

## HOMOEOPATHIC TREATMENT OF ECZEMA

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From ancient times all schools of medicine considered Sulphur a remedy par excellence for eczema. The picture of the sulphur patient as dirty and water-shy is often correct, but from experience, I can say Sulphur has never disappointed me in clean patients. A typical symptom is that the sulphur eczema is dry and scaly, itching especially evenings, in the warmth of bed and is worse from washing. The sulphur eczema is found especially on the forehead at the hairline, genitals and flexor surfaces of joints.

I also like to give Sulphur to produce reaction. Often we find that a well chosen homoeopathic remedy is apparently not able to affect the eczema, and it is not always possible to explain this. Possibly there is a weakened physical reaction, or other obscure factors play a role. In many cases I have experienced that Sulphur caused an extraordinary reaction in the sense of a primary aggravation, and that then the eczema disappeared suddenly after a while, or that now the suitable homoeopathic remedy could better develop its action. I have seen patients who suffered from eczema (usually as so-called seborrheic eczema) and asthma. If now the asthma was treated successfully, then often the eczema was aggravated and vice versa. Such patients often react to Sulphur. However, in such cases it is difficult to solve the question of dose. I have seen improvement from low as well as from high potencies. In combination with Arsenicum one can often relieve such patients of their distressing condition.

Arsenicum with Sulphur in large doses is used today extensively by the dermatological school; how much of the often outstanding results belong to the credit of homoeopathic medicine action, I do not wish to decide.

The Arsenic skin eruption is usually dry, seldom moist, combined with severe burning of skin. Itching is not so prominent. There is aggravation from scratching and cold. The skin bleeds easily and is covered with crusts. Open air and radiated heat are unpleasant to the patient. Arsenicum seems to be especially valuable in degenerative processes, so often caused by eczemas of the aged and in suitable forms of diabetic eczemas.

Graphites has often been found to be an excellent eczema remedy. Its domain is the chronic form, but often one must have much patience till its action becomes evident. Its type is the slow, thickset, indolent and gluttonous patient, women who have delayed and weak menses. It is strange that these people do not perspire; but the women have much 'flying heat'. Eczema behind the ears and on occiput, often very moist with tough, yellow crusts, and that is characteristic. Callosities on hands and feet remind one of Graphites. Aggravation of all symptoms evenings is often remarked.

Antimonium crudum is the opposite of Graphites in many ways; perspiration is one of its characteristics. Its eczema is usually moist, begins with

purulent pustules in face. Impetigo in children is one of its grateful fields in connection with Mercurius. The tongue is usually coated with bad, flat taste mornings. Chronic digestive disturbances. The patient is very tired and lazy, may have severe horny calluses, especially on the feet; deformed nails.

Calcium has lately played a prominent rôle in dermatology. In itching eczemas it has often acted splendidly, but again in other cases which seemed to be the same, it failed. Perhaps in these cases there was no Calcium type as in the others. I have found that Calcium type: fat, phlegmatic, easily perspiring patient, women who menstruate too early and profusely, respond often very well to *Calcarea carbonica*. Important is, that though skin getting wet is not tolerated, there is a craving for water, Cold, moist feet fit well into the picture. Warmth relieves. In children's eczema *Calcarea* often acts well. I generally try to learn whether or not patients have had eczema or milk crust in younger years, which indicates *Calcarea* strongly. Also the often obstinate circumscribed eczema on the hands of young girls which resists all other therapy respond well to *Calcarea carbonica*. *Natrum muriaticum* must not be forgotten here, as it often exactly suits these cases.

*Baryta carbonica* for children as well as for the aged is well indicated in many instances, and especially in backward children.

*Petroleum* has the chronic eczemas in the fall and winter with cracked skin, which does not heal well.

*Sepia* is preeminent in eczemas in the climacteric or at its end, if they also have small, very itchy vesicles on the fingers worse from water. Of course, there should be other *Sepia* symptoms too. During summer one must be sure that it is not a case of mycosis from athlete's feet. In such cases anti-parasitic treatment must be instituted and a constitutional remedy should be given, like *Calcarea* or *Silicea*.

*Lycopodium* is a valuable remedy in eczema: itching severely, bleeding from scratching; disturbed digestion. Bulimia satisfied by a few bites, flatulency not relieved by passing of gases. I mention these symptoms because they are the opposite of *Carbo vegetabilis*, which is also efficient in the treatment of chronic leg ulcers of older people. Often it is advisable to alternate with *Calcarea fluorica*.

*Thuja occidentale* can be used in faecal seborrheic eczema, especially if there exists also an oily condition of the hair. There are women who distinctly show the *Thuja* type.

*Croton* is especially for eczema of serotum with terrible itching.

*Silicea* is a constitutional remedy which should be tried repeatedly in many cases.

*Berberis vulgaris* in eczema with much uric acid, often accompanied by troubles of the joints and bladder.

*Acidum nitricum* is for itching anal eczema, rhagades and moist conditions.

All these remedies have this in common: They are especially valuable

in chronic cases from disturbed metabolism, or when they are constitutionally indicated. For acute eczema with redness and swelling of skin, vesicle formation, the following briefly mentioned remedies must be compared:

Belladonna when skin is tightly drawn and hot; during infectious diseases and intestinal disturbances.

Apis is similar: oedema of skin, stitching pains; no thirst

Rhus toxicodendron: acute blisters on skin, intensely itching and burning. Often after colds and change of weather.

Cantharis: when acute eczema is preceded or soon followed by bladder troubles.

Not to be forgotten: Formic acid therapy (internally, or preferably hypodermically or intravenously in medium aqueous potencies).

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his appetite was rather finicky. He preferred cold foods, and was strongly averse to warm meals. He claimed that warm foods gave him paroxysmal belching and food came up in large quantities. For this particular symptom we have about 107 remedies. The pain in the abdomen has a burning character such as one would find in Arsenicum. These peculiarities were elicited after careful questioning. At the time of this second consultation the symptoms above related were too tangled up for me to unravel with a single remedy, so I decided to repertorize the case. Here are the results of repertorial studies:

1. Abdomen: sensation of burning pain: Ars., Phos.
2. Paroxysmal eructations by the mouthful: Phos.
3. Oppression in chest: Nux, Phos.
4. Constriction in chest as from a band: Cactus, Phos.
5. Pain in forehead ameliorated by cold evening air: Phos.
6. Headache aggravated by daylight: Bell., Nux, Phos.
7. Back pain better by rubbing: Phos.
8. Back pain brought on by rising from sitting posture: Phos.

In many of the above captions Nux came up quite often, but Phosphorus was the predominant drug, and invariably in large rubric. You will remember that this patient could very well be a phosphorus type: thin, lanky and dark.

Phosphorus 6x was given and the result was as expected.

I have been tempted to extend this paper to at least four cases, but the presentation thereof would be too lengthy, so suffice it for me to say here that no matter how easy a case may seem to be, it is worthy of careful study, if we are to gild the name of our school. For after all a tree is judged by its fruit.

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