International Journal of Science and Research (IJSR)

ISSN: 2319-7064 SJIF (2022): 7.942

Eczema and its Homoeopathic Treatment

Anjali Mankoo

BHMS, PG Scholars, Homoeopathic Materia Medica, Sri Guru Nanak Dev Homoeopathic Medical College and Hospital, Ludhiana, Punjab, India

anjalimankoo[at]gmail.com

Abstract: Eczema or dermatitis is series of inflammatory changes in skin typically characterized by itchiness, redness and a rash. Dermatitis was estimated to affect 245 million people globally in 2015, or 3.34% of the world population. Classification is based on the affected area and causative agent. Dermatitis is most commonly seen in infancy, with female predominance of eczema presentations occurring during the reproductive period of 15-49 years. The rate of eczema has been found to have increased substantially in the latter half of the 20th century, with eczema in school-aged children being found to increase between the late 1940s and 2000. Homoeopathy has proved very effective in such skin diseases, as it cures the basic cause by studying not only the skin type, but also the genetic and immune system factors of the Patient.

Keywords: Eczema, Classification, Pathogenesis, Management, Homoeopathic Treatment

1.Introduction

The word eczema is derived from Greek word 'Ekzein' mean to boil out or erupt out. It is synonymous with the other descriptive term, 'dermatitis'. Eczema is defined as serious of inflammtory changes in skin which is induced by external and internal factors.

All eczema are dermatitis but all dermatitis are not eczema.

Bear describe eczema as a pruritic papulovesicular process which in its acute phase is associated with Erythema and edema and which in its chronic while retaining some of its popular vesicular feature is dominated by thickening Lichenification and scaling.

- Acutely, epidermal edema and intra-epidermal vesiculation predominate
- With Chronicity-there is more epidermal Thickening.

2. Clinically stages of eczema

- Acute-Papulovesicular, erythema, edema and pruritic
- Sub acute-crusting
- Chronic-Lichenification

3. Classification of eczema

- Endogenous (inside cause)
- Exogenous (outside cause)
- Endogenous

1) Atopic dermatitis

- 2)Seborrheic dermatitis
- 3)Nummular or discoid dermatitis
- 4)Pompholyx or Dyshydrotic
- 5)Static or gravitational dermatitis
- 6)Lichen simplex chronicus or neurodermality
- Exogenous

1) Contact dermatitis a) Allergic

b) Irritant

- 2) Photo allergic
- 3) Infectious type
- 1) Atopic Dermatitis

Atopic dermatitis is a skin inflammation results from allergy. Immune system attacks the skin causing dry, itchy skin. It involves flexor surfaces i.e. inside of elbows, creases of wrist, back of knees and exposed surfaces such as face, hand and feet. It is a type 1 hypersensitivity reaction starts up with the environmental allergen like flower or pollen. It is commonly seen in children especially at age of 18 months.

Signs and Symptoms

- Dry sensitive skin
- Intense itching
- Red, inflammed skin which may bleed and peel and in later stages get lichnified

Risk factors

- Atopic dermatitis can worsen with allergens like cigarette smoke, dust mites
- Change in weather.
- Stress
- Genetics play an important role in atopic dermatitis forming an atopic triad of asthma, allergic rhinitis and atopic dermatitis and therefore run in families.
- 2) Seborrheic Dermatitis

Seborrheic dermatitis is inflammation of skin densely rich in sebaceous glands such as scalp, face and ears. The lesions are erythematous papulosquamous type and is characterized by patches of redness, scaling, Itching and whitish yellowish greasy scales. Babies before 2 years of age have seborrheic dermatitis commonly known as cradle cap. Both sexes are equally affected by this condition. It commonly starts at puberty, peaks up between 30-40 years of age and is less severe in elderly ages. It has no association with other disorders. Usually it worsens in winters.

Volume 11 Issue 9, September 2022

<u>www.ijsr.net</u>

Licensed Under Creative Commons Attribution CC BY

Risk factors

- Genetic, environmental, hormonal and immune system factors can impact seborrheic dermatitis outbreaks.
- It may also be aggravated by illness, psychologicalstress, change of season and reduced general health

3) Discoid Dermatitis

Discoid eczema, also known as Nummular or Discoid dermatitis, is a long term skin condition that causes skin to become itchy, reddened, swollen and cracked in circular or oval patches. Over time the patches may become dry, crusty, cracked and flaky. The center of patch also sometimes clears, leaving a ring of discoloured skin that can be mistaken for ringworm. Patches of discoid eczema can sometimes become infected and signs of an infection can include: patches oozing lot of fluid. A yellow crust developing over the patches. The skin around the patches becomes red, hot, swollen and painful.

4.Symptoms of discoid eczema

Discoid eczema causes distinctive circular or oval patches of eczema they can affect any part of body but commonly these disc shaped spots appear on arms and legs and usually don't affect face or scalp. Spots may look like coins and they can appear in different colours such as red, pink and brown. It is not contagious. Discoid eczema is always bilateral and symmetrical.

4) Pompholyx (Dyshidrotic Eczema)

It is a type of eczema that causes painful, hard and itchy tiny blisters to develop across palms of hands, fingers and sometimes the soles of the feet.

Signs and Symptoms: It usually starts as intense itching and burning of skin of hands and fingers. The palms and side of fingers then erupt into tiny itchy blisters that may weep fluid. The skin can sometime become infected. Signs of infection can include the blisters becoming very painful and oozing puss or forming golden crust.

5) Stasis Dermatitis

Stasis dermatitis is skin inflammation that develops in people with poor circulation. it most often occurs in lower legs because that's where the blood typically collects.

5.Risk Factors

- People with venous insufficiency, the one way valve inside leg veins become weak due to which pooling of blood occurs causing stasis dermatitis
- Varicose veins and congestive heart failure are also known causes of stasis dermatitis
- It usually develops in people as they get older.
- Apart from age other causes involve surgery such as using leg vein for bypass surgery, DVT etc.

6.Signs and Symptoms

Symptoms include skin discoloration due to hemosiderin pigment deposition. Your skin may also itch, but lesion shouldn't be scratched as scratching causes skin to crack and fluid to seep out. Skin may eventually get thickened and hardened. Atrophy of both legs. You may also experience symptoms of venous insufficiency i.e. leg swelling, calf pain, dull ache or heaviness in your legs that gets worse when you stand. In later stages it may also involve formation of leg ulcers

6) Lichen Simplex Chronicus

This type of lesion is seen usually after insect bite. The bite of insect causes continuous type of itching which is followed by scratching of lesions which leads to lichenification of lesion. The lesions are seen in nape of neck, arms and legs.

Exogenous Dermatitis

- 1)Contact Dermatitis Due To Irritation
- 2)Contact Dermatitis Due To Allergic Reactions
- 3)Photoallergic Type
- 4)Infectious Dermatitis

1) Contact Dermatitis due to Irritation

- It is a result of inflammation of skin when skin comes in contact with irritant and irritant causing burning sensation in skin and certain morphological changes in skin.
- Substances which are used as irritants are: soaps, organic solvents, hair pins, alkalines, vegetables like chilies, onions, etc.

2) Allergic Contact Dermatitis

- It is disorder of skin resulting into delayed hypersensitivity reaction which is regulated by Tlymphocytes against certain chemicals or substances and causes burning, inflammation and certain morphological changes in skin e. g on scalp: Hair dyes, shampoos, hairbands and hair clips
- On face: Kumkum, cosmetics like cream, lipsticks.
- On eyelids: eye shadows, spectacles.

3) Photoallergic Dermatitis

It is reaction in skin which is caused by certain chemicals which come in contact with solar or UV lights.

Photosensitivity: Whenever skin come in direct contact with sunlight or UV rays which causes sun burns, sun tanning it is due to reaction between solar light, UV light and skin.

4) Infectious Dermatitis

There are certain types of micro organisms which can cause infectious type of dermatitis. It can be virus or bacteria.

Volume 11 Issue 9, September 2022

<u>www.ijsr.net</u>

Licensed Under Creative Commons Attribution CC BY

7.Investigations

- Patch Test-for contact dermatitis
- Diluted allergen applied to part of skin. After 48 hoursred raised lesion are found
- Testing IgE level
- Haemogram Hb, TLC, DLC, ESR. If there is Allergic condition, eosinophils are raised.

Management

- Physician should know diagnosis and should explain it
- Reassurance to patient must be given
- To avoid allergen-dyes, cosmetics, irritants
- Protection from sunlight

8. Homoeopathic Treatment

- Sulphur-Burning is marked in sulphur. Itching, voluptuous, scratching ameliorate; feel good to scratch. Scratching causes burning. Aggravation from heat in bed.
- Graphite-Rawness in folds of skin. Eruptions Cracked, moist and bleed easily, behind the ears. Moist, Crusty eruptions. Eczema anal, crural, palmar.
- Petroleum-Eruptions having thick, hard, moist or yellow green crusts. All eruptions itch violently, much stratch until they bleed, part becomes cold after scratching.
- Rhustox-stiff, thick, dry, hot, burning. Itching on hairy parts. Skin sensitive to cold. Vesicular, crusty, eczematous; moist or erysipelatous.
- Dulcamara-Eczema of infant. Thick crust all over body. Pruritus with moist bleeding.
- Arsenic Iodatum-Eczema Of beard which aggravate after washing. Discharges Causes BURNING of the part on which they flow.
- CrotonTiglium-violently Itching, burning red skin; sore if scratched, ameliorate by gentle rubbing. Eczematous eruptions.
- Mezereum-Intolerable iching, aggravate by warm bath, changes place on scratching, coldness after.

References

- Golwalla's Medicine for students, A Reference book for the family physician, 25th Edition
- [2] Textbook of Medicine by P. C Das, P. A Das 6th Edition
- [3] Harrison's Principles of Internal Medicine 20th Edition
- [4] Keynotes with Nosodes by Allen H. C
- [5] Materia Medica by Boericke W.
- [6] Concise Materia Medica of Homoeopathic remedies by S. R. Phatak
- [7] Leaders in Homeopathic Therapeutics by Nash E. B
- [8] www.medicalnewstoday.com
- [9] www.healthline.com

Volume 11 Issue 9, September 2022

<u>www.ijsr.net</u>