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Individualized Homoeopathic Treatment in Chronic Urticaria: A Case Report

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ABSTRACT

Background: Chronic urticaria (CU) is the recurrence of itchy wheals for more than six weeks. It disturbs sleep, work, social life and mood, so its impact is best judged with a quality-of-life tool such as the Chronic Urticaria Quality of Life Questionnaire (CU-Q2oL).

Case presentation: A 26-year-old male student presented on 17 July 2026 with 8 months of recurrent, raised, pale pink, itchy wheals over the whole body. They were worse in the evening and with heat, sun exposure, sweating and spicy food, and eased with cold water and open air. Cetirizine gave only temporary relief. He was also reserved, sensitive to criticism and aggravated by consolation, with large thirst at long intervals, aversion to fatty food and a hot thermal reaction. The baseline CU-Q2oL index was 61.95 (severe impact).

Intervention: After repertorisation, *Natrum muriaticum* 200 was given as a single dose on 17 July 2026 and repeated once on 20 August 2026. *Rubrum* (placebo) 30 TDS for 15 days was given at each visit.

Outcome: Over about 12 weeks the hive episodes fell by roughly 80–90% (one episode in the last 15 days at the visit of 13 October 2026), itching eased and no other complaints remained. The CU-Q2oL index fell to 23.91 (mild impact).

Conclusion: In this case, an individualized prescription based on the totality of symptoms was followed by marked clinical and quality-of-life improvement in chronic urticaria.

Keywords: chronic urticaria; individualized homoeopathy; *Natrum muriaticum*; CU-Q2oL; case report

Introduction

Urticaria is a skin condition of transient, itchy wheals, sometimes with angioedema. When episodes recur for more than six weeks it is called chronic urticaria. Antihistamines such as cetirizine are the usual first treatment, but relief is often partial or temporary, and patients may also be bothered by medication side effects.

Because the condition fluctuates and affects daily life, symptom counts alone do not show the full burden. The CU-Q2oL measures 23 items covering symptoms, daily activities, sleep, mood, appearance and treatment side effects, and gives a 0–100 index.

This case was recorded at the Department of Practice of Medicine, Swasthya Kalyan Homoeopathic Medical College and Research Centre, Jaipur. It forms part of a dissertation study, *"An interventional study to assess the role of individualized homoeopathic medicine in the cases of chronic urticaria using CU-Q2oL questionnaire"*. It is reported to show the case-taking, repertorisation, prescription and follow-up of one patient who improved under individualized treatment.

Patient information

Mr. A (identity withheld), a 26-year-old unmarried male student, attended the OPD on 17 July 2026 (OPD no. 18193/26). He is Sikh, lives in an urban area of Jaipur, belongs to the middle economic class and follows a non-vegetarian diet.

Presenting complaints

- **Onset and course:** urticaria for 8 months, with recurrent wheals over the whole body.

- **Nature of wheals:** raised, pale pink and painless; they occur especially in the evening (7–9 pm).
- **Sensation:** occasional stinging; temporary relief after taking cetirizine.
- **Itching:** whole body, more on the trunk and upper limbs. Scratching gives temporary relief, followed by burning.
- **Aggravated by:** heat, sun exposure, sweating, evening, spicy food.
- **Ameliorated by:** cold water, cold application, open air.
- **Concomitants:** nil significant.
- **Associated complaint:** recurrent allergic rhinitis for 3 years.

Past and family history

- **Past history:** typhoid. Vaccination done.
- **Family history:** maternal side, allergic rhinitis; paternal side, healthy.
- **Menstrual and obstetric history:** not applicable. **Sexual history:** not significant.

Mental and physical generals

Particular	Finding
Mind	Reserved and quiet by nature; sensitive to criticism; difficulty forgiving insults or emotional injuries; consolation aggravates
Appetite	2–3 chapatis per meal, three meals a day
Thirst	4–5 litres a day, in large quantities at long intervals
Desire	Spicy food
Aversion	Fatty food
Stool	Constipation (sometimes); hard, dry stool
Urine	5–6 times by day, 0–1 at night
Perspiration	Moderate; more on scalp or face
Addiction	Not significant
Bathing habit	Regular
Thermal reaction	Hot
Sleep	Disturbed due to itching
Dreams	Not significant

Clinical findings

The patient was of moderate build with a normal gait. General and systemic examination showed no abnormality beyond a slightly coated tongue.

Parameter	Finding
Height / weight / BMI	180 cm / 70 kg / 21.5 kg/m²
Temperature	98.6 °F
Pulse	82 per minute
Blood pressure	120/80 mm Hg
Respiratory rate	18 per minute
Pallor, icterus	Not present

Parameter	Finding
Lymph nodes	Not palpable
Tongue	Slightly coated
Nails	Pinkish
Skin	Healthy at examination

Systemic examination: Nervous system, deep tendon reflexes normal and bilateral. Respiratory system, vesicular breath sounds heard bilaterally; no wheeze, rhonchi or crepitations. Cardiovascular system, apex beat palpable in the left 5th intercostal space in the mid-clavicular line. Other systems, not significant.

Diagnostic assessment

The diagnosis was chronic urticaria, made on the history of recurrent, transient, itchy wheals lasting 8 months.

Quality of life was measured with the CU-Q2oL before treatment. Each of the 23 items is scored from 1 ("not at all") to 5 ("extremely"), so the raw score runs from 23 to 115. The index is converted to a 0–100 scale:

\text{CU-Q2oL index} = \frac{\text{raw score} - 23}{92} \times 100

At baseline the patient rated itching, restriction of food choices and difficulty using cosmetics as "extremely" bothersome, and hives, physical activity, sleep onset, concentration, nervousness and low mood as "very much". He was not bothered by swelling of the eyes or lips. The baseline index was 61.95, in the 61–80 band (severe impact).

Therapeutic intervention

Analysis and evaluation of symptoms

Mental generals	**Physical generals**	**Particulars**
Reserved and quiet by nature	Thirst: large quantities of water at long intervals	Urticaria for 8 months
Sensitive to criticism	Aversion: fatty food	Recurrent wheals over the whole body
Difficulty forgiving insults or emotional injuries	Stool: hard, dry	Wheals raised, pale pink; worse in the evening
Consolation aggravates	Thermal: hot	Stinging sensation
	Perspiration: scalp or face	Hives more on trunk and upper limbs

The symptoms were then evaluated for their value in individualization. Mental generals (reserved, sensitive to criticism, consolation aggravates) and physical generals (thirst, aversion to fatty food, hard dry stool, hot thermal reaction, perspiration of scalp or face) were kept together with the characteristic particulars: recurrent pale pink raised wheals over the whole body with a stinging sensation, more on the trunk and upper limbs.

Repertorial totality

- **Mind:** reserved
- **Generals:** food, fat, aggravates
- **Stomach:** thirst, large quantities for long intervals
- **Skin, eruptions:** urticaria, evening
- **Skin, eruptions:** urticaria, warmth and exercise
- **Skin, eruptions:** urticaria, cold air, ameliorates
- **Skin, eruptions:** stinging

Repertorial analysis

Remedy	Score / rubrics covered
Pulsatilla nigricans	10/4
Natrum muriaticum	7/4
Nitricum acidum	7/4
Sulphur	7/3
Nux vomica	5/4

Selection of medicine and potency

Pulsatilla nigricans scored highest, but the prescription was based on the whole case, not on the repertorial score alone. *Natrum muriaticum* matched the mental generals (reserved, sensitive to criticism, consolation aggravates, difficulty forgiving insults), the physical generals (large thirst at long intervals, aversion to fatty food, hard dry stool, hot patient) and the urticaria modalities (worse from heat, sun and sweating; better in cold air). It was selected in the 200 potency.

Prescription

- Rx *Natrum muriaticum* 200, one dose, stat

Rx *Rubrum* (placebo) 30, TDS for 15 days

General management and auxiliary measures

- Avoid heat exposure.
- Avoid scratching.

Follow-up and outcomes

Over about 12 weeks, hive episodes fell to a single episode in the last 15 days. Relief dipped to 40% at the visit of 20 August 2026, and *Natrum muriaticum* 200 was repeated once. Improvement then continued at every visit.

Date	Symptom change and new symptoms	Prescription
17 Jul 2026	Baseline visit: urticaria for 8 months, recurrent wheals, itching	*Natrum muriaticum* 200, one dose stat; *Rubrum* 30 TDS × 15 days
31 Jul 2026	Slight relief in recurrent wheals; slight relief in itching; no other complaints	*Rubrum* 30 TDS × 15 days
14 Aug 2026	About 60% relief in wheals; 2–3 episodes in the last 15 days; relief in itching	*Rubrum* 30 TDS × 15 days
20 Aug 2026	About 40% relief; 5–6 episodes of hives during 15 days; slight increase in itching	*Natrum muriaticum* 200, one dose stat; *Rubrum* 30 TDS × 15 days
12 Sep 2026	About 65% relief in hive episodes; only 2 episodes in the last 15 days; relief in itching	*Rubrum* 30 TDS × 15 days
25 Sep 2026	About 70–80% relief in hive episodes; relief in itching; no other complaints	*Rubrum* 30 TDS × 15 days
13 Oct 2026	About 80–90% relief in hive episodes; only 1 episode in the last 15 days; no other complaints	*Rubrum* 30 TDS × 15 days

CU-Q2oL outcome

Measure	Before treatment	After treatment
CU-Q2oL index (0–100)	61.95	23.91
Interpretation	Severe impact (61–80)	Mild impact (21–40)

The index fell by 38.04 points, a relative reduction of about 61%. Itching, hives, sleep, work, physical activity and eating, which carried the highest scores at baseline, were rated "not at all" or "a little" after treatment. Concentration, nervousness, low mood and food restriction improved from "very much" or "extremely" to "moderately".

Discussion

The prescription rested on the patient himself: a reserved man, sensitive to criticism, who is aggravated by consolation, hot, thirsty for large quantities at long intervals and averse to fatty food. His urticaria had clear modalities, worse from heat, sun, sweating and in the evening, and better from cold and open air. Repertorisation placed *Pulsatilla nigricans* first by score, yet *Natrum muriaticum* fitted the mental and physical generals better, and it was chosen after evaluating the totality.

The course followed a recognisable pattern. Relief was slight at 2 weeks, reached about 60% at 4 weeks, and then fell back to about 40% with more episodes and slightly more itching. After the single repeat dose on 20 August 2026, relief rose to 65%, then 70–80%, then 80–90%, with no other complaints. Placebo (*Rubrum*) was given between doses, so the later gains followed the two medicinal doses and not frequent repetition.

The CU-Q2oL showed the same direction: the index moved from severe to mild impact. Sleep, work and physical activity, which were limited at baseline, returned to normal, and the patient's concern about medication side effects was lower.

This is a single case without a control, and chronic urticaria can fluctuate or remit on its own. Use of cetirizine during follow-up is not recorded. The result therefore shows an association, not proof of cause. Controlled studies are needed.

Patient perspective and consent

At the last visit the patient reported relief in hive episodes of about 80–90%, relief in itching and no other complaints. Written informed consent for publication of this case, with identity withheld, is to be confirmed by the authors before submission.

Conclusion

In this 26-year-old man with chronic urticaria, *Natrum muriaticum* 200 selected on the totality of symptoms was followed by a clear fall in hive episodes and itching, and the CU-Q2oL index fell from 61.95 (severe impact) to 23.91 (mild impact). The case supports individualized prescribing guided by mental and physical generals in chronic urticaria and calls for larger controlled studies.