

A Non - Randomized Exploratory Study on Efficacy of Homoeopathic Treatment in Scabies

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Abstract: ***Aim of the study:** To study the efficacy and the scope of Homoeopathy in managing scabies. **Result:** Out of 50 cases 43 cases showed improvement, 2 cases had no change, 2 cases got worse and 3 cases dropped out of the study. 86% of cases showed improvement. Sulphur was prescribed in 13 cases and various other remedies like Ant Crud, Ars, Calc Carb, Merc Sol etc were also prescribed on the basis of totality of symptoms. **Conclusion:** The findings of the above study concluded that 86% cases responded well to the indicated homoeopathic similimum. This study proved the efficacy of homoeopathic treatment in scabies.*

Keywords: Scabies, homoeopathy, individualization, totality of symptoms

1. Introduction

Scabies is a common parasitic infection caused by the mite *Sarcoptes scabiei* var *hominis*, arthropod of the order Acarina. The worldwide prevalence has been estimated at about 300 million cases annually, although this may be an overestimate. The disease affects people regardless of their age, sex or socioeconomic status. The transmission occurs mainly through direct contact with an infected person as well as personal items including clothes, bedclothes, etc. The main symptom is pruritus that typically worsens at night, and it is often associated with itching experienced by other family members in the household or amongst people in close physical contact with an infested individual. The lesions are commonly located in the finger webs, on the flexor surfaces of the wrists, on the elbows, in the axillae, and on the buttocks and genitalia. The elementary lesions are papules, burrows, and nodules. In crusted scabies, clinical signs include hyperkeratotic plaques, papules and nodules, particularly on the palms of the hands and the soles of the feet, although areas such as the axillae, buttocks, scalp, and genitalia in men, and breasts in women may also be affected.

2. Materials and Methods

Study setting: The study has been conducted on the patients attending OPD and peripheral dispensaries of Sri Guru Nanak Dev Homoeopathic College & Hospital, Ludhiana. Patients of all age groups and both sexes were included.

Intervention: Patients fulfilling the eligibility criteria were enrolled to receive the homoeopathic intervention. Medicines were given in 30C, 200C or 1 M as per the totality of symptoms. Medicines were repeated depending upon the potency and complaints of the patient in accordance with the principles of homoeopathy.

Pharmacy: Dr. Reckweg & Co, SBL Pvt. Ltd., Dr. Willimar Schwabe India Pvt. Ltd, B Jain Pharmaceutical Pvt. Ltd.

Inclusion criteria: Patients who had given written informed consent.

Exclusion criteria: Patients with serious underlying medical conditions. Pregnant and lactating females.

Investigations: Diagnostic criteria was based mainly on clinical presentation, local examination and necessary investigations if required.

Type of study: exploratory study

Sample: 50 cases were studied

Sample calculator: Data of the sample size 50 has been statistically analyzed to show 95% confidence limit.

Statistical analysis: T - test has been applied to show the efficacy in post test result.

Research technique: After proper case taking individualization of each case was done and medicine was selected on the basis of similarity of symptoms.

Treatment method:

a) **Repetition and change of potency:** According to the instructions given by Dr. Samuel Hahnemann in Organon of Medicine

b) **Diet and Regimen:** According to the instructions given by Dr. Samuel Hahnemann in Organon of Medicine

c) **Duration of study:** 18 months (2020 - 2021)

3. Discussion

This study was performed to know the efficacy of Homoeopathic treatment in scabies.

The subjects were taken from Out Patient Department and peripheral dispensaries of Sri Guru Nanak Dev Homoeopathic Medical College and Hospital, Ludhiana, as per the inclusion and exclusion criteria.

The sample size was 50 and subjects of either sex were included and followed up at regular intervals. The diagnosis was made on the basis of strong clinical presentation. The medicines were selected on the basis of totality of symptoms and repertorisation was done from synthesis repertory using

RADAR software. Each patient was also advised certain general management at each visit. The statistical analysis made here is based on the data obtained from 50 cases.

The patients coming with the complaint of scabies principally complained of severe or violent itching. In some this itching was followed by burning. Some patients also came with associated complaints such as secondary bacterial infection due to repeated scratching and improper hygiene.

Out of 50 cases selected on non - randomized basis, the maximum prevalence was observed in the age group of 10 to 20 years i.e.19 cases (37%) and minimum amongst the age group of 50 years and above i.e. 2 cases (4%).

Looking into the epidemiology of scabies in the available literature, it occurs worldwide regardless of age, sex, race, socio - economic status or standards of personal hygiene.

26 cases were males and the remaining 24 cases were of females. Thus males comprised of 52% cases and rest 48% were females.

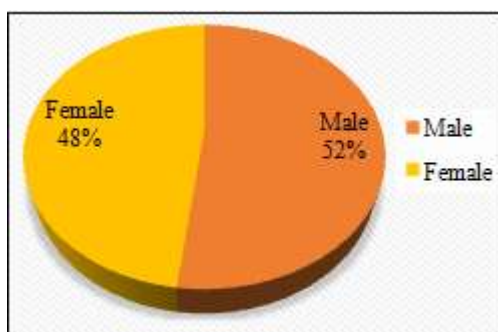


Figure 1: A graphical representation of distribution of cases of scabies according to gender

While studying these 50 cases it was found that maximum patients of this study belonged to lower socio economic class.56% of the total cases were from lower socio economic class, while remaining 40% were from middle and 4% from upper socio economic class.

Looking at the area of residence it was found that, 70% cases were from rural background and only 30% belonged to urban background.

Most of the cases under study were students, who were 26 in number, 7 were housewives and remaining 17 were from other modes of occupation.

Psoric miasm was found to be predominant in majority of the cases.

Out of 50 cases studied, all the cases were diagnosed to have the classical scabies and no cases of crusted or nodular scabies were diagnosed.

Out of 50 patients 13 were treated with Sulphur and in 6 cases psorinum was prescribed. Various other remedies like Ant crud, Ars, Calc carb, Merc sol, Nat carb etc. were also prescribed on the basis of totality of symptoms.

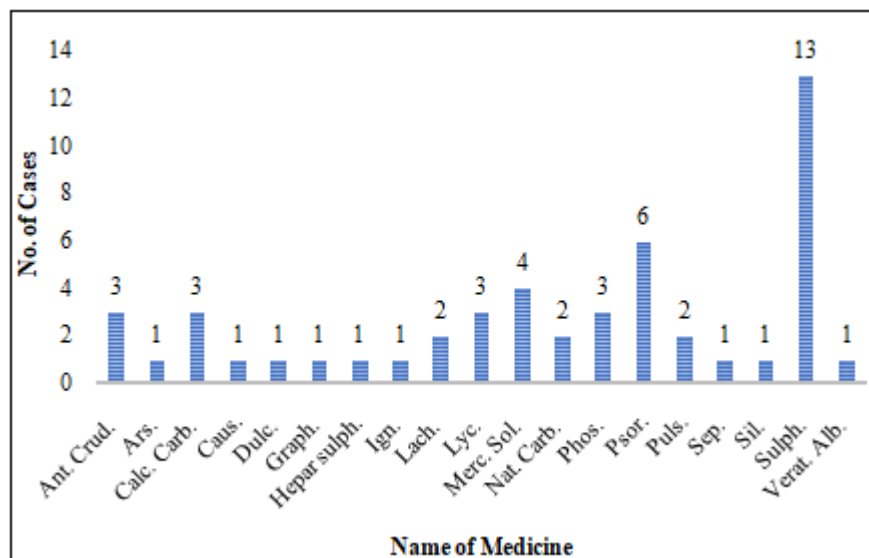


Figure 2: A graphical representation of distribution of cases as per medicine prescribed

External application was not used in any of the cases.

The most used potency was 200. Out of 50 cases, 43 cases showed improvement, 2 had no change, 2 got worse and 3 patients dropped out of the treatment.

Finally a statistical analysis was made comparing the scores before and after the treatment as per the scoring criteria and the null hypothesis was rejected. The statistical analysis was done using paired t - test, to assess the effectiveness of homoeopathic treatment in scabies. The calculated t value was compared with the tabulated value of t statistic at 95%

confidence for degree of freedom= 49. After comparing this value the null hypothesis was rejected, hence proving that homoeopathic treatment is effective in the treatment of scabies.

4. Conclusion

Constitutional treatment was found to be very effective. External application was not used in any case. In the study a total of 19 medicines were prescribed with Sulphur being prescribed the most i. e in 13 cases. Looking at the outcome of treatment, 86% cases showed improvement, 4% had no change, 4% got worse and 6% dropped out of the treatment.

The statistical tests used for the assessment of efficacy of homoeopathy in scabies also supported the study. The patients who took proper treatment and followed advice properly recovered quickly as compared to the non - cooperative ones.

Also, after studying the efficacy of homoeopathy in cases of scabies, I found the result to be positive and promising.

This study was a very modest effort on my part to contribute in medical community towards finding the efficacy of homoeopathy in scabies cases. The study opens a window for further researches on role of homoeopathy in scabies.

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