

## **A case of chronic urticaria treated with use of 50 millesimal Potency. A case report.**

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### **ABSTRACT –**

Introduction - Urticaria is a common dermatological disorder characterized by the sudden appearance of transient, pruritic wheals resulting from localized dermal edema. It affects approximately 15–25% of the population at least once during their lifetime and may present in acute or chronic forms depending on duration and recurrence. Case Summary -This case report describes the homoeopathic management of a 30-year-old male presenting with acute urticarial eruptions, following partial and temporary relief from conventional medication. Individualized homoeopathic treatment resulted in marked clinical improvement. Result- This case illustrates the clinical relevance of individualized homeopathic prescribing in a patient with acute urticaria. The therapeutic outcome was assessed using the Modified Naranjo Criteria for Homoeopathy (MONARCH), which yielded a score of +9, suggesting a probable causal relationship between the intervention and the observed improvement. Conclusion - This case demonstrates the effectiveness of individualized homoeopathic treatment using LM potency in urticaria, highlighting holistic case analysis and MONARCH-supported clinical improvement with sustained symptomatic relief.

Keywords –Homoeopathy, Urticaria, MONARCH criteria, Individualized treatment.

### **INTRODUCTION –**

Urticaria is a common dermatological disorder characterized by the sudden appearance of transient, pruritic wheals resulting from localized dermal edema. It affects approximately 15–25% of the population at least once during their lifetime and may present in acute or chronic forms depending on duration and recurrence. While acute urticaria is often self-limiting and triggered by identifiable allergens such as foods, drugs, infections, or physical factors, chronic urticaria poses a significant therapeutic challenge due to its multifactorial etiology and frequent idiopathic nature. Persistent symptoms adversely affect quality of life, sleep, work productivity, and psychological well-being of patients, often leading to frustration and dependence on long-term conventional medications.<sup>12</sup>

Conventional management primarily relies on antihistamines, corticosteroids, and immunomodulatory agents, which may provide symptomatic relief but are frequently associated with recurrence upon withdrawal and potential adverse effects with prolonged use. This has led many patients to seek complementary and alternative systems of medicine, including homoeopathy, for a more holistic and individualized approach.<sup>3</sup>

Homoeopathy, founded by Samuel Hahnemann, is based on the principle of *similia similibus curentur* (like cures like) and emphasizes individualized prescribing after a comprehensive evaluation of mental, emotional, and physical symptoms. According to homoeopathic philosophy, skin diseases such as urticaria are not merely local manifestations but expressions of an underlying internal imbalance of the vital force. Suppression of external symptoms without addressing the constitutional disturbance may predispose to chronicity or deeper pathology.<sup>4-6</sup>

Modern homoeopathic practice employs systematic case-taking, Repertorization, and consultation of the *Materia Medica* to arrive at the most similar remedy. Computerized repertories, such as RADAR software, have enhanced the accuracy, reproducibility, and transparency of the analytical process, especially in complex cases involving prominent mental and general symptoms. The inclusion of characteristic mental symptoms—such as aversion, disgust, and suicidal disposition, incoherent or hesitating speech often plays a decisive role in remedy selection, in alignment with Hahnemann’s emphasis on the primacy of mental and emotional symptoms.<sup>47</sup>

The use of 50 millesimal (LM/Q) potencies, introduced by Hahnemann in the sixth edition of the *Organon of Medicine*, represents a significant advancement in homoeopathic therapeutics. These potencies are designed to provide gentle, rapid, and sustained action with minimal aggravation, making them particularly suitable for chronic and sensitive cases.<sup>48</sup> Recent clinical experiences suggest that LM potencies may offer improved tolerability and flexibility in dose repetition compared to centesimal potencies, especially in long-standing or recurrent conditions.

This case report aims to illustrate the role of individualized homoeopathic treatment in a patient with urticarial complaints who had obtained only partial and temporary relief from conventional therapy. The case highlights the application of Repertorial analysis using RADAR software, the rationale for remedy selection, and the clinical outcome following administration of a 50 millesimal potency. By documenting this case, the report seeks to contribute to the growing clinical evidence supporting homoeopathy as a complementary approach in the management of urticaria and to emphasize the importance of holistic, patient-centered care.

### **Patient Information**

A 30-year-old male patient presented with circular, red, swollen patches over the skin associated with intense itching and burning sensation for the past 3 years.

#### **History of Presenting complaint**

The patient reported the appearance of circular red swollen patches on the skin, associated with burning, itching, and needle-pricking type sensation. The episodes were acute in onset. Three years prior, the patient experienced an episode of vomiting, and on the following day, similar patches appeared all over the body. Since then, he has been experiencing recurrent episodes.

**Past History –**

The patient had taken allopathic medications, including antihistamines (Tablet Atarax) and corticosteroids (Tablet Deflazacort 6 mg), which provided temporary relief.

**Family History –**

Father – Apparently healthy

Mother - coronary artery disease

Wife - Apparently healthy

**Physical Generals –**

His appetite was reduced, with increased thirst for water. The Patient was thermally chilly. Her bowel movements were regular and satisfactory. Sleep was disturbed.

**Life Space Situation –**

The patient reported that his wife did not maintain cleanliness or hygiene at all, which made him increasingly irritable and distressed. On one occasion, he found a hair in his food, which disgusted him and worsened his irritation. Due to this ongoing situation, he even contemplated separating from his wife. Although he disliked living alone and preferred companionship, he felt unable to continue living with his family under these conditions.

**Mental Generals**

- He spoke slowly and with many pauses, showing that he had trouble starting and keeping a smooth conversation.
- At times, his speech did not make clear sense and was slightly mixed up instead of flowing naturally.
- He also looked restless during the case taking, could not sit still, and appeared tense.

**General Examination –**

The patient is of average build and weighs 85 kg. His gait is normal. There is no pallor, icterus, cyanosis, or oedema. Lymph nodes are impalpable. Her pulse rate is 78 beats per minute, blood pressure is 130/80 mm Hg, respiratory rate is 19 per minute, and temperature is 98°F. The tongue is clean and moist. The conjunctiva and nails are pink, hair is black, and the skin is wheatish in complexion.

**Systemic Examination –**

The central nervous system examination reveals that the patient is conscious and well-oriented. The respiratory system shows equal air entry on both sides. Cardiovascular examination reveals normal heart sounds (S1 and S2). The gastrointestinal tract is soft and non-tender on palpation.

**Local examination of skin-**

Inspection – Multiple erythematous, raised wheals of varying size and shape seen over the body. Lesions are circular to irregular in outline with well-defined margins. No vesicles, pustules, scaling, crusting, or ulceration observed. no discharge, bleeding, or signs of secondary infection. Surrounding skin appears normal.

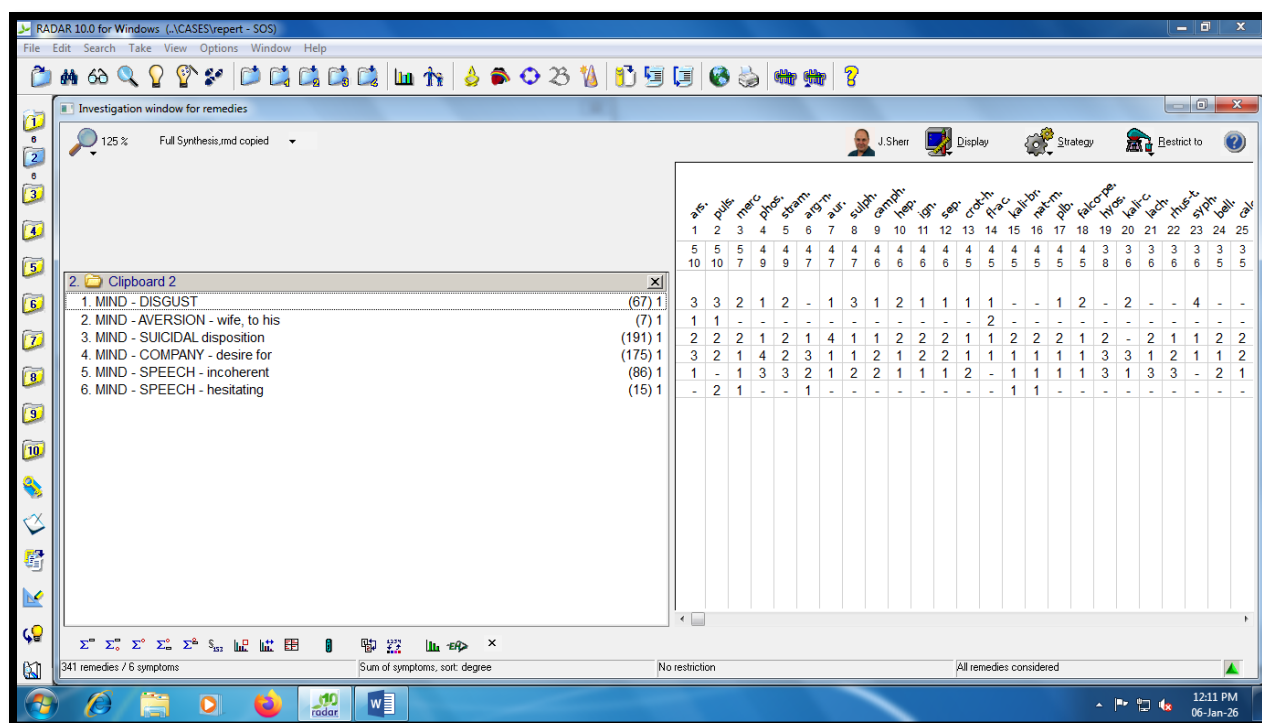
Palpation - Lesions are soft and edematous to touch. Non-tender on palpation. Local temperature is normal. No induration or nodularity felt. Skin surface smooth without thickening.

Figure 1 – Urticaria Patches Before Treatment Dated 4/01/24

**Totality of symptom –**

- Aversion to his wife
- Disgust feeling
- Incoherent speech
- Hesitating speech
- Company desire

Figure 1: Repertorization chart using RADAR software.<sup>10</sup>



**Therapeutic Intervention-**

The selection of the remedy was done based on Repertorization using the RADAR Opus Homeopathic software<sup>10</sup> with the Synthesis Treasure Edition Repertory. The Repertorization chart is shown in Figure 1. Considering the Repertorial results and referring to Materia Medica, *phosphorus* was selected as the similimum.

On the day of visit, *phosphorus* 30C was prescribed, - 4 globules, three times a day for 3 days and followed by a placebo for 12 days. All the prescribed medicines were manufactured by a Good Manufacturing Practice (GMP) – Certified pharmaceutical company and dispensed in globules sized 40.

As there was recurrence to the symptoms, 50 millesimal potency was prescribed for the case which completely resolved the case.

**Prescription and Follow-up**

Table 1: Observations and Prescription

Date	Observations	Prescription
11/1/24	<ul style="list-style-type: none"> <li>• Itching markedly reduced</li> <li>• No new eruptions noted</li> <li>• Previously existing eruptions reduced.</li> <li>• Sleep sound and refreshing</li> </ul>	Placebo 4 pills thrice daily 15 days
29/01/24	<ul style="list-style-type: none"> <li>• Red patches reduced significantly</li> <li>• Itching present mildly all over the body (reduced compared to earlier.)</li> <li>• No fresh eruptions.</li> <li>• Appetite – adequate</li> <li>• Sleep – sound</li> </ul>	Placebo 4 Pills thrice daily for 30 days
9/2/24	<ul style="list-style-type: none"> <li>• Red patches on left hand</li> <li>• Itching present on all over body in the last 4 days</li> <li>• Appetite – adequate</li> <li>• Sleep – sound</li> </ul>	Phosphorus 200 single dose Placebo 4 Pills thrice daily for 15 days
22/2/24	<ul style="list-style-type: none"> <li>• No new eruption on body</li> <li>• No itching present</li> <li>• Appetite - adequate</li> <li>• Sound sleep</li> </ul>	Placebo 4 Pills thrice daily for 15 days
12/3/24	<ul style="list-style-type: none"> <li>• No new complaint</li> <li>• Appetite adequate</li> <li>• Sound sleep</li> </ul>	Placebo 4 Pills thrice daily for 30 days
25/4/24	<ul style="list-style-type: none"> <li>• No any new complaint</li> <li>• Feels better.</li> </ul>	Placebo 4 Pills thrice daily for 30 days
27/06/24	<ul style="list-style-type: none"> <li>• Rash on skin all over the body</li> <li>• Burning present</li> <li>• Itching present</li> <li>• Sound Sleep</li> </ul>	Phosphorus 1M one dose Placebo 4 Pills thrice daily for 30 days
12/07/24	<ul style="list-style-type: none"> <li>• Rash on all over the body since morning</li> <li>• Itching Aggravate in morning</li> <li>• Appetite adequate</li> <li>• Sound sleep</li> </ul>	Phosphorus 0/1 in distilled water Placebo 4 Pills thrice daily for 7 days

18/7/24	<ul style="list-style-type: none"> <li>• Fever came 100<sup>0</sup> C</li> <li>• No new rash</li> <li>• No itching present</li> <li>• Sound sleep</li> </ul>	Phosphorus 0/1 in distilled water Placebo 4 Pills thrice daily for 30 days
16/08/24	<ul style="list-style-type: none"> <li>• No new complaint</li> <li>• Feels better</li> <li>• Sound sleep</li> </ul>	Phosphorus 0/1 in distilled water Placebo 4 Pills thrice daily for 30 days
2/01/26	<ul style="list-style-type: none"> <li>• Rashes all over the body completely relieved</li> <li>• No patches has been appear since 1 year</li> <li>• Cold and coryza since 10 days</li> <li>• Nose blocked</li> <li>• Appetite reduced</li> </ul>	Phosphorus 1m one dose. Placebo 4 Pills thrice daily for 7 days

**Table 2- Assessment of outcome with Modified Naranjo Criteria<sup>9</sup>**

Scoring Parameters	YES	NO	Not Sure or N.A.	Score
Was there an improvement in the main symptom or condition for which the homeopathic medicine was prescribed?	+2	-1		+2
Did the clinical improvement occur within a plausible timeframe relative to the drug intake?	+1	-2	0	+1
Was there an initial aggravation of symptoms?	+1	0	0	0
Did the effect encompass more than the main symptom or condition (i.e., were other symptoms ultimately improved or changed)?	+1	0	0	+1
Did overall well-being improve? (suggest using validated scale)	+1	0	0	+1
Direction of cure: did some symptoms improve in the opposite order of the development of symptoms of the disease?	+1	0	0	0

Direction of cure: did at least two of the following aspects apply to the order of improvement of 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	0	0	0
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?	+1	0	0	0
Are there alternate causes (other than the medicine) that—with a high probability— could have caused the improvement? (Consider known course of disease, other forms of treatment, and other clinically relevant interventions)	-3	+1	0	+1
Was the health improvement confirmed by any objective evidence? (e.g., laboratory test, clinical observation, etc.)	+2	0	0	+2
Did repeat dosing, if conducted, create similar clinical improvement?	+1	0	0	+1

Total Score MONARCH = +9

Figure 2 – Urticaria Patches After Treatment



### Discussion –

Chronic urticaria poses a significant therapeutic challenge due to its recurrent nature, unpredictable triggers, and frequent dependence on suppressive conventional medication. From a homoeopathic standpoint, urticaria is not merely a cutaneous manifestation but an external expression of an internal dynamic disturbance of the vital force. The present case highlights the effectiveness of individualized homoeopathic management using the 50 millesimal (LM) potency in addressing both the symptomatic and constitutional aspects of the disease.

The patient had a history of recurrent urticarial eruptions with only partial and transient relief from antihistamines, suggesting suppression rather than true resolution of the underlying disorder. Homoeopathic case-taking emphasized the totality of symptoms, including modalities, triggering factors, and the patient's general and mental state. This holistic evaluation guided the selection of the simillimum, aligning with Hahnemann's principles as outlined in the *Organon of Medicine*. The choice of LM potency was particularly significant, as these potencies are known for their gentle yet sustained action, making them suitable for chronic conditions with hypersensitive responses such as urticaria.

LM potencies allow for frequent repetition with minimal aggravation, thereby maintaining a continuous therapeutic stimulus to the vital force. In this case, gradual and consistent improvement in the frequency, intensity, and duration of urticarial episodes was observed, without the occurrence of suppressive effects or adverse reactions. The patient's overall sense of well-being and reduction in dependency on conventional medication further supports the curative nature of the intervention.

The assessment of treatment outcome using the Modified Naranjo Criteria for Homoeopathy (MONARCH) yielded a score suggestive of a probable causal relationship between the homoeopathic intervention and clinical improvement. This objective evaluation strengthens the credibility of the therapeutic response and reduces the likelihood of spontaneous remission or placebo effect.

This case underscores the relevance of individualized homoeopathic prescribing and the clinical utility of 50 millesimal potencies in chronic urticarial case. It demonstrates that homoeopathy, when practiced in accordance with classical principles, can offer a safe, effective, and sustainable approach to managing chronic allergic conditions, thereby contributing meaningfully to patient-centered care.

**Result:**

Marked clinical improvement was observed following individualized homoeopathic treatment. The intensity and frequency of urticarial eruptions reduced significantly, with sustained relief and no recurrence during follow-up. Causal attribution assessed using the Modified Naranjo Criteria for Homoeopathy MONARCH yielded a score of +9, supporting a probable therapeutic relationship.

**Conclusion:**

This case demonstrates the effectiveness of individualized homoeopathic treatment using LM potency in urticaria, highlighting holistic case analysis and MONARCH-supported clinical improvement with sustained symptomatic relief.

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