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## Bleeding eczema turns smiling by Lachesis: Case report

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### Abstract

Eczema is common chronic dermatological condition, affecting about 20% of children and up to 10% of adults. Its etiology is multifactorial and presents as erythema, oedema, papules, vesicles, scaling, and lichenified depending upon chronicity of skin lesions. Usually emollients and local adrenocorticosteroids are used as conventional treatment which suppress local condition arousing internal malady and other symptoms which previously existed in latent state. A case of 30 years female suffering from bleeding eczema on both hands for 1 year was treated successfully by single individualized homoeopathic medicine *Lachesis mutus* 200 C. Modified Naranjo Criteria Score was used to establish causal attribution, with total score of 9. This evidence-based case report clearly shows the positive role of homoeopathy in treatment of eczema.

**Keywords:** Eczema, homoeopathy, individualized, modified Naranjo criteria, *Lachesis mutus*

### Introduction

“Eczema” is a Greek term derived from ec-out & zema -boil. In this condition, skin looks like “boiling out” or “oozing out”<sup>[2]</sup>. World Allergy Organisation (WAO) in 2003, defining eczema (or atopic dermatitis), as an inflammatory skin illness that is chronic, irritating and recurrent. It clinically manifests as pruritus, erythema, edema, papules, vesicles, scaling and lichenification<sup>[2]</sup>. Globally most prevalent inflammatory skin disorder, affecting 20% of children and up to 10% of adults<sup>[3]</sup>. Eczema was ranked 15th among non-fatal disorders and 59th overall among all diseases based on disability adjusted life years (DALYS) according to Global Burden of Disease (GBD) 2017<sup>[4]</sup>. Prevalent in industrialized countries and urban areas of developing nations<sup>[1]</sup>. Global Asthma Network (GAN) Phase I study concluded an average increase in prevalence of current eczema symptoms of 0.98% per decade in adolescents, 1.21% per decade in children, and of 0.26% and 0.23% per decade globally in severe eczema symptoms. Hand eczema is prevalent in about 4%, being common in women as compared to men<sup>[6]</sup>. Histologically, spongiosis and clinically pruritus is the hallmark of eczema, which may disturb the quality of life<sup>[2, 5]</sup>. In chronic phase, lesion shows hyperkeratosis and acanthosis. Acute eczema is ill-defined erythematous, edematous plaque topped with papules, vesicles, pustules and exudates that dry into crusts. Chronic eczema shows lichenification (triad of hyperpigmentation, skin thickening and increased skin markings); lesions are less exudative and more scaly<sup>[2, 5]</sup>. Exact etiology is unknown, however, number of variables contribute to the disorder. Risk factors include first-degree relatives (Filaggerin gene mutation), high socioeconomic class, sensitization to dust, water hardness, washing habits, irritants (wet, mineral oils), contact allergies (chromate, nickel, scent, biocides, rubber compounds) and atopy.<sup>[1, 2, 6]</sup>. The diagnosis is made clinically according to patient’s presenting symptoms. Eczema is disabling with significant psychological impacts like sleep disturbances<sup>[1]</sup>, anxiety, depression, wage loss, social ostracism<sup>[2]</sup>. Treatment includes immune-modulators, emollients, topical corticosteroids, antihistaminic. Homoeopathy says suppressed eruptions always spreads into deeper tissues; therefore, should be treated promptly with homoeopathic individualized medicine. A case of bleeding eczema in female effectively treated with homoeopathy is presented below.

### Case Report

#### Background

A 30 years old female presented with history of lesions on hands with intense itching and burning pain, which bleed on touching since 1 year reported to the OPD of State Lal Bahadur

Shastri Homoeopathic Medical College and Hospital, Shantipuram, Prayagraj, on 8<sup>th</sup> June, 2023. Housewife with low socioeconomic status insidiously developed painful blackish eruptions on palmar surface of left hand (especially thumb) and later on right hand (Figure 1a, 1b). She complained of painful burning with severe itching in eruptions which aggravated by touch, warmth and hot weather and not relieved by scratching. Itching kept her up at night and pain unable her to hold anything in hand, hindering in daily household work. Excessive dry skin of hands cracked and bled on touching. Ointments were used for temporary relief, but the condition relapsed on discontinuing. She felt embarrassed and self-conscious in social settings. Patient was more affected by heat and avoided tight clothing. She was curious, talkative and concerned about consultation fees. She was suspicious about the treatment and never appreciated the improvement.

**Past history**

Chickenpox at age of 16 years.

**General Examination**

Built - patient was thin with dry, shriveled skin.  
 Blood Pressure - 110/70 mmHg.  
 Pulse Rate - 74 beats/min.

**Physical Generals**

- **Thermal:** Hot.
- **Thirst:** 2-3 L/day, normal water.
- **Appetite:** Ravenous appetite, cannot tolerate hunger.
- **Desires:** Salty food, fatty food.
- **Tongue:** Dry, trembling.
- **Stool:** D1, N0, satisfactory, soft in consistency.
- **Urine:** D3-4, N0-1, clear, watery, no burning.
- **Perspiration:** Profuse, non-offensive, on face.
- **Sleep:** Unrefreshing, not sound sleep, on back.
- **Sexual sphere:** Increased desire.
- **Dreams:** Dead ones, SNAKES, flying, falling.
- **Menses:** Regular, LMP: 01/06/2023.

**Mental Generals**

She was talkative, difficult to stay on one topic. Sharp observer with hasty speech, suspicious and wanted to know about everything.

**Diagnosis**

**Eczema of hand**



**Fig 1(a):** Right hand before treatment



**Fig 1(b):** Left hand before treatment



**Fig 2:** Both hands after treatment

**Totality of symptoms**

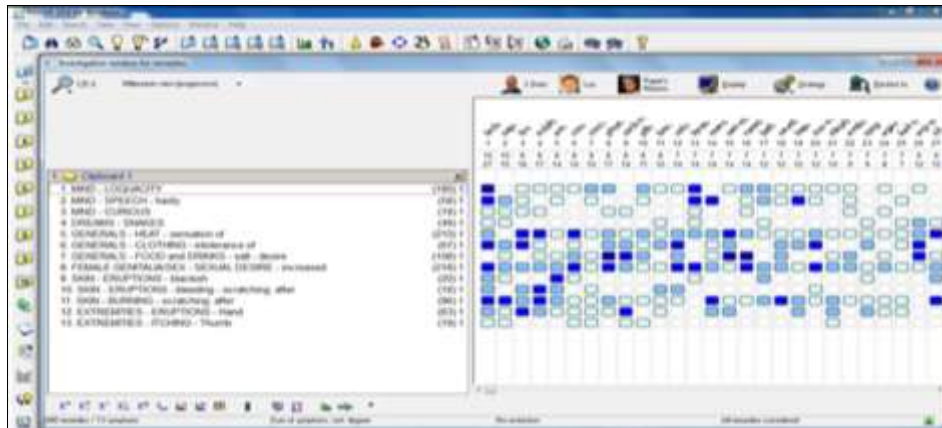
1. Loquacity.
2. Inquisitive.
3. Hasty speech.
4. Desire- salty food.
5. Tight clothing aggravation.
6. Thermal- Hot.
7. Dreams of snake.
8. Sexual desire increased.
9. Blackish eruptions on hand.
10. Itching, burning and bleeding on scratching.

**Table 1:** Analysis and evaluation

| Mental symptoms                               | Evaluation |
|---|------------|
| Loquacity                                     | 4+         |
| Inquisitive                                   | 2+         |
| Hasty speech                                  | 3+         |
| Physical symptoms                             |            |
| Generals-food and drinks-salty food-desire    | 2+         |
| Generals- clothing –intolerance to            | 3+         |
| Generals-heat-sensation of.                   | 3+         |
| Dreams of snake                               | 3+         |
| Female genitalia/sex- sexual desire increased | 2+         |
| Particular symptoms                           |            |
| Skin-eruptions – blackish                     | 2+         |
| Extremities-eruptions, hand                   | 2+         |
| Extremities –itching- thumb                   | 3+         |
| Skin-burning- scratching after                | 3+         |
| Skin-eruptions, bleeding, scratching after    | 3+         |

**Repertorial analysis**

RADAR software [version 10.0.028(ck), Archibel 2007, Belgium] using Synthesis Repertory.



**Fig 3:** Repertorization chart

**Table 2:** Analysis of Repertorial result

| S. No. | Medicine   | Mark Obtained |
|--------|------------|---------------|
| 1.     | Lachesis   | 27/12         |
| 2.     | Sepia      | 15/10         |
| 3.     | Lycopodium | 18/9          |
| 4.     | Sulphur    | 17/9          |

**First prescription (8th June 2023)**

After case taking, based on repertorial totality and consultation of homoeopathic Materia Medica [8], *Lachesis mutus* 200C / 1 dose / 4 globules /OD and placebo for 15 days was prescribed. Advised not to use any other treatment and moisturize with coconut oil in case of dryness. This case is followed upto 1<sup>st</sup> September 2023, as per the follow-up

table [Table 3]. Gradual improvement was seen with no new eruptions after 1 month of treatment and complete resolution within 3 months (Figure 2). Modified Naranjo Criteria for Homoeopathy [7] has been used for causal attribution [Table 4].

**Reasoning behind remedy and chosen potency**

In repertorial analysis, Lachesis, Sepia, Lycopodium and Sulphur cover all rubrics. Based on repertorial totality and Materia Medica consultation [8], *Lachesis mutus* 200C/one dose seemed to be the most suitable prescription in this case. The potency selection and repetition was based on homoeopathic principles, philosophy and susceptibility of individual [9].

**Table 3:** Follow up sheet

| S. No. | Date    | Brief notes  | Prescription   | Improvement |
|--------|---------|--|--|-------------|
| 1.     | 8/6/23  | Black lesions on both hands, itching, burning pain on scratching                           | Lachesis 200/ 1 dose Placebo 30 * 4 Pills OD For 15 days | -           |
| 2.     | 26/6/23 | No change in lesions, relief in itching and pain.  | Placebo 30 * 4 Pills OD For 15 days                      | Mild        |
| 3.     | 14/7/23 | No new eruptions but itching, pain much better.  | Placebo 30 * 4 Pills OD For 15 days                      | Moderate    |
| 4.     | 31/7/23 | Blackish skin, itching and burning pain significantly decreased.                           | Placebo 30 * 4 Pills OD For 15 days                      | Moderate    |
| 5.     | 17/8/23 | Discolouration, itching, burning pain negligible. Marked improvement in general condition. | Placebo 30 * 4 Pills OD For 15 days                      | Marked      |
| 6.     | 1/9/23  | Complete disappearance of eruptions.   | Placebo 30 * 4 Pills OD For 15 days                      | Marked      |

**Table 4:** Modified Naranjo Criteria

| S. No. | Domains   | Case |
|--------|---|------|
| 1.     | Was there an improvement in the main symptom or condition for which the homoeopathic medicine was prescribed?   | +2   |
| 2.     | Did the clinical improvement occur within a plausible timeframe relative to the medicine intake?  | +1   |
| 3.     | Was there an initial aggravation of symptoms?   | 0    |
| 4.     | Did the effect encompass more than the main symptom or condition (i.e., were other symptoms, not related to the main presenting complaint, ultimately improved or changed)?   | +1   |
| 5.     | Did overall well-being improve?   | +1   |
| 6(A).  | Direction of cure: did some symptoms improve in the opposite order of the development of symptoms of the disease?   | 0    |
| 6(B).  | Direction of cure: Did at least one of the following aspects apply to the order of improvement of symptoms:<br>From organs of more importance to those of less importance?<br>From deeper to more superficial aspects of the individual?<br>From the top downwards? | +1   |
| 7.     | Did 'old symptoms' (defined as non-seasonal and non-cyclical symptoms that were previously thought to have resolved) reappear temporarily during the course of improvement?   | 0    |
| 8.     | Are there alternative causes (i.e., other than the medicine) that with a high probability-could have produced caused the improvement? (Consider known course of disease, other forms of treatment and other clinically relevant interventions)                      | +1   |
| 9.     | Was the health improvement confirmed by any objective evidence? (e.g., investigations, clinical examination, etc.)  | +2   |
| 10.    | Did repeat dosing, if conducted, create similar clinical improvement?   | 0    |
| Total  |   | +09  |

## Discussion

Eczema is a complex inflammatory skin condition characterized by itching, scaling, oozing and vesicle development. Conventional management includes emollients and topical steroids with grievous side effects on body. According to homoeopathy, external diseases occur due to some underlying internal derangement and hence they should be treated internally and not locally. Homoeopathic medicines have no side effects as based on holistic approach in curing patient. Miasmatic interpretation of eczema: Psora- persistent itching, dry rough scaly eruptions, < open air, > night; Syccosis-eruptions in circumscribed spot, eczema exfoliate, scaly and patchy eruption; Syphilis-thick and heavy scales, very little soreness, eruption is circular grouping. In this case, patient had dry skin, itching, bleeding and burning pain on scratching which aggravated by warm and touch. Her thermal was hot with tight clothing aggravation. She was loquacious with hasty speech, jumping from one topic to another, as well as suspicious. Sleep was unrefreshing and had dreams of snake and dead. *Lachesis mutus* was prescribed on basis of totality of symptoms, going by the result of repertorization. 200C potency was selected based on susceptibility of the case with follow-up period of 15 days. During post-treatment follow-up no new patches grew on the body and the case was completely cured within 3 months. Modified Naranjo Criteria score was 09 in the case, thus showing some causal attribution of homoeopathic medicine *Lachesis mutus* towards cure of the eczema.

## Conclusion

Homoeopathy can treat chronic skin complaints where conventional treatment cannot permanently remove the disease. Non-recurrence of complaints in this case indicates that single dose of individualized homoeopathic medicine chosen by symptom similarity can treat cases of Eczema. However, a well-designed study with sizable sample size is necessary for providing stronger evidence for proving effectiveness of homoeopathy in eczema cases.

## Declaration of patient consent

Informed patient consent was obtained to disseminate clinical information on scientific platform.

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## Author's Contribution

Not available.

## Conflict of Interest

Not available.

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## References

- Schmitt J, Apfelbacher CJ, Flohr C. Eczema. BMJ clinical evidence. 2011;1716(2011):1-41.
- Neena K. Illustrated synopsis of dermatology and sexually transmitted diseases, 6<sup>th</sup> edition, New Delhi, Elsevier; c2020.
- De Lusignan S, Alexander H, Broderick C, *et al.* Patterns and trends in eczema management in UK

primary care (2009-2018): A population-based cohort study. DOI: 10.1111/cea.13783

- Langan SM, Mulick AR, Rutter CE, *et al.* Trends in eczema prevalence in children and adolescents: A Global Asthma Network Phase I Study. Clinical and Experimental Allergy. 2023;53(3):337-352. DOI:10.1111/cea.14276
- Griffiths CEM, Bleiker TO, Creamer D, Ingram JR. Rook's Dermatology Handbook. First. John Wiley & Sons; c2022.
- Lakshmi C, Srinivas CR. Hand eczema: An update. Indian Journal of Dermatology, Venereology and Leprology. 2012;78(5):569-582. DOI:10.4103/0378- 6323.100547
- Lamba CD. Evaluation of the Modified Naranjo Criteria for Assessing Causal Attribution of Clinical Outcome to Homeopathic Intervention as Presented in Case Reports. Homoeopathy. 2020;109(4):191-197.
- Boericke W. Pocket Manual of Homoeopathic Materia Medica with Repertory. 9<sup>th</sup> edition. B. Jain Publishers (P) LTD; c2015.
- Hahnemann S. Organon of Medicine, translated from the 5th edition, with an appendix by RE Dudgeon with additions and alterations as per 6th edition translated by William Boericke, and Introduction by James Krauss. New Delhi: B Jain Publishers; c2013.

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