

Urticaria Cure by Homeopathy

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Correspondence Author: Dr.Nidhi Tiwari, Assistant Professor, Dept. of gynaecology & Obstetrics, Faculty of Homeopathic Science, Jayoti Vidyapeeth Women's University, Jaipur, Rajasthan, India**Conflicts of Interest:** Nil**Abstract**

Urticaria is a hypersensitivity reaction caused by either external or an internal cause. The signs and symptoms sometimes annoy the patient to a greater extent and leads to both mental and physical disturbance. It is a commonly seen clinical condition where there is a transient eruption of raised and circumscribed erythematous or oedematous swellings of the superficial dermis, associated with itching. There are a variety of its clinical variants seen, two of which are: Angioedema (angioneurotic oedema, giant urticaria, Quinke's oedema) Consists of transient swellings in the deeper dermal, subcutaneous and Submucosal tissues. In terms of duration, Urticaria can be divided into acute and chronic forms.

Acute Urticaria is usually self- limited and the weals commonly resolve within 24 hours, but may last up to 4- 6 weeks. In chronic urticaria the weals continue daily or on most days for longer than 6 weeks. Acute urticaria is more common in young adults of both sexes, whereas chronic urticaria is more commonly seen in women, in their fourth or fifth decades.

Keyword: Urticaria,Adults,Clinical variant, Chronic.**Causes****Food:** Chocolates, eggs, fish milk and products, nuts, pork, shellfish, strawberries, tomato, and yeast.**Food additives:** Hydroxybenzoates, salicylates, sulhites, and tartrazine. Inhalants: Animal danders, grass pollens, house dust, mould spores, new perfumes.**Infections:** Pharyngitis, gastrointestinal, genitourinary, respiratory, fungal (e.g., scabies), HIV and parasitic infections (e.g., ascaris, strongyloides, schistosoma, and trichinella).**Systemic disorders:** Amyloidosis, carcinoma, hyperthyroidism, lymphoma, polycythemia vera, polymyositis, rheumatic arthritis (RA)

- Physical: Cold, exercise, friction, perspiration, pressure, and sunlight.
- Miscellaneous: Contact with nickel (e.g., cheap jewelry, jean stud buttons), latex, nail polish or rubber (e.g., gloves and elastic bands); emotional or physical stress; pregnancy (usually occurs in
- Last trimester and typically resolves spontaneously soon after delivery); and recent use of new clothes, creams, detergents, or lotions.

Symptoms

The urticarial lesions begins as itchy erythematous macules, which develop into weals consisting of pale-pink or red, edematous, raised skin areas, of varying shapes and sizes, often with a surrounding flare. These usually transient and migratory lesions can form linear, annular (circular) or actuate (serpiginous) patterns, and can occur

anywhere on the body in variable numbers. These wheals are generally very itchy, especially at night, but the patients tend to usually rub the part, rather than scratch and thus these lesions resolve leaving a normal skin surface, without any excoriation marks. In a number of cases, these weals are seen to get worse in the evenings or nights and also usually before menses. Urticaria vacuities should be suspected if the lesions last for more than 24 hours.

Half the cases of urticaria are associated with angioedema, where large, non-pruritic or slightly itchy, non-pitting, pale or pink, diffuse swellings occur, especially on the face, affecting the eyelids, lips, tongue, pharynx and larynx, hands, feet, genitalia, ears, and neck. These lesions may last for several days.

Specific laboratory studies are not generally indicated. Instead a detailed personal and family case history is taken in suspected clinical cases, especially as regards to previous attacks, and an attempt made to find out the trigger factors, through in more than half the cases no particular cause can be traced. In few cases a fluoroimmunoassay may help in detection of food allergies undetected by routine examination and testing.



Homeopathic Approach to Urticaria Homeopathy has maximum scope in the above condition, as modern medicine has nothing more to offer other than anti histaminic. The following pattern should be observed most meticulously whilst treating the patient:

- Confirm whether the lesions fits into urticarial rash. The typical lesion should include a rosy – red, erythematous macule with edematous weals. The erythema fades on pressure.
- Time of aggravation. I have found a night aggravation more common.
- Dose urticaria alternate with any other complaint? Especially asthma or rheumatism.
- Always ask whether urticaria is preceded by any other symptoms like nausea, chill, menses, etc.
- Inquire as to which season the patients develops urticaria and at what temperature e.g. hot room, cold room, open air, near the seashore, etc.
- The most important factor that helps us to eliminate majority of the drugs is the patient's feeling of wellbeing after an application of heat or cold.
- Try and find out which particular foodstuff aggravates the condition, especially shellfish, sweets, meat, chocolates, etc.

- Has the patient got any emotional stress?
- I have seen many patients of urticaria who have a history of worm infestation. Therefore one should inquire for any history of worms. Also history of insect's bites or contact with any plants or ingestion of drugs like penicillin or salicylates.
- Sometimes physical factors especially exposure to sun, excessive physical exertion and exercise lead to urticaria.

All the above should be thoroughly scrutinized to get the maximum data. In very rare cases, patient may develop swelling of face with laryngeal obstruction. At that time the patient should be shifted to a homeopathic hospital and his airway should be kept clear with end tracheal intubation and oral drugs like chlorum, etc. should be administered. The treatment consists of not only giving the indicated homeopathic drugs, but to eliminate the offending agent e.g. eliminative diet, withdrawal of causative drug, treatment of parasitic infection, correction of the existing physical stress. During an acute attack the patient should be kept on a bland diet- alcohol, tea and coffee are preferably avoided. Finally reassurance should be given to the patients who have chronic urticaria.

Homeopathic medicines for Acute Urticaria

Anthracokali: Urticaria increases with general sweat. There is intense itching, which is <night. The site of urticaria is hands, tibia, shoulders, and dorsum of feet. Eruptions always decrease with the full moon. Concomitant symptoms with urticaria are dropsy and intense thirst.

Antimonium crudum: Dirty, unhealthy skin. Urticaria with white lump with red areola which itch. The itching is not continuous, but seems to come and go. There is marked aggravation after the ingestion of **meat** and when in bed. The itching makes the patient which is characterized by a thick white- coated tongue.

Antipyrinum: Chiefly between fingers and toes with troublesome itching and erythema. Urticaria appears and disappears quite suddenly and is often accompanied by internal coldness. Also angioneurotic edema with swelling about eyes and lachrymation is seen. Urticaria associated with tinnitus.

Apis mellifica: stinging and itching as if from bee sting < night. The urticaria may consist of isolated elevations, which are quite painful and tender to touch; these later become purple or livid. There is slight fever and heat of skin accompanying urticaria with burning pain. The urticaria sometimes accompanies asthmatic trouble. Change of weather, warmth and exercise cause troublesome itching and burning urticaria. Generalized anasarca as a strong concomitant to urticaria. > open air, uncovering cold bathing.

Arsenicum album: Urticaria with burning and restlessness. Useful for persistence of complaints during recession of urticaria. <Eating shell fish, < at seashore, < sea bathing.

Astacus fluviatilis: shortacting remedy having a special affinity for skin producing urticaria all over the body with violent pruritus. Liver affection with nettle rash. The urticarial rash is so violent that patient may go into a mild miliaria. < Fish or shellfish.

Belladonna: violent sudden outbreaks of red, hot, painful urticaria, location- inner aspects of limbs, face. Urticaria associated with metrorrhagia.

Bovista lycoerdon: Urticaria covers nearly whole body. Itching and burning <by scratching, <night. Urticaria caused by tar. The itching worse on getting warm. Urticaria with a disposition to diarrhea. Each stool is followed by tenesmus. The other concomitant symptoms are scorbutic gums, inflammation of eyes, metrorrhagia, various mental symptoms. Urticaria on excitement, with rheumatic lameness, palpitation and diarrhea. Urticaria <

on waking in morning, < form bathing. Stupor, staring, even delirium with urticaria.

Copaiva officinalis: Hives with fever and constipation. Chronic urticaria in children. Itching < at night and during fever. Urticaria over whole body with red face. Skin dry and hot with violent itching. Severe headache with urticaria.

Dulcamara: Hives comes on at night, especially when nights are cool, with heavy dew, after a hot day or when weather changes from warm to cool and damp. Urticaria with violent cough and edema of glands. Feverish urticaria. Urticaria obliging one to scratch and burning after scratching, every eruption being preceded by sensation of pricking over whole body. Eruption of white, irregular blotches raised upon the skin, surrounded with red areola, appearing in warmth and disappearing in cold. Extremities, face, chest and back violently itching and burning after scratching. Headache, want of appetite, nausea, bitter taste, vomiting, intense aching in pit of stomach and precordial region, restlessness and sleeplessness, night sweats, turbid dark urine, diarrhea, pains in limbs. Urticaria from gastric disorders.

Conclusion

This study has dealt with 5 patients with acute exacerbation of chronic urticaria and chronic urticaria. Through this study we are able to learn the role of homoeopathic management in cases of urticaria. urticaria is designed as hypersensitivity reaction due to various causes. Due to some exciting cause in chronic conditions. eruptions may flare up; in this phase our line of treatment is to treat that phase with acute short acting remedy followed by constitutional remedy or an antimiasmatic remedy.

Our dynamic system has a great role to play for the treatment of urticaria. This would only be possible when a

physician follows the principles were laid down by our master Dr. Samuel Hahnemann.

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