

Homoeopathic Approach to Acne and Case Study with Homoeopathic Therapeutics

Dr Pradip S. Joshi¹, Dr Vishal V. Magdum²

¹Professor & HOD, Dept. of Physiology & Biochemistry, Hon R R Patil College of Homoeopathy and Hospital and Research Centre Sangali

²Assistant Professor, Dept. of Physiology & Biochemistry, Hon R R Patil College of Homoeopathy and Hospital and Research Centre Sangali

Abstract

Acne/ Pimples is one of the commonest skin disorder. It has been estimated 70% population have clinically evidence of Acne at some stage during adolescence. When patient comes to homeopathic consultant., problem should never be tackled only with superficial, local acting remedies. Instead, deep acting constitutional remedies should be prescribed as soon as the complete totality is available.

Acne is a chronic inflammatory characterized clinically by papules comedones and pustules occur on face. This case report will help to increase knowledge and homeopathic students & practitioners, so that they can use the homeopathic remedies in similar complaints.

Keywords: Acne, Pimples, in Hindustani Kee, Muhase. Homoeopathy, Natrum Mur.

Introduction

Acne is a disorder in which hair follicles develop obstructing horny plugs (comedones), as a result of which inflammation later develops around the obstructed follicles, causing tissue destruction and scar formation¹

The pathogenesis involves four major factors .^{1,10}

1. Increased sebum production.
2. An abnormality of the microbial flora.
3. Cornification of the pilosebaceous duct.
4. Production of inflammation. ¹

Incidence-

The condition usually starts in adolescence and frequently resolves by the mid-twenties. The increased incidence during puberty is due to the increased sebaceous activity. Acne develops earlier in females than in males, which may reflect the earlier onset of puberty, but it usually is somewhat severer in boys. In the twenties, it gradually decreases and is again seen especially in women after the age of 28 or so (post adolescent acne), since they usually stop producing children (family planning) and periods may become scanty at that age. Several studies have shown that genetic factor influence susceptibility to acne. ^{3,6,7}

Etiology-

Increased sebum production presents to the patient as a seborrhea (greasy skin). Active sebaceous glands

are a prerequisite for the development of acne. Acne patients, male and female, excrete on average more sebum than normal subjects, and the level of secretion correlates reasonably well with the severity of the acne.^{1,3,10}

Hormones³

Common occurrence of acne at puberty is because of increased production of sex hormones, which makes the sebaceous glands hyperactive. Sebaceous activity is predominantly dependent on androgenic sex hormones of gonadal or adrenal origin. Abnormally high levels of sebum secretion could thus result from high overall androgen production or increased availability of free androgen because of a deficiency in sex-hormone-binding globulin (SHBG). Androgen and progesterone are responsible for hyperplasia of the oil glands. There is general agreement that plasma testosterone levels are not abnormally high in males with acne.^{1,3,}

Diet

The possible effect of nutrition on the age of puberty may be and this occurs when the body weight attains about 48kg. Diet rich relevant, as acne is more likely after the start of sexual development, in fat and starches may be a contributing factor.

Hereditary factor

Several members of the same family may be affected with severe scarring acne.

Premenstrual flare

About 70% of women complain of a flare 2-7 days premenstrually. It is unlikely that any possible variation in sebum excretion during the menstrual cycle could be substantial enough to explain the flare. Possibly it is related to a premenstrual change in the hydration of the pilosebaceous epithelium. Progesterone and oestrogen also have both pro- and anti-inflammatory effects.

Sweating

Up to 15% of acne patients notice that sweating causes a deterioration in their acne, especially if they live or work in a hot humid environment, for example as a cook. Ductal hydration may be the responsible factor.

UV Radiation

Patients and doctors alike accept that natural sunlight often improves acne, but there is no scientific evidence that it does. The cosmetic effect may be the entire explanation. Artificial UV radiation appears to be less satisfactory than natural radiation, and psoralen and UVA (PUVA) have been reported to induce acne lesions. Furthermore, UV radiation may enhance the comedogenicity of sebum.

Psychogenic stress

Particularly the habit of picking pimples makes them worse. Questionnaire studies have shown that many acne patients experience shame (70%), embarrassment and anxiety (63%), lack of confidence (67%), impaired social contact (57%) and a significant problem with unemployment. Severe acne may be related to increased anger and anxiety.

Occupation-

Hydration of the ductal stratum corneum may induce acne in such occupations as catering. Patients dealing with oil undoubtedly develop an acneiform oil folliculitis, particularly on their trunks and limbs.

Besides this constipation, sedentary life, excessive use of greasy cosmetics, pomade, detergents and mechanical rubbing are seen to have considerable effect.^{1,3}

Location

Acne is a polymorphic disease, which occurs predominantly on the face, most frequently on the cheeks and in lesser degree on the nose, forehead and chin.

Ears: Large comedones in the concha, cysts in the lobes and sometimes retroauricular comedones and cysts.

Neck: Large cystic areas may predominate which may later become keloidal.

Upper part of the chest, shoulder and back.

Occasionally seen on the thighs and buttocks.

Distribution-

It is usually bilaterally symmetrical. The primary lesion of acne is the comedone; it signifies a plug composed of dried sebum, epithelial cells and keratinous scales; it fills the pilosebaceous canal.

The first stage is erythema, which surrounds or engulfs the comedone and a papule develops: acne papulosa. Most of these papules gradually involute leaving no trace; others suppurate to form pustules resulting from the action of secondary invading microorganism's. can cause firm perifollicular nodules of bluish red colour. They persist for a long time. Many of them eventually become completely or partially absorbed, others transform into cysts - acne cystica. They, however, also tend to persist, discharging from time to time a thin, purulent fluid.^{1,3}

Course and Prognosis

Generally the peak activity of acne is in the mid or late teen years with steady improvement starting around age 20, Women seem particularly prone to this long lasting form of acne.

Acne in general seems to be more severe in men. Cystic lesions, which are common in men, are only rarely found in women. In women a monthly peak of acne activity often occurs during the week prior to their menses. Acne tends to improve during the 3 to 6 month of pregnancy but rebound worsening sometimes occurs following parturition and cessation of lactation.

It is difficult to predict the future severity of acne at the time a young patient is first seen. The presence of cysts and a F/H of scarring acne are however bad prognostic signs.

When acne is untreated, individual small papules and pustules resolve spontaneously in 7 to 10 days. Resolution of these lesions does not result in scarring even when some degree of picking is carried out. Large papules and cysts require several weeks to resolve and even then post inflammatory colour changes may persist for months. Scarring is occasionally found at the site of deep-seated papules and is almost invariably present following resolution of fluctuant cysts.^{1,3,10}

HOMEOPATHIC APPROACH TO ACNE

Acne vulgaris can be considered as one of the common diagnoses brought forward by the patient to a homeopath. The problem should never be tackled with superficial, local acting remedies. Instead, deep

acting constitutional remedies should be prescribed judiciously as soon as the complete totality is available.³

While treating acne, inquire about the following points:

1. Exact type of acne acne rosacea, vulgaris.
2. The site is extremely helpful to select the appropriate drug e.g. I am able to prescribe Carbo-veg. on many occasions when no other symptoms are available only its characteristic site of affection that is back (Refer - Kent Repertory. Back eruptions -acne, Carbo-veg.).
3. Ascertain whether:
 - a. Is patient symptomatic and has come to take preventive measures for recurrence of acne.
 - b. Is it Pustular and cystic variety where pain is the presenting symptom?
 - c. When patient presents with lots of scarring and disfigurement of skin due to acne.

The above differentiation is a must as the course progresses and the line of treatment is quite different.

Acne from the homeopathic standpoint has known to be caused by various causative factors e.g.

1. Menstruation and pregnancy.
2. Masturbation.
3. Food habits
4. Allergies.
5. Emotions.

A sincere attempt to find the cause is important The following additional causes have been frequently observed in my practice. They are:

- during stressful situations, especially amongst teenagers,
 - after abuse of various cosmetics,
 - occupational that is exposure to various organic and inorganic chemicals.
- 4) The aggravating and ameliorating factors should be noted, es acne aggravated during summer - Bovista.
 - 5) Concomitant symptoms that are usually associated with acne should be noted. We have frequently observed that amongst the concomitant symptoms, constipation and Gastrointestinal upset are two of the commonest out of lot.

Guidelines given:

1. Patient should be strictly advised not to apply any local medicaments on acne as this does not help in overcoming the tendency to develop acne. Instead patients should be encouraged to clean the face, preferably with hot water at least 6-8 times a day without using any soap. This helps to removal dust particles and the bacteria.
2. The patient should be advised to have proper timing for their diet and to avoid from the diet -
 - --Highly seasoned food and pungent food.
 - ---Foods that is rich in fats.
 - --High carbohydrates: Mithais, sweets, chocolates. Patient should be encouraged to eat plenty of green leafy vegetables and fresh fruits.
 - --Exercise in fresh open air adds a feather to the cap of treatment.
3. The recent trend to be on long-term antibiotics to subside the acne should be discouraged.
4. When the patient is passing through stressful situation psychotherapy is often of tremendous help to cope up with the situation.

Acne is a very disfiguring disease owing to the fact that it selects the face by preference as its location. The non-professional man than any other skin affection often mistakes it for syphilis.

Acne tends to be chronic, and is obstinately resistant to treatment. Moreover, it is subject to periods of amelioration and aggravation without treatment of any kind. With proper diet and attention to hygiene, together with the homeopathic remedy it yields to treatment in course of a few weeks to a few months.

It is an inflammatory structural disorder of the sebaceous glands or follicles of the skin. Dirt plugs the outlet of many of the follicles, forming black heads or comedones. According to Unna, however, the uniform blackening of these outlets is due to a pigmentary staining. Retention of the natural secretion or sebum causes irritation of the follicles and congestion of the surrounding tissue. Pressure of the skin with the finger nails squeezes out the secretion in little cylinders, generally regarded by the laity as worms. Some points suppurate and some intermediate follicles inflame, and pimples, as well as hardened masses, appear. It is a complete spoiler of a fine complexion and hence dreaded by the fair sex.

The cases that suppurate are those that become infected with some variety of the staphylococcus pyogenes. The variety described above is the acne simplex. A more formidable kind is the acne rosacea, characterized by hypertrophy, redness, dilatation of the blood vessels and even neoplastic tubercles.

Acne simplex is the form most frequently met with. It is more common about the time of puberty. The direct causes are said to be local irritants, cosmetics, uncleanliness, exposure to heat, cold and wind, and the entrance of pus germs into the gland. The general causes are inappropriate food, too rich or too nitrogenous, masturbation, sexual excesses, uterine derangements, and debilitating diseases generally. It is most intimately connected with derangements, overactivity, etc., of the sexual organs, which accounts for its frequent occurrence at the time of puberty. At this age the hair follicles and the sebaceous glands are very active, and many changes are taking place in the developing individual.

Certain drugs produce acne-like eruption of the face-namely, Tar, Potassium bromide (forehead) and Potassium iodide. The habitual use of alcohol, especially in excess, is responsible for a good number of cases.^{3,4,8,9}

Homoeopathic Remedies-

Antimonium crudum: Cheeks and chin. Simple acne that turn into pustules and then gradually develop into boils. Pimples associated with gastric derangement. Burning and itching sensation in acne < night. Tendency to develop cracks and warts. Acne in drunkards (Led., Nux-v.).

Berberis aquifolium: The acne eruptions come in blotches. The rest of the skin is dry and scaly. Pimples extend from face towards the neck. It is an age-old remedy to clear the complexion of the face. Acne associated with menstrual irregularity.

Bovista lycoperdon: A/F cosmetics. Acne with indurated papules.

Bromium: Acne in scrofulous individuals with glandular enlargements (Calc-s., Merc-s.). Acne with indurated papules.

Carbo animalis: Acne rosacea with burning and rawness. Skin has a tendency to develop ulcers with indurated glands, especially neck, axilla and groins. Acne with unsightly scars (Kali-br.). Indurated papules.

Chrysarobinum: Acne rosacea that leads to easy formation of crusts. Acne is associated with violent itching.

Calcarea phosphorica: Face is pale, yellowish, earthy, and full of pimples. They ulcerate very easily and form deep scars. Also they tend to suppurate easily. Acne vulgaris in individuals who are tall, lean, anemic

with glandular enlargement; with vertex headache and flatulent dyspepia> by eating.

Calcarea sulphurica: Tendency to suppuration after the pus has found its vent, comes within the range of this remedy. The face is full of pimples and pustules. The discharge is thick, yellow, lumpy and bloody. Obstinate pimples that refuse to heal early. Even though a hot patient, Calc-sulph. patient feels better by local heat.

Carbo vegetabilis: Pimples with mottled cheeks and red nose. They are fat, sluggish, old, lazy, lifeless individuals with pimples that suppurate and have an offensive odor. Acne associated with gastric derangements.

Cimicifuga racemosa: Pimples with facial blemishes in young women. Pimples associated with ovarian and uterine complaints. Acne in nervous, depressed and oversensitive individuals. Acne associated with gastric derangements.

Conium maculatum: Pimples, small, red, burning appear with scanty menses and disappear when menses are over. Pustular acne on the face that itch violently. The skin is discolored red. Pustules rupture and form thick crusts. Acne alternates with internal symptoms e.g. diarrhea. Acne with indurated papules.

Eugenia jambosia: It is specially indicated for indurated and painful acne along with comedones. The pimples are painful for some distance around. It is also useful for acne rosacea. Skin cracks about toes. Fissures between toes and nightly cramp in soles of feet become important concomitants. Acne associated with menstrual irregularities.

Graphites: Acne that exudes gluey moisture, but bleeds easily and has a tendency to develop thick crusts. Acne vulgaris before the menses. Skin symptoms alternate with digestive complaints.

Juglans regia: Comedones and acne of the face that itch violently. When the acne bursts, it forms thick crusts. Acne that is associated with menstrual irregularities.

Kalium bromatum: Face has a blotchy red appearance with multiple indurated acne in fleshy young people with coarse habits, especially during puberty. Acne developing in individuals after sexual excess. Bluish red pustules on face, chest and shoulders. Acne with unsightly scars and menstrual irregularities.

Kalium arsenicosum: Pustular acne worse during menses. The skin is dry, scaly, wilted. Intolerable itching that is worse from warmth.

Ledum palustre: Red pimples on forehead and cheeks, stinging when touched. Pimples develop in individuals after suppressed discharges or after excess of alcohol (Nux-v., Rhus-t., Ant-c., Bar- c.). Acne with rheumatism (Rhus-t.).

Medorrhinum: Acne and pustules come out in blotches of reddish colour during menses; worse after menses. Discharge from the acne has a fishy odour. H/O sycoses.

Nux vomica: A/F cheese, excessive use of liquor. Pimples associated with gastric derangements.

Phosphoricum acidum: Acne from onanism (Aur.). Acne that gradually turns into small painful boils with stinking pustular discharge. Acne with loss of hair from beard.

Psorinum: Acne rosacea with dirty, rough, scabby, greasy skin. Robinia

Sarsaparilla officinalis: Acne with menstrual irregularities. Acne during pregnancy (Sep., Bel.I, Sabina).

Sulphur: Pale sickly face with bright red lips with multiple painful acne. Acne with dry rough wrinkled scaly skin. There is burning and itching sensation in acne < at night in bed. Acne alternates with other complaints like asthma.

Sulphuricum acidum: Acne rosacea with obstinate constipation. ^{3,4,8,9}

CASE STUDY

This is a case of Miss S.R.A., a 24 years old unmarried lady, who came with a complaint of acne on 26-12-20.

Chief Complaint

Location	Sensation	Modalities
Skin-face		
Since 5-7 years	Increased facial hair growth.	
Since 3-4 years	Pimples with scars.	< Before menses.
		<When tense.
		< Chocolates.
		< Butter, cheese.
		< Oily fried food.
		< Ice cream.
Since 5 months	Itching without eruptions of the whole body, more on hands.	< Night.
		> Hot water
Scalp	Dandruff	
	Hair fall.	

Associated Complaints

Generalities: Vertigo from hunger.

Head: Headache < Eyestrain from computer work.

Past History

Not significant.

Family History

Maternal grandfather - cancer throat.

Younger sister - piles.

Personal History

Appetite: Normal. Hungry more in the evening.

Thirst: 5-6 glasses/ day. Prefers cold.

Craving: Spicy³, ice cream², fish, prawns, pickles, fruit.

Aversion: Milk.

Stool: Normal.

Urine: Normal.

Perspiration: Profuse on armpits and back.

Thermal state: Ambithermal.

Sun < Rash on face.

Menstrual history

FMP-10 years. Has a 28 days cycle lasting for 5-6 days. The bleeding is regular, moderate, bright red and clotted.

Before menses: Pain in abdomen.

During menses: Pain in breasts.

After menses: Leucorrhea, clotted, stains sometimes difficult to wash.

Mental History and Life Space

Patient was born in Belgavi (Karnataka) and brought up in Konkan- Sawantwadi . In school she was an average student. She scored less in std. X and took up commerce. After her Third Year Bachelor of commerce, she took up a secretarial job and has been working there for the past 4 years.

As a child she was very scared of her parents, especially her mother who was very strict. But her parents and sisters were very loving and caring.

By nature the patient is quite reserved; can't make friends easily; feeling uncomfortable to speak to unknown people; does not like to open up. She will open up only if the opposite person is friendly and she can trust him. The patient was in love with a married man with whom she had split up a year back. She refused to give information on this front; only said that her trust had been broken. Now she doesn't want to trust anybody. Felt that people have taken advantage of her.

Feels nervous when speaking to men. Has fear of the opposite sex. She also has a fear of lizards.

She has a poor confidence level. She is also quite conscious of the way she dresses or the way she talks and behaves. She always wants to do something different from others.

She weeps easily, Prefers to cry alone but feels better if consoled.

She is very sensitive to rudeness. Will keep quiet but will keep thinking about it for months or even years but later will see to it that she gets back and insults that person.

Gets irritated very soon, especially when somebody makes fun of her. But will keep quiet. Since the disappointment in love, she gets angry on petty matters. When angry she gets trembling of the whole body. She loves listening to music.

Sleep

Sleeps on sides. More on the left than on the right.

When mentally disturbed, does not get sleep till 2-3 am and wakes up by 6 am.

Dreams

Occasionally of friends.

Rubrics

Generalities, food and drink, spices, condiments, piquant, highly seasoned food.

Generalities, food and drink, ice cream desires.

Generalities, food and drink, fruit desires.

Mind, music ameliorates.

Mind, reserved.

Mind, timidity, public, about appearing in.

Mind, weeping,

Mind, Ailments from, disappointment, deception.

Mind, brooding.

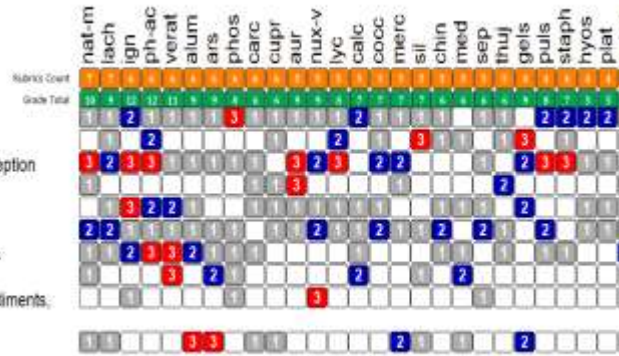
Skin itching eruption without

Remedy- (Repertorial Analysis)²

Natrium Mur. 1M -Single dose -SL for 15 days.

Vision
Totality, Rubrics, None, Chart

- 1 Complete; Mind: RESERVED
- 2 Complete; Mind: TIMIDITY public, about appearing in
- 3 Complete; Mind: AILMENTS from disappointment, deception
- 4 Complete; Mind: MUSIC amel.
- 5 Complete; Mind: BROODING
- 6 Complete; Mind: WEEPING, night
- 7 Complete; Generalities: FOOD and drinks fruit desires
- 8 Complete; Generalities: FOOD and drinks ice desires
- 9 Complete; Generalities: FOOD and drinks spices, condiments, piquant, highly seasoned food agg.
- 10 Complete; Skin: ITCHING eruptions without



Remedy selection:

On the basis of the symptom similarity ,constitution of patient and miasmatic background Medicine is selected, after repertorization using ISIS-VISION software. As per totality of symptom Natrum Muraticum is selected as covers maximum number of symptoms One dose of Natrum Mur -1 M was prescribed to the patient followed by Sac Lac.

General management:-

1. Patient is advised to dry face after washing
2. Avoid scrubbing of the skin and picking or squeezing of acne lesions as this can increase the risk of scar formation.
3. Use of soap-free face wash and oil-free moisturizers Patient can use sunscreens.
4. Avoid mental stress, Every effort should be made to relieve nervous tension
5. Foods like hot tea, coffee, alcohol and spicy foods, which cause flushing of the face, should be strictly avoided.
6. Vegetarian food is encouraged.
7. Exposure to sudden alterations in temperature should be minimized.

Follow up -

Date	Complaints	Treatment
05 -01-2021	Acne slightly reduced Itching ,Dandruff -and hair fall Headache mild intermittent.	SL 4 pills twice a 15 days
20 -01-2021	Acne slightly reduced Itching - increased Dandruff and hair fall Headache – prominent Irritability -increased.	SL 4 pills twice a day x 1 months
20 -02-2021	Acne reduced, Itching reduced Dandruff and hair fall increased Headache – prominent with vertigo Irritability -increased., weeping tenancy	Natrum Mur -1 M stat dose SL 4 pills twice a day x 1 months

20 -03-2021	Feels better, Pimples -forehead and cheek recurred Dandruff and hair fall reduced Headache reduced ,No vertigo Irritability -increased., weeping tendency- more marked	Natrum Mur -200 stat dose SL 4 pills twice a day x 2 months
10 -05-2021	Feels better , Pimples reduced Sweating Profuse increased Fear reduced No Headache.	SL 4 pills twice a day x 1 months
12 -06-2021	Feels better No Acne, Pimples-on face. Anxiety , Fear - reduced No any additional complaints	SL 4 pills twice a day x 1 months
10-07-2021	Patient still is doing well. Better generally and emotionally, no more urticaria or respiratory problems	SL 4 pills twice a day x 1 months
10-08-2021	Feels better- emotionally, no more Acne , Pimples , No any other problems	SL 4 pills once a day x 2 months

Discussion

In Acne-case remedy selection is on the basis of totality of symptoms, as per guidelines of homoeopathic principles. Natrum Muraticum-1M prescribed to patient for improvement of his mental status and physical wellness. Acne/ Pimples with other associated complaints are completely cured after treatment with regular follow up .^[4,5,6]

Conclusion

Homoeopathy has scope in treatment of Acne. Selected homoeopathic drugs eliminate the causative factors , removes the stress ,as it acts centrally on Vital force of individual. Along with the medicine patient is advised to take balance diet for fast recovery. Homoeopathic medicines brings back immunity of the person also removes disease permanently with minimum dose & without any side effects. Thus, this case study report has proved the effectiveness of Natrum Muraticum in patients suffering from Acne .

Declaration of patient consent

Consent from patient taken before further proceeding of case

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