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Individualized Homoeopathic Treatment of Atopic Dermatitis Treated with Graphites - A Case Report

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Abstract: ***Atopic dermatitis is a chronic, relapsing inflammatory skin condition characterized by itching, erythema, dryness, and recurrent eczematous lesions. It may affect quality of life by disturbing sleep and causing persistent discomfort. CASE SUMMARY: A 16-
years-old female presented with chronic skin eruptions over both forearms for 2 years ago, associated with redness, burning, and itching.
Scratching and oil application provided relief. After a detailed case-taking and individualized assessment, Graphites was prescribed.
During the follow-up, the patient showed improvement in her complaints. This case highlights the potential role of individualized
homoeopathic management in atopic dermatitis.***

Keywords: Atopic dermatitis, Homoeopathy, Graphites

1. Introduction

Atopic dermatitis (AD) is an acute, subacute, or chronic relapsing inflammatory skin disorder. It usually begins within the first six months of life, although it can develop at any age. Approximately 70% of patients have a family history of atopic diseases, such as bronchial asthma, allergic rhinitis, or atopic dermatitis. [(1)] *Atopy* is defined as an inherited tendency to produce immunoglobulin E (IgE) antibodies in response to minute amounts of common environmental proteins such as pollen, house dust mites, and food allergens. The clinical presentation of atopic dermatitis is often more elaborate with a large variation in the morphology and distribution of the eczema combined with various other features. However, many patients with atopic dermatitis have a general tendency to present with dry skin (xerosis) due to the low water content and an excessive water loss through the epidermis. [(2)] Skin barrier dysfunction due to reduced filaggrin and epidermal lipids causes dryness, increased water loss, and allergen penetration. Genetic factors, altered skin microbiome, and impaired immunity increase disease severity and susceptibility to infections. [(3)] One important gene is called filaggrin. It helps control a protein important for keeping the skin barrier strong and healthy. If this gene does not work properly, the skin barrier becomes weaker, and the affected person can develop eczema. A weak skin barrier makes it easy for bacteria and viruses to enter the skin and cause skin infections. It also allows irritating substances to enter the skin, making it inflamed and itchy. [(4)] Emollients are the cornerstone of atopic dermatitis treatment, helping maintain skin hydration and control dryness. They should be applied daily, preferably after bathing. Lotions are light, creams provide better moisturization, and ointments offer maximum hydration but may feel greasy. [(5)]

2. Case Report

16 years old, working female presented with eruption, itching, burning and oozing sticky fluid occasionally on forearm. Complaints started 2 years ago.

History of Presenting Complaints
The patient initially noticed a few small eruptions, which developed gradually and progressively spread over both forearms for 2 years, which were red in colour with sense of burning and itching, which gets aggravated at night and after washing, sticky fluid occasionally. Scratching and oil application provided relief.

Past History
TYPHOID FEVER -at 20 years -allopathy -recovered

Family History
Brochial Asthma- uncle
Hypertension- grandmother (maternal)
Diabetes Mellitus- grandfather (paternal)

Physical Generals
Appetite: 3 times /day.
Thirst: good (1- 1/2 lit / day)
Urine: passes regularly.
Stool: passes regularly.
Sleep: disturbed due to itching.
Perspiration: generalized
Dream: nothing specific
Desire: desire for cold drinks, strong desire for sweets^{++} foods.
Aversion: meat^{+}, curd.
Thermal: hot

Mental General
The patient is unable to make decisions easily and remains doubtful when choosing between alternatives. The patient experiences persistent fear and anxiety about dying.

General Examination:
Patient is conscious and well oriented with time, place and person.
General Appearance: fair complexion.
Built and Nourishment: Moderately built and moderately nourished.
No signs of pallor, oedema, clubbing, jaundice, lymphadenopathy, cyanosis.
Respiratory Rate: 18 cycle/mi. Blood pressure 120/80 mm of hg.
Pulse 78/m. Temp 98.6 C.

Local Examination
The skin over both forearms appear dry, with altered skin thickness and superficial bleeding following scratching. Oozing is present, with no edema or local rise in temperature.

Diagnositic Assessment

Based on this clinical examination and history, this case was diagnosed as ATOPIC DERMATITIS.

Therapeutic Intervention

All the symptoms obtained from detailed case-taking were analyzed, and the most characteristic symptoms were converted to rubrics, followed by repertorization with complete repertory figure 1[6]. After repertorization and referring to Materia Medica Graphites was selected, covering the maximum rubrics, including the characteristic features of the sticky fluid on eruption[7]. Afterward, assessing the patient susceptibility based on age, seat of the disease, pathology, and nature of the disease, higher potency was indicated 200 C is selected.[8]

Remedy	Graph	Calc	Lyc	Sulph	Merc	Sep	Puls	Nat-m	Phos	Rhus-t	Am-c	Chin	Nux-v	Petr	Ars
Totality	21	18	18	18	17	16	15	14	14	14	13	13	13	13	12
Symptoms Covered	6	5	5	5	5	5	4	5	5	5	5	5	5	5	5
[Complete] [Mind]Indecision, irresolution:	3	3	4	3	3	3	4	4	3	1	1	1	3	4	3
[Complete] [Mind]Fear:Death, of:	3	4	3	3	4	3	4	3	4	4	3	3	4	1	4
[Complete] [Generalities]Food and drinks:Meat:Aversion:	4	4	4	4	3	4	4	3	3	3	3	4	4	4	3
[Complete] [Generalities]Food and drinks:Sweets:Desires:	4	4	4	4	3	3	3	1	3	3	4	4	1	3	1
[Complete] [Extremities]Eruptions:Forearms:	3	3	3	4	4	3	0	3	1	3	2	1	1	1	1
[Complete] [Skin]Eruptions:Discharging, moist:Sticky:	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Figure 1: Repertory chart

Prescription

Date: 1/3/2025

RX
Graphites 200/1 dose (HS)
SG 1 dram (3-0-3)

Follow Up and Outcomes

Date	Sign and Symptoms	Prescription
12/3/2025	Itching, burning, Redness of eruption persist, sticky discharge persists (occasionally). No new eruptions reported.	Graphites 200/2D (HS) SG 1 dram (3-0-3) -2 weeks
28/3/2025	Itching and burning sensation slightly better. Redness better. Sticky discharge is reduced (occasional). Sleep disturbed.	SL2 D(HS) SG 1 dram (3-0-3) -2 weeks
14/4/2025	Itching, burning better but persist, redness persists. Sticky discharge is reduced (occasionally). Sleep disturbed.	Graphites 200/2D (HS) SG 1 dram (3-0-3) -2 weeks
30/4/2025	Itching, burning better redness better.no sticky discharge. Sleep improved	SL2 D(HS) SG 1 dram (3-0-3) -2 weeks
14/5/2025	Itching, burning better redness better.no sticky discharge. Sleep improved	SL2 D(HS) SG 1 dram (3-0-3) -2 weeks
2/6/2025	No itching, no burning redness completely disappeared. sleep is good.	SL2 D(HS) SG 1 dram (3-0-3) -2 weeks

Before Treatment



After Treatment



3. Discussion

Atopic dermatitis is a chronic, relapsing inflammatory skin condition characterized by itching, redness, burning, and occasional oozing or sticky discharge. In the present case, the patient experienced recurrent eruptions over both forearms for 2 years, affecting sleep and daily activities.Detailed case-taking helped identify the characteristic mental and physical symptoms. Based on the totality of symptoms, repertorization was performed using Complete Repertory, followed by Materia Medica verification. Graphites was selected considering the characteristic skin manifestations, particularly the sticky discharge associated with the eruptions. Following individualized homoeopathic management, gradual improvement was observed during successive follow-ups. Itching, burning sensation, and redness gradually reduced, while sticky discharge completely subsided. Improvement in sleep was also reported. The overall clinical observations suggest symptomatic improvement during the treatment period. This case highlights the importance of individualization, careful symptom evaluation, repertorization, and appropriate remedy selection in homoeopathic practice. However, a single case report cannot establish treatment efficacy, and further clinical studies are required.

4. Conclusion

Individualized homoeopathic treatment has shown promising results in the management of Atopic Dermatitis, a chronic and relapsing inflammatory skin condition. The gradual improvement in itching, burning, redness, sticky discharge, and sleep disturbance highlights the potential benefits of an individualized treatment approach in the management of Atopic Dermatitis.

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