

## **Efficacy of Individualized Homoeopathic Medicine in the Treatment of Nummular Dermatitis : A Case Report**

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### **ABSTRACT:**

Nummular dermatitis, also known as discoid eczema, is a chronic skin condition characterized by round, itchy, and scaly patches on the skin. It is often challenging to treat and manage due to its recurrent nature. In this case report, we discuss the treatment of nummular dermatitis with individualized homeopathic medicine Graphites 200 CH. The patient, a 60 years aged individual, presented with classic symptoms of nummular dermatitis, including erythematous, coin-shaped lesions with intense pruritus and oozing. This case report demands that individualized homeopathic medicine can treat Nummular dermatitis and improvement of life quality of the patient. This evidence provides a favorable indication for the utilization of homeopathy in isolation and appears to pave the way for supplementary therapies in conjunction with standard treatments in forthcoming practices.

**KEYWORDS:** Graphites 200CH, Individualized Homoeopathic medicine, Nummular dermatitis.

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Received: 03.07.2024    Revised: 31.0.2024    Accepted: 01.09.2024    Published: 20.09.2024

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### **Quick Response Code**



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### **INTRODUCTION:**

Nummular dermatitis, also known as discoid eczema or nummular eczema, is a pruritic eczematous dermatosis characterized by pruritic coin-shaped erythematous and

eczematous patches on an individual with uniformly dry skin. This persistent inflammatory skin condition typically affects the lower extremities and followed by the upper extremities and trunk. Nummular

dermatitis is considered a distinct manifestation of endogenous or idiopathic eczema, although some authorities propose its classification as a variant of atopic dermatitis<sup>[1]</sup>. The precise cause of nummular dermatitis remains unidentified. Diagnosis of nummular dermatitis relies on clinical observations of pruritic coin-shaped erythematous and eczematous patches on an individual with uniformly dry skin. Acutely, lesions may begin as papules or vesicles that coalesce into plaques but when established, lesions will appear sharply defined, round or coin-shaped, and erythematous; eczematous plaques will range in size from 1 to 10 cm and in late-stage lesions may develop a drier scale and lichenification and has a bimodal distribution, predominantly affecting females aged 15 to 25 years and males aged 50 to 65 years.<sup>[1]</sup>

While conventional treatments like corticosteroids and antibiotics have shown clinical improvement in some cases<sup>[2]</sup>, homoeopathic remedies have been increasingly considered as a safer and more satisfactory alternative for treating dermatitis, including nummular dermatitis<sup>[4]</sup>. Homoeopathic medicines, when prescribed based on individualization, have demonstrated effectiveness in managing contact dermatitis, a type of eczema that shares similarities with nummular dermatitis<sup>[3]</sup>. Additionally, homoeopathy has shown promising results in treating chronic skin diseases like lichen simplex chronicus, providing stable improvement and remission without recurrence in patients<sup>[5]</sup>. Therefore, considering the positive outcomes observed in various skin disorders, including dermatitis, homoeopathy could be a viable treatment option for nummular dermatitis, emphasizing the importance of further research in this field<sup>[3]</sup><sup>[5]</sup>.

This case report has been reported as per the HOM-CASE CARE guideline, to add evidence of successful homoeopathic treatment in case of Nummular dermatitis and improvement of the quality of life of the patient<sup>[6]</sup>.

#### **Case Presentation:**

A 60 years old male patient came to our Out Patient Department on 5<sup>th</sup> February with the complain of itchy eruption with sticky watery discharges on left lower extremities since 2 month. Physical examination of the affected part showed multiple pruritic coin-shaped erythematous and eczematous patches on left lower extremities. Itching which was aggravated at night and warmth weather. Associated with pain in stomach with flatulence, which was ameliorated by eating and lying down.

#### **History of the present complains**

According to the patient, there is a small patchy itchy eruption on affected parts for 2 months. Initially ignored, the eruption worsened over time with watery discharges. Despite taking allopathic medicine and ointment for a month, no improvement was observed.

**Past History:** he was suffering from ringworm 2 years ago and took homoeopathic medicine.

**Family History:** the patient have 4 children and they are healthy.

#### **General symptoms (Physical and Mental):**

His appetite was moderate with moderate thirst. He had desire for sweet and aversion to meat. He passes stool regularly but it was hard large and knotty. The urine flows clearly with a pronounced sour odor. His skin appeared unhealthy, dry, and cracked,

emitting an offensive smell due to foot sweat. He was timid, apprehensive, and despondent.

**Diagnosis Assessment:**

Diagnosis was done by its peculiar skin eruption which is clearly seen in picture 1,2. After careful examining the effected part the lesion was diagnosed as Nummular dermatitis with edema of lower extremities.

**Analysis of the case:**

After conducting thorough homoeopathic case taking, the symptoms were analyzed to identify the most suitable homoeopathic medicine for this case

**Totality of symptoms:**

The following symptoms are considered for the totality of the symptoms.

- Eruption, oozing out a sticky exudation.
- Dry, cracked, unhealthy skin.
- Edema of lower limbs.
- Itching at night, warm weather
- Pain in stomach with flatulence > eating, lying down
- Aversion to meat
- Desire for sweet
- Stool was hard large and knotty
- Urine has sour smell
- Offensive foot sweat.
- Timid, Apprehensive, and Despondent

**Miasmatic background:**

**Symptoms Miasm Corresponding<sup>[11]</sup>**

Eruption, oozing out a sticky exudation. Psoricmiasm

Dry, cracked, unhealthy skin. Psoricmiasm

Itching aggravates at night. Syphilitic miasm

Desire for sweet. Psoricmiasm

Urine has sour smelling Sycoticmiasm

Timid, apprehensive & despondent Psoricmiasm

**Reportorial analysis:**

Here the totality of symptoms clearly indicates the picture of *Graphites* but for final confirmation, a software reportorial assessment was done after converting the totality of symptoms into rubrics using HomopathZomeo Elite based on Kent repertory. After repertorisation, *Graphites* covered most of the symptoms both physical and mental, with a total score of 32 which is the highest score. (Picture 4)

**THERAPEUTIC INTERVENTION AND FOLLOW UP:**

After reportorial analysis and consulting with various homoeopathic materiamedica,<sup>[7-9]</sup> *Graphites* 200/ 4 dose, once daily for 4 days and *Phytum* 500/ 14 dose, once daily for 14 days was prescribed. Follow up of the patient was done as per the requirement and all changes of clinical presentation. In the whole process of the homoeopathic treatment the medicine, potency and dose was unchanged. The timeline of the presented case with 1st visit and subsequent follow up and prescription is showing in table no 1. After intervention of homoeopathic medicine the patient showed marked improvement within four weeks and cured within three months. (Picture 3,4)

**Objective Evidence:**

The case was visually recorded at the beginning and conclusion of the therapeutic process. To evaluate the impact of a skin condition on an individual's quality of life in the week prior, the Dermatology Life Quality Index (DLQI) was employed in the aforementioned case. <sup>[11-12]</sup>

**Intervention adherence and tolerability:**

On every follow up patient was inquired

about timely taking medicine in the prescribed dose.

**Adverse and unanticipated events:** No adverse and unanticipated events are noticed during the whole homoeopathic process of treatment.

**Possible causal attribution of changes:**

Modified Naranjo Criteria for Homoeopathy (MONARCH) was used to find out relationships between the homoeopathic treatment and its result. In this case, the MONARCH score at the final visit was +9, as shown in Table no-2 which means a positive causal attribution of the individualized Homoeopathic treatment in the case of Nummular dermatitis<sup>[10]</sup>.

**Table- 1: Follow Up:**

| Date       | Symptoms   | Prescription  |
|------------|--|---|
| 05/02/2024 | <ul style="list-style-type: none"> <li>On the basis of the precedent symptoms</li> </ul>   | <ol style="list-style-type: none"> <li>Graphites 200 /4 dose in sac.lac. Each dose to be taken once daily in empty stomach.</li> <li>Phytun 500/ 28 dose. In globules no 10. 4 pills be taken twice daily in morning and evening on empty stomach.</li> </ol> |
| 20/02/2024 | <ul style="list-style-type: none"> <li>Itching reduce</li> <li>Sticky watery discharges decrease</li> </ul>                          | Placebo for next 30 days  |
| 18/03/2024 | <ul style="list-style-type: none"> <li>No itching</li> <li>No sticky watery discharges</li> <li>Area of eruption decrease</li> </ul> | Placebo for next 30 days  |
| 25/04/2024 | <ul style="list-style-type: none"> <li>No itching</li> <li>No sticky watery discharges</li> <li>No eruption.</li> </ul>              | Placebo for next 30 days  |
| 22/05/2024 | <ul style="list-style-type: none"> <li>No itching</li> <li>No recurrence of eruption, patient was cured.</li> </ul>                  | Patient was advised to come OPD if any other complains occurs.  |

**Table-2: Modified Naranjo Criteria:**

| Modified Naranjo Criteria  | Answers of the patient | Score |
|--|------------------------|-------|
| Was there an improvement in the main symptom or condition for which the homeopathic medicine was prescribed?                 | Yes                    | +2    |
| Did the clinical improvement occur within a plausible time frame relative to the drug intake?                                | Yes                    | +1    |
| Was there an initial aggravation of symptoms?  | Yes                    | +1    |
| Did the effect encompass more than the main symptom or condition (i.e., were other symptoms ultimately improved or changed)? | Yes                    | +1    |
| Did over all well-being improve? (suggest using validated scale)   | Yes                    | +1    |

|   |          |    |
|---|----------|----|
| Direction of cure: did some symptoms improve in the opposite order of the development of symptoms of the disease?   | Not Sure | 0  |
| Direction of cure: did at least two of the following aspects apply to the order of improvement of symptoms  | Not Sure | 0  |
| 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 symptoms that were previously thought to have resolved) reappear temporarily during the course of improvement?   | No       | 0  |
| 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 interventions) | No       | +1 |
| Was the health improvement confirmed by any objective evidence? (e.g., laboratory test, clinical observation, etc.)   | Yes      | +2 |
| Did repeat dosing, if conducted, create similar clinical improvement?   | No       | 0  |
|   |          | +9 |

**Clinical images:**



**Figure-1: Before Treatment**



**Figure-2: Before Treatment**



Figure-3: During Treatment



Figure-4: After Treatment

| ← Repertorisation                                       |                |                |                |                |               |                |                |
|---|----------------|----------------|----------------|----------------|---------------|----------------|----------------|
| Symptoms: 15 Remedies: 304   Applied Filter             |                |                |                |                |               |                |                |
| Remedy Name   | Graph          | Lyc            | Calc           | Sulph          | Carbn-s       | Petr           | Phos           |
| <b>Totality / Symptom Covered</b>                       | <b>32 / 12</b> | <b>27 / 10</b> | <b>26 / 10</b> | <b>25 / 10</b> | <b>23 / 9</b> | <b>22 / 10</b> | <b>22 / 10</b> |
| [Kent ] [Skin]Eruptions :Discharging:Glutinous: (5)     | 3              |                | 2              | 1              | 2             |                |                |
| [Kent ] [Skin]Eruptions:Vesicular:Cracked,breaking: (5) |                |                |                |                |               |                | 1              |
| [Kent ] [Skin]Dry: (121)                                | 2              | 3              | 3              | 3              | 2             | 3              | 3              |
| [Kent ] [Skin]Unhealthy: (51)                           | 3              | 2              | 3              | 2              | 3             | 3              | 2              |
| [Kent ] [Extremities]Swelling:Foot:Oedematous: (69)     | 3              | 3              | 2              |                |               | 1              | 2              |
| [Kent ] [Skin]Itching:Night: (44)                       | 2              |                |                | 3              | 3             |                |                |
| [Kent ] [Stomach]Pain:Lying:While :Amel...              | 2              | 2              |                |                |               |                |                |
| [Kent ] [Stomach]Pain:Eating:Amel: (33)                 | 3              |                |                |                |               | 2              | 2              |
| [Kent ] [Stomach]Pain:Flatulent food,after: (1)         |                |                |                |                |               |                |                |
| [Kent ] [Stomach]Aversion:Meat: (88)                    | 3              | 2              | 3              | 3              | 3             | 3              | 2              |
| [Kent ] [Stomach]Desires:Sweets: (36)                   |                | 3              | 2              | 3              |               | 1              |                |
| [Kent ] [Extremities]Perspiration:Foot:Offensive: (38)  | 3              | 3              | 2              | 2              | 2             | 2              | 2              |
| [Kent ] [Mind]Fear (see anxiety): (143)                 | 3              | 3              | 3              | 2              | 3             | 2              | 3              |
| [Kent ] [Mind]Sadness,mental depression: (249)          | 3              | 3              | 3              | 3              | 3             | 2              | 2              |
| [Kent ] [Mind]Timidity: (78)                            | 2              | 3              | 3              | 3              | 2             | 3              | 3              |

Figure- 4: Reportorial Analysis

## DISCUSSION:

Nummular dermatitis, characterized by pruritic, coin-shaped eczematous lesions, presents a significant therapeutic challenge in dermatology. The aim of Homeopathy is to treat the underlying cause of the disease rather than merely treating symptom superficially. Homoeopathy treats skin affections with individualized internal medicines as these are not local maladies but internal affections and need to be treated internally. It treats the disturbances of the immune system and treats the roots of this disease. This case report details the successful treatment of a 60-year-old male patient with chronic nummular dermatitis using individualized homeopathic medicine, specifically Graphites 200 CH. The patient's condition, which had been refractory to conventional therapies, showed marked improvement within four weeks of initiating Graphites 200 CH, with complete resolution of lesions observed at the three-month follow-up, along with improvement of life quality. According to Hahnemann's classification, any skin disease comes under local disease and he advised to treat with proper anti psoric medicine.

Dr J.T. Kent said in his Noble book Lectures on homoeopathic philosophy in the chapter 12 observation, his 3rd observation is "No aggravation with the recovery of the patient."<sup>[13]</sup> In this condition, the prognosis is very good and the potency of homoeopathic remedy is exactly fitted to the case. In this presented case at 2nd visit no aggravation with the recovery of some complaints was observed, so placebo was prescribed. DLQI score at first visit was 10 and become 1 in 5<sup>th</sup> visit. The individualized homeopathic approach, which considered the patient's unique symptomatology and constitutional profile, underscores the potential efficacy of homeopathy in managing chronic

dermatological conditions. This case highlights the importance of personalized treatment strategies in homeopathy, suggesting a need for further research to validate these findings in larger, controlled studies.

## CONCLUSION:

The present case report shows the effectiveness of individualized Homoeopathic medicine, *Graphites* in the treatment of Nummular dermatitis along with the improvement of the life quality of the patient.

## Declaration of patient consent:

The patient provided verbal consent for the dissemination of his homeopathic treatment outcome in the present case study. It is ensured that no confidential information will be disclosed in any published material.

**Limitation of study:** As it is a single case report, in future case series can be recorded and published to establish the efficacy of individualized homoeopathic medicine in Nummular Dermatitis.

**Conflict of interest:** Author declares that there is no conflict of interest.

**Guarantor:** Corresponding author is guarantor of this article and its contents.

**Source of support:** None

## How to cite this article:

Patra SS, Hui A, Mondal N, Bhattacharjee A. Efficacy of Individualized Homoeopathic Medicine in the Treatment of Nummular Dermatitis : A Case Report. Int. J. AYUSH CaRe. 2024;8(3):386-393.

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