	1						1	
EXTREMITIES - GANGRENE		1		2		3							3		1				2
HEAD - HAIR - falling - spots, in	2	1		2	1	2	2		1					2		1	2		1
MIND - AILMENTS FROM - emotions	2	2	3	2	1	1	1	1	3	1		1	2	2	1	2	1	3	1
MIND - COMPANY - aversion to - desire for solitude	3	1	2					1	1	2	1	1	2				1	1	1
MIND - FORSAKEN feeling	2	1	3	2	1	2	1	1		1	1	1	2	3	2	1	1		1
GENERALS - HYPOTHYROIDISM	2	1	1		1	1	1	1		1	1	1		1	1		1	1	

Figure 2. Repertorial result chart.

Constitutional Remedy — Pulsatilla: Selected for emotional nature, mild disposition, weeping tendency, hormonal disturbances, irregular menses, and health anxiety.

Acute Remedy — Fluoric Acid: Selected for active alopecia, rapid hair fall, diffuse hair loss, and hair regrowth stimulation.

Intercurrent Remedy — Thuja occidentalis: Selected for chronic constitutional background, hormonal disturbances, and long-standing susceptibility.

Potency Selection — 200C: Selected considering moderate susceptibility, chronic endocrine disorder, constitutional correspondence, and active hair loss.

4. Follow-up Summary

- 1 month: Hair fall reduced; baby hair visible.
- 2 months: Hair regrowth observed over bald areas; menstrual cycle normalized.
- 3 months: No new alopecia patches; continued scalp regrowth.
- 4 months: Hair fall inactive, scalp normal, dandruff absent, significant regrowth documented.

Table 1. Outcome Assessment

Parameter	Before Treatment	Final Follow-up
Hair Pull Test	10 hairs/pull	Within normal limits
Hair Fall	Severe	Controlled
Bald Patches	Active	Regrowth present
Dandruff	Present	Absent
Menses	Irregular	Regular
Scalp	Visible	Healthy regrowth

Medicine Given: Pulsatilla (Constitutional), Fluoric Acid (Acute), Thuja occidentalis (Intercurrent).

Duration of Treatment: 4 months.

Duration of Remission: Ongoing with sustained improvement.

5. Brief Case Summary

A 37-year-old female with hypothyroidism, PCOS, anemia, and elevated TSH presented with sudden severe alopecia associated with diffuse scalp visibility and positive Hair Pull Test. Individualized constitutional treatment with Pulsatilla, supported by Fluoric Acid, Thuja, nutritional advice, and thyroid management resulted in marked reduction of active hair fall, normalization of Hair Pull Test, visible hair regrowth, regularization of menstrual cycles, and significant improvement in quality of life.

5.1 Learning from the Case

- Endocrine disorders such as hypothyroidism and PCOS should be evaluated in patients presenting with diffuse alopecia.
- Constitutional homoeopathic treatment combined with correction of nutritional and hormonal abnormalities may contribute to favourable clinical outcomes.
- Hair Pull Test, serial scalp examination, and photographic comparison are valuable objective tools for monitoring treatment response.

5.2 Prognosis

Favourable. Early hair regrowth, absence of new patches, improved endocrine control, and good patient compliance indicated a good prognosis.

5.3 Differential Remedies Considered

- Natrum muriaticum

- Lycopodium
- Phosphorus
- Sepia
- Arsenicum album

5.4 Health-Related Quality of Life

Following treatment, active hair fall reduced markedly, hair regrowth restored confidence, menstrual cycles became regular, anxiety regarding hair loss decreased, and daily activities and emotional well-being improved significantly.

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