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ROLE OF MURPHY REPERTORY IN THE MANAGEMENT OF ECZEMA

Dr. Shubham Sushilkumar Jain¹, Dr. Bhagyashri Narkhede², Dr. Pankaj Vishwanath Chaudhari³

- ^{1.} M.D. (Homoeopathy), Assistant Professor, Department of Repertory.
- ² M.D. (Homoeopathy), Assistant Professor, Department of Physiology Including Biochemistry.
- ^{3.} M.D. (Homoeopathy), Assistant Professor, Department of Forensic Medicine & Toxicology.

Shri Chamundamata Homoeopathic Medical College & Hospital, Jalgaon - 425001 (M.S.) INDIA

E-mail: shubhamsjain7020@gmail.com1, Dr Narkhede@homoeopathy.ac.in2, dr.pc2512@gmail.com3

ABSTRACT:

Eczema is a very common skin disease that affects a large percentage of the world's population even in our country. Despite the frequency of eczema; Society and the medical community often consider it a minor dermatological condition. However, eczema is a chronic skin disease that causes many psychosocial stress and stigmatization feelings, can be serious tribes and have an adverse impact on the quality of life.

Murphy Repertory has been designed to be a modern, practical and easy -to -use reference guide Homeopathic Materia Medica. This alphabetical repertoire contains a thousand new clinical sections, especially in the field of mental disorders, emergencies, infections, pathologies and organs. Also consistent alphabetical formatting (chapters, sections and sub-section) with updated medical terminology and modern disorders. Murphy repertoire includes all the original Kent's repertory and adding from Allen, Hering, Boericke, Kent, Kunzili, Phatak, Repertories, etc.

Clinically, in cases of eczema of homeopathic medicines, according to Murphy's repertoire, it turned out to be well. Homeopathy is a science that is based on Similia Similibus Curentur, ie like treatment. He has his own aspect, his own core and his own picture. I appreciated more to consider the psoric cause in understanding cases of eczema and the best results with homeopathic institutional medicine. This preview functioned as an inspiration for my ideas and to select this study for eczema management.

 $\textbf{KEYWORDS:} \ \textbf{Eczema, Murphy Repertory, Homoeopathic Repertory, Homeopathy and Homeopathic Medicine.}$

INTRODUCTION:

Eczema is a very common skin disease that affects a large percentage of the world's population even in our country. Despite the frequency of eczema; Society and the medical community often consider it a minor dermatological condition. However, eczema is a chronic skin disease that causes a lot of psychosocial stress and stigmatization feelings that can be serious strains and have an adverse impact on the quality of life.

Homeopathic treatment treats the cause and not effects. He is a man who is ill and not his body and in fact needs to be treated1. It is the concept of individualization comes into practice, where the physical and mental characteristics of the individual are accepted.

With regard to endogenous factors in atopic dermatitis, detailed case of persons, diagnosis of persons, diagnosis of disease and treatment of cases, both specific and general. Therefore, this study has been made to develop a suitable homeopathic approach in effective control in atopic dermatitis.

Homeopathic science is engaged in the treatment of patients with complete Symptoms and individualization. This study of the role of Murphy's repertoire in the treatment of eczema is an attempt to emphasize the role of Murphy's repertoire in choosing an eczema drug. Murphy Repertory helps in choosing a drug more Exactly because there are a large number of options to include corrective measures from the section to their mother and restructuring feelings and placement in the repertoire.

REVIEW OF LITERATURE:

Eczema is the term health conditions that lead the skin to inflammation or irritation. Atopic dermatitis or atopic eczema is known as the most common type of eczema. Atopic is pointed to a group of diseases with a often enlarged tendency to create other allergic conditions such as asthma and hay hover. Eczema is almost always itchy no matter what any part of the skin is affected.

Sometimes itching begins first after a rash occurs, but when this happens, the rash most often appears on the face, back of the knees, wrist, hands or legs. Itching of the skin can lead to red redness and swelling and even more itching.

Eczema is not contagious and the reason for eczema is unknown. This is probably due to both genetic and environmental factors. Over time, eczema may improve or deteriorate, but usually a long -term disease.

Atopic dermatitis is most common in children and children, but can also have adults. As children with atopic dermatitis age, this problem can improve or disappear. Sometimes, however, the skin persists and is easy to irritate.

The treatment can consist of medicines and good skin care. We can prevent some eczema by avoiding things that irritate the skin such as certain soaps, fabrics and lotions

Things that are allergic, such as some food, pollen and animals. Atopic dermatitis commonly occurs during childhood and continues to childhood, there are times when the condition deteriorates, is called flare.

The ignition is followed by healing of the skin. During this period there may be no signs of atopic dermatitis called remission. Remise may persist weeks, months or even years. Some children grow atopic dermatitis and others will still have it when they are adults. The flares in adults tend to be less severe. Some grow atopic dermatitis. Others will still have it when they are adults. The flares in adults tend to be less severe.

It is more likely to have atopic dermatitis or eczema if it has a family member. These conditions are not contagious. This means they can't catch them from other people. Although it is already stated that other causes of eczema are not known.

Simply looking for a doctor will be able to diagnose eczema. As part of the examination, it will also review the patient's medical history. It is important to tell the doctor whether the patient has allergies or asthma. The doctor may order blood and skin tests to exclude other conditions.

Without knowing the exact reason for eczema or atopic dermatitis, they cannot avoid them. They cannot be cured, but can be controlled. One can also learn to avoid things that trigger him.

Some things that can irritate the skin include:

Household cleaning agents soap after shaving lotions

henzine

Terpentine and other solvents

The patient should try to avoid contact with things that can help with eczema outbreak. Soaps and humidity may be the reason for skin irritation. One has to wash your hands only if necessary. One has to use a fine uninhabited soap, especially if it has eczema on the hand. After washing, we have to dry them completely.

The patient must wear vinyl or plastic gloves for work that requires the patient to have hands in the water. Also wear gloves when his hands are exposed to everything that can irritate the skin of the patient. The patient must occasional breaks and remove gloves. This prevents the accumulation of sweat inside the gloves.

During the winter, the patient should wear gloves when he goes out. Cold air and low humidity can dry the skin. Dryness can worsen eczema.

The patient must wear cotton clothing or cotton mixture. Wool or some synthetic fabrics may irritate the skin.

The patient should only bathe with gentle soap with a small amount of soap and maintain the water temperature in the cold or warm, but not hot. Soaking in a short bath for a short time can be good for the skin. This allows the outer layer of the skin to absorb water and less dry. Soak at least 15 to 20 minutes. Then without rubbing the skin with a soft towel to dry the skin.

Immediately after drying, the patient should use a humidifier on the skin. This helps to seal moisture.

The humidifiers help keep the skin soft and prevent the skin from cracks. A simple humidifier is the best; Avoid fragrant humidifiers and humidifiers with lots of other ingredients. Ordinary oil jelly is a very good cheap humidifier (such as petrolatum).

The use of humidifiers that are greasy than creamy are more advantageous because the creams usually have more preservatives.

Regular use of the humidifier can help prevent dry skin, which is common in winter.

Excessive heat and sweat and sweat can irritate the skin and itching. The patient must try to avoid activities that make it hot and sweaty.

The patient should not scratch the irritated area of the skin, even if itch itch. Scratching can break the skin. Bacteria can easily enter these breaks and can lead to infection. The moistening of the skin will help to prevent itching.

Eczema may ignite when the patient is stressed. Stress reduction techniques can help. Changes in activities can also be useful to minimize daily stress. The area that had eczema can easily re-irritate, so it needs special care. Even after the recovery of the skin, we must continue to follow the above tips.

Synonyms

Neurodermatitis, endogenous eczema, dermatitis atopica, bending eczema, infantile eczema, Besnier'Sprurigo, prurigo diathsique

Historical aspects

Atopic dermatitis is a genetically determined disorder that has been described by Besnier as a "prurigo dithetique" in 1892 and was known in Europe as Besnier's Prurigo. In 1923, Coca and Cooke used the term "atopy" and the original description included asthma and hay fever. Later it was realized that Besnier's Prurigo also fell into this category. In 1933 they used the wise and sulberger this term "Atopic dermatitis" and in 1935 hills and sulberger clinical entity. Atopic dermatitis is a designation that is now used in general.

DEFINITION

The term atopic dermatitis describes chronic, inherited, relapsed, prritical condition of the skin with clinical features of xerosis, inflammation and lichenification.

EPIDEMIOLOGY

Atopic dermatitis is the main cause of morbidity in children in the world. The incidence of atopic dermatitis is unknown, but a prevalence of up to 2% and up to 20% was reported, the probable range is 5 to 10%. In older children and adult diseases, women affect more than men with an incidence ratio of 2:

1. Atopic dermatitis seems to be particularly common in Caucasus and Chinese and is more common in high -industrial countries and in higher social classes.

In August 2020 Anne Guertler, Nicholas Moellhoff, Thilo L Schenck, Christine with Hagen, Benjamin Kendzior, Riccardo e Giunta, French, Markus Reinholzof Germany wrote an article on the topic of ECZEMA employment Single Single and Single Single and Single Single and Single Chingem. -19 Intensive care unit ".

The aim of the article was to explore the advent of hand eczema during the COVID-19 pandemic in healthcare workers (HCW) directly involved in intensive care for patients with COVID-19 and HCW without direct contact with patients with COVID-19. Therefore, the aim of the research worker of this article is to raise awareness of the eczema of the hand and preventive measures that can be taken.

As a result of the COVID-19 focus, hygiene regulations were revised and a hand hygiene in the background of the abstract has been intensified.

As a method, the survey was carried out between 114 HCWS in one surgical center and on the unity of intensive COVID-19 care at the Ludwig University Hospital

Maximilian University in Munich, Germany. Participants were asked for a daily frequency of hand hygiene before and during the pandemic. Participants themselves reported on the procedure of handic eczema and related symptoms.

As a result, it was found that a significant increase in hand washing, disinfection and using the hands of the hands in all participants (p-value <0.001), yet has direct contact with patients with COVID-19. The high incidence of symptoms associated with acute manual dermatitis 90.4% was found in all HCW, while eczema itself was insufficiently reported (14.9%).

Finally, it was written that the increase in hand hygiene during the COVID-19 pandemic worsens the skin of the hands across all HCW, independent of direct intensive care of the affected patients.

Muzaitul Akma, Mustapa Kamal Basha, Hadree Abdul Majid, Nuguelis Razali, Abgariya Yahya research "the risk of eczema, infection of respiratory and respiratory tract in the first year of life: systematic review: systematic review:

Vitamin D concentration during pregnancy and birth.

Against the background of the abstract of the article, they wrote that allergic conditions and airway infections (RTI) are common reasons for morbidity and mortality during childhood. In pregnancy (mothers), early life (infants) and health results such as allergies and RTI in childhood, the relationship between vitamin D is not clear. Studies have so far demonstrated contradictory results.

The aim of the research was that this systematic overview focuses on the assembly and assessment of existing evidence of the context between the concentration of vitamin D in serum during pregnancy and the birth and development of eczema, wheezing and RTI in infants.

Data sources are PubMed, Medline, Proquest, Scopus, Cinahl, Cochrane Library and Academic Search Premier Databases have been systematically searched using specified search terms and keywords.

During pregnancy and the birth of articles on the context between serum concentrations of vitamin D and eczema, wheezing and RTI between infants (1-year-old and younger) published by March 31, 2019 were identified, verified and acquired.

As a result, it was written that the initial 2678 articles were screened ten met the criteria for inclusion and included in the final analysis. Regarding the relationship between the concentration of vitamin D maternal and umbilical blood blood and three health results-e-keys, halls and infants of the lipis, there were mixed and conflict results.

In conclusion, the current findings did not reveal any robust and consistent context between the state of vitamin D in early life and the risk of eczema, wheezing and RTI in infants.

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The aim of this study was to explore how rescue drugs were explained, reported and considered in randomized controlled studies (RCT) in populations of eczema and asthma.

This is an organized Overview of RCT phase II/III evaluating monoclonal antibodies for the treatment of chronic eczema or asthma. To recognize the eligible RCT, the search for Embase, Medline and Cochrane Central Registers of controlled attempts was carried out.

Sixty published RCTs have been recognized, of which 60 (100%) allow the use of rescue drugs, but only 28 (47%) reported its use. Twenty -seven (45%) articles preceded the ARM rescue use, with a diameter of 25%(95%CI(17%, 36%)) greater use in placebo shoulder. Nine (15%) experiments are involved in the analysis, which has modified the estimate of the primary effect of treatment for rescue drugs, but 8 of them used suboptimal access using a single imputation, including 4, which used the "last observation" after settling error data.

The use of rescue drugs in studies of eczema and asthma evaluating monoclonal antibodies is often allowed but not always reported. There is evidence of imbalance in the use of rescue between weapons, but few articles have committed themselves to effecting the effect of rescue treatment. In the investigation, the methods used were suboptimal, which could introduce distortion.

Some different types of eczema are:

Atopic- the term "atopic" concerns a personal and family tendency to develop eczema, asthma and/or Senna.

Contact- contact dermatitis is the most common type of skin-related skin disease.

Pompholyx adult seborrheeic

Infantile seborroreic

Discoid as Tatotic varicosis.

Pompholyx eczema:

Pompholyx eczema is an eczema in which small blisters developed on the hands and feet. These blisters are often itchy. Pompholyx comes from a Greek word for a bubble.

Eczema is a chronic skin disorder that includes scaly and itchy rashes.

The cause is unknown. The situation seems to occur at certain periods of the year.

One probably for the development of pompholyx eczema when:

One is stressed.

One has an allergy like a fever hay

One has dermatitis elsewhere

Hands are often in water or wet

One work with cement or other work that exposes his hands of chrome, cobalt or nickel

It seems that women are greater tendencies to develop more than men.

Symptoms of Pompholyx eczema:

On the fingers, hands and legs, small blisters filled with liquid called vesicles appear. Next to the edges of the fingers, fingers, palms and feet are the most common. These blisters can be very itchy. They also cause scaly spots of the skin that flakes or red, cracked and painful.

Scratching causes skin changes and skin reinforcement. Large blisters can cause pain or can be infected.

Tests and Tests:

The physician may be able to diagnose this condition by looking at the skin.

To exclude other reasons, such as psoriasis fungal infection, skin biopsy may be required.

If your doctor thinks that the condition may be due to an allergic reaction, allergies (patches testing) may be recommended.

Treatment:

Pompholyx may disappear himself. Treatment is aimed at controlling symptoms such as itching and prevention of blisters. The physician is likely to propose measures to care for himself.

Skin care at home

Maze or moistening the skin with ointment (such as oil jelly), creams or skin water should be kept moist.

Humidifiers

Should be without alcohol, smells, dyes, aromas or other chemicals.

It works best when they are applied to the skin that is wet or wet. After washing or bathing, double -click the skin and then apply the humidifier right away.

It can be used in different times of the day. For the most part, you can apply these substances as often as they must maintain soft skin.

Prognosis

Pompholyx eczema usually disappears without any problems, but the symptoms may return. Severe scratches can cause strong irritated skin. This makes it difficult to treat the problem.

Signs of infection such as tenderness, redness, heat or fever, a rash that does not go with simple home treatment.

Cheiropompholyx; Pedopompholyx; Dyshidrosis; Dyshidrotic eczema; Acral vesicular dermatitis; The alternative name is chronic dermatitis of the hand. Nummular eczema

Nummular eczema is dermatitis (eczema) with a symptom of itching, spots or coin -shaped spots occur on the skin. Nummular is a Latin derivative for "coin -like".

The cause of the nummular eczema is unknown, but there is usually a personal or family history:

Allergies

Atopic dermatitis

Things that can make the status worse consist:

Dry skin

Environmental irritant

Changes in temperature

Stress

Symptoms

Symptoms may consist of the following:

Lesion lesion in the shape of coins that are red, dry, itchy and scaly and appear on the arms and feet

Lesions can spread to the center of body lesions that may emerge and become crispy

Tests and Tests

The physician can usually diagnose this state of view of the skin and ask about family history.

Biopsy of the skin may be required to exclude other similar conditions. Allergic testing may be performed.

Prognosis

Nummular eczema is a chronic condition. Medical treatment and avoidance can help irritating substances to improve and cure symptoms.

Possible complications:

Secondary skin infections may occur.

When to contact a doctor?

If someone has symptoms of this condition.

It should also contact a doctor if: the symptom remains despite treatment.

You have signs of infection (such as fever, redness or pain)

There is no known way to prevent failures.

Eczema -discoid; Nummular dermatitis are alternative names.

Review Murphy Repertory:-

Murphy repertoire has been designed to be a modern, practical and easy -to -use reference guide to the homeopathic Materia Medica. This alphabetical repertoire contains thousands of new clinical sections, especially in the field of mental disorders, emergencies, infections, pathologies and organs. Also consistent alphabetical formatting (chapters, columns and sub-pebriky) with updated medical terminology and modern disorders. Murphy Repertory includes all

Original Kent's repertoire and additions from Allen, Hering, Boericke, Kner, Kunzli, Phatak, Repertories, etc., plus thousands of clinical updates from homeopathic and herbal research. Murphy.

New remedies and updates - new remedial measures added from modern demonstrations. Also additions from Allen, Boericke, Boenninghausen, Burnett, Clarke, Grimmer, Hahnemann, Hering, Julian, Kent, Kners, Kunzli, Nash, Phatak and many others.

New Chapters –Homeopathic Clinical Repertory-3RD Edition Chapters: Abdomen, Ankles, Arms, Back, Bladder, Bones, Brain, Breasts, Breathing, Cancer, Chest, Children, Chills, Clinical, Constitutions, Coughing, Dreams Face, Fainting, Feet, Female, Fevers, Food, Gallbladder, Generals, Glands, Hands, Head, Headaches, Hearing, Hearts, Hips, Intestinals, Joints, Ledures, Hand, Linfill, Legs, limbs, Liver, Lungs, Man, Mind, Muscles shoulders, vision, vacuum, vacuum,

New Clinical Rubrics-Addikce, A.I.D.S., Allergy, Anxiety Attacks, Asphyxia, Appendicitis, Autoimmune Disorders, Bipolar, Blood Pooping, Burns, Bubonic Plague, Cancer, Chemotherapy, Chemotherapy, Outdading, Outdads, Drugs Outdiation, drugs, outfolds, medicines, outfolds, outfo

Food poisoning, gastroenteritis, hepatitis, herpes, infection, infertility, influenza, malaria, mononucleosis, physical disease,

Multiple sclerosis, Parkinson's disease, radiation disease, retinitis, Sars, seasonal affective disorder, sea disease, surgery, tetanus, Tourette syndrome, typhoid, vaccination, vaginitis, etc.

Homeopathic therapeutics:

Introduction-

Graphite

"What is Pulsatilla in puberty, graphite is on climacteria."

Generality

Constipation, fat, cold and expensive, with delayed menstrual history, are easy to cool. Children endless, teasing, laughs. The decerto obesity could be present. Seen swollen genitals.

Mind-

fearsome; Uncreated, hesitates on little things.

SKIN

Skin junction; Behind the ears.

Nails, scars.

with scales or crusts.

Modality-

During and after menstruation, movement, suppression; eruption; Secrection, empty swallowing, fats, hot drinks, warm beds. - Night, wet legs, scratches. - Operated air; After entering, hot drinks, esp. Milk, eating, eruption, touch.

SULPHUR

The generality of the-action is centrifugal from the outer external affinity to the skin, where it produces heat and burning, with itching; It worsened with the heat of the bed.

They do not like water, dry and hard hair and skin, red holes, sinking feeling in the stomach at about 11 o'clock and sleeping cats; Always indicate sulfur homeopathically. patients. This is indicated for dirty, dirty people, susceptible to skin disability. Is a aversion to washing. Very red lips and face are observed that easily flush. Dirty, dirty people, susceptible to skin disability.

Mind.

Cholar, inventor, works day and night in clothing and a battered hat; Has long, uninhabited hair and dirty face; His study is unclean, it is disordered; Books and books of books are collected indiscriminately; There is no order creates this state of clutter, state of inconvenience, state of impurities, condition "care about how things go", and the state of selfishness, good appetite. The main feeling of sulfur is the feeling of contempt, suppression, postponing and criticism. The person is forced to feel humiliated, his pride is injured. Embarrassment is one of the main feelings in sulfur. Therefore, there is a constant effort, a struggle to reappear to be someone, know something, get respect.

Skin dry, scaly, unhealthy; He supports every little injury. The freckles are visible. Itching, burning; Worse scratches and washing.

Leather in local medicines. Pruritus, especially from heat. (2) Successful desire, hard knots insufficient

Modality-

Deterioration - pipes, bathing, milk, heated; excessive height; in bed; from Woollens etc., atmospheric changes, regularly speaking; 11a.m., Climacteric.

- Fullmoon, standing, twisting, reaching high, sweetness, looking down, crossing running water, vaccination, suppressed piles.
- -The air, movement, elaboration of affected limbs, sweating, dry warm weather, lie on the right side, walking, dry heat.

Gan

Generality

Parts are cold or emaaliaiate.

blowing to part.

SKIN

Eczema; unbearable itching; chillliness with pruritus; worse in bed. UlcerSitch and Burn, surrounded by vesicles and shining, fiery red courts with burning pain. Worse night, touch, wet weather.

Modality-

Worse -mut the air; proposals; wet; night, suppression, warm beds; Fire, movement, touch, mercury.

Better -Air air, wrap, heat from stove, eating.

CONCLUSION:

In the present thesis the aim of showing significance of psycho-somatic causes in understanding of eczema with Homoeopathic Remedies was achieved as results were found to be of a good success rate. Considering the total data, out of 30 cases 25 were recovered (83.33 %) and 5 were improving(16.66%) The objective of understanding how the psycho-somatic causes are significant came to be noted was made clear as in this study 30 patients of age group 1 year to 70 years with different types of Eczema were studied. The maximum representation were from the age group 21 to 30.

Out of the 30 cases studied 10 were of males and 20 were of females. The male & female % calculated was found to be 33% Male & 67% Female.

In this study of 30 cases, it was found that remedies and patients covering the Psora miasm (3 cases i.e 10%), 21 cases i.e 70% of Sycosis as a fundamental miasm are prominently found in this study, 6 cases i.e 20% cases were found of Tubercular miasm & 0% cases of syphilitic miasm.

Following individualization and holistic approach, for the treatment of the patient suffering from Eczema (and not treatment of Eczema in the patient) gives best results.

It is seen that characteristic mental state of the patient plays a vital role in deciding the remedy.

In some cases which responded to the indicated remedy, the patient stopped improving after a particular point then potency of the remedy was increased to obtain complete cure

From the 30 cases it is observed that 11 cases of eczema i.e. 36.66% hence it is a more common form of Eczema

It highlighted the role of diet and regimen in order to remove the maintaining cause and thereby facilitating rapid cure with homoeopathy.

The manner in which the significance of constitutional and psycho-somatic causes in understanding of with Homoeopathic Remedies actually helps in complete cure of the patient has been proved in my thesis and is to be of great help. The practical work done shows that it has relieved the patient to vast extent.

REFERENCES/BIBLIOGRAPHY:

- Kaplan Harold I., Sadock Benjamin J., SYNOPSIS OF PSYCHIATRY Behavioral Sciences Clinical Psychiatry, 6th edition, Published by Williams & Wilkins- 1991, Page no – 498, 515
- 2. C.R.Kothari,Research Methodology Methods and Techniques,Second Revised Edition,New age international (P) Limited,Publishers,Page 1 to 29
- 3. Marks Ronald, ROXBURGH"S Common Skin Diseases, 17th edition, published by Arnold-2003, Page no 105,106.
- Davidson Stanley/ edited by Colledge Nicki R., Walker Brian R., Ralston Stuart H., Davidson"s Principles & Practice of Medicine, 21st edition, Published by CHRCHILL LIVINGSTONE Elsevier -2010, International Edition Reprinted 2012, Page no. - 1257.
- 5. Dr.Khopkar Uday, Skin Diseases & Sexually Transmitted Infections, 6th edition, Bhalani Publisher-2009, Reprint-2013, Page no 92, 93.
- Marks Ronald, ROXBURGH"S Common Skin Diseases, 17th edition, published by Arnold-2003, Page no 105,106

- Hahnemamann Samuel, ORGANON OF MEDICINE, 6TH edition, Indian Books & Periodicals Publishers, Reprinted December 2009, Page no- 239,240.
- 8. Dr.Goel Sumit, a study on Organon of Medicine and homoeopatic philosophy, 1st edition- October 2013, 1st edition Reprinted July 2016, Published by Indian Books & Periodicals Syndicate, Page no 302.
- 9. Sankaran Rajan, THE SOUL OF REMEDIES, 1st edition, Homoepathic Medical Publishers, Published in 2014, Page no- 196
- Phatak S. R., Materia Medica of Homoeopathic Medicine, 2nd edition, B. Jain Publishers, Published in 2014, Page no 83,328, 329,480,481,676
- 11. Boericke William, Pocket Manual of Homoeopathic Materia Medica and Repertory, 9th edition, B. Jain Publisher, Published in 2015, Page No 79,309,620,622,
- Allen H. C., KEYNOTES Rearranged & Classified with Leading Remedies of the Materia Medica added with other Leading Nosodes & Bowel Nosodes, 10thedition, Indian Book and Periodicals Publishers, Published in 2009, Page no-48,49,50,181,182
- 13. Nash E.B., Leaders in Homoeopathic Therapeutics with Grouping and Classification, 4thedition, B. Jain Publishers, Published in August 2002. Reprinted- 2005, Page no- 94
- 14. Claudia M. Witt1, Rainer Lüdtke2 and Stefan N. Willich1, Homeopathic Treatment of Children with Atopic Eczema: A Prospective Observational Study with Two Years Follow-up, Published in 2008(www.ingentaconnect.com)
- 15. Andrea L. SUÁREZI, Jamison D. FERAMISCO2, John KOO3, and Martin STEINHOFF2, Psychoneuroimmunology of Psychological Stress and Atopic Dermatitis: Pathophysiologic and Therapeutic, Published in 2012, (www.ncbi.nlm.nih.gov)
- 16. Mahajan"s, Methods in Biostatistics for Medical student & Research
- 17. Workers, Eight Edition, Jaypee Brothers Medical Publishers, Page no 15,33
- 18. Cara Professional V1.4
- https://www.google.com/search?q=psycho+somatic&rlz=1C1CHWA_enIN785I
 N785&oq=psycho+somatic&aqs=chrome..69i57j0l5.7800j0j8&sourceid=chrom e&ie=UTF-8
- Saul McLeod, What is the Stress Response? published 2010,(https://www.simplypsychology.org/stress-biology.html