



URTICARIA & HOMOEOPATHY

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ABSTRACT :

Urticaria is a common skin condition that, though rarely fatal, can seriously impair a patient's quality of life. Urticaria is caused by cutaneous mast cell activation and degranulation disease triggered by numerous stimuli. The condition is defined as chronic if it persists for more than 6 weeks. Self-remission is common in acute Urticaria, but in chronic cases less than half of patients achieve remission within 1 year.

KEYWORD: Homoeopathy , Urticaria or Nettle Rash

INTRODUCTION:

The term Urticaria is defined as a transient eruption of circumscribed , pinkish, white or reddish elevation of oedematous and usually itchy swellings of the dermis. The other names given are nettle rash, hives or wheals. These lesions last for a few hours but not exceeding 48 hours.

Urticaria involves dilatation of vascular structure in the superficial dermis , while angioedema originates from the deeper dermis and subcutaneous tissue .



WHEELS/HIVES



DERMATOGRAPHISM

Classification:

1. Acute Urticaria : < 6 weeks
2. Chronic Urticaria: >6 weeks at least 2 episodes /week and persist for > one year

Others:

1. Physical Urticaria: Physical stimulus cold , heat, solar, UV radiation, exercise, mechanical irritation.
2. Dermatographism: Linear wheal with surrounding erythema at the site of brisk stroke with a firm object. Duration generally is 4 -5 years.
3. Pressure Urticaria: Shoulder strap or belt running (feet) or manual labour (hands) with chronic idiopathic Urticaria.
4. Cholinergic Urticaria : pruritic wheals of small size(1 - 2 mm): large area of erythema are precipitated by fever, hot bath or shower or exercise .
5. Exercise induced anaphylaxis: exertion alone or food ingestion prior to exercise, IgE specific for alpha-5 gliadin, a component of wheat.
6. Solar Urticaria : subdivided into 6 groups specific portion of the light spectrum.
7. Cold Urticaria: exposed to low ambient temperature or cold object , vascular collapse with immersion of cold water(swimming).

8. 8.Vibratory Urticaria & angioedema: Occupational exposure or idiopathic, accompanied by cholinergic Urticaria. Inherited and syndromic conditions mutations in the NLRP3, master cell mechanoreceptor ADGRE2.

PREDISPOSING FACTORS AND ETIOLOGY:

Acute :

Drug reactions
NSAIDS,ACE inhibitors,contrast media, antibiotics,anti microbials
Food reactins-Sea food,mushroom,wheat,egg,milk,etc.
Inhalation or contact environmental allergens
Transfusion reactions
Stinging &biting insects
Toxin[scombroid]
Infections-viral,bacterial,parasitic

Chronic :

Idiopathic –subset with autoimmune component
Collagen vascular disease-urticarial vasculitis
Physical stimuli –Dermatographism, cholinergic urticaria ,vibration,cold,pressure,water,sun
Mastocytosis [cutaneous or systemic]
Hereditary –HAE,C3 inhibitor deficiency,CIAS1
Schnitzler's syndrome
Hyper eosinophilic syndrome
Gleich's syndrome

PATHO PHYSIOLOGY

Subcutaneous antigens low dose
Mast cell activation of Type I hypersensitivity, IgE , FCERI
Increased vascular permeability leads to localized swelling
Histamine as a mast cell mediator
Enhanced vaso dilatation and vaso permeability caused by plasma leakage and wheals formation Histamine stimulates nerve endings - pruritis – neuropeptide release-skin response (flareup)

CLINICAL PRESENTATION:

Raised patches, swollen and center pale clear distinct edges . wheal or nettle rashes. Itching and irritation with burning & stinging pain.Rashes occur disappear 12 -36 hours , and 2 -3 times per week or monthly persist.

Severe acute urticaria sympytoms :

Urticaria rashes spread rapidly throughout the body including the arms , legs, face around the eyes and mouth. Anaphylactic reaction / shock: Swollen face , lips and eyes similar to angioedema. Airway obstruction, asthma, nasal congestion and shortness of breath, chest tightness, low BP,nausea vomiting, abdominal pain and diarrhorea, dizziness,fainting fever, joint pain.

Diagnosis:

1. Clinical evaluation
2. Allergy blood test(specific IgE & total IgE)
3. Skin prick test
4. Full blood count test, ESR, Urea, LFT, Thyroid profile, Iron profile, ANA , skin biopsy, stool examination, ova ,cyst ¶sites, Hepatitis B&C, HIV, complement studies CH50, cryoproteins.

DIFFERENTIAL DIAGNOSIS:

1. Atopic dermatitis (eczema)
2. Contact dermatitis
3. Erythema multiforme
4. Pityriasis rosea
5. SLE

6. Urticaria pigmentosa
7. Urticaria vasculitis
8. Insect bite

MANAGEMENT:

Avoid allergy foods ,medicines and pollen dust, pet animals exposure, avoid stress.

COMPLICATIONS:

Anaphylactic shock, rarely death
 Angioedema

MIASMATIC BACKGROUND:

Psora (Acute)
 Tubercular miasm (recurrent tendency)

HOMOEOPATHIC MANAGEMENT:

1. **Apis mellifica**- Nodular raised eruption with burning or rarely stinging pain. There is flaring of the surrounding skin and the wheals cause great itching . The causative factor maybe anger or rage after consuming wine or during an episode of fever. The patient is basically thirstless. The symptoms are < at night by warmth of room and change of weather. The symptoms are relieved by cold application or even cold environment.
2. **Rhus tox**- Rosy coloured wheals on the skin developed from getting wet or river bathing in hot summer or even from profuse sweating in a febrile episode. Itching is marked in the night. The patient becomes very restlessness on account of itching and there is mild amelioration by motion and in a warm place. In such a patient, there is no reaction even after repeating a few potencies of Rhustox, then, one may resort to Bovista.
3. **Bovista**- Dermatographism- blunt instruments leave a deep impression on body like a fresh tattoo. Urticaria over the whole body causes itching on getting warm , on excitement waking in the morning , worse from bathing and alternating with either rheumatic stiffness, palpitation, diarrhea or metorrhagia.
4. **Nux vomica** – Over sensitive skin urticaria caused by intake of stimulants or gastric upset and consumption of meat. It is characteristically < in the early morning and by exposure to dry cold air but better at the onset of damp wet weather. The Urticaria begins with redness with blotchy slight bluish spots . It is accompanied with mild burning and itching.
5. **5.Urtica urens (or) Sting nettle**- Red raised blotchy eruptions occur on whole body especially after bathing , exercise or in a warm environment. Causation- first degree superficial burns consumption of shell fish or oyster, bee stings and sunburn(photosensitivity) . Urticaria alternates with either rheumatism or pinworms. The Urticaria follows a strict seasonal modality and occurs annually. Angioneurotic oedema on the face and jaws after eating crabs or oyster. Eruption and itching disappear , patient lies down , reappears immediately on raising from recommended posture.
6. **Anthrakoli**- Chronic nettle rash , papules with considerable itching. Eruptions occur on the scrotum, hands ,tibia, shoulders and soles. < full moon days. Urticaria in diabetes where there is insatiable thirst, diuresis and increased appetite.
7. **7.Xerophyllum** - The skin becomes, red with intense itching and burning .Urticaria around knees.
8. **8.Chloralum Hydratum**- Urticaria spirituous liquor, hot drinks, wheals come on from a chill, better warmth.
9. **9.Copaiva**- Hives with fever and constipation. Chronic urticaria in children.
10. **Pulsatilla** – Urticaria after rich food with diarrhea from a delayed menses, worse undressing.
11. **Fragaria**- Strawberry anaphylaxis, strawberry produced symptoms of poisoning in susceptible individuals as urticarial rashes . Swelling of whole body.
12. **Calc carb** < by cold air. Chronic type rash disappears slightest exposure or fresh air .

RUBRICS:

- Skin,eruptions , urticaria , night –Apis
- Skin, eruptions, urticaria, alternating with asthma –Calad.
- Skin, eruptions ,urticaria, altenating with rheumatism Uritca-u
- Skin, eruptions, urticaria, cold air, in –Rhustox
- Skin, eruptions, urticaria, cold bath , from taking –Dulc
- Skin , eruptions, urticaria, fever during- Apis, Ign, Rhust.
- Skin, eruptions, urticaria, meat after –Anti –c
- Skin , eruptions, urticaria, perspiration during-Apis, Rhust

- Skin, eruptions, urticaria, wine from –Chlol

CONCLUSION:

Homoeopathy offers excellent treatment for urticaria. In a holistic approach to the homoeopathic system of medicine, skin diseases are not considered local diseases. Treatment of urticaria is not only dependent on a character but also on periods and condition aggravation, generals and particulars considered. The above therapeutics medicines are used frequently in urticaria with the best results. Other individualized homoeopathic medicines can also offer significant result in urticaria.

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