



CASE REPORT: EFFECTIVE HOMEOPATHIC MANAGEMENT OF PALMOPLANTAR PSORIASIS USING CAUSTICUM – A CONSTITUTIONAL APPROACH

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ABSTRACT

Psoriasis is a chronic, immune-mediated skin disorder that can significantly impact daily life, especially in localized forms like palmoplantar psoriasis. This case reports a 52-year-old male with blackish discoloration, itching, scaling, and fissures on the palms and soles, aggravated by emotional stress and cold climate. Despite allopathic treatment, his symptoms persisted. Based on individualized case analysis, Causticum 200C was prescribed as a single dose, leading to complete relief from itching, reduced discoloration, and improved mental well-being over four months. This case highlights the effectiveness of constitutional homeopathic treatment in managing chronic autoimmune skin conditions, emphasizing detailed case-taking and holistic healing as per Hahnemann's guidelines.



INTRODUCTION

Psoriasis is a chronic, immune-mediated skin disorder marked by inflammation and rapid keratinocyte turnover, leading to erythematous, scaly plaques. It commonly affects the scalp, elbows, knees, nails, and palms/soles, with triggers including stress, infections, medications, and trauma (Koebner phenomenon). Palmoplantar psoriasis, localized variant, affects 3-4% of psoriasis cases, often causing painful fissures, bleeding, and functional impairment, significantly impacting physical and psychological well-being.

In Homeopathy, treatment follows the principle of "like cures like," addressing both physical symptoms and underlying systemic imbalances.^{3,7} Rather than focusing solely on skin lesions, constitutional remedies aim to restore internal balance and stimulate the body's innate healing response. This report shows cases such a case which was treated Homoeopathically using *Causticum* by considering the constitution of the patient that explains the patient's peculiarity in his character and his sufferings. A closer look on the life of the patient suggests a correlation between his mental stress and the disease initiation and progress. Various studies have demonstrated significant improvement in psoriasis cases treated with individualized homeopathic prescriptions, highlighting its effectiveness in managing chronic autoimmune skin disorders.^{9,10}

Causticum is a complex and intriguing homeopathic remedy, still somewhat mysterious to many practitioners. It is derived from a combination of slaked lime calcium and potassium hydroxide. In its marble-like state, it remains insoluble in water. The essence of *Causticum* is marked by deep sensitivity, a strong sense of justice, and intense emotional responses such as anger, fear, grief, and compulsiveness. Individuals who may benefit from this remedy often experience discomfort that fluctuates with changes in temperature or altitude, struggling to tolerate both heat and cold. Personality-wise, they are more likely to challenge authority rather than passively accept defeat. Over time, their emotional burden—often rooted in perceived injustices—can lead to feelings of sadness, hopelessness, and despair. This may manifest as depression, anxiety, emotional hypersensitivity, or even addictive behaviours like gambling or alcoholism. *Causticum* is particularly indicated in chronic inflammatory conditions, as it has the potential to induce and address such pathological processes.^{11,12}

Research supports that a detailed case analysis and selection of the most appropriate constitutional remedy lead to long-term symptomatic relief and improved quality of life.¹⁰



PATIENT INFORMATION

A 52-year-old male residing in Sullia town who was working as a rubber tapper came with a complaint of blackish discolouration of the skin with itching, cracking and dryness of both hand and foot since three years. His symptoms aggravated recently since five days. He has stiffness of joints of fingers during the complaint. Patient was taking allopathic medication since five days but is not better.

History of Present Illness

The complaint was first noticed 12 years back when he quit his job at an MNC due to his boss being excessively demanding on him and asking him to do work against the company policy. The complaint started gradually as itching, blackish discolouration and cracks especially on the dorsum and extensor aspect of the right hand after this incident. The itching was very severe, for which he took allopathic medication and after few months it subsided. He then turned towards farming and started working as a rubber tapping employee. He uses gloves and boots made of rubber, and uses chemical fertilizers, all of which has not caused him any type of allergic reactions. Three years back during his family asset partition, he had a similar complaint for few months after he started to get anxious and worried about his family as he did not like the partition decision that was put forward by his brother. He didn't want the family to split. Both the complaints got better after allopathic medication, few months after the onset. He is deeply affected by his brother and him not in good relation after few incidents due to the partition. He observed the complaint aggravated especially at night and cold climate

The patient is known to be diabetic since one year and currently he is not under any medication for it. The patient's mother had diabetes mellitus and hypertension and asthma

Life Space Investigation

He was the eldest child of his parents. He was born and brought up in a middle-class family in south India. His father was the sole earner of the family. His childhood was largely happy and he had a good relationship with his parents, siblings and friends. He started schooling at the age of 5 years. No medical problems were reported during his school years. He completed his B.com. He was a hardworking and responsible son and looked after the family as his father was unwell during his college days. He was a timid person and felt anxious about his family always. He always interfered in social scenarios in his neighbourhood and college if he felt that things were not done fair. He also worked for NGOs in his



college days but such activities were left off due to pressure from his wife after marriage. He was married at the age of 28 years. No significant events had happened in his life until the age of 40 years when he had quit his Job. He is generally very short tempered.

Physical generals

The patient has a lean build with an increased appetite but experiences early satiety and a strong preference for chicken, meat, and fish. His thirst is decreased, while perspiration is generalized and increased. He is chilly by nature, prefers summer, and tends to cover himself even in warm weather. His sleep is disturbed, primarily due to intense itching.

CLINICAL FINDINGS:

On examination blackish discoloration, with scaling and dryness was observed on both hands on the palmar aspect. The right palm was affected more and the cracks were more on the finger tips. The patient complained of intense itching of the affected area especially the fingers and also complained of scaling of skin. Patient also complained of intense pain mostly in the region of the cracks.

Both the lower limbs were also having discolorations on them especially on the ankle area. Cracking was visible on the heel of both foot and itching was moderately present. Scaling was comparatively less and was confined to the outer ankle area of both feet.

He also reported stiffness of finger joints of both the hands and all complaints aggravated in cold climate especially when the climate was dry.

TIMELINE:

12 years ago: Initial onset of symptoms after quitting job

3 years ago: Recurrence of symptoms due to family issues

5 days prior to consultation: Recent aggravation of symptoms

DIAGNOSTIC ASSESSMENT

Diagnosis was based on the physical examination and detailed case taking along with the available symptoms. A diagnosis of palmoplantar psoriasis (ICD-11-EA90.42) was primarily made based on a clinical examination, observing well-demarcated, erythematous, scaly plaques on the palms and soles, with painful cracks, and a symmetrical distribution.

Confirmation through a skin biopsy was needed to rule out other conditions like eczema or fungal infections, but the financial condition of the patient made him unwilling to undergo any kind of lab investigations

Palmoplantar psoriasis was considered based on the location and characteristics of

skin lesions, along with patient's history. Other diagnoses considered were eczema or fungal infections and allergic contact dermatitis.

Psoriasis Area Severity Index (PASI)

Name: PPP/52 M

Date: 04-10-2023

PASI: 6.5

	Head		Arms	
Area	<10%		10-29%	
Erythema (redness)	0		1	
Induration (thickness)	0		3	
Desquamation (scaling)	1		4	
	Trunk		Legs	
Area	0%		10-29%	
Erythema (redness)	0		0	
Induration (thickness)	0		2	
Desquamation (scaling)	0		2	

FIGURE 1 – PSAI (Before Treatment)

ANALYSIS OF SYMPTOMS

The symptoms narrated by the patient and attendant, as well as the symptoms observed by the physician, were considered for the analysis.⁴ These were: ailment from grief (family partition), Sympathetic towards others, Sensitive to authority, cannot stand injustice, Cares for others especially relatives, Anxiety for others especially relatives, thermally chilly, complaints aggravated in cold, tendency to cracks and fissures.³

His anxiety and sympathy were the main cause for all his sufferings. He was affected by his family issue and was affected by the injustice that he faced in his work place and family. The totality of the case was constructed and repertorised to find out the most suitable remedy. The symptom of sympathetic to others and intolerance to injustice was given most importance. The Synthesis Repertory was used for repertorisation using RADAR Opus 2.0 software



PPP-52/M			
MIND			
1 MIND - AILMENTS FROM - grief			
2 MIND - ANXIETY - others, for - loved persons			
3 MIND - CARES, full of - relatives, about			
4 MIND - INJUSTICE, cannot support			
Remedies	ΣSym	ΣDeg	Symptoms
caust.	3	8	1, 3, 4
nat-m.	3	7	1, 3, 4
vanil.	3	6	1, 2, 3
phos.	3	5	1, 3, 4
puls.	3	5	1, 3, 4
plat.	3	4	1, 3, 4
sulph.	3	4	1, 3, 4

FIGURE 2- Repretorial Toatality- Synthesis

THERAPEUTIC INTERVENTION

Individualised Homoeopathic medicines was the best suited for the case and the medicine was selected according to the symptom similarity.^{5,6,7} A single dose *Causticum* 200C was prescribed and no repetition was done.^{3,5} Other remedies like *Graphites* were considered initially, but this was ruled out with the characteristic mental make up of the patient such as the anxiety for others and intolerance to things that are wrong, also the characteristic thick discharges that usually accompany *Graphites* was absent. *Graphites* patients worry over trifles and are sensitive, this was not evident in this particular case.^{3,5,6,7}

Maintenance of general hygiene of the area and avoidance of walking on bare feet were



advised to the patient. Avoiding contact with irritants or chemicals like fertilizers and using high quality gloves during his work was also advised. The patient was further advised to get exposed to morning sunlight at least for 5–10 min/day and increase the exposure by 30 s each day, as exposure to sunlight is known to have a beneficial role in the management of psoriasis.⁸

FOLLOW-UP AND OUTCOMES

The patient was followed-up and assessed twice a month for nearly 4 months. Significant improvement in the patient's condition was observed. Images of the condition from initiation of treatment and progress every two weeks was captured. Itching was completely relieved, and blackish discoloration had diminished. Improved mental well-being in the form of decreased anxiety and irritability was also observed.

The patient adhered to the prescribed treatment with no adverse effects and no other complaints were reported during this period.

The improvements were attributed to the exclusive homeopathic treatment.

S. No.	Date	Brief Notes	Prescription
1	04-10-2023	Bilateral hands more on right hand and fingers -Complaint of itching ²⁺ -Cracks (painful)/Dryness of skin ²⁺ -Blackish discolouration ²⁺ -Stiffens of all the fingers aggravated at night Bilateral foot -Complaint of itching -Cracks on foot- dorsum -Blackish discolouration ²⁺ Aggravation- night ²⁺ , cold climate Amelioration-moisturiser application(petroleum jelly) Generalised anxiety of mind ²⁺	1. Rx Causticum 200C /1Packet (morning) 2. Two Grain Tab / 2-0-2 3. Maintain hygiene: Keep the area affected mainly the cracks clean and dry 4. Footwear and gloves: Wear well-fitting shoes and gloves to prevent irritation. 5. Stress management: Techniques like relaxation exercises or meditation can help. 6. Smoking cessation: Quitting smoking is crucial as it can worsen psoriasis. 7. Alcohol moderation: Limit alcohol intake.
2	25-10-2023	Bilateral hands -Complaint of itching- reduced by 80% -Cracks (painful)/Dryness of skin-reduced in intensity, especially cracks and accompanying pain by almost 80% -Blackish discolouration- slightly reduced. No new area of affection -Stiffens of all the fingers aggravated	1. Rx Sac lac /1Packet (morning) 2. Two Grain Tab / 2-0-2 3. General Managements 4. Continuous monitoring for any new symptoms



		at night- same Bilateral foot -Complaint of itching- reduced 80% -Cracks on foot- dorsum-reduced by 50% -Blackish discolouration²⁺ - same Aggravation- night , cold climate Generalised anxiety of mind- reduced	
3	15-11-2023	Bilateral hands -Complaint of itching absent. - Occasional itching episodes on handling any skin irritants such as fertilizers. -Cracks (painful)/Dryness of skin- only slightly present and pain is nil. -Blackish discolouration- reduced significantly. -Stiffens of all the fingers- occasionally in extreme cold temperature. Bilateral foot -Complaint of itching- absent -Cracks on foot- absent -Blackish discolouration- reduced in area but few spots are present. Aggravation- night , cold climate Generalised anxiety of mind- is controllable, not bothering him.	1. Rx Sac lac /1Packet (morning) 2. Two Grain Tab / 2-0-2 3. General Managements 4. Continuous monitoring for any new symptoms
4	20-04-2024	Reported follow-up by patient bystander. Bilateral hands -Complaint of itching absent. -Complaint of Cracks absent -Complaint of Blackish discolouration absent -Stiffens of all the fingers are absent- occasional pain in extreme cold temperature. Bilateral foot -Complaint of itching- absent -Cracks on foot- absent -Blackish discolouration-intensity and area covered reduced but few spots are still present.	1. Rx Sac lac /1Packet (morning) 2. Two Grain Tab / 2-0-2 3. General Managements 4. Continuous monitoring for any new symptoms

		Aggravation- cold climate Generalised anxiety of mind- is under full control. Patient has specifically mentioned a feeling of generalised well-being.	
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TABLE 1 - Follow up table



FIGURE 3 - Images Before and After Treatment

Psoriasis Area Severity Index (PASI) Calculator

Name: PPP/52 M

Date: 15-11-2023

PASI: 0.6

	Head		Arms	
Area	0%		<10%	
Erythema (redness)	0		0	
Induration (thickness)	0		0	
Desquamation (scaling)	0		1	
	Trunk		Legs	
Area	0%		<10%	
Erythema (redness)	0		0	
Induration (thickness)	0		0	
Desquamation (scaling)	0		1	

FIGURE 4 – PASI (After Treatment)



S. No.	Domains	Yes	No	Not Sure
1	Was there an improvement in the main symptom or condition for which the homeopathic medicine was prescribed?	+2	-	-
2	Did the clinical improvement occur within a plausible timeframe relative to the medicine intake?	+1	-	-
3	Was there a homeopathic aggravation of symptoms?	-	0	-
4	Did the effect encompass more than the main symptom or condition (i.e., where other symptoms, not related to the main presenting complaint, improved or changed)?	+1	-	-
5	Did overall well-being improve? (Suggest using a validated scale or mention changes in physical, emotional, and behavioral elements)	+1	-	-
6A	Direction of cure: Did some symptoms improve in the opposite order of the development of symptoms of the disease?	-	-	0
6B	Direction of cure: Did at least one of the following aspects apply to the order of improvement in symptoms? - From organs of more importance to those of less importance? - From deeper to more superficial aspects of the individual? - From the top downwards?	+1	-	-
7	Did "old symptoms" (defined as non-seasonal and non-cyclical symptoms that were previously thought to have resolved) reappear temporarily during the course of improvement?	-	0	-
8	Are there alternative causes (i.e., other than the medicine) that—with a high probability—could have produced the improvement? (Consider the known course of disease, other treatments, and relevant clinical interventions)	-	+1	-
9	Was the health improvement confirmed by objective evidence? (e.g., investigations, clinical examination, etc.)	+2	-	0
10	Did repeat dosing, if conducted, create similar clinical improvement?	-	-	0

Total- 9

TABLE 2- Modified Naranjo Criteria for Homoeopathy (MONARCH)



DISCUSSION

Managing psoriasis patients with regular follow-ups presents a significant challenge for homeopathic physicians, as patients often remain unconvinced due to the visible nature of symptoms and the limited success of other treatments. The key to achieving favourable outcomes lies in a meticulous first prescription and a comprehensive assessment of the patient as a whole. In this case, the principles outlined by Dr. Samuel Hahnemann in the third aphorism of the Organon of Medicine were followed, emphasizing the need for a thorough understanding of the disease, in-depth knowledge of individual remedies, careful selection of the appropriate remedy, and precise dosage and repetition to ensure an effective and lasting cure.

A study conducted at Bakson Homoeopathy College, Noida, India, demonstrated a significant reduction in PASI scores in three cases treated with individualized homeopathic medicines. Other research and case reports on skin disorders, particularly autoimmune conditions like psoriasis, have consistently shown positive outcomes with constitutional prescriptions.⁹

This case serves as a classic example of how homeopathic constitutional treatment can effectively manage chronic skin conditions like palmoplantar psoriasis, addressing both the physical and mental well-being of the patient. As emphasized by Dr. Samuel Hahnemann, a physician must analyse the case in its entirety, identifying the underlying causes of the patient's suffering to ensure a deep-rooted cure rather than mere symptom relief. Additionally, this case highlights the critical role of detailed case-taking and thorough history-taking, as a comprehensive understanding of the disease is essential for selecting the most appropriate remedy and achieving lasting results.³

CONCLUSION

The positive outcome of the homoeopathic treatment on palmoplantar psoriasis could be a pathway for encouraging patients to opt for homoeopathy to manage such skin conditions especially of autoimmune origin. A meticulous evaluation of physical, emotional, and mental symptoms, along with cross-verification from a bystander, ensured a precise prescription, leading to effective and sustained improvement without the need for repeated doses. This case reinforces the potential of individualized Homoeopathic treatment in managing chronic dermatological conditions by stimulating the body's innate healing response and restoring overall balance. Limitation Of Study: This case series is not sufficient



to draw any conclusion rather good quality, well-designed studies are required to establish the efficacy of Individualized homeopathic medicines in managing Palmoplantar psoriasis

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PATENT CONSENT

Patient consent was obtained to disseminate the clinical information and display images on a scientific platform.

CONFLICTS OF INTEREST

None declared.

LIMITATION OF STUDY:

This case series is not sufficient to draw any conclusion rather good quality, well- designed studies are required to establish the efficacy of Individualized homeopathic medicines in managing Palmoplantar psoriasis

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