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## Atopic hand eczema/dermatitis treated and cured with Homoeopathic constitutional remedy: A case report

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**Abstract**

A case report of 47 yrs male occupationally a mechanical worker, suffered with atopic hand eczema of both palmar surface of the hand with roughness, scales erythematous, cracks with bleeding in between. after complete case history taking in detail the analyses and evaluation done the case was treated with homoeopathic medicine ars alb 200 as a constitutional remedy by selecting a similimum From kents repertory after medication the follow up was done by using hand eczema severity index (0-360) the above mentioned case gave a improvement in reducing scales and changes in mental and physical wellbeing the case highlights role of individual homeopathic medicine can bring changes in skin disorder without any adverse effect.

**Keywords:** Atopic hand eczema, homoeopathic medicine, Arsenic alb, kent repertory

**Introduction**

Atopic hand eczema is one of the common disease in recent times seen in people exposed to chemical agents, exogenous toxins, allergic to soap detergents, occupationally works as a mechanics, works in hotel ect they all needs a medical attention. It is characterized by pruritus, recurrent infection, symmetric eczematous lesions, roughness, scales crusty, xerosis with bleeding and cracks followed by burning, it involves palmarhands (40%), finger ect most commonly prevalence in children 20% adult pohase shows more intense itching lichenification, crackes and bleeding the diagnosis mainly clinical with few lab test available for confirmation like patch tst, serum Ige level, atopic PT ect often suffering of above condition may have a history of eczema/dermatitis, respiratory infection 10%, sensitivity to irritants pollen ect. atopic hand eczema impacts the patients quality of life. In the case of treatment procedure the modern medicine though gives improvement not able to bring the changes in re currency and permanent cure homeopathy treats all types of skin affection are successfully treated without any side effect.

**Case report**

A male patient 47 yrs old came with the history of reddish, scales, roughness, itching, fissured with pain over the palmar surface of both hands since 2-3 yrs on and off increased with seasonal variabilities, allergy, with contributing factors

Location	Sensation	Modalities
Skin Hand (both) Palmar dorsal surface	roughness++, scales reddish with itching scratch marked thick yellowish erythematous, fissured, bleeding marks with symmetrically distributed h/o of mild vesicles ++	Worse seasonal change Worse by washing hands with soap Worse night Beter by warmth and moisturizer

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**Past history:** Atopic dermatitis during childhood treated with local application HTN since 3 yrs on regular treatment family history – no significant history

**Table 1: Personal history**

Diet: Veg(prefer) Thirst: 1L/day, consumes about 3 glasses after eating Aversion: nothing specific Bowels: 1/D, satisfactory once per day Appetite: regularly habituated Desires: sweets +	<ul style="list-style-type: none"> <li>• Sleep: disturbed due to aggravation of skin complaints</li> <li>• Perspiration: generalised</li> <li>• Dreams: nothing specific</li> <li>Thermals:</li> <li>• Season preferred-winter</li> <li>• Bathing-lukewarm, warm bath</li> <li>• Food-warm</li> <li>• Doesn't like Fanning-</li> <li>• Chilly</li> </ul>
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**Table 2: Life space investigation**

Situation /events	Expression	Diseases suffered
<ul style="list-style-type: none"> <li>• Low socio economic status</li> <li>• Working in private mechanic shop gets stressed easily</li> <li>• Doesn't sit in one place</li> <li>• Likes to stay alone</li> <li>• Works continuously</li> <li>• Gets tensed about financial matter as he is working in private mechanic factory</li> <li>• Gets tense slightly and so how manage's the situation</li> <li>• Conscious about his health as if a big dangerous is going to happen</li> </ul>	Restlessness Workaholic Stress++ Worried about his health Worries about damages	Develops skin roughness gradually increased

**General physical examination:** A patient is moderately built and nourished with wheat complexion normal on examination: PR- 90 bpm, RR- 20 cpm, Weight-70 kgs BP- 140/96 mm of hg systemic examination: RESPIRATORY Examination, CVS, Per Abdomen nothing abnormality detected

**CNS:** conscious and oriented GCS -15/15, Cranial nerves examination normal motor and sensory functions normal, coordination good and gait normal.

**Local Examination: Skin;** palm /hand inspection and palpation Reddish, Cracks+, Scales, yellowish scales roghness, Dryness Observed Peeling of Skin, Bleeding Marks In between SEEN itching marks, both palmar region over dorsal surface of hand, gradually extending to fingers abut more than 4mm size.

**Observed**

**Differential Diagnosis**

- Foot dermatitis.
- Hand dermatitis.
- Foot and mouth disease.

Palmoplantar psoriasis.

Eczema of hand.

**Diagnosis**

**Atopic hand eczema both hand**

**Table 3: Analysis of symptoms**

Common	Uncommon
<ul style="list-style-type: none"> <li>• cracks and scales over the palmar surface of hands</li> </ul>	<ul style="list-style-type: none"> <li>• Reddish cracks, peeling of skin, painful, bleeding+, roughness thickening of skin,</li> <li>• &lt;winter, night, changes season varied</li> <li>• &gt; warm application, applying petroleum gel</li> <li>• Desires: sweets+</li> <li>• restlessness++</li> <li>• work halchohalic</li> <li>• chilly patient</li> <li>• stress</li> <li>• worried about health, about damages happening</li> </ul>

**Table 4: Evaluation of symptoms**

<ul style="list-style-type: none"> <li>• Mentals</li> <li>• does not sit or stand in one place</li> <li>• Restless++</li> <li>• Work halohalic</li> <li>• Stress</li> <li>• Worried about health and worries about damages</li> </ul>	<ul style="list-style-type: none"> <li>• Physicals</li> <li>• Desires: sweet</li> <li>• Chilly patient</li> <li>• Wheat complexion</li> </ul>	<ul style="list-style-type: none"> <li>• Characteristics</li> <li>• cracks, fissures, peeling of skin, painful, bleeding+,</li> <li>• Roughness of skin</li> <li>• &lt; winter, night,</li> <li>• &gt; warm application , applying petroleum gel</li> </ul>
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**Miasma**




**Reportorial totality and miasmatic analysis**

1. Mind-Restlessness -psora
2. Mind-workhalcoholic – sycotic
3. Mind -anxiety -worried about -sycotic
4. Skin -roghness, scales -sycotic
5. Extremities-Cracked, syco syphphilitic
6. Skin-Cracks-Itching sycotic
7. Skin-Eruptions-Desquamating-Scales,

8. White- syphilitic
9. Skin –Eruption-Wet AGG; Getting sycotic
10. Skin-Eruptions-Winter-AGG sycotic
11. Bladder-Urination-Involuntary-Night sycotic
12. Generals-Food And Drinks-Potatoes-Agg sycotic

**Generals-Open Air:** Better sycotic

**Dominat miasm:** syco syphilitic.

	<ul style="list-style-type: none"> <li>• Feels better while using moisturiser.</li> <li>• Roughness ++ peeling of skin +, cracks++ , bleeding marks +, dryness+ over palmar region dorsal surface of the hand</li> <li>• Prescription – arsenic alb 1 m od for 3 days</li> <li>• Strict auxiliary measures</li> <li>• Rubrum 200 bd fr 15 days</li> <li>• 1<sup>st</sup> follow up</li> </ul> <p style="text-align: center;">Hand eczema severity index Erythema -4, infiltration -4 vesicles -1 Fissured -4 scales -4 roughness -4 Odema -1 total 22</p>
<p style="text-align: center;"><b>2<sup>nd</sup> follow up</b></p> 	<ul style="list-style-type: none"> <li>• Soles -Redness + reduced, dryness++, scales and cracks extended size reduced to 3m over the mid portion of palmar surface of hand</li> <li>• Prescription -</li> <li>• continue same treatment</li> </ul> <p style="text-align: center;">Hand eczema severity index Erythema -4,infiltration -4 vesicles -0 Fissured -3 scales -3 roughness -3 Odema -1 total 17</p>
<p style="text-align: center;"><b>3<sup>rd</sup> follow up</b></p> 	<ul style="list-style-type: none"> <li>• c/o dryness of palm, roughness of skin absent</li> <li>• Scales and few dryness still persists</li> <li>• Prescription-</li> <li>• Rubrum 200</li> </ul> <p>1-0-1 x15 days</p> <p style="text-align: center;">Hand eczema severity index Erythema -2, infiltration -1 vesicles -0 Fissured -2 scales -2 roughness -1 Odema -0 total 8</p>
<p style="text-align: center;"><b>4<sup>th</sup> and 5<sup>th</sup> Follow UP</b></p> 	<p style="text-align: center;"><b>4<sup>th</sup> FOLLOW UP and 5<sup>th</sup></b></p> <ul style="list-style-type: none"> <li>• Scales and cracks reduced by 60%</li> <li>• No redness, peeling of skin not seen</li> <li>• Prescription-</li> </ul> <p>ars alb 1M one dose- Rubrum 200 1-0-1 x15 days</p> <p style="text-align: center;">Hand eczema severity index Erythema -1 infiltration -0 vesicles -0 Fissured -1 scales -2 roughness -0 Odema -0 total 4</p> <p style="text-align: center;">Hand eczema severity index Erythema -0,infiltration -0 vesicles -0 Fissured -0 scales -0 roughness 0 Odema -0 clear</p>

**Remedies selected** -Arsenic album, phosphorus, Silicea, Sepia, Calcarea Phosphorica Prescription arsenic album 1M 3 dose  
❖ Rubrum 200 1-0-1

**Auxiliary measures**

- Should make sure that the personal hygiene is maintain
- Avoid exposure to irritant and chemicals, application of moisturiser.
- Maintain a healthy diet.
- Massage with coconut oil over the palm to prevent dryness of palm

**Conclusion**

Patient was diagnosed with atopic hand eczema after analysis of symptoms. He was given ars alb 200 Od fr 3 days with repetition as required it has been observed that homoeopathic medicines are effective in eczema/dermatitis case. The medicine selected and given on basis of totality of symptoms as per the principles of individualisation, the above case gives the permanent cure for assessment hand eczema severity scales used in above case.

**Declaration of patient consent**

The patient was informed about the publication of her data in journal and written consent was taken from the patient.

**Conflict of Interest**

Not available

**Financial Support**

Not available

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