

Tinea Faciei treated with constitutional Homoeopathic Medicine using Vithoulkas Compass: Two evidence-based case reports

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Abstract

Introduction: Tinea faciei, also known as tinea faciale or facial ringworm, is a common infection of the skin on the face caused by a fungus. In general, tinea infections are quite common, but facial ringworm infections happen mostly in teens and young adults or anyone with an immunosuppressive disease. Management involves the use of topical antifungals in limited diseases, and oral therapy is usually reserved for more extensive cases. These agents have side effects, sometimes even severe. **Cases Summary:** Two diagnosed cases of tinea faciei, treated with individualized constitutional homeopathic medicines, are presented. Both patients complained of red, itchy rashes on their faces, which were treated using homeopathic medicine. The cases were documented photographically at the onset and the end of treatment. Both patients went into remission following treatment, and long-term follow-up suggested that the therapy remained efficacious long after cessation of treatment. No significant side effects were noted. Homeopathic medicines may be effective for the treatment of tinea, without any side effects. More research on the subject is warranted.

Keywords: Case reports, Constitutional Homeopathic medicines, *Natrum Mur*, *Sulphur*, Tinea faciei

INTRODUCTION

Tinea faciei is a dermatophyte infection that occurs on the non-bearded regions of the face. It is often a deceptive facial eruption and can mimic a variety of cutaneous dermatoses.^[1] All dermatophyte infections of face in women and prepubertal boys are tinea faciei. Tinea faciei is often misdiagnosed as seborrhoeic dermatitis, atopic dermatitis, bacterial infections, irritant contact dermatitis, cutaneous lupus erythematosus, rosacea, granuloma annulare, perioral dermatitis, pityriasis alba, and pityriasis rosacea. It can also mimic tinea barbae, where hair follicles of the face are affected.^[2] The past few years have seen a significant rise in the incidence of chronic dermatophyte infections of the skin which has proven difficult to treat. With the increasing resistance to available antifungal agents, complementary and alternative medicine has shown significant results in the control of these dermatophytes infection.

Homoeopathy has always offered safe and significant results in controlling the infections of cutaneous disorders, including atopic dermatitis,^[3] eczema,^[4] lichen planus,^[5] seborrhoeic dermatitis,^[6] melisma^[7], rosacea^[8], dermatitis herpetiformis,^[9] and verruca vulgaris.^[10]

Homoeopathy plays an important role in combating the infection caused by dermatophytes as evident in case reports^[11] and clinical trials.^[12] There are several medicines in the homoeopathic Materia medica which can be considered for tinea infection; some prominent medicines are *Arsenic*, *Bacillimum*, *Chrysarobinum*, *Tellurium*, *Sepia*, etc.^[13] However, very few studies are found in the literature, which shows a positive result of well-selected individualized homeopathic medicines in tinea faciei. These case reports show the effectiveness of individualized homeopathic medicine in the treatment of this condition.

CASE REPORTS

Case report 1

Patient information

A girl aged 8 years visited the outpatient department with her mother on July 8, 2019 at the private clinic of the author with

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a complaint of a severe itchy lesion over the face for 3 months. The patient took allopathic antifungal medicines for the same with temporary relief for 5 months, but lesions reappeared. She was on no medication for 1 month. There was no significant finding in the family history.

Clinical findings

Erythematous patch on the right cheek was seen, which was circular in pattern, with a distinct margin. The lesions exuded watery and sticky discharge on scratching. Itching aggravated at night and scratching. During case taking, her mother informed that the patient got very angry, especially when she was directed to do something against her will and was averse to consolation. She was a hot patient, desired salt, and had increased thirst, around 3 L/day. The diagnosis was made by clinical presentation and history.

The following characteristic symptoms were considered for repertorisation:

1. Eruption on the cheek
2. Sticky discharge from lesion
3. Itching; aggravated at night and on scratching
4. Anger; contradiction from
5. Hot patient
6. Thirst for a large quantity of water
7. Consolation aggravates.

Therapeutic intervention

The prescription was done based on flat repertorisation using Vithoulkas Compass online homeopathic software [Figure 1] and after consulting Materia medica.^[14] *Natrum Muriaticum* 30c BD for 5 days with placebo for the next 10 days was prescribed.

The Modified Naranjo Criteria (MONARCH) was used for assessing causal attribution of improvement to the homeopathic medicine and the total score was 7 [Table 1].^[15]

Follow-up on subsequent follow-ups, potency was changed based on the assessment of improvement in facial lesions, as shown in Table 2. Finally, the lesions of tinea disappeared with constitutional medicine [Figure 2a and b]. The reappearance of the symptoms was not reported even after 8 months of treatment.

Case report 2

Patient information

An 18-year-old boy reported at the private clinic of the author on September 23, 2019 with a complaint of red itchy rashes on the whole face for 6 months. There was a history of some skin eruptions 4 years back, for which he took allopathic medicines. For the present complaint, he was treated with different kinds of antifungal ointments (fungiceros cream and Lamifin lotion), with temporary relief. He also took homeopathic medicines for 3 months without any improvement. He was not on any treatment at the time of reporting. There was no significant family history.

Clinical findings

The itching was aggravated under the sun and in a warm room and relieved from washing the face. There was a burning sensation after scratching. Along with that, he was also complaining about gastric upset, having eructation and water brash, especially after eating and there was burning in the abdomen. He was a hot patient and had a recurrent tendency to catch a cold. He could not bear hunger, desired sweets and disliked milk, and milk products. He was occasionally constipated. He was mild in nature and liked the company of friends. The diagnosis was made by his medical history and clinical presentation.

The following characteristic symptoms were considered for repertorisation:

1. Red rash on face
2. Itching aggravation from heat
3. Burning sensation after scratching
4. Hot patient
5. Desire for sweets
6. Aversion milk
7. Constipation
8. Hunger aggravation
9. Mild
10. Desire company.

Therapeutic intervention

The prescription was based on flat repertorisation using Vithoulkas Compass online homeopathic software [Figure 3] and after consulting Materia medica. *Sulphur* 6c BD was prescribed for 5 days with placebo for the next 10 days. The

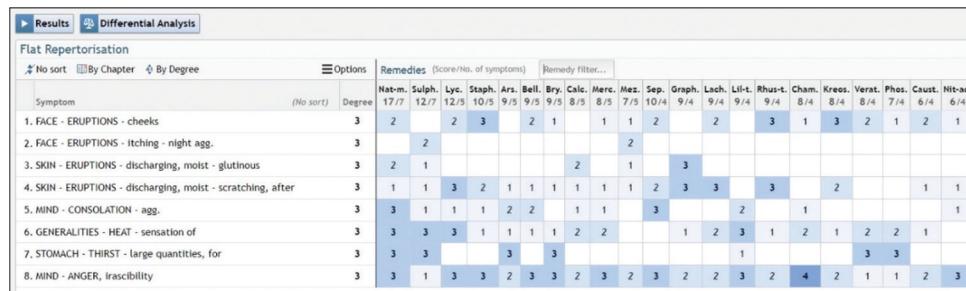


Figure 1: Case 1 – Repertorisation chart

Table 1: Modified Naranjo Criteria Score for case 1

Items	Yes	No	Not Sure
1. Was there an improvement in the main symptom or condition, for which the homeopathic medicine was prescribed?	+2		
2. Did the clinical improvement occur within a plausible time frame relative to the drug intake?	+1		
3. Was there a homoeopathic aggravation of symptom? (need to define in glossary)	0		
4. Did the effect encompass more than the main symptom or condition, (i.e., were other symptoms, not related to the main presenting complaint, Improved or changed?)	0		
5. Did overall well-being improve? (suggest using a validated scale or mention about changes in physical, emotional and behavioural elements)	+1		
6A. Direction of cure: Did some symptoms improve in the opposite order of the development of symptoms of the disease?	0		
6B. Direction of cure: Did at least one of the following aspects apply to the order of improvement in symptoms:	0		
• From organs of more importance to those of less importance?			
• From deeper to more superficial aspects of the individual?			
• From the top downwards?			
7. Did "old symptoms" (defined as non-seasonal and non-cyclical symptoms that were previously thought to have resolved) reappear temporarily during the course of improvement?	0		
8. Are there alternate causes (other than the medicine) that – with a high probability – could have caused the improvement? (consider known course of disease, other forms of treatment and other clinically relevant interventions)	+1		
9. Was the health improvement confirmed by any objective evidence? (e.g., investigations, clinical examination, etc.)	+2		
10. Did repeat dosing, if conducted, create similar clinical improvement?	0		
Total score – 7			

Table 2: Case 1 Follow up

Date	Symptoms	Medicine with doses and repetition
August 23, 2019	Discharge on scratching was reduced, itching – same	Placebo for 15 days
September 06, 2019	No discharge now, itching – same	Placebo for 15 days
September 20, 2019	Itching persists and margins became inflamed	<i>Natrum muriaticum</i> 200 C/BD for 2 days and P130 for 15 days
October 11, 2019	Redness reduced, itching reduced, and inflammation reduced	Placebo for 15 days
November 08, 2019	No redness	Placebo for 15 days
November 26, 2019	Itching remains, no redness No discharge, faintly visible lesion	<i>Natrum muriaticum</i> 1M/BD for 1 day,
December 20, 2019	Itching reduced	Placebo for 15 days
January 02, 2020	Itching on and off, lesion visible faintly	<i>Natrum muriaticum</i> 1M/OD for 1 day and P1/30 for 15 days
January 20, 2020	No itching, no visible lesion	Placebo for 30 days
February 24, 2020	No complaints	Placebo for 30 days

**Figure 2: (a and b) Case report 1**

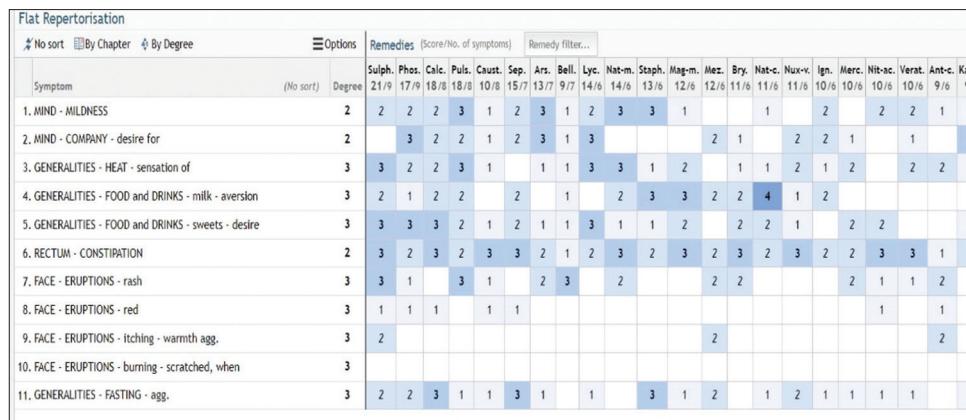
MONARCH was used for assessing causal attribution of improvement to the homeopathic medicine and the total score was 8 [Table 3].^[15]

Follow-up and outcome

On subsequent follow-ups, potency was changed based on the assessment of improvement in facial lesions, as shown in Table 4. There was complete remission in facial lesions [Figure 4a and b] and other gastric complaints after constitutional treatment.

DISCUSSION

In both the cases, after the careful recording of the medical history, repertorisation, and consultation with Materia Medica, medicine was prescribed. Both the patients showed improvement from the beginning, which proved the correct selection of the medicine, but there was a slow improvement with low potencies, that is, 6C and 30C. However, marked improvement was observed with higher potencies of 200 and 1M. There was a marked improvement in the main complaint of tinea, as well as of associated complaints and general health of patients with single, individualized constitutional homeopathic medicine. These cases have highlighted the

**Figure 3:** Case 2 - Repertorisation chart**Table 3: Modified Naranjo Criteria Score for case 2**

Items	Yes	No	Not sure
1. Was there an improvement in the main symptom or condition, for which the homeopathic medicine was prescribed?	+2		
2. Did the clinical improvement occur within a plausible time frame relative to the drug intake?	+1		
3. Was there a homoeopathic aggravation of symptom? (need to define in glossary)	0		
4. Did the effect encompass more than the main symptom or condition, i.e., were other symptoms, not related to the main presenting complaint, improved or changed?	+1		
5. Did overall well-being improve? (suggest using a validated scale or mention about changes in physical, emotional and behavioural elements)	+1		
6: (a) Direction of cure: Did some symptoms improve in the opposite order of the development of symptoms of the disease?	0		
(b) Direction of cure: Did at least one of the following aspects apply to the order of improvement of symptoms:	0		
• From organs of more importance to those of less importance?			
• From deeper to more superficial aspects of the individual?			
• From the top downward?			
7. Did "old symptoms" (defined as non-seasonal and non-cyclical symptoms that were previously thought to have resolved) reappear temporarily during the course of improvement?	0		
8. Are there alternate causes (other than the medicine) that – with a high probability – could have caused the improvement? (consider known course of disease, other forms of treatment and other clinically relevant interventions)	+1		
9. Was the health improvement confirmed by any objective evidence? (e.g., investigations, clinical examination, etc.)	+2		
10. Did repeat dosing, if conducted, create similar clinical improvement?	0		
Total score – 8			

Table 4: Case 1 Follow up

Date	Symptoms	Medicine with doses and repetition
November 01, 2019	Itching same, burning reduced	Placebo for 15 days
November 22, 2019	Redness and itching of face are same. Burning in abdomen and water brash reduced	Placebo for 15 days
December 6, 2019	No further improvement in burning and itching of facial lesions	Sulphur 30 c BD for 3 days and Placebo for 15 days
December 17, 2019	Redness, burning, and itching were reduced	Placebo for 15 days
December 30, 2019	Burning in abdomen occasionally only. No Water brash. Stool clear. No burning on face now	Placebo for 15 days
January 02, 2020	Redness and itching on the face reduced to much extent	Placebo for 15 days
January 17, 2020	No redness on face, only slight burning and itching remains which are relieved by washing the face with water	Placebo for 15 days
January 31, 2020	No itching, no burning sensation on the face. Stool not clear, feel constipated, and complaining of burning in the abdomen	Sulphur 200c 1 dose and Placebo for 30 days
February 28, 2020	No significant complaints, no visible lesion on the face, and slight burning in epigastrium empty stomach sometimes	Placebo for 30 days
March 23, 2020	Much better, no complaints now	Placebo for 30 days

importance of a holistic approach in the treatment considering the individuality of a patient for remedy selection, and not just disease symptoms.

The modified Naranjo scores of the patients after treatment were '7' and '8', respectively [Table 1 and 3], which indicate that there is a likelihood of causality between the result



Figure 4: (a and b) Case report 2

observed and the prescribed homeopathic medicines in both the cases.

The above two cases treated with individualized homeopathic medicines did not only bring relief in the signs and symptoms but also assured no recurrence, as reported in more than 8 months of follow-up. This shows the effective role of homeopathic medicines in treating tinea faciei, including checking for relapse, or any side effects, contrary to conventional treatment of tinea, where the chances of recurrences are high.^[16]

However, the limitation of this study was that no laboratory investigations were used to establish the diagnosis. If KOH Mount had been used, it would have added evidence to prove the marked clinical improvement.

CONCLUSION

The presented case reports showcase the successful treatment of tinea faciei and restoration of the well-being of the patient with the help of constitutional homeopathic medicines. Further clinical studies may be required to establish homoeopathy as one of the reliable treatment modalities available to patients for the therapy of Tinea faciei.

Declaration of patient assent

The author certifies that she has obtained all appropriate patient assent forms. In the form, the patient's parents have given their consent for images and other clinical information

to be reported in the journal. The parents understand that their children's names and initials will not be published, and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

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Nil.

Conflicts of interest

None declared.

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Titre: Tinea Faciei traité avec des médicaments homéopathiques constitutionnels - Rapports de cas basés sur des preuves.

Résumé: Contexte: La tinea faciei, également appelée tinea faciale ou teigne du visage, est une infection courante de la peau du visage causée par un champignon. En général, les infections à la teigne sont assez courantes, mais les infections à la teigne du visage surviennent surtout chez les adolescents et les jeunes adultes ou chez les personnes souffrant d'une maladie immunodépressive. La prise en charge implique l'utilisation d'antifongiques topiques dans les maladies limitées, et le traitement oral est généralement réservé aux cas plus étendus. Ces agents ont des effets secondaires, parfois même graves. **Résumé des affaires:** Deux cas diagnostiqués de Tinea faciei, traités avec des médicaments homéopathiques constitutionnels individualisés, sont présentés. Les deux patients se plaignaient d'éruptions rouges et prurigineuses sur le visage, qui ont été traitées à l'aide du médicament homéopathique suivant. Les cas ont été documentés photographiquement au début et à la fin du traitement. Les deux patients sont entrés en rémission après le traitement, et le suivi à long terme a suggéré que la thérapie restait efficace longtemps après l'arrêt du traitement. Aucun effet secondaire significatif n'a été noté. Les médicaments homéopathiques peuvent être efficaces pour le traitement du tinea, sans aucun effet secondaire. Des recherches supplémentaires sur le sujet sont nécessaires.

Titel: Tinea Faciei mit konstitutioneller Homöopathie behandelt – Evidenzbasierte Fallberichte

Abstrakt: Hintergrund: Tinea faciei, auch bekannt als Tinea faciale oder Tinea faciale, ist eine häufige Infektion der Gesichtshaut, die durch einen Pilz verursacht wird. Im Allgemeinen sind Tinea-Infektionen ziemlich häufig, aber Tinea-Infektionen im Gesicht treten hauptsächlich bei Teenagern und jungen Erwachsenen oder Personen mit einer immunsuppressiven Krankheit auf. Die Behandlung umfasst die Anwendung von topischen Antimykotika bei begrenzten Erkrankungen, und eine orale Therapie ist normalerweise ausgedehnteren Fällen vorbehalten. Diese Mittel haben Nebenwirkungen, manchmal sogar schwere. **Zusammenfassung der Fälle:** Zwei diagnostizierte Fälle von Tinea faciei, die mit individualisierten konstitutionellen homöopathischen Arzneimitteln behandelt wurden, werden vorgestellt. Beide Patienten klagten über rote, juckende Hautausschläge im Gesicht, die homöopathisch behandelt wurden. Die Fälle wurden zu Beginn und am Ende der Behandlung fotografisch dokumentiert. Beide Patienten gingen nach der Behandlung in Remission, und die Langzeitnachbeobachtung deutete darauf hin, dass die Therapie lange nach Beendigung der Behandlung wirksam blieb. Es wurden keine signifikanten Nebenwirkungen festgestellt. Homöopathische Arzneimittel können zur Behandlung von Tinea ohne Nebenwirkungen wirksam sein. Weitere Forschung zu diesem Thema ist gerechtfertigt.

शीर्षक: टिनिया फेसियाइ का घटक होम्योपैथिक चिकित्सा के साथ इलाज - साक्ष्य आधारित विषय श्रृंखला

सार: पृष्ठभूमि: टिनिया फेसियाइ, जिसे टिनिया फेसिअल या चेहरे के दाद के रूप में भी जाना जाता है, एक कवक के कारण चेहरे पर लचा का एक आम संक्रमण है। सामान्य तौर पर, टिनिया संक्रमण काफी आम हैं, लेकिन चेहरे के दाद संक्रमण ज्यादातर किशोरों और युवा वयस्कों या प्रतिरक्षा को दबाने वाले बीमारी वाले किसी भी व्यक्ति में होते हैं। प्रबंधन में सीमित बीमारियों में सामयिक एंटिफ्गल का उपयोग शामिल है, और मौखिक चिकित्सा आमतौर पर अधिक व्यापक मामलों के लिए होती है। इन एजेंटों के साइड इफेक्ट्स होते हैं, कभी-कभी गंभीर भी होते हैं। **विषय सारांश:** टिनिया फेसियाइ के दो निदान मामलों, व्यक्तिगत घटक होम्योपैथिक दवाओं के साथ इलाज किया गया। दोनों रोगियों ने अपने चेहरे पर लाल, खुजली वाले चकते की शिकायत की, जिनका होम्योपैथिक दवा का उपयोग करके इलाज किया गया था। मामलों को उपचार की शुरूआत और अंत में फोटोग्राफिक रूप से प्रलेखित किया गया था। दोनों रोगियों को उपचार के बाद इसमें कमी आई और दीर्घकालिक अनुवर्ती से उपचार की समाप्ति के बाद चिकित्सा लंबे समय तक प्रभावी रही। कोई महत्वपूर्ण दुष्प्रभाव नोट नहीं किया गया था। होम्योपैथिक दवाएं बिना किसी दुष्प्रभाव के, टिनिया के उपचार के लिए प्रभावी हो सकती हैं। इस विषय पर अधिक शोध की आवश्यकता है।

Título: Tinea Faciei tratada con Medicina Homoeopática Constitucional –informes de casos basados en evidencias

Resumen: Antecedentes: La tiña faciei, también conocida como tiña facial o tiña facial, es una infección común de la piel en la cara causada por un hongo. En general, las infecciones por tiña son bastante comunes, pero las infecciones por tiña facial ocurren principalmente en adolescentes y adultos jóvenes o en cualquier persona con una enfermedad inmunosupresora. El manejo implica el uso de antifúngicos tópicos en enfermedades limitadas, y la terapia oral se reserva generalmente para casos más extensos. Estos agentes tienen efectos secundarios, a veces incluso graves. **Resumen de casos:** Se presentan dos casos diagnosticados de Tinea faciei, tratados con medicamentos homeopáticos constitucionales individualizados. Ambos pacientes se quejaron de erupciones rojas y picantes en sus caras, las cuales fueron tratadas usando medicina homeopática. Los casos se documentaron fotográficamente al inicio y al final del tratamiento. Ambos pacientes entraron en remisión después del tratamiento, y el seguimiento a largo plazo sugirió que la terapia seguía siendo eficaz mucho después de la interrupción del tratamiento. No se observaron efectos secundarios significativos. Los medicamentos homeopáticos pueden ser eficaces para el tratamiento de la tiña, sin efectos secundarios. Se justifica una mayor investigación sobre el tema.

标题：宪制顺势疗法治疗足癣-循证病例报告

摘要：背景资料：面癣，也称为面癣或面癣，是一种常见的由真菌引起的脸部皮肤感染。一般来说，脚癣感染很常见，但面部癣感染主要发生在青少年和年轻人或任何患有免疫抑制疾病的人。管理涉及在有限的疾病中使用局部抗真菌药物，口服治疗通常保留用于更广泛的病例。这些药剂有副作用，有时甚至严重。个案摘要：介绍了两例确诊的体癣，用个体化的宪政同化药物治疗。两名患者都抱怨脸上出现红色，发痒的皮疹，这些皮疹使用顺势疗法药物治疗。这些病例在治疗开始和结束时都有照片记录。两名患者在治疗后都进入缓解期，长期随访表明该疗法在停止治疗后很长一段时间仍然有效，没有注意到显着的副作用。顺势疗法药物可能对治疗脚癣有效，没有任何副作用。有必要对这个问题进行更多的研究。