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Non-contagious pityriasis versicolor in an adult male treated with individualized homoeopathic intervention: A descriptive case report

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Abstract

Objective: Tinea versicolor, also known as Pityriasis versicolor, is a common, non-painful, non-contagious, benign, superficial fungal infection of the skin. Pityriasis versicolor is caused by *Malassezia globosa* also known as *Pityrosporum*. P.V affected skin seborrheic areas like, trunk, neck, and/or arms. P.V. is not properly cured in conservative treatment, whereas in homoeopathy lots of probabilities to cure are lurking up & prime objective is to cure P.V. with IHM. This case report is helpful for contributing to the scientific literature on PV for exploring more.

Method: We collect symptoms before & after treatment of patient. The patient's symptoms have been perceived & Scored by the "Dermatology life quality index". We also followed the "Modified Naranjo Criteria Score (Monarch)" for medicinal aggravation.

Results: Tinea versicolor with lesions over chest, trunk & arms with intensive itching and soreness was treated with the individually selected homoeopathic medicine *Nat. Mur* 0/2 to 0/12 potency. The outcome was measured by changes in clinical presentation along with improvement in general well-being. The dermatology life quality index Score (DLQI) improved from 24 to 0 during treatment. Monarch score of +9/13 indicates a positive result between Homoeopathic intervention & Clinical outcome.

Conclusion: Homoeopathy is a specialized system of medicine that treats the patient as a whole and not just the disease. This case report shows a positive effect of treatment with individualized homoeopathic medicine in managing the case of Pityriasis Versicolor for adults.

Keywords: Pityriasis Versicolor, DLQI, Monarch, IHM (Individualized homeopathic medicine), Local maladies, Psorico-Sycotic Miasam

Introduction

Tinea versicolor is also known as "Pityriasis versicolor" & it's a common, 'non-painful', 'non-contagious', "benign", "superficial fungal infection of the skin". The causative organism is "*Malassezia globosa*" or "*Malassezia furfur*", also known as *Pityrosporum* [1, 2]. Meanwhile, they live in our bodies as a symbiotic relationship & they are predominant under genetic predisposition, and environmental conditions [3]. Skin lesions of P.V occurred in various areas like, seborrheic areas (trunk, neck, and/or arms) [4].

PV is more common in warm and humid conditions, about 50% in tropical countries like India than and as low as 1.5% in cold climates such as Sweden [4].

PV is diagnosed on the bases of its characteristic clinical presentation. Ultraviolet black light (Wood lamp) is rarely used clinically [5, 6].

Homoeopathically P.V. management is very easy, cheap, without side effects & palliation. This case report may be helpful for observation in homeopathic prescription & contribute to the scientific literature on PV for exploring more [7].

Case Summary

A 50-year-old male came to my clinic, with complaint of severe itching on his back, arm, chest, and abdomen along with finely "brown scaly patches" & "hypopigmentation" [7,8]. The complaints are always aggravated by "Sunrays", "Excessive Sweat", "Warmth", "Indigestion at night" & "Ameliorated by cold bathing", Rest. He is a "Businessman", that's why he continuously travels varieties area. This Complaint belongs 10-12 years. Before coming to the O.P.D/ clinic, she was treated with "Conventional palliative therapies" ("Anti-fungal", "Anti-histamines with steroidal ointment").

For 8-9 years by a dermatologist, at that time his complaints were little ameliorate for 3-4 months and after that, scaly patches became more violent than earlier. He is diabetic for 4-5 years (FP: - 150 mg/dl & PP: - 240 mg/dl) & Continues taking “conventional medicine”. He suffered from “chickenpox” in childhood [8].

Family history

Father: “Diabetes mellitus” & Mother: “Gout complaints”.

Homoeopathic Generalities: Mental generals: Easily angry, Shouted continuously & Consolation aggravation, Desire for solitude & Business Embarrassment.

Physical generals: Appetite- regular”, “addicted- alcohol”, and thirsty full & “tongue- cracked white”. Desire- “Chicken”, “Salt”, “cold food” & Thermal relation- “HOT++”. Stool- “constipated”. Sleep well & Urine- Regular.

Clinical findings: General examination: Talkative & gentle. “Weight”: 60 Kg; “Temperature”: 98.3°F; “Respiratory rate”: 16/min; “B.P.”: - 128/82 mm of Hg, Abdomen: - Normal “Reflex gait”: - Regular.

Skin examination: Hypopigmented spots with size: 1-2 cm to 3-4 cm. & whitish-brown scales on chest, abdomen, arm & back.

Diagnostic assessment: - Diagnosis of PV was based on its characteristic clinical presentation & distribution of the lesions. On further examination, “Scratch sign/Besnier’s sign” [9] was positive.

Provisional Diagnosis: “Pityriasis Versicolor”.

Miasmatic Analysis: This case belongs to “psorico-sycotic miasma” [9, 10]. Always remember that “Miasmatic analysis” of any case of disease and patient is an important pillar of homoeopathic treatment, there is no break of rule in case of skin diseases [10].

Analysis & Totality of symptoms: - 1) “Easily anger or grief” 2) “Consolation aggravation” 3). “Want to be alone” 4) “Itching agg. By sunrays or photosensitive, sweat, warm & amel. By cold, rest” 5) “Desire for salty & hot things” 6) “Thirsty” 7). “Hypopigmented, scaly, and itching spots.” 8) “Oily skin” 9). “Pityriasis”

Table 1: Repertorization of the analytic symptoms

Remedy Name	Nat-m	Ars	Calc	Sulph	Sep	Merc	Bry	Carb-v	Ign	Phos	Rhus-t	Bell
Totally	28	17	15	15	15	14	14	14	14	14	14	13
Symptoms Covered	10	6	9	7	6	7	6	6	6	6	6	7
Kingdom												
[Kent] [Mind]Anger, irascibility (see irritability, quarrelsome):	3	3	2	3	3	1	3	2	3	2	2	2
[Kent] [Mind]Grief:Silent:	3								3			
[Kent] [Mind]Consolation :Agg:	3	2	1		3	1			3			2
[Kent] [Mind]Company: Aversion to:	3		1	2	2		2	2	3	1	2	2
[Kent] [Skin]Itching:	3	3	2	3	3	3	2	3	1	2	3	1
[Kent] [Skin]Itching: Perspiration agg:						2						
[Kent] [Generalities]Sun: From exposure to:	3		1	1			2	2	1			2
[Kent] [Face]Greasy:	2		1			2	2				2	
[Kent] [Skin]Eruptions: Scaly:	2	3	2	2	3	2				3	2	2
[Kent] [Skin]Itching: Cold air:Amel:												
[Kent] [Stomach]Desires: Salt things:	3		2	1				3		3		
[Kent] [Stomach]Desires: Warm :Food:		3										
[Kent] [Stomach]Thirst:	3	3	3	3	1	3	3	2		3	3	2

Table 2: Elaborated Table no 1 due to haziness of Picture

Remedy Name	Nat-m	Ars	Calc	Sulph	Sep	Merc	Bry	Carb-v	Ign	Phos	Rhus-T	Bell
Totally	28	17	15	15	15	14	14	14	14	14	14	13
Symptoms Covered	10	6	9	7	6	7	6	6	6	6	6	7
Kingdom												
[“Kent”] [Mind]Anger, irascibility (see irritability, quarrelsome):	3	3	2	3	3	1	3	2	3	2	2	2
[“Kent”] [Mind]Grief:Silent:	3								3			
[“Kent”] [“Mind”]Consolation :Agg:	3	2	1		3	1			3			2
[Kent] [Mind]Company: Aversion to:	3		1	2	2		2	2	3	1	2	2
[Kent] [Skin]Itching:	3	3	2	3	3	3	2	3	1	2	3	1
[Kent] [Skin]Itching: Perspiration agg:						2						
[Kent] [Generalities]Sun: From exposure to:	3		1	1			2	2	1			2
[Kent] [Face]Greasy:	2		1			2	2				2	
[Kent] [Skin]Eruptions: Scaly:	2	3	2	2	3	2				3	2	2
[Kent] [Skin]Itching: Cold air:Amel:												
[Kent] [Stomach]Desires: Salt things:	3		2	1				3		3		
[Kent] [Stomach]Desires: Warm :Food:		3										
[Kent] [Stomach]Thirst:	3	3	3	3	1	3	3	2		3	3	2

Bases of Selection Constitutional Individualized Homoeopathic Medicine (CIHM): Repertorial analysis done by kent [11] & Symptoms Cross check done by Clark

materia medica [11]. We selected 1st remedy “Nat.mur” as a constitutional remedy.

Objective

Tinea versicolor, also known as “Pityriasis versicolor”, is a common, non-painful, non-contagious, benign, superficial fungal infection of the skin [1, 2, 12]. “Pityriasis versicolor” is caused by “Malassezia globosa” also known as “Pityrosporum” [12]. P.V affected skin seborrheic areas like, trunk, neck, and/or arms. P.V. is not properly cured in conservative treatment, whereas in homoeopathy lots of probabilities to cure are lurking up & prime objective is to cure P.V. with IHM. This “case report” is helpful for contributing to the scientific literature on PV for exploring more.

Method

We collect symptoms before & after treatment of patient. The patient’s symptoms have been perceived & Scored by the “Dermatology Life Quality Index” [12, 13]. We also followed the “Modified Naranjo Criteria Score (Monarch)” for medicinal aggravation [12, 13].

First prescription: “*Nat. mur* 0/2 /10” dose followed by “*Placebo* 30” TDS for 10 days was prescribed on the first visit (Date: -13/05/2022). The patient was sent for Blood sugar Fasting and a postprandial test to check.

Table 3: Timeline including follow-up of the case

Follow-up	Date	Symptoms	Advised Remedy
1 st	19/06/2022	After 1 st prescription patient symptoms are relief. No new symptoms outcome, but frequency of itching is ameliorated. That is the main reason for potency increases.	“ <i>Nat. mur</i> 0/4/10” dose followed by “ <i>Placebo</i> 30/ 10 dose”.
2 nd	22/07/2022	In the 2 nd follow-up itching as usual remain under sunlight, Constipation not present, stool regular & No new hypopigmentation spot come.	1) “ <i>Nat. Mu</i> ” r 0/6/ 10 dose evening vac.van 2) “ <i>Placebo</i> ”-200/1o dose in BDPC.
3 rd	16/09/2022	Complain is aggravated, stool constipated, “Hypopigmentation spot” is stand still. Indigestion present last few days.	1) “ <i>Thuja</i> ” 0/2/6 dose in evening vac.van. 2) “ <i>Nat. phos</i> ” 6X/ 4tab BDPC at warm water.
4 th	05/11/2022	Itching complaints still remain & all spot is slightly >. Indigestion > & stool regular. New complain- common cold.	1) “ <i>Nat. mur</i> ” 0/8/ 10 dose evening x vac.van 2) “ <i>Rhus tox</i> ” 200/ 3 hourly interval/4 days.
5 th	02/12/2022	In the 5 th follow-up patient feels improved himself. All pigment spots are reduced their size & Common cold complain >.	1) “ <i>Nat. mur</i> ” 0/10/10 dose evening x vac.van 2) “ <i>Placebo</i> ” 200/10 dose in BDPC.
6 th	06/02/2023	Itching complain > & Photosensitivity complain less, Stool regular, and “Hypopigmented spot” size was reduced continuously.	1) “ <i>Nat. mur</i> ” 0/12/10 x evening vac.van 2) “ <i>Placebo</i> ”- 1M/10x BDPC.
7 th	25/03/23	Spots on abdomen gained normal skin colour and on chest became lighter. No new spots. Patient was improving.	“ <i>Placebo</i> ” - 1M/10 dose OD
8 th	17/04/23	Patient all complained >, specially itching. All spot are pigmented one by one.	“ <i>Placebo</i> ” - 1M/ 2 dosesx vac.van x2 day
9 th	20/04/23	Patient main complaint is disappearance of hypopigmented spots. Normal skin colour restored.	“ <i>Placebo</i> ” - 1M/10 dose x vac.van x morning.

Dermatology life quality index (DLQI) [12, 13]

Hospital No: Dr. Abhinandan Das’s Clinic

Date: 13/05/2022

Name: MR. XY

Score: 24/30 (Before Treatment/Q1) & 0/30 (After

Treatment/Q2).

Address: 303, Raja Ram Mohan Roy Road, Kolkata-700008, India.

Diagnosis: “Tinea versicolor OR Pityriasis versicolor”

Table 4: DLQI Measurement Score (Q1 = Before Treatment DLQI Score, Q2 = After Treatment DLQI Score) [12, 13]

SE. No.	Questionaries (DLQI) [12, 13]	Q1	Q2
01	Over the last week, how itchy, sore, painful or stinging has your skin been? [12,13]	03	00
02	Over the last week, how embarrassed or self-conscious have you been because of your skin? [12,13]	03	00
03	Over the last week, how much has your skin interfered with you going shopping or looking after your home or garden? [12,13]	02	00
04	Over the last week, how much has your skin influenced the clothes you wear? [12,13]	02	00
05	Over the last week, how much has your skin affected any social or leisure activities? [12,13]	02	00
06	Over the last week, how much has your skin made it difficult for you to do any sport? [12,13]	03	00
07	Over the last week, has your skin prevented you from working or studying? [12,13]	03	00
08	Over the last week, how much has your skin created problems with your partner or any of your close friends or relatives? [12,13]	03	00
09	Over the last week, how much has your skin caused any sexual difficulties? [12,13]	00	00
10	Over the last week, how much of a problem has the treatment for your skin been, for example by making your home messy, or by taking up time? [12,13]	03	00
Total DLQI Scoring		24	00

Table 5: Assessment by Modified Naranjo Criteria Score (MONARCH) [13]

SL. No	Item/ Question	Yes	No	Not sure or NA
01	Was there an improvement in the main symptom or condition for which the homoeopathic medicine was prescribed? [13]	+2	0	0
02	Did the clinical improvement occur within a plausible time frame relative to the drug intake? [13]	+1	-2	0
03	Was there an initial aggravation of symptom? (Need to define in glossary) [13]	+1	0	0
04	Did the effect encompass more than the main symptom or condition, i.e., were other symptoms ultimately	+1	0	0

improved or changed? ^[13]				
05	Did overall wellbeing improve? (Suggest using a validated scale) ^[13]	+1	0	0
06(A)	Direction of cure: did some symptoms improve in the opposite order of the development of symptoms of the disease? ^[13]	+1	0	0
06(B)	Direction of cure: did at least two of the following aspects apply to the order of improvement of symptoms -from organs of more importance to those of less importance - from deeper to more superficial aspects of the individual - from the top downwards. ^[13]	+1	0	0
07	Did old symptoms" (Defined as non-seasonal and non-cyclical that were previously thought to have resolved) reappear temporarily during the course of improvement? ^[13]	+1	0	0
08	Are there alternate causes (Other than the medicine) that-with a high probability- could have caused the improvement? (consider known course of disease, other forms of treatment and other clinically relevant intervention) ^[13]	-2	+1	0
09	Was the health improvement confirmed by any objective evidence? (e.g. lab test, clinical observation, etc.) ^[13]	+1	0	0
10	Did repeat dosing, if conducted, create similar clinical improvement? ^[13]	+2	0	0
Total scoring Range, Maximum score, 13 Minimum score, 02		Score = 09		

Outcome: The "monarch score" of +9/13 (Table-2) indicates that the improvement is attributed to the Homoeopathic medicine "NAT. MUR."



Fig 1: Before homoeopathic treatment



Fig 2: After homoeopathic treatment

Discussion

'Pityriasis versicolor' normally belong in homeopathic domain called "local maladies" aphorism 185-203 ^[14, 15]. These few local manifestations always originate from a miasmatic disturbance. They are truly chronic in nature, sometimes it belongs to one-sided diseases (Aphorism 173) ^[14, 15]. Proper "case-taking" & "anti-miasmatic" or deep-acting remedies can help to recover from this situation. This case is very peculiar because P.V mainly occurred in children but is very rare for aged people. So, under this circumstance, we repertorised the analytical symptoms of P.V. & chosen "Nat. mur" as a constitutional remedy followed by a "Placeb" o. In the 3rd follow up we are given "Thuja Occident" followed by a "Nat. phos 6X" because of indigestion & standstill condition. In the 6th follow-up patient's complaint was completely ameliorated, followed by "Nat. Mur 0/12" & patient further continued for 9th follow-up for psychological satisfaction. In this case report we also measure DLQI = (Q1=24 & Q2= 00) ^[12, 13, 16] &

MONARCH ^[13, 16] = 09/13. So, this case is clearly shown how homoeopathic remedy can cure P.V. without any palliation or drug adverse reactions ^[17]. However, more studies like RCT with larger sample sizes are suggested to establish the efficacy of homoeopathic individualised or constitutional remedies in the treatment of pityriasis ^[18]. Always acknowledge that it's a single case report which is why it has some limitations like low sample size, Bias, etc.

Results

Tinea versicolor with lesions over "chest", "trunk" & "arms" with intensive itching and soreness was treated with the individually selected "homoeopathic" medicine "Nat. Mur"- 0/2 to 0/12 potency. The outcome was measured by changes in clinical presentation along with improvement in general well-being. The "Dermatology life quality index" Score improved from 24 to 0 during treatment ^[12, 17, 18]. "MONARCH" score of +9/13 indicates a positive result between Homoeopathic intervention & Clinical outcome ^[19, 20].

Conclusion

Homoeopathy is a specialised system of medicine that treats the patient as a whole and not just the disease. This case report shows positive effect of treatment with "individualized homeopathic medicine" in managing the case of "Pityriasis Versicolor" for adult.

Declaration of patient consent

The author certifies that he has obtained the appropriate patient consent forms. In the form, the patient has given his consent for his images and other clinical information to be reported in the journal. The patient understands that his name and initials will not be published.

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Conflicts of interest: None declared.

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