

Case Report

## Dermatophytosis & Its Homoeopathic Perspective

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**Abstract** Dermatophytosis are the most common widespread superficial fungal infection in developing countries. Homoeopathy is the system by which we stay it plays an important role in the treatment of fungal infection. Here, a 21-year-old unmarried female, presented with red erythematous patches on medial aspect of left arm with much itching for 1 month. He was successfully treated by individualized homoeopathic medicine *Graphites 30/1dose* over 15 days. It shows positive role of Homoeopathic treatment in curing dermatophytosis.

**Keywords** *Dermatophytosis; Individualized homoeopathic medicine; Graphites*

### Introduction

Dermatophytosis is also known as "Tinea" or "Ringworm". It is a superficial skin infection which is restricted to the stratum corneum. It affects the keratin of skin, hair, and nails but do not penetrate deeper tissues or internal organs [1]. Dermatophytosis is an important public health problem worldwide. It is prevalent globally but is more common in geographical areas with higher humidity. According to the World Health Organization (WHO), approximately 20% of world's population suffers from dermatomycoses [2]. The three genera responsible for all dermatophyte infections *Trichophyton* affects skin, hairs, and nails. *Epidermophyton* affects skin and nails. *Microsporon* affects skin and hair. [2]

**Transmission:** By direct or indirect contact with skin or scalp lesions of infected people, animals or fomites. [3]

**Incubation period:** for infection is 1-2 weeks. [3]

### Clinical Subtypes of Dermatophytosis

Tinea may be a Latin term that named consistent with the involved site, such as tinea capitis (head), tinea faciei (face), tinea barbae (beard), tinea corporis (body), tinea manus (hand), tinea cruris (groin), tinea pedis (foot), and tinea unguium (nail). [4]

Dermatophytosis present with a pruritic erythematous rash with a lively scaly palpable edge within which pustules or vesicles could also be seen. The infection spreads centrifugally and ends up in

annular patches of varying sizes. [5] Research in this area has often been neglected despite the increasing prevalence of cutaneous dermatophytosis across the globe, and particularly in tropics.

## CASE REPORT

### Presenting Complaints

A 21-year-old unmarried female presented in outpatient department (OPD) of Maharshi Menhi Homeopathic Medical College & Hospital, Katihar (Bihar) on 13.02.2023 with complaint of eruption on medial aspect of left arm for one month. It is associated with severe itching. The itching was very much aggravated at night and burning sensation after scratching. Sometimes there was slight watery discharge after scratching.

Personal History: Housewife

Family History: Mother - Hypertensive

Mental General: Patient was emotional, Fastidious & Anxiety about Health

### Physical General:

Appetite - Good

Desire – Salty

Thirst - + +

Perspiration - Nothing significant

Bowel -Regular.

Thermal reaction – Chilly

### Local examinations:

Point Findings Inspection

Site - Inside of left arm region

Shape - Ring shaped (oval)

Symmetry - Non-symmetrical

Border - Irregular, raised

Colour - Hyperpigmented with erythematous at border

Discharge - Present after scratching

Crusting - Not present

**Provisional Diagnosis:** Dermatophytosis

**Justification of Diagnosis:** Symptomatic

**Analysis & Evaluation of the Symptoms with Miasmatic Analysis [6]**

S. NO	Symptoms	Analysis	Evaluation	Miasmatic Analysis
1.	Restlessness	Mental general	++	Psora
2.	Fastidious	Mental general	++	Psoro-syphilitic
3.	Anxiety for Health	Mental general	++	psora
4.	Desire for salty	Physical general	+++	Syco-syphilitic
5.	Chilly	Physical general	++	Psora
6.	Itching < Night	Particular	+++	Syphilitic
7.	Burning after scratching	Particular	++	Psoro-syphilitic
8.	Discharge after scratching	Particular	++	Psora
9.	Dermatophytosis	Particular	++	Sycosis

**Repertorisation:** The Repertorisation was done using Hompath software (Complete Repertory). *Graphites* covers maximum rubrics at particular level with highest scoring medicine. [7]

Remedy	Graph	Sulph	Lyc	Ars	Staph	Rhus-t	Sep	Nat-m	Calc	Mez	Thuja	Caust	Kali-c	Phos	Puls
Totally	31	29	27	25	25	25	24	24	23	22	21	21	21	20	20
Symptoms Covered	9	9	8	8	8	7	8	7	7	7	9	8	7	7	6
Kingdom	🌿	🌿	🌿	🌿	🌿	🌿	🐾	🌿	🌿	🌿	🌿	🌿	🌿	🌿	🌿
[Complete ] [Mind]EXCITEMENT, EXCITABLE: (982)	4	4	4	4	4	3	4	4	4	3	3	4	4	4	4
[Complete ] [Mind]FASTIDIOUS: (121)	3	3	4	3			1	3			3	2	3	1	4
[Complete ] [Mind]ANXIETY:Health, about: (312)	4	4	3	4	4	4	4	4	4	4	1	3	3	4	4
[Complete ] [Generalities]FOOD AND DRINKS:Salt or salty food:Desires: (159)	2	3	2		1		3	4	3		3	3		4	2
[Complete ] [Generalities]COLDNESS, LACK OF VITAL HEAT: (755)	4	4	4	4	4	4	4	4	4	4	3	4	4	4	4
[Complete ] [Skin]ERUPTIONS:Itching:Night: (46)	3	3	3	3	3	3					1				
[Complete ] [Skin]ERUPTIONS:Burning:Scratching:Agg.: (36)	3	3		3	3	3	1		3	3	3	1	1	1	
[Complete ] [Skin]ERUPTIONS:Discharging, moist:Scratching, after: (50)	4	2	4	1	3	4	3	1	1	1	1	1	3		
[Complete ] [Skin]ERUPTIONS:Herpetic:Circinate, ringworm: (159)	4	3	3	3	3	4	4	4	4	4	3	3	3	2	2

**Figure 1: Repertorisation** from Complete repertory using zomeo software [7]

**Prescription:** After Case taking, Repertorisation & book references<sup>5</sup> first prescription was *Graphites* 30 prescribed OD on date 13/02/2023.

**Selection of remedy with Justification:** In reportorial analysis [7] *Graphites*, Sulphur & Lycopodium cover all rubrics & higher score then after consulting Materia medica [8], *Graphites* is found to be most appropriate for this case covering general, physical & mental picture & also thermal reaction.

**Selection of potency with Justification:** It based on susceptibility of the patient. Lower the susceptibility lower the potency was selected [9].



Before Treatment



During Treatment



After Treatment

### Follow-Up Sheet

Date of visit	Change in Symptoms	Prescribed Medicine/Potency/Dose
21/02/2023	Eruption diminished & burning pain decreases	Placebo/BDS/7 Days
28/02/2023	Marked improvement Superficial skin was looking normal & no any symptoms are present.	Placebo/BDS/7Days

### Conclusion

Dermatophytosis can be successfully treated with Homoeopathic medicines based on detailed individual case analysis. Homoeopathy has many medicines which can be effective in the treatment of these dermatophytosis infection without chances of developing resistance. Hahnemann mention in § 191 he mentions, 'Internal administration of a remedy causes important changes in general health and particularly in the affected external parts'. [10] Although study of a single case does not constitute a strong opinion, but the outcome is encouraging.

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