



DEFEATING THE INNER FOE WITH HOMOEOPATHY: A CASE REPORT ON PSORIASIS VULGARIS

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ABSTRACT: Psoriasis vulgaris, a chronic inflammatory and hyperproliferative autoimmune skin disorder. Autoimmune disorders represent a perplexing challenge in contemporary medicine when it comes to the management of such diseases. A case of a 38-year-old male presented with itching, scaling, and plaque-like eruptions on the extensor aspects of hands, feet, elbows, and knees, accompanied by burning after scratching and dryness of skin. Clinical examination revealed positive Auspitz sign, polygonal lesions, and symmetrical distribution, suggestive of Psoriasis vulgaris. Based on the totality of symptoms, Phosphorus was prescribed in 50 millesimal potency along with general management and lifestyle advice. The patient showed gradual reduction in the lesion size, itching, and scaling. At a later stage, when improvement plateaued, Sulphur 200 was administered, further enhancing a significant improvement. Psoriasis Area and Severity Index (PASI) score before and after treatment confirms the effectiveness of Homoeopathic treatment. This case highlights the potential role of individualized homoeopathic management in psoriasis vulgaris.



INTRODUCTION

Autoimmune disorders are characterized by the immune system's misguided attack on its own tissues. Psoriasis vulgaris is a chronic, autoimmune, inflammatory skin disease characterized by sharply demarcated erythematous plaques with silvery-white scaling, most commonly affecting the extensor surfaces, scalp, and nails.^[1] The ICD - 11 code for this condition is EA90.0.^[2] The disease has an equal incidence in both sexes, with a prevalence ranging from 0.3–2.5%. Genetic predisposition notably HLA associations and environmental triggers such as trauma, streptococcal infections, sunlight, certain drugs, and mental stress play an important role. Chronicity and recurrence often lead to complications like psoriatic arthritis, nail dystrophy, secondary infections, and significant psychological distress.^[3] Homoeopathy considers psoriasis as a manifestation of underlying chronic miasma (psora, sycosis, syphilis) and aims to treat it with individualized remedies based on the totality of symptoms. This case report illustrates the successful management of Psoriasis vulgaris with homoeopathic remedies Phosphorus and Sulphur based on the principles enunciated in the Organon of Medicine.

CASE Report

A 38 years old male patient visited the dermatology OPD on 22.02.2024 with complaints of itching on extensor surfaces of hands, feet, elbows, knees < night, > scratching, < sweating, < sun exposure, > warm washing. Burning after scratching. Scaling of skin with shedding and dryness of skin which started four months ago. The onset of the complaints was gradual; initially beginning on the feet, later spread on scratching to hands, elbows, knees. He took homoeopathic treatment for one month without any improvement. The patient had a past history of surgery done for right thumb injury, three years ago. There is a family history of Diabetes mellitus in both the parents and Hypertension in father.

PHYSICAL GENERALS

Appetite and thirst are normal, sleep is good, generalised perspiration, eliminations are normal, desires sweets and cold drinks, prefers cold bathing, Ambithermal towards hot.



MENTAL GENERALS

Extroverted, cheerful, carefree.

CLINICAL EXAMINATION OF SKIN:

Lesion: Plaque-like.

Margins: well-defined.

Shape: polygonal lesions.

Size: 3–10 cm.

Distribution: symmetrical distribution.

Positive Auspitz sign.

Other Vitals: Stable.

DIAGNOSIS: The diagnosis is Psoriasis vulgaris based on the clinical presentation of the case and the examination findings.

	PSORA	SYCOSIS	SYPHILIS
Family history		Diabetes Mellitus, Hypertension	Diabetes Mellitus, Hypertension
Past history			Injury to thumb- surgically corrected
Mind	Extroverted, carefree		
Body	Desires: sweets,	Desires: cold drinks, < sun exposure	Desires: cold drinks, Itching < night



	Itching in both hands, feet, knees, elbows < sweating, > scratching, > warm water washing. Burning sensation after scratching. Skin peeling. Dryness of skin.		< sun exposure
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Table 1.: Miasmatic Analysis of the case

According to Hahnemannian classification of diseases, this case of psoriasis vulgaris belongs to fully developed true natural chronic disease: Psora–Sycosis–Syphilis.

TOTALITY OF SYMPTOMS

Extrovert

Cheerful

Carefree

Desires sweets, cold drinks, junk food

Itching < night, < sun exposure, < sweating; > scratching, > warm washing

Burning after scratching

Scaling and bleeding spots occasionally

Dryness of skin

Ambithermal, towards hot



By analysis of the case and evaluation of the symptoms, the symptom totality was constructed based on which the repertorization was done using Zomeo 3.0 software. (Figure 1.) The final selection of medicine was done with reference to Clarke's Materia Medica. Indications of Phosphorus: Psoriasis. Keratitis. Desquamation of skin. Burning in the skin. Wounds bleed very much, even if small; Cheerful. ^[4]

Figure 1. Repertorial Chart at the first visit.

Remedy	Phos	Sulph	Staph	Bar-c	Calc	Lyc	Rhus-t	Calc-s	Ign
Totality	26	27	18	8	22	21	21	16	16
Symptoms Covered	9	8	8	8	7	7	7	7	7
[Complete] [Mind]Extroverted:	3	3	1	1	0	1	0	0	1
[Complete] [Mind]Carefree:	1	0	0	0	0	0	0	1	0
[Complete] [Mind]Cheerfulness:	4	4	4	1	4	4	3	4	4
[Complete] [Generalities]Food and drinks:Sweets:Desires:	3	4	3	1	3	4	3	3	1
[Complete] [Generalities]Food and drinks:Cold:Drinks:Desires:	4	3	3	0	3	3	4	3	3
[Complete] [Mind]Consolation, sympathy:Amel.:	3	0	0	1	0	0	0	0	3
[Complete] [Skin]Itching:Scratching:Amel.:	4	3	1	1	4	0	1	1	3
[Complete] [Skin]Itching:Perspiration:During:	0	3	1	1	4	4	4	0	0
[Complete] [Skin]Itching:Burning, smarting:Scratching, after:	1	4	1	1	1	1	3	1	1
[Complete] [Skin]Eruptions:Psoriasis:	3	3	4	1	3	4	3	3	0

PRESCRIPTION

Medicine was given for 2 weeks. First week, PHOSPHORUS 0/1 / 1D (weekly once Morning) and placebo was given for the rest of the days. Similarly, for the second week, PHOSPHORUS 0/2 / 1D (weekly once Morning) was given along with placebo. General management advice was given to the patient.



DATE	SYMPTOMS	INFERENCE	PRESCRIPTION
29.2.24	Itching with burning sensation after scratching Plaque like rash with Itching in both feet and hands < night, <sweating, < sun exposure, >warm washing >scratching Auspitz sign positive GENERALS: All good. BP: 110/80 mmHg	persists persists	First week Rx, 1. PHOSPHORUS 0/3 / 1D (M) 2. SAC LAC / 6 D (M x 6 days) 3. B.PILLS 3x TDS x 7 days 4. B.DISK 1 x BD x 7 days Second week Rx, 1. PHOSPHORUS 0/4 / 1D (M) 2. SAC LAC / 6 D (M x 6 days) 3. B.PILLS 3x TDS x 7 days 4. B.DISK 1 x BD x 7 days
14.3.24	Itching in both hands and elbows and knees	Slightly better	First week



	Itching in both feet Plaques like lesions of affected parts Burning sensation after scratching skin peeling after scratching Auspitz sign positive GENERALS: All good. BP: 110/70 mmHg	Persists Better Persists Persists	Rx, 1. PHOSPHORUS 0/5 / 1D (M) 2. SAC LAC / 6 D (M x 6 days) 3.B.PILLS 3x TDS x 7 days 4.B.DISK 1 x BD x 7 days Second week Rx, 1. PHOSPHORUS 0/6 / 1D (M) 2, 3, 4. - REPEATED Third week Rx, 1. PHOSPHORUS 0/7 / 1D (M) 2, 3, 4. - REPEATED Fourth week Rx, 1. PHOSPHORUS 0/8 / 1D (M) 2, 3, 4. - REPEATED
11.4.24	Itching in both hands and elbows and knees Itching in both feet Plaques like lesions of affected parts Burning sensation after scratching	Slightly better Persists Better Persists	First week Rx, 1. PHOSPHORUS 0/9 / 1D (M) 2. SAC LAC / 6 D (M x 6 days)



	Skin peeling after scratching Auspitz sign positive GENERALS: All good. BP: 110/70 mmHg	Persists	3.B.PILLS 3x TDS x 7 days 4.B.DISK 1 x BD x 7 days Second week Rx, 1. PHOSPHORUS 0/10 / 1D (M) 2, 3, 4 - REPEATED
25.4.24	All complaints were persisting Auspitz sign positive GENERALS: good The case was re-examined.	Persits	First week Rx, 1. SULPHUR 200 / 1D (M) 2. SAC LAC / 6 D (M x 6 days) 3.B.PILLS 3x TDS x 7 days 4.B.DISK 1 x BD x 7 days Second week Rx, 1.SAC LAC 7D / 1D (M) 2. B.PILLS 3x TDS x 7 days 3.B.DISK 1 x BD x 7 days
9.5.24	Itching in both hands and elbows, knees, and feet Plaques like lesions of affected parts Burning sensation after scratching Skin peeling after scratching	Slightly better. Reduced in size, improving Occasionally Better but persists	Rx, 1.SAC LAC 7D / 1D (M) 2. B.PILLS 3x TDS x 7 days 3.B.DISK 1 x BD x 7 days X 2 weeks



	Auspitz sign positive GENERALS: Good		
1.6.24	Blackish discoloration of dorsal surface of foot, palms, and both elbows. Itching with occasional bleeding spot from scratching. < Scratching. After scratching. < Hot water application. Dryness of skin with scaling. Auspitz sign negative GENERALS: Good	Better Much better than before. Better	Rx, 1.SAC LAC 7D / 1D (M) 2. B.PILLS 3x TDS x 7 days 3.B.DISK 1 x BD x 7 days X 2 weeks

Table 2. Follow-Up of the case:

When the improvement plateaued after two months of treatment, the case was re -examined and again repertorization was done (Figure 2.) based on which Sulphur 200 was prescribed, followed by Sac Lac.

Remedy	Sulph	Rhus-t	Sep	Merc	Ars
Totality	29	17	17	17	17
Symptoms Covered	8	7	7	6	5
[Complete] [Extremities]Dryness:	3	1	1	1	3
[Complete] [Extremities]Eruptions:Desquamating:	4	3	3	4	4
[Complete] [Skin]Eruptions:Bleeding:Scratching, after:	4	3	3	4	3
[Complete] [Extremities]Itching:Burning:Scratching, after:	4	3	1	0	0
[Complete] [Extremities]Itching:Hands:Back:	4	0	0	2	0
[Complete] [Extremities]Itching:Elbows:	3	1	3	3	0
[Complete] [Extremities]Itching:Knees:	4	3	3	0	4
[Complete] [Extremities]Eruptions:Psoriasis:	3	3	3	3	3

Figure 2. Repertorial Chart after re-evaluation of the case.

The PASI score was used as an assessment tool to measure the area and severity of psoriasis symptoms of the patient. The PASI score was 6.8 before the treatment (Figure 3.) and 1 after the treatment (Figure 4.).

PASI: 6.8					
	Head			Arms	
Area	0%			10-29%	
Erythema (redness)	0			1	
Induration (thickness)	0			2	
Desquamation (scaling)	0			2	
	Trunk			Legs	
Area	0%			10-29%	
Erythema (redness)	0			1	
Induration (thickness)	0			3	
Desquamation (scaling)	0			2	

Figure 3. PASI score before treatment

PASI: 1.0					
	Head			Arms	
Area	0%			<10%	
Erythema (redness)	0			0	
Induration (thickness)	0			1	
Desquamation (scaling)	0			0	
	Trunk			Legs	
Area	0%			<10%	
Erythema (redness)	0			1	
Induration (thickness)	0			1	
Desquamation (scaling)	0			0	

Figure 4. PASI score after treatment



BEFORE TREATMENT

AFTER TREATMENT

Figure 5. Psoriasis on hands before and after treatment



BEFORE TREATMENT



AFTER TREATMENT

Figure 6. Psoriasis on feet before and after treatment



DISCUSSION

Hahnemann emphasized in §189 that No external malady (not occasioned by some important injury from without) can arise, persist or even grow worse without some internal cause. Psoriasis having external lesions on the skin is the result of the internal miasma.^[5] According to H.A. Roberts, “Psoriasis is the marriage of all miasms” which corresponds to the miasmatic background in this case.^[6] (Table 1.) Phosphorus was prescribed in 50-millesimal potency in accordance with Hahnemann’s directions in the 6th edition of the Organon. He emphasized that, with this the new altered but perfected method, a carefully selected remedy may be repeated even daily, for months, in ascending degrees of potency. Treatment begins with the lowest degree of potency, and after one or two weeks, the potency is progressively raised (§246 footnote).^[5] After two months of treatment, the progress of symptoms came to a standstill. The case was re-examined and Sulphur 200 was prescribed. Stuart Close points out that in some cases, especially chronic diseases, the patient may show a deficient reaction or diminished susceptibility to remedies, where the vital force fails to respond to a well-selected remedy; in such cases, an intercurrent remedy may be required to restore reactivity by removing miasmatic or pathological obstacles. Bönninghausen mentioned remedies like Carbo veg., Laurocerasus, Moschus, Opium, and Sulphur for this purpose.^[7] The clinical outcomes were documented in the form of photographs (Figure 5. & 6.) and PASI Scores before and after treatment (Figure 3. & 4.).^[8] Individualized homoeopathic remedies selected based on totality of symptoms and miasmatic background is the pivotal in bringing therapeutic effectiveness.

CONCLUSION

Individualized homoeopathic treatment can play a significant role in the management of chronic autoimmune conditions like psoriasis. Phosphorus and Sulphur prescribed in 50-millesimal and centesimal potencies respectively, along with lifestyle advice, resulted in significant improvement. This case highlights the importance of practical application of the instructions by Hahnemann in the Organon of Medicine and the use of intercurrent remedy in prescription.



INFORMED CONSENT

We confirm that written informed consent was obtained from the patient for publication of this case with images.

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