



RECURRENT TINEA CRURIS TREATED WITH HOMOEOPATHIC MEDICINE NATRUM MURIATICUM- A CASE REPORT

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ABSTRACT: Tinea cruris is a common dermatological disorder worldwide, affecting a significant portion of the population and often leading to physical discomfort and emotional distress. These conditions frequently manifest as itching, scaling, redness, and eruptions. Homoeopathic management emphasises individualised, holistic treatment that addresses both physical and emotional aspects, aiming for long-term remission and overall well-being. This is a case of Tinea cruris treated with Natrum muriaticum as a constitutional remedy. The improvement was assessed with the help of photographic evidence. The study underlines the role of homoeopathy in restoring balance, improving quality of life, and preventing relapse.

INTRODUCTION

Tinea cruris, commonly known as “jock itch,” is a superficial fungal infection of the groin, inner thighs, and gluteal region, caused primarily by dermatophytes such as *Trichophyton* species. The ICD-11 code for *tinea cruris* (jock itch) is 1F28.3 – Genitocrural dermatophytosis. It is a prevalent dermatological condition worldwide, particularly in warm and humid climates, and is more common in adult males¹.



The condition typically presents with well-demarcated, red, scaly, and itchy patches, which may extend to the inner thighs and perianal area. Predisposing factors include excessive sweating, obesity, tight clothing, poor hygiene, immunosuppression, and a history of fungal infections elsewhere on the body. While tinea cruris is generally not life-threatening, chronic or recurrent infections can significantly impact quality of life, causing discomfort, sleep disturbances, and psychological stress². Complications may include secondary bacterial infections, changes in pigmentation, or spread to other areas of the body. Homoeopathic management aims to treat not only the local symptoms but also underlying constitutional and psychosomatic tendencies, focusing on individualised remedies and holistic care to achieve long-term remission³.

CASE PROFILE

A 63-year-old male from Haryana, currently residing in Delhi, has been suffering from tinea for the past five years, initially starting in the groin and later spreading to the buttocks, thighs, and left knee. The lesions were associated with intense itching, redness, and thickened borders. The itching worsened with changes in clothes, dry air, exposure to cold, and after sweating, while relief was noted after bathing and with warmth. He has taken allopathic treatment, including antifungal oral medications and topical creams. On taking a detailed case, Homoeopathy medicine was prescribed.

H/O PAST ILLNESS

Sep 2024- History of tuberculosis

In 2016- Cholecystectomy

H/O FAMILY ILLNESS

Father – TB, Diabetes mellitus

Mother – Rheumatoid arthritis

Father and brother suffer from similar skin conditions.

GENERAL SYMPTOMS

The patient's appetite and thirst were good. His stools were regular, and he voided urine without any difficulty. His sweat was profuse, generally with no specific odour. His sleep was good and refreshing. His Thermal was hot.

EXAMINATION OF THE PATIENT

On examination, lesions were noted in the thighs, buttocks and left knee with redness and thickened borders.



MENTAL GENERALS

The patient was brought up in Haryana and had a relatively simple childhood with no major physical ailments during his early years. His scholastic performance was average, and he recalls not facing any significant bullying, though he was emotionally sensitive and tended to suppress his feelings from a young age. He had a reserved nature, which limited deep bonding with friends or teachers, and his interpersonal relations during school years were cordial but not very expressive. His parents were moderately strict, especially his father, who had a dominant influence on his upbringing. There were expectations placed upon him, though not excessively high. He shares a neutral to cordial relationship with his three brothers. Among the siblings, he did not report any major conflicts, and the family setup appears to be intact.

In adulthood, he faced major emotional stress during his first marriage, which began in 2013 and ended in separation from 2014 to 2018, a period he describes as deeply stressful and grief-laden. He later remarried four years ago, but the couple has not been able to conceive, which continues to cause emotional distress. He has no children and silently carries grief related to this. Although he experiences intense stress and anger, he claims to keep them under control. Personality-wise, he identifies as reserved, overthinking, emotionally suppressed, and sensitive, with a tendency to silently carry burdens rather than express them openly. His current work environment and occupation details are not specified, so no information is available about professional stressors or dynamics.

CASE ANALYSIS

Repertory used	Rubrics selected
Synthesis Repertory	1. MIND – TIMIDITY 2. MIND – CONFIDENCE – want of self-confidence 3. PERSPIRATION – PROFUSE 4. MIND – SENSITIVE 5. SKIN – ERUPTIONS – itching 6. MIND – GRIEF

Table 1: Repertorial totality



REPERTORY CHART

Remedies	nat-m.	puls.	sil.	lyc.	bar-c.	caust.	nux-v.	sep.	sulph.	ars.	bry.	kali-c.	rhus-t.	aur-m-n.	calc.	chin.	merc.	phos.	staph.
Serial Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
Symptoms Covered	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
Intensity	16	16	16	15	14	14	14	14	14	13	13	13	13	12	12	12	12	12	12
Result	6/16	6/16	6/16	6/15	6/14	6/14	6/14	6/14	6/14	6/13	6/13	6/13	6/13	6/12	6/12	6/12	6/12	6/12	6/12
Clipboard 9																			
MIND - TIMIDITY	2	4	4	3	4	2	2	3	3	2	3	3	2	2	3	2	2	3	1
MIND - CONFIDENCE - want of self- confidence	2	2	3	2	4	1	2	1	1	1	2	2	2	2	1	2	1	1	1
PERSPIRATION - PROFUSE	3	2	3	3	2	2	2	3	2	3	3	3	2	3	3	3	3	2	1
MIND - SENSITIVE	3	3	3	3	2	3	3	2	3	2	1	2	1	2	2	3	2	3	3
SKIN - ERUPTIONS - itching	3	2	2	2	1	3	3	3	3	3	2	2	3	1	2	1	2	2	3
MIND - GRIEF	3	3	1	2	1	3	2	2	2	2	2	1	3	2	1	1	2	1	3

Figure 1: Repertorial Result

SELECTION OF REMEDY

Remedy Type	Remedy Name	Remedy Potency	Remedy Dose	Remedy Reasons
Constitutional Remedy	<i>Natrum muriaticum</i>	200C	One dose weekly	Selected as the constitutional remedy considering skin eruptions following suppressed emotions, grief, and controlled anger. Addresses psychosomatic background and chronic tendency.
Acute Remedy	<i>Tellurium</i>	30C	Twice daily during acute flare-ups	Chosen to manage acute exacerbations of skin lesions with itching, scaling, and irritation.
Biochemic Remedy	<i>Ferrum phosphoricum</i>	6X	Twice daily	Used to improve general vitality, enhance tissue repair, and control inflammatory tendency.

Table 2: Analysis of Remedy Selection



OBSERVATION AND RESULT

Month	Progress / Follow-up Notes	Prescription
1st Month (June 2025)	Initial improvement in itching and scaling noticed. Lesions on gluteal and groin region showed reduced redness and dryness. General condition stable.	<i>Natrum muriaticum</i> 200C – 1 dose weekly <i>Tellurium</i> 30C – twice daily <i>Ferrum phosphoricum</i> 6X – twice daily
2nd Month (July 2025)	Marked reduction in itching (about 70%), no new eruptions. Old patches becoming lighter. Constipation improving. Patient reported better mood and less stress.	<i>Natrum muriaticum</i> 200C – 1 dose weekly <i>Tellurium</i> 30C – twice daily <i>Ferrum phosphoricum</i> 6X – twice daily
3rd Month (August 2025)	Further improvement—itching reduced up to 90%, no spreading, redness and scaling completely subsided. Skin smooth and healthy. Patient emotionally more stable and confident. Overall well-being improved.	<i>Natrum muriaticum</i> 200C – 1 dose weekly <i>Tellurium</i> 30C – twice daily <i>Ferrum phosphoricum</i> 6X – twice daily Supportive counseling and dietary advice continued
4th–6th Month (Follow-up)	No relapse noted. Skin remained clear. Sleep and digestion improved. Emotional balance maintained.	Same constitutional and maintenance regimen continued, gradually tapered.

Table 3: Follow-up table showing the patients improvement



Figure 2: Before treatment



Figure 3: After treatment

DISCUSSION

This case demonstrates the effectiveness of a holistic, individualized homeopathic approach in managing chronic skin conditions with a psychosomatic component. The patient presented with long-standing skin eruptions associated with emotional factors such as suppressed grief, timidity, and sensitivity. Gradual improvement was observed over consistent follow-up, with significant reduction in itching, redness, and scaling, as well as improved skin texture and overall well-being. An article has suggested the role of homoeopathy in treating dermatophytosis⁶. In homoeopathic materia medica, *Natrum muriaticum* and *Tellurium* both play significant roles in the management of tinea infections, each with its characteristic symptom pattern. *Natrum mur* suits patients with chronic, recurring fungal eruptions that are dry, scaly, and intensely itchy, especially in the skin folds^{7,8}. The lesions may crack, ooze slightly, or worsen with heat, exertion, and emotional stress, reflecting the remedy's deep action on the skin and its tendency toward dryness and salt imbalance. *Tellurium*, on the other hand, is strongly indicated in ringworm and tinea cruris



with sharp, clearly defined circular eruptions, offensive odour, and intense itching that becomes worse at night. Its eruptions often appear violaceous or coppery and may spread rapidly in concentric rings^{8,9}. This case highlights the importance of addressing both physical and emotional aspects of chronic conditions. Progress was steady, and no relapse or new lesions were observed during follow-up, indicating sustained improvement. This emphasises the potential of individualised treatment in restoring balance and improving quality of life.

CONCLUSION

A holistic, patient-centred approach with Homoeopathic treatment can lead to complete remission of symptoms and enhanced emotional health, validating the role of constitutional management in chronic dermatological cases. Also, this case demonstrates the scope of Homoeopathic treatment in such recurrent skin conditions and serves as small evidence showing the significant role of Homoeopathy. Further researches are needed to support this concept.

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