



"From Partial Relief To Cure: A Homeopathic Case Of Eczema Refined By Similimum Selection" - A Case Report.

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Abstract:

Background:

Eczema is a chronic inflammatory skin disorder marked by erythema, exudation, scaling, lichenification, and pruritus. Conventional therapies provide palliation but not lasting cure. In homoeopathy, skin manifestations are seen as external expressions of internal imbalance, requiring constitutional treatment with the similimum. Frequent repetition of partial similimum remedies may offer temporary relief but risks suppression or aggravation.

Case:

A 52-year-old female presented with chronic eczema on the posterior ankles for seven years, with itching, burning in the evening, and purulent discharge after scratching. The complaint followed marital discord, leading to grudge toward her husband. Initial prescriptions of Natrum muriaticum, Sulphur, and Natrum sulphuricum produced only transient improvement. On revisiting the case, the mental symptom of "grudge" guided the prescription of Ammonium muriaticum.

Intervention:

Ammonium muriaticum 200C was prescribed, resulting in significant improvement: itching subsided, cracks healed, and the patient reported mental relief and overall well-being. Sustained remission was observed in follow-ups.

Discussion:

This case illustrates the limitations of repeated partial similimum prescriptions, in contrast to the lasting results of the true similimum, correspond with Hahnemann's Organon and Kent's philosophy of cure.

Conclusion:

case analysis, precise interpretation of rubrics and prescription of the similimum based on the totality of symptoms are essential for lasting cure, whereas reliance on partial similimum only palliates.

KEYWORDS: Eczema, Homoeopathy, Similimum, Partial Similimum, Cure.

INTRODUCTION

Eczema is delineated by superficial skin inflammation manifesting as erythema, edema, exudation, scaling, lichenification, and frequently accompanied by pruritus¹. Eczema is derived from the term meaning to 'boil out,' as the skin exhibits characteristics reminiscent of being 'boiling out' or 'oozing out'. The diagnosis of eczema is primarily clinical, established through the identification of the following characteristics: Acute manifestations present as itchy, exudative plaques, encircled by papulovesicular formations, pustules, or crusts, whereas chronic manifestations are characterized by itchy, lichenified, and scaly plaques². Management of eczema involves the avoidance of known irritants, alongside the conventional application of

emollients for skin hydration. Topical corticosteroids constitute the mainstay of treatment, with second-line interventions for severe, non-responsive cases including ultraviolet phototherapy, among other modalities. According to the principles of homeopathy, skin manifestations serve as reflections of underlying internal derangement; thus, treatment should be approached constitutionally to ascertain the precise etiology of the dermatological presentation rather than merely suppressing it through local interventions, which may precipitate more severe systemic complications³. Eczema is invariably of constitutional origin, and both the patient and the physician should be reassured by the understanding that the vital force has extricated the condition from within, manifesting it as an eczematous eruption upon the integument⁴. which should be treated by homoeopathic similimum to achieve cure. However, in practical clinical situations, we often encounter cases where only a **partial similimum** is identified, a remedy covering a portion of the symptomatology but not the complete essence of the case. While such prescriptions may offer temporary relief or partial amelioration, frequent repetition of a partial similimum can sometimes lead to suppression, aggravation, or stagnation in the case progress. This raises an important question: what are the comparative outcomes between prescribing the **true similimum** versus the **partial similimum**? The significance of understanding this distinction lies in the precision of correctly interpreting data with refined differential knowledge of rubrics, improving case management, minimizing unnecessary repetition of remedies, and emphasizing the curative potential of the well-selected similimum. The present case highlights the importance of identifying the similimum remedy with the help of Homoeopathic Repertory and Materia medica, demonstrates the contrasting effects of frequent repetition of a partial similimum in clinical practice.

MATERIAL AND METHOD

Case, A 52 years female patient, who presented to the Outpatient Department of JIMS Homeopathy Medical College & Hospital, located in Shamshabad, Telangana, on the 24th of January, 2024, with a primary complaint of itching on the posterior aspect of her ankles bilaterally, over a duration of seven years.

CASE SUMMARY

The patient reported the onset of bilateral pruritus on the posterior aspect of her ankles, which commenced gradually and was accompanied by a burning sensation that aggravates during the evening hours; additionally, upon scratching, there was a discharge of purulent material.

PAST HISTORY

The patient has a medical history for hypertension, diagnosed seven years ago, for which she has been receiving allopathic treatment.

FAMILY HISTORY

Her father died due to Cancer and her mother has no apparent medical history died due to old age.

PHYSICAL GENERALS

The patient having a moderate appetite, normal thirst, and maintains a regular bowel habit. She experiences profuse perspiration localized to the forehead, feeling refreshed upon awakening, attained menopause at the age of 46, and her thermal state is hot.

MENTAL GENERALS

She began to develop her complaint after she and her husband had disputes and she found that he had an extramarital affair. She suffered tremendously within and found it difficult to communicate her feelings, which led her to hate her husband. She didn't easily open up during the narration; her expressions were mild in nature.

CLINICAL FINDINGS

On clinical examination, the patient's pulse rate was 83 beats per minute, her body temperature was recorded as 98.6 degrees Fahrenheit, and her blood pressure was 130/80 mmHg.

Dermatological examination revealed vesicular eruptions and exudate in the bilateral posterior ankle regions. There were no scaly plaques present, though pigmentation changes were noted. In light of the clinical history and examination findings, a diagnosis of Chronic Eczema was established.

REPERTORIAL TOTALITY

S. No	Symptom	Interpretation into Rubric
1	Ailments from disputes with husband	Ailments from Discords between
2	hate her husband.	Hatred
3	Suffered tremendously within and found it difficult to communicate her feelings	Embittered, exasperated
4	Not easily opened up during narration	Introvert
5	Mild expressions	Mildness

TABLE 1: REPERTORIAL TOTALITY**REPERTORIAL INTERFACE**

Repertorization was done with complete repertory in Zomoeo software. 3.0.







Remedy Name	Nat-m	Sulph	Aur-m-n	Nit-ac	Lyc	Puls
<u>Totality</u>	16	14	12	12	12	12
<u>Symptoms Covered</u>	5	5	5	5	4	4
Kingdom						
[Complete] [Mind]Discords agg., ailments from: (39)	3	1	1	1	3	
[Complete] [Mind]Hatred: (127)	4	4	3	4	3	3
[Complete] [Mind]Embittered, exasperated: (49)	1	3	1	1		1
[Complete] [Mind]Introverted: (243)	4	3	4	3	2	4
[Complete] [Mind]Mildness: (138)	4	3	3	3	4	4

FIG.1 REPERTORIAL SHEET**INTERVENTION**

Natrum mur was given as 1st prescription. The potency was selected according to the susceptibility of the patient. Single dose of Natrum muriaticum 200 was prescribed followed by Rubrum 30/BD/ 21 days on 24.01.24. followed by Sulphur 200, and Natrum sulphuricum 200 which produced temporary relief, therefore the case reviewed again and Ammonium muriaticum 200C was prescribed with sustained remission.

FOLLOW-UP AND OUTCOME

DATE	CHANGES IN SYMPTOMATOLOGY	PRESCRIPTION
16.02.24	Patient feeling better. with his bodily level, itching reduced than before.	Sac lac 1 dose Rubrum 30/ BD/ 21 days
08.03.24	No any new complaints, but itching present on & off, leads to scratching, sleep disturbed due to itching	Nat mur 2001 dose Rubrum 30/BD/ 21 days
03.04.24	Itching still persist, better for some times and recurs Sleep- improved by 60 % No new complaints	Nat mur 2001 dose Rubrum 30/BD/ 21 days
24.04.24	Itching in ankles aggravated, sleeplessness due to itching, formication sensation, scratching leads to bleeding, cracks on soles	Sulphur 200 1 dose Rubrum 30/ BD/ 21days
15.05.24	Better after previous visit, itching reduced but still present, cracks SQ.	Sac lac1 Dose Rubrum 30/BD/ 21 days
05.06.24	Complaint of itching still present, eruption appeared on medial side of both legs, more on left side which is reddish in colour.	Nat Sulph 200 1Dose Rubrum 30/BD/ 21 days
28.06.24	Itching in ankle SQ, Cracks disappeared 50%	Sac lac1 Dose Rubrum 30/BD/ 21 days
19.07.24	Skin becomes hard, cracks on soles reduced. itching on & off, No new complaints	Sac lac1 Dose Rubrum 30/BD/ 21 days
13.09.24	Cracks on soles felt better for 2 weeks will taking medicine but increased again, slight bleeding followed by scratching. Hence the case reviewed again and observed that she is having strong grudge on her husband due to his act	Am-mur 200 1 Dose Rubrum 30/BD/ 21 days
18.10.24	Cracks and itching on bilateral ankle better by 50% < on exposure to water Burning sensation reduced	Sac lac1 Dose Rubrum 30/BD/ 21 days
22.11.24	Complaints reduced, patient feels satisfied, no itching. No new complaints.	Sac lac1 Dose Rubrum 30/BD/ 21 days

TABLE 2: FOLLOW-UP AND OUTCOME

PHOTOGRAPHIC ILLUSTRATION AS EVIDENCE BASED RESULTS**FIG-2. BEFORE TREATMENT****FIG-3. FOLLOW UP - 24.04.24**

Itching in ankles aggravated, sleeplessness due to itching, formication sensation, scratching leads to bleeding, cracks on soles

**FIG-4. FOLLOW UP – 16.08.24**

Cracks on soles reduced, itching reduced than before, but < on scratching



Fig-5. FOLLOW-UP – 18.10.24
Cracks and itching on bilateral ankle better.

DISCUSSION

The present case illustrates the marked difference in the clinical course when a patient is treated with the similimum as opposed to the frequent repetition of a partial similimum. This observation is well supported by the foundational homoeopathic philosophy.

Hahnemann, in the *Organon of Medicine* (§§ 153, 162), emphasized that the remedy must be selected on the basis of the most striking, peculiar, and characteristic symptoms, which together form the totality of the case. Only such a prescription, the true similimum, can bring about a gentle, rapid, and permanent restoration of health. When a remedy covers merely a fragment of the case, its curative potential is necessarily limited⁵.

The frequent repetition of a partial similimum often leads to either palliation or suppression. Hahnemann warns in §§246–248 about the dangers of unnecessary repetition without observing the patient's response⁵.

Similarly, Kent, in his *Lectures on Homoeopathic Philosophy*, asserts that if a prescription needs to be repeated often without sustained improvement, it is a strong indication that the chosen remedy is not the similimum. In such circumstances, the vital force may be disturbed rather than harmonized, leading to either aggravations or a standstill in cure⁶.

Boenninghausen also cautions against prescribing on fragmentary symptoms, noting that only the totality can lead to the true curative remedy. His *Therapeutic Pocket Book* methodology underscores that partial similarity can misguide the prescriber, yield temporary relief but fail to initiate true cure⁷.

- In this case as Natrum mur given temporary relief for short span later complaints started to aggravate therefore anti-miasmatic prescription Sulphur was administered followed by Natrum sulph as synthetic prescription also given only partial relief, later the case revised again and identified the characteristic mental symptom as Grudge not just hatred then based on this characteristic mental Ammonium mur was selected as Similimum to this case and administered. According to Jan Scholten in *Homoeopathy and Minerals*, it is clearly mentioned that Nat mur doesn't have so much hate, they are more inclined to withdraw, where Am-mur have a grudge⁸.
- **Hatred** feels powerful in the moment, an adrenaline surge. It's rooted in threat or disgust.
- **Grudge** is ruminative, it feeds on memory and ego injury. It's tied to betrayal more than disgust.

In contrast, the administration of the well-selected similimum in this case resulted in a marked general improvement, mental and physical concordance, and a lasting curative response.

CONCLUSION

Therefore, this case illustrates not only the limited and potentially adverse outcomes of frequent repetition of a partial similimum but also the profound and lasting results achievable when the true similimum is administered with proper regard to potency and repetition. This serves as a reminder to the homoeopathic physician that genuine cure rests not in palliation through partial similarity, but in the careful, patient-centered search for the similimum that resonates with the totality of the case.

CONFLICT OF INTEREST

Not available

FINANCIAL SUPPORT

Not available

DECLARATION OF PATIENT CONSENT

Patient consent was taken for images to be reported for this article.

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