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Role of Individualized Homeopathic Intervention in Management of Herpes Simplex: An Evidence-Based Case Report

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ABSTRACT:

Infection with Herpes Simplex virus is very extensive in the human population. Virus replication is generally limited to the epithelium but reactivation of the latent virus in the enervating sensory neurons not only produces recurrent localized lesions, but also encephalitis, keratitis, blindness and many other severe systemic diseases. Overall prevalence varies between 40-80% and 0-40% for HSV 1 and HSV 2 respectively. The primary and recurrent cases are treated by anti-viral therapies in modern medicine. But in today's world, resistance to the available drugs, toxicity due to long term drug use causes much difficulty to treat the cases. Several HSV vaccines are also being terminated due to much controversy. This case report of a patient, complaining of pain redness with itching & blister formation over chest and back for last 5 months, shows a case of Herpes Simplex virus infection, which was treated and recovered with individualized Homeopathic remedy, *Thuja occidentalis*. It was prescribed according to the *totality of the symptoms*, without recurrence and further complication. Clinical improvement as well as the overall wellbeing directs towards the success of applying single Homeopathic medicines to the individual. The evidence of recovery in the case of HSV infection as well as other difficult to treat cases indicates to the new horizon of the future medical guidelines.

KEYWORDS: Herpes simplex, Homeopathy, Individualization, *Thuja occidentalis*.

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INTRODUCTION:

Herpes simplex virus (HSV) produces numerous infections, involving mucocutaneous surface, nervous system, visceral organs etc. [1] There are two types of HSV infections, those are identified- HSV 1 and HSV 2, which usually causes orolabial diseases and genital and newborn infections respectively. [2] Herpes viruses are able to invade and replicate in the host nervous system and also, they have the ability to establish a site of local infection. HSV may reactivate from its latent state and travels through the sensory neurons to the skin and the muco-cutaneous surfaces. Recurrent muco-cutaneous shedding of HSV causes transmission of the viruses to a new host.[3] Clinical manifestations of HSV includes typical or disseminated and atypical cutaneous infections, herpetic whitlow, traumatic herpes, eczema herpeticum and many more. [4] The typical lesions are painful erythematous papules, vesicles and shallow ulcers. In case of atypical lesions, HSV forms tumors or hypertrophic, nodular growths.^[5] During the first infection, patient may experience fever, body ache, headache, sore throat, swollen lymph nodes near the infection etc. Painful blisters or ulcers can be recurrent or chronic with the constant burning sensation. itchiness and estimated worldwide HSV-1 infection prevalence under age 50 is 67% and HSV-2 is infection 13%.^[6] The immunecompromised patients are more prone to suffer from the HSV infection. Serious muco-cutaneous complications like large non-healing ulcers, disseminated acute lesions can occur along with especial atopic eczema, eruptions. [7] Other risk factors include age, sex, ethnicity, BMI, smoking, stress, fatigue etc. [8] According to WHO report, the symptoms of Herpes Simplex infection can be reduced by using modern

anti-viral medications, but it can't be cured. [6] It leads the patient to search for alternative therapies. Plenty of cases are treated and recovered successfully by Homeopathic medicines now-a-days. [9] But gap of reporting the cases leads to lack of evidences and ultimately less acceptance of this therapy. In this case report, a diagnosed case of Herpes Simplex Virus infection is presented, which was successfully recovered by Homeopathic treatment.

CASE REPORT:

A male patient, aged about 47 years, reported on 25th April, 2023, was complaining of painful red, papular eruptions at the back and at the chest area for last 5 months [Figure 1, Figure 2]. He stated that some blisters were forming here and there at the affected area and these were very much painful and tender to touch. His pain was getting aggravated when he put on some clothes and in airconditioned room. The lesion was having some fishy odour. He went for conventional therapy and was diagnosed as mucocutaneous infection by Herpes Simplex Virus. He was prescribed some allopathic anti-viral medicines and ointment but he got some temporary relief. The pain, papules and formation of blisters was still persisting. Complaints were reappearing after stopping the anti-viral medicines.

History:

Past history: he suffered from skin eruptions formerly.

Family history: his mother, grandmother suffered from hypertension and osteo-arthritis respectively. His father suffered from bronchial asthma too. He presented that his grandfather died due to bronchitis.

Personal History: patient was married and working as a factory worker.

General symptoms (Physical and Mental): His appetite was good, couldn't

bear hunger for long. He had desire for salty food and fish. He had a tendency to drink water frequently. Tongue was moist, imprinted and cracked. His stool was regular but constipated and offensive. Perspiration was offensive, mainly at the axilla, staining the clothes yellow. Sleep was disturbed at night due to tenderness. He had dreams of falling and of regular activities. He was a chilly patient thermally. On questioning, he stated that he couldn't take decisions easily.

Clinical examination: Patient was chubby and stout. His face was looking oily and waxy. There were small skin tags at the neck region. No clubbing was there. Decubitus was of choice. There was no sign of malnutrition. Pulse was 80 beats per minute and blood pressure was checked 140/86 mm of Hg. Respiratory rate was normal. Anaemia, jaundice, cyanosis was absent. No

engorgement of the neck vein was noticed and the neck gland was not palpable.

Analysis of the case: After analysing the case, characteristic mental and physical symptoms were taken to form the totality of symptoms and we repertorised the case with Kent's Repertory using Zomeo Pro 3.0 [Figure 7].

THERAPEUTIC INTERVENTION:

After considering the miasms and the totality of the symptoms, he was prescribed *Thuja occidentalis* 200, 1 dose on the first visit, followed by placebo for three weeks. After 3weeks, there was no such improvement, but redness was reduced. We gave him placebo for one month. After two and half months, we repeated *Thuja occidentalis* 200, 1 dose by keeping his symptoms in observation. [Figure 5 and Figure 6]. A detailed timeline of treatment has been discussed in [Table1].

Table 1: Therapeutic interventions and detailed timeline of treatment of the case

Date of visit	Observation of symptoms	Therapeutic intervention
25/04/2023	Painful red, papular eruptions at the back and at the chest area with tender blisters	Thuja occidentalis 200, 1 dose, followed by placebo for 20 days
16/05/2023	Redness was reduced	Placebo was given
13/06/2023	Painful blisters were reduced, no new papules	Placebo was given
07/07/2023	Complaints were still persisting, but decreased in intensity	Thuja occidentalis 200, 1 dose was repeated
04/08/2023	Papules were faded, no pain, no blister	Placebo was continued

Table 2: Assessment of the case according to MONARCH: Modified Naranjo Criteria for Homoeopathy [14]

Item	Yes	No	Not	sure	or
			N/A		
Was there an improvement in the main symptom or condition	+2				
for which the Homoeopathic medicine was prescribed?					
Did the clinical improvement occur within a plausible time frame	+1				
relative to the drug intake?					
Was there an initial aggravation of symptoms?	+1				

	_	_	
Did the effect encompass more than the main symptom or	+1		
condition (i.e., were other symptoms ultimately improved or			
changed)?			
Did overall well-being improve? (Suggest using a validated scale)	+1		
Direction of cure: Did some symptoms improve in the opposite			0
order of the development of symptoms of the disease?			
Direction of cure: Did at least two of the following aspects apply			0
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			
Did 'old symptoms' (defined as non-seasonal and non-cyclical		0	
that were previously thought to have resolved) reappear			
temporarily during the course of improvement?			
Are there alternate causes (other than the medicine) that,		+1	
with a high probability could have caused the improvement?			
(e.g., known course of disease, other forms of treatment and			
other clinically relevant intervention)			
Was the health improvement confirmed by any object evidence?	+2		
(Lab test, clinical observation, etc)			
Did repeat dosing, if conducted, create similar clinical	+1		
improvement?			

Total score = 10





Figure 1 Figure 2
Figure 2 and Figure 2 Showing red papular eruptions at the back and at the chest area with tender blisters before treatment.





Figure 3 and Figure 4 Showing red papular equations a

Figure 3 and Figure 4 Showing red papular eruptions at the back and at the chest area were reduced and blisters also reduced during treatment.





Figure 5 Figure 6

Figure 5 and Figure 6 Showing red papular eruptions at the back and at the chest area were faded and blisters also improved at the end of treatment.

Remedy	Thuj	Carb- an	Nit-ac	Phos	Graph	Lach	Merc	Nat-m	Sil	Carb-v	Plb	Sulph	Lyc	Nux-v	Ars
Totality	12	12	12	12	12	11	11	11	11	10	10	10	10	10	9
Symptoms Covered	6	5	5	5	4	5	5	5	4	5	5	5	4	4	4
[Kent] [Mind]Confidence, want of self:	0	1	1	1	0	1	1	1	2	1	1	1	2	1	0
[Kent] [Face]Shiny:As if oily:	1	0	0	0	0	0	0	2	0	0	2	0	0	0	0
[Kent] [Stomach]Desires:Salt things:	1	0	2	3	0	0	0	3	0	3	2	1	0	0	0
[Kent] [Rectum]Constipation (see inactivity):	3	2	3	3	3	3	2	3	3	2	3	3	3	3	3
[Kent] [Perspiration] Odour:Offensive:	3	3	3	2	3	2	3	0	3	2	0	3	3	3	2
[Kent] [Generalities]Heat:Vital,lack of:	2	3	3	3	3	2	2	2	3	2	2	2	2	3	3
[Kent] [Perspiration]Staining the linen:Yellow:	2	3	0	0	3	3	3	0	0	0	0	0	0	0	1

Figure 7: Repertorial analysis using HOMPATH ZOMEO software

DISCUSSION:

Herpes Simplex virus (HSV) type 1 and type 2 can infect a wide range of hosts and cell types. It causes the prevalence of this viral infection almost 40-80% worldwide. The complex interaction of the viral glycoprotein with the host cell receptors are dependent on various risk factors.[10] HSV enters through the breaks in the skin surface or mucosa via direct contact, innervates the infection site and infects the skin. But during the latent period, HSV genome infect through the peripheral neurons in the absence of infected virus but with potential to restart the infection.[11] The study of advance epigenetics explains this modern pathophysiology of HSV with Homeopathy. The Homeopathic philosophy completely believes that the morbid influence remains even in the absence of infected virus and affects the individuals according to their vital state. The process of individualization presents the patient as a whole. This wholistic approach includes the totality of the symptoms, i.e the outwardly reflected picture of the internal cause of the disease.[12] According to the modern medicinal concept, Herpes Simplex is an incurable disease, though the burning, itching, tingling, blisters, sore can be removed. [13] But Homeopathy can remove symptoms of the internal disease and also can cure the individual. This case report describes the importance of single individualized constitutional Homeopathic treatment in the case of Herpes Simplex virus infection. Thuja occidentalis was prescribed according to the totality of symptoms of that patient and after doing proper repertorization. Individualize case evaluation is done. The possible causal attribution to the clinical outcome of homeopathic intervention on the patient was assessed with the help of 'Modified Naranjo Criteria for Homoeopathy' (MONARCH) [14]

whose total score was 10 which is at par with the maximum score [**Table 2**]. Complete cure of the cases is achieved after Homoeopathic individualistic treatment. Regular follow up also ensures that there was no recurrence after complete recovery.

CONCLUSION:

This case report goes one step further in demonstrating the efficacious treatment of Herpes simplex with individualized homeopathic medicine without any adverse effects of drug reactions or recurrence of the disease symptoms.

Limitation of study:

This case report is not sufficient to draw any conclusion rather good quality, well-designed studies are required to establish the efficacy of Individualized homeopathic medicines in managing Herpes simplex.

Patients consent:

The patient has consented that his images and other clinical information will be published in the journal; He has understood that his name and initials will not be included in the manuscript.

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