

A Case Report on Treatment of Contact Dermatitis by Homoeopathic Similimum

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ABSTRACT

Contact dermatitis (CD) is a type of eczema that develops after coming into direct contact with a chemical, but can also be caused by biologic or physical causes. Although numerous homoeopathic medications are used in the treatment of contact dermatitis, this example has once again demonstrated that homoeopathic medicines work best when prescribed on the basis of individualization.

Key words: Contact Dermatitis, Graphites, Similimum.

INTRODUCTION

Contact dermatitis is classified into irritant contact dermatitis and allergic contact dermatitis. Irritation by direct touch with a material causes irritant contact dermatitis (ICD), while allergic contact dermatitis is caused by exposure to an allergic substance (ACD) (1). ICD is the most frequent occupational skin disease, accounting for over 80% of all CD cases. With the length, intensity, and concentration of the drug, the risk of getting irritating contact dermatitis increases. Irritant contact dermatitis can be caused by chemical or physical irritants, as well as microtrauma. Nickel, balsam of Peru, chromium, neomycin, formaldehyde, thiomersal, fragrance mix, cobalt, and parthenium are common etiological allergens for allergic contact dermatitis (2).

Case Study

The patient, 40 year male, mechanic by profession reported in the OPD at Dr. Girendra Pal Homoeopathic Hospital and Research Centre on 12/08/2020, with the complaint of cracks and eruptions on left palm with itching more at night and sticky discharge from eruptions since 2 years. The affected areas showed brown discoloration. Patient had applied allopathic topical ointment

before 1 year but no relief was obtained so he opted for homoeopathic treatment.

Past history- Typhoid 5 years back.

Family history- Mother has Hypothyroidism. Father has Hypertension.

Patient as a whole

Thirst: 3-4 L/ day, 1 glass at a time, normal tap water.

Appetite: 4 chapati per meal, 3 meals per day.

Desire: Cold things

Aversion: Sweets

Stool: D₁N₀, semi solid, satisfactory

Urine: D₄₋₅N₁₋₂, pale yellow, non-offensive.

Perspiration: Normal, Generalised, offensive, non-staining.

Thermal reaction: Chilly

Mental

He was very irritable as described by attendant and also observed by physician. Patient also confessed that he has violent anger, sometimes beats the other person when angry, this was also confirmed by attendant.

Local examination

Cracks on left palm with brown discoloration and sticky discharge.

Provisional Diagnosis

Irritant contact dermatitis on the basis of clinical history and local examination (Figure 1).

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Case Processing

Table 1: Analysis of symptoms

Mental generals	Physical generals	Particulars
Irritability	Desire cold things	Eruptions on with itching more at night.
Violent anger	Aversion sweets	Cracks with itching.
	Offensive perspiration	Eruptions with sticky discharge.

Evaluation of symptoms

1. Violent anger
2. Irritability
3. Desire cold things
4. Aversion sweets
5. Offensive perspiration
6. Eruptions with itching more at night
7. Eruptions with sticky discharge.

8. Cracks with itching.

Predominant Miasm: Predominantly Psora (3).

Repertorisation- As the generals were marked, this case was repertorised with the help of the *Synthesis Repertory* from RADAR 10.0 version (4) (Figure 2).



Figure 1: Lesion before treatment

Figure 2: Repertorisation Sheet

Selection of remedy- *Graphites* was selected on the basis of repertorisation (Figure-2) and after consulting materia medica, considering the symptom similarity.

Selection of potency and dose - 1 dose of *Graphites* 200 , 4 globules was prescribed.

12/08/20: *Graphites* 200/1 dose, *Rubrum* 30/TDS for 14 days.

General management - Patient was advised to avoid any kind of local application.

Table 2: Follow ups during treatment

Date	Changes in symptoms	Prescription	Justification
26/08/2020	Reduced itching on eruptions. No new eruptions.	Phytum 200/ 1 dose Rubrum 30/ TDS X 14 days.	Changes observed and placebo was given.
9/9/2020	No itching. No new eruptions.	Phytum 200/ 1 dose Rubrum 30/ TDS X 14 days	Marked improvement observed and placebo was given.
23/9/20	Eruptions and cracks reduced. No itching was present (Figure 3).	Phytum 200/ 1 dose Rubrum 30/ TDS X 14 days.	Marked improvement observed and placebo was given.



Figure 3: Lesion after treatment

DISCUSSION

Homoeopathy is a medical system that takes a holistic approach to patient care. To explicate the constitutional composition of the patient, detailed case taking is required, and a single remedy is chosen based on the totality of symptoms according to the principles given by Dr. Christian Friedrich Samuel Hahnemann. This case study demonstrates that the homoeopathic constitutional approach to ICD treatment is effective without the need of medicated external applications. Here Graphites was prescribed which covered the totality of symptoms the patient was cured completely. The key indications for Graphites being rough, hard, persistent dryness of portions of skin unaffected by eczema. Eruptions ooze out a sticky exudation. Unhealthy skin with tendency to suppuration. Worse, warmth, at night (4).

CONCLUSION

The following case report demonstrates the effectiveness of constitutional homoeopathic medicine in the treatment of ICD. This instance has underlined the necessity of a holistic approach to treatment, in which the individuality of a patient is taken into account when choosing a solution, rather than merely the disease symptoms. This case report can assist physicians in better understanding how to manage patients with ICD.

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CONFLICT OF INTEREST

The authors declare that there is no conflict of interests regarding the study or this article.

ABBREVIATIONS

Outpatient Department (OPD), Contact Dermatitis (CD), Irritant Contact Dermatitis (ICD), Allergic Contact Dermatitis (ACD).

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