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PLENARY LECTURES

Homeopathic treatment of atopic dermatitis in the childhood – retrospective study

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Introduction Atopic dermatitis (AD) is an itching dermatosis with outset in sucklings and early childhood and affects 15% of the children. It is quite often associated with other atopic diseases, such as asthma, allergic rhinitis, allergic conjunctivitis, urticaria and high IgE levels (1, 2, 3). For the last few years many patients have been looking for relief in homeopathy after series of unsuccessful trials with methods of medical treatment. Very little has been studied about the place of homeopathy in the treatment of AD.

Aim The study is to analyse the therapeutic effect of homeopathy in the treatment of AD in children and teenagers.

Material and methods A multi-centre, retrospective study of the homeopathic records of 55 children and teenagers with AD aged up to 18 was conducted in the course of 1 year. We analyzed 624 homeopathic prescriptions with symptomatic and terrene drugs for AD.

Criteria for including patients in the investigation (1) Age: from 0 to 18 years. (2) Sex: both boys and girls included. (3) The diagnose AD was determined in advance by dermatologist. (4) Presence of concomitant atopic and non-atopic diseases was allowed. (5) Therapy till the moment – only with local medications: corticosteroids, antibiotics emollients, hydratants etc.

Criteria for excluding patients from the investigation (1) Patients not answering the criteria for including. (2) Presence of congenital anomalies, metabolic and endocrine diseases. (3) Patients conducting treatment with immunosuppressors – oral or parenteral therapy.

Demographic and clinical indices of the kids included in the investigation before the treatment with homeopathy The investigation included 32 (58%) boys and 28 (42%) girls, divided in three age groups: from 0 to 6 years – 28 (51%); from 7 to 12 years – 15 (27%) and from 13 to 18 years – 12 (22%).

Distribution according to the phase of AD: 1 (2%) child in remission, 33 (60%) children with weak manifestation of AD and 21 (38%) children in fit. The average duration of AD is 4.8 ± 2.3 years (\pm SD). Twenty-nine (53%) children were hereditary defective for atopic diseases. Distribution according to the place of residence: 8 (15%) of the children live along the seaside, 33 (60%) – in the plane far from the sea and 14 (25%) – in mountainous regions. Alongside with AD 20 (36%) of the patients suffered other atopic disease - allergic conjunctivitis, pollen fever, asthma, food allergy etc. Thirteen (24%) children were with chronic no allergic disease: adenoid vegetations, frequent catarrhal inflammations, etc. All kids were treated with local conventional medications before they went to homeopathic doctor.

Statistics The data was processed by a statistical program SPSS.11 for medical and sociological investigations by ANOVA and alternative analysis.

Results and discussion Changes in the clinical symptoms

A year after of the beginning of treatment with homeopathy the main clinical symptoms were significantly reduced. At the first medical check 29 (53%) of the patients complaint of itching, whereas on the 12th month it was reduced to 8 (15%) kids ($P < 0.05$). Thirty-one (60%) of the patients complained of dry skin, and on the 12th month their number was lessened to 13 (24%) kids ($P < 0.05$).

A reverse effect of the typical AD skin lesions was observed too. On the 6th month they were registered in 45 (82%) of the patients and on the 12th month they were 23 (44%). Erythema was observed in 33 (60%) of the patients in the beginning of the investigation and was reduced to 9 (17%) kids in the end of the first year.

Changes in the acuteness of AD

As a result of the treatment with homeopathy in the course of 12 months the number of patients in remission increased considerably – 25 (48%) compared to the number in the beginning – 1 (2%), ($P < 0.001$). The number of patients in active phase decreased too.

III. Changes in the choice of the therapeutic approach

II. At the end of the first year 37 (72%) of the patients were treated only with homeopathic drugs, 18 (28%) of them were treated both with homeopathic and allopathic means. The treatment with allopathic means was reduced to one (2%) patient. The necessity of local corticosteroids in the course of one year was significantly reduced from 32 (58%) patients to 10 (18%), $P < 0.05$. Approximately, three times was reduced the treatment with anti-histamine medications, emollients, local antibiotics, etc.

IV. Changes in the homeopathic therapy

The average number of the visits in the course of one year was 3.1 ± 0.7 . Six hundred twenty-four prescriptions, containing 39 symptomatic and 24 terrene medications were written. Homeopathic dilutions from 9 CH to 30 CH were used. The average number of medications prescribed per patient were respectively – 2.3 symptomatic and 1.7 terrene medications.

Symptomatic medications From 415 AD oriented prescriptions with symptomatic medications most often were prescribed: Apis mellifica 70 (16.9%), followed by Lycopodium clavatum 67 (16.1%) and Histamine 58 (14.0%). Natrum muriaticum, Poumon histamine and Arsenicum iodatum were used very often too. Various authors mention the combination of Apis mellifica with Histaminum or with Poumon histamine as quickly suppressing the symptoms of acute AD – oedema, rash and itching, whereas Arsenicum iodatum has a beneficial effect on the dry, husking skin (4, 5). The present investigation shows that it is necessary to combine the above medications with Lycopodium clavatum or Natrum muriaticum to maintain the good results. Other authors quote these two medications as used very often in the chronic phase of dermatitis (6, 7, 8). Apis mellifica was most frequently used in early childhood from 0 to 6 years 45 (21.4%) prescriptions in comparison to teenagers (< 0.02 , Table 1). The high percent of prescriptions with Poumon histamine 10 (23.8%) and Arsenicum album 3 (7.1%) in the seaside regions was probably due to the fact that the patients in those towns suffered often from atopic bronchial asthma as a concomitant disease (Table 1). There weren't statistically significant differences in the prescribed symptomatic medications for both boys and girls.

Table 1 Significant difference in the number of prescriptions of symptomatic drugs depending on age and place of residence

Homeo-pathic drugs (dilution from 9CH to 30CH)	Age groups (in years)			Distribution according to the place of residence		
	0–6 nb. (%)	6–12 ^{**} nb. (%)	12–18 ^{***} nb. (%)	The [*] seaside nb. (%)	Far ^{**} from the sea nb. (%)	Mountainous ^{***} region nb. (%)
Apis mellifica χ^2 , P^* acc. ** χ^2 , P^* acc. ***	45 (21.4) 5.1, < 0.02	n.s.	19 (14.2) 6 (8.5)	n.s.	n.s.	n.s.
Arsenicum alb χ^2 , P^* acc. ** χ^2 , P^* acc. ***	n.s.	n.s.	n.s.	3 (7.1) 8.8, < 0.003 n.s.	1 (0.4)	4 (4.3)
Poumon hist. χ^2 , P^* acc. ** χ^2 , P^* acc. ***	n.s.	n.s.	n.s.	10 (23.8) 22.4, < 0.001 8.0, < 0.005	10 (3.6)	5 (5.4)
Total	210 (51) 415 (100)	134 (32)	71 (17)	42 (10) 415 (100)	281(68)	92 (22)

Note: acc. – according to; n.s. – no statistically significant difference.

Terrene medications Two hundred and nine prescriptions of terrene medications were prescribed in the course of 1 year most frequently of which were: Lycopodium clavatum 37 (17.7%) prescriptions, Sulphur 28 (13.4%) and Silicea 23 (11.0%). They were used independently, or in combination with Tuberculinum, Calcarea carbonica or Natrum muriaticum. Calcarea carbonica was prescribed six times more frequently to boys from 0 to 6 years in the seaside regions compared to girls ($P < 0.01$, Table 2). other two terrene medicines Sulphur and Tuberculinum were prescribed more frequently to sucking

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children and children aged up to 12 (Table 2). In the teenage period the number of prescriptions with Natrum muriaticum rose.

Table 2 Significant differences in the number of prescriptions of terrene drugs depending on sex, age and place of residence

	Sex		Age groups (in years)			Distribution according to the place of residence		
	M * nb.(%)	F ** nb.(%)	0–6 * nb.(%)	6–12 ** nb.(%)	12–18 *** nb.(%)	The * seaside nb.(%)	Far ** from the sea nb.(%)	*** Mountainous region nb.(%)
Homeo-pathic drugs (dilution from 9CH to 30CH)								
Calc. carb χ^2 , P *	14 (12.3)	2 (2.1)	13 (13.4)	2 (3.4)	1 (1.9)	9 (23.7)	5 (4)	2 (4,4)
acc. ** χ^2 , P *acc. ***	6.2 < 0.01		4.2 < 0.05			12.1 < 0.001		
Na muriat χ^2 , P *	n.s.	n.s.	0 (0) 11.7	7 (11.9)	8 (15.1)	n.s.	n.s.	n.s.
acc. ** χ^2 , P *acc. ***			19.2 < 0.001					
Pulsatilla χ^2 , P *acc. **	1 (0.9)	7 (7.4)	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.
	4.3 < 0.05							
Sulfur χ^2 , P *acc. **	n.s.	n.s.	17 (17.5) n.s	7 (11.9)	4 (7.5)	n.s.	n.s.	n.s.
χ^2 , P *acc. ***			7.9 < 0.01					
Tuberculin χ^2 , P *	n.s.	n.s.	12 (12.4) n.s.	5 (8.5)	1 (1.9)	n.s.	n.s.	n.s.
acc. ** χ^2 , P *acc. ***			4.8 < 0.05					
Total	114 (54)	95 (46)	97 (46.4)	59 (28)	53 (25)	38 (18)	126 (60)	45(22)
	209 (100)		209 (100)			209 (100)		

Note: acc. – according to; n.s. – no statistically significant difference.

Jouanny *et al.* (9) recommend *Lycopodium clavatum* as a basic terrene medication for urticaria induced by alimentary allergens and renal and hepatic lithiasis. Despite of that this medication plays a leading role in this study both as a symptomatic and terrene choice for the treatment of AD. The results of the investigation show the benefit of the complex therapy in the cases with AD. The therapeutic approach was in correspondence with the therapeutic concepts of AD of other authors (10, 11, 12). Other authors recommend a combination of several homeopathic groups – medications specifically used for atopic diseases, on one hand (*Apis mellifica*, *Histaminum*), and on the other – medications with affinity to skin lesions and drugs, affecting kidneys and liver (*Lycopodium clavatum*). The use of *Silicea* in the overall therapeutic plan is important in case we want to cope with the concomitant inflammatory diseases.

Conclusion Homeopathy is a beneficial, effective method in the treatment of AD in children. It is necessary to apply it for a long time if a long-term remission is to be achieved. The best results were observed after a year of treatment. A considerable number of patients achieved full or partial remission of their disease, their physical condition as a whole was improved. The use of corticosteroids and anti-histamine drugs was reduced considerably.

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