

INTEGRATING HOMOEOPATHY WITH CONVENTIONAL PSORIASIS TREATMENTS: A NARRATIVE REVIEW OF COMPLEMENTARY APPROACHES

**Rajeswari K. R¹, SanthiPriya A.U², Arpana Sandeep Pareek^{3*}, Edwin Anto Raj
James⁴, Ajith Kumar M.V⁵ and Gopukumar S.T⁶**

¹District Project Coordinator, National AYUSH Mission, Vanchiyoor, Trivandrum, India – 35.

²District Project Coordinator, National AYUSH Mission, Kollam, India – 35.

³Department of Repertory, Smt. K. B. Abad Homoeopathic Medical College, Chandwad, India.

⁴Inner Healing Institute of Advance Homoeopathy, Thingal Nagar, Kanniyakumari District,
Tamilnadu, India.

⁵Department of Community Medicine, Sarada Krishna Homoeopathic Medical College,
(Affiliated to The Tamil Nadu Dr. M.G.R. Medical University, Chennai), Kulasekharam,
Kanyakumari District, Tamilnadu, India.

⁶Department of Community Medicine, Venkateswara Homoeopathic Medical College,
(Affiliated to The Tamil Nadu Dr. M.G.R. Medical University, Chennai), Porur, Chennai,
Tamilnadu, India.

*Corresponding Author Email: arpu_joshi@rediffmail.com

ABSTRACT

Psoriasis is a chronic autoimmune skin disorder characterized by rapid skin cell turnover, leading to thickened, scaly plaques. Conventional treatments such as topical agents, systemic drugs, and biologics target immune-mediated pathways but often come with adverse effects and limited long-term efficacy. Homoeopathy, a complementary system of medicine, has gained attention for its holistic approach and potential benefits in managing psoriasis. This narrative review explores the potential benefits of integrating homoeopathy with conventional psoriasis treatments, emphasizing a complementary approach that targets both the immune-mediated inflammation and the patient's overall well-being. By reviewing existing literature and clinical experiences, this review article aims to provide a balanced perspective on how homoeopathy can complement standard psoriasis management, potentially improving patient outcomes and quality of life while addressing some of the limitations of conventional therapies.

INTRODUCTION

Psoriasis is a chronic, immune-mediated inflammatory skin disorder affecting approximately 2-3% of the global population. It is characterized by the rapid proliferation of keratinocytes, leading to the formation of thick, scaly plaques on the skin, often accompanied by redness, itching, and discomfort. Although the exact cause of psoriasis remains elusive, it is widely accepted that a combination of genetic, environmental, and immunological factors contribute to its development. The disease manifests in various forms, with plaque psoriasis being the most common subtype, accounting for about 80-90% of cases. Other subtypes include guttate, inverse, pustular, and erythrodermic psoriasis, each presenting with distinct clinical features¹.

KEYWORDS:

Autoimmune, Complementary, Conventional,
Integration, Psoriasis.

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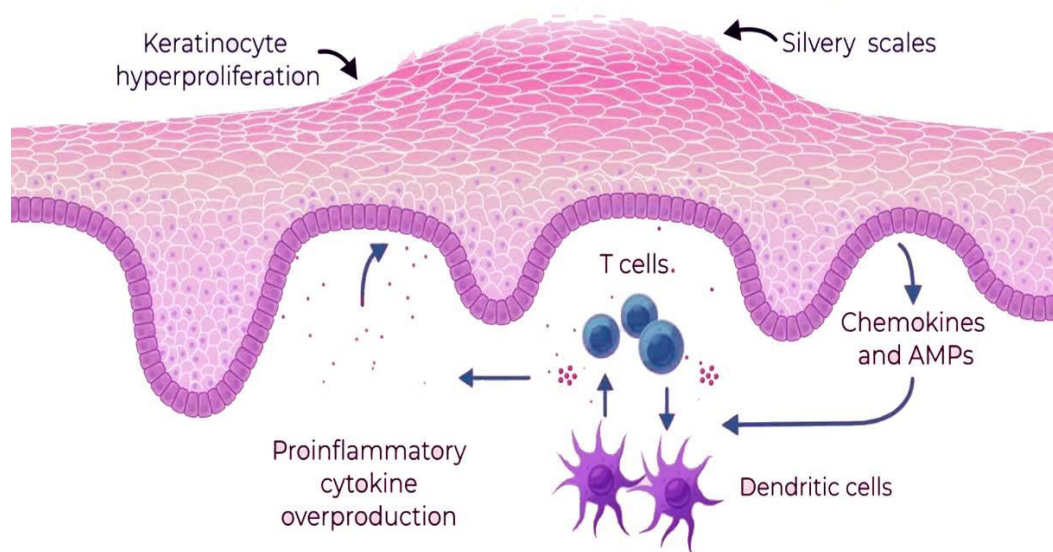
Psoriasis is more than a dermatological condition; it is associated with significant systemic comorbidities, including psoriatic arthritis, cardiovascular disease, metabolic syndrome, and mental health disorders such as depression and anxiety. The psychological burden of the disease can be profound, affecting the patient's quality of life, self-esteem, and social interactions. Given its chronic and relapsing nature, psoriasis requires long-term management strategies that address both the physical and psychological aspects of the condition².

The conventional treatment options for psoriasis include topical agents, systemic therapies, biologics, and phototherapy. While these treatments can effectively manage the symptoms and control disease progression, they often come with limitations such as side effects, drug resistance, and the need for continuous use to maintain remission. Biologics, for instance, offer targeted immunomodulation but are costly and may increase the risk of infections or other complications. Topical treatments, though useful in mild cases, are less effective for extensive or severe disease. Consequently, many patients seek complementary and alternative therapies to enhance their treatment outcomes and minimize adverse effects³.

PATHOPHYSIOLOGY OF PSORIASIS

Psoriasis is an immune-mediated disease primarily driven by dysregulated T-helper cells, especially Th1 and Th17, resulting in the overproduction of inflammatory cytokines such as TNF- α , IL-17, and IL-23. These cytokines stimulate keratinocyte hyperproliferation and abnormal differentiation, leading to the clinical presentation of psoriatic plaques. Conventional treatments focus on inhibiting these inflammatory pathways, with biologics specifically targeting cytokines to modulate the immune response. The Fig.1 depicts the pathophysiology of psoriasis as an immune-mediated inflammatory condition. Psoriasis is characterized by the hyperproliferation of keratinocytes, leading to the formation of thickened, silvery scales on the skin. This abnormal skin growth is driven by immune cell activation, specifically the involvement of T cells and dendritic cells, which initiate an overproduction of proinflammatory cytokines. These cytokines, in turn, stimulate further immune responses, creating a feedback loop that results in chronic inflammation. The presence of chemokines and antimicrobial peptides (AMPs) further contributes to the dysregulated immune activity, perpetuating the condition⁴.

Psoriasis Is an Immune-Mediated Inflammatory Condition



Immune Cell Activation
Fig.1: Pathophysiology of Psoriasis

CONVENTIONAL PSORIASIS TREATMENTS

The four main categories of treatment options for psoriasis: topical therapies, systemic therapies, biologics, and phototherapy [Fig.2]. Topical treatments, including corticosteroids, vitamin D analogs, calcineurin inhibitors, and retinoids, are commonly used for mild to moderate psoriasis. Systemic treatments such as immunomodulators, methotrexate, retinoids, and fumaric acid esters are used for moderate to severe cases⁵. Biologic therapies, including agents like etanercept,

adalimumab, infliximab, golimumab, ustekinumab, and secukinumab, target specific immune components involved in the disease. Phototherapy options like narrowband and broadband UVB, as well as psoralen combined with UVA, are effective in reducing symptoms by controlling skin cell growth and immune response. Together, these treatments provide a comprehensive approach to managing psoriasis, with treatment choices depending on disease severity and individual patient needs⁶.

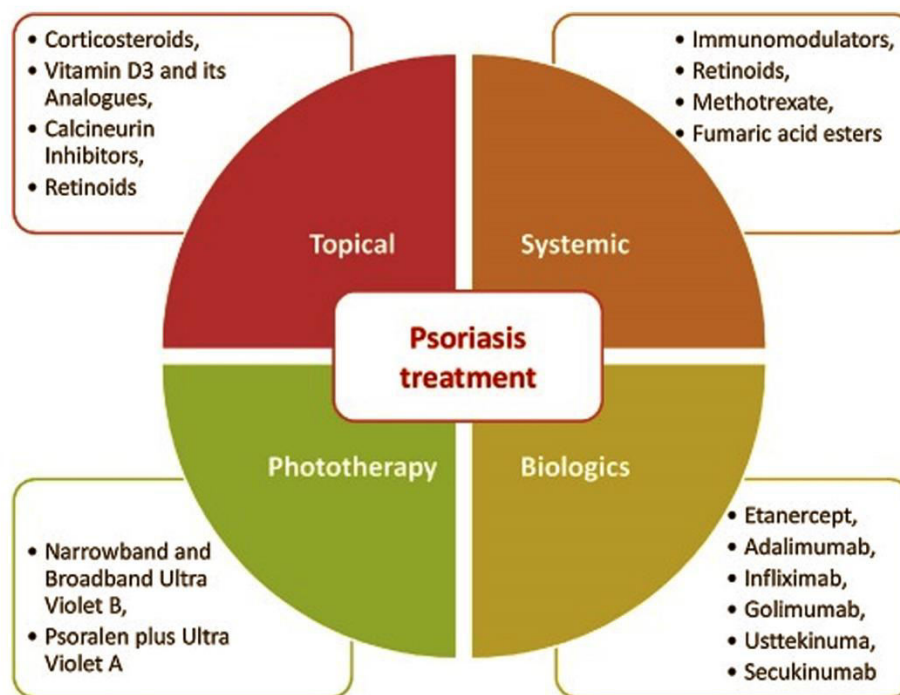


Fig.2: Conventional Psoriasis Treatments

Topical Therapies

Topical corticosteroids, vitamin D analogs, and coal tar are first-line treatments for mild to moderate psoriasis. However, long-term use of corticosteroids can lead to skin thinning and tachyphylaxis. Vitamin D analogs like calcipotriol regulate keratinocyte proliferation but can cause irritation in sensitive areas⁷.

Systemic Therapies

For moderate to severe psoriasis, systemic agents like methotrexate, cyclosporine, and retinoids are commonly prescribed. While effective, these medications are associated with hepatotoxicity, nephrotoxicity, and teratogenicity, limiting their use in certain populations⁸.

Biologics

Targeted biologic therapies such as TNF inhibitors (infliximab, adalimumab) and IL-17 inhibitors (secukinumab) have revolutionized psoriasis treatment. Although they offer higher efficacy and better safety profiles compared to systemic drugs, biologics come with high costs and potential risks of infections and malignancies⁹.

HOMOEOPATHY AND PSORIASIS

In homoeopathy, remedies are selected based on a holistic evaluation of the patient's symptoms, both physical and emotional, as well as their overall constitution. The goal is to stimulate the body's natural healing mechanism and restore balance. Psoriasis, being a chronic autoimmune condition, can benefit from individualized treatment aimed at reducing inflammation, regulating immune responses, and addressing the patient's mental and emotional well-being. Below are some commonly used homoeopathic remedies for psoriasis¹⁰.

Commonly Used Homoeopathic Remedies

Arsenicum Album:

Arsenicum Album is a prominent homoeopathic remedy used for chronic skin conditions like psoriasis, especially when there is dry, scaly skin with intense burning sensations. The scales tend to be silvery or white, and the skin often looks inflamed or reddish underneath. *Arsenicum* is suited for patients who experience anxiety and restlessness, particularly at night, and tend to feel worse in cold environments. Psoriatic lesions are often accompanied by itching and a sensation of burning, which may worsen with scratching. The patient typically has a strong desire for warmth and tends to feel cold¹¹.

Graphites:

Graphites are particularly indicated for individuals with thick, cracked, or oozing skin eruptions. It is especially effective when psoriasis affects areas with skin folds, such as behind the ears, on the scalp, and between the fingers. The scales are typically rough, dry, and may have a honey-like discharge. Patients who benefit from *Graphites* often experience itching, especially at night, which can lead to scratching and further skin damage. The emotional profile of such patients usually includes sadness, irritability, and a tendency to obesity¹².

Sulphur:

Sulphur is a key remedy for various skin conditions, including psoriasis. It is often prescribed when there is intense itching and burning, with red, inflamed, and dry skin that worsens with heat and water. The itching is usually severe, particularly at night, leading to restless sleep. *Sulphur* is beneficial for individuals who are prone to scratching, which can exacerbate their skin

condition. Patients needing Sulphur may also exhibit a marked tendency toward irritability, frustration, and a philosophical mindset. Sulphur is particularly suited for cases where psoriasis has been treated with conventional medications that suppress the skin symptoms, leading to internal discomfort or exacerbations¹³.

Sepia:

Sepia is recommended for psoriasis cases where hormonal imbalances play a significant role, especially in women. The remedy is suited for individuals who experience circular, dry, and rough patches of psoriasis, often on the elbows, knees, and scalp. The skin eruptions may worsen in cold weather or after exposure to water. Sepia patients often exhibit indifference or apathy toward loved ones and may feel overwhelmed by responsibility, leading to mood swings or irritability. This remedy is also commonly used when there are concurrent menstrual or menopausal symptoms¹⁴.

Petroleum

Petroleum is a homoeopathic remedy that is highly effective in treating psoriasis with excessively dry, cracked, and fissured skin, particularly in winter. The skin may appear thickened, with deep fissures that bleed or become infected. It is especially indicated for cases where the skin symptoms are accompanied by a sense of weariness and physical discomfort. Petroleum patients often have a rugged constitution, and their skin condition worsens with cold weather or dry environments. Emotional symptoms may include irritability and a tendency toward depression¹⁵.

Mezereum

Mezereum is used for cases of psoriasis where the skin lesions are thick, crusted, and can extend into deeper layers of the skin. It is particularly indicated when there is a sensation of burning and itching, which worsens at night or after bathing. The scales can be thick and may cover large areas of the body, such as the scalp, where they may ooze pus or serum. Patients needing Mezereum may experience intense discomfort due to the itching and the feeling of constriction in the affected areas. There is often a deep sense of chilliness, and the patient may prefer warmth¹⁶.

LycopodiumClavatum

Lycopodium is suitable for chronic psoriasis cases where there is thick, dry, and scaly skin, particularly affecting the scalp and nails. The skin may have deep cracks, and the scales tend to be yellowish or dirty-looking. This remedy is useful for individuals who suffer from digestive disturbances, such as bloating and flatulence, and may have a tendency to crave sweets. Lycopodium patients often exhibit a lack of self-confidence and may become easily anxious in social situations. Psoriasis in such cases tends to worsen during cold weather and after stressful events¹⁷.

NatrumMuriaticum

NatrumMuriaticum is a valuable remedy for psoriasis with dry, flaky skin that appears on the scalp, elbows, and knees. The eruptions are often worse with emotional stress or exposure to the sun. NatrumMuriaticum patients are usually

sensitive, introverted, and may harbor unresolved grief or sadness. They often prefer to be alone, and their psoriasis symptoms may worsen during periods of emotional upheaval. The skin lesions are typically associated with a sensation of itching and dryness, and they may have a tendency to crack and bleed¹⁸.

ThujaOccidentalis

Thuja is particularly indicated for patients with thickened, warty, or scaly skin lesions. The psoriasis patches may be localized to specific areas, such as the scalp, elbows, or genital region. Thuja patients may exhibit a general sense of discomfort and insecurity about their appearance, as well as a tendency to develop other skin conditions, such as warts or fungal infections. Thuja is often used in cases where the psoriasis is exacerbated by vaccinations or other medical interventions¹⁹.

Kali Arsenicosum

Kali Arsenicosum is another homoeopathic remedy used for chronic psoriasis, particularly when there are large, scaly patches that are dark in color and often painful. It is suited for patients who experience burning and itching, especially during the night. The skin may become ulcerated or infected, and there is a general feeling of weakness or malaise. Patients benefiting from Kali Arsenicosum often have a tendency toward anxiety, especially concerning their health, and may experience frequent cold hands and feet²⁰.

Evidence for Homoeopathy in Psoriasis Management

While high-quality clinical trials on homoeopathy are limited, case studies and observational data suggest a role for homoeopathy in reducing symptom severity and improving quality of life in psoriasis patients. Some studies have reported successful outcomes in chronic cases resistant to conventional therapies, with fewer relapses and prolonged remission periods. The individualized nature of homoeopathic treatment makes it a valuable adjunct to conventional care²¹.

INTEGRATING HOMOEOPATHY WITH CONVENTIONAL THERAPIES

The integrative approach seeks to combine the strengths of conventional medicine with homoeopathic remedies to achieve a synergistic effect. This combination aims to reduce the dosage and duration of conventional drugs, thereby minimizing side effects while maintaining efficacy²².

Enhancing Efficacy

Patients receiving conventional therapy for severe psoriasis may benefit from concurrent homoeopathic treatment, as it could help modulate the immune response and improve skin healing. Remedies like Sulphur and Arsenicum Album have been used to address both skin symptoms and systemic inflammation²³.

Reducing Adverse Effects

Conventional treatments, particularly systemic agents and biologics, carry a risk of adverse effects. Homoeopathic remedies, being non-toxic, can potentially reduce the need for higher doses of these drugs. This may alleviate the burden of drug-

related side effects such as hepatotoxicity, nephrotoxicity, and immune suppression²⁴.

Improving Quality of Life

Psoriasis significantly impacts the quality of life due to its visible nature and associated comorbidities like depression and anxiety. Homoeopathy's holistic approach, addressing both physical and emotional aspects, may complement conventional treatments by improving mental well-being and coping mechanisms²⁵.

Challenges and Considerations in Integrating Homoeopathy

While integrating homoeopathy with conventional treatments holds promise, several challenges need to be addressed:

Lack of Robust Clinical Trials:

The paucity of large-scale randomized controlled trials limits the evidence base for homoeopathy in psoriasis²⁶.

Patient Adherence:

Ensuring patients adhere to both homoeopathic and conventional treatments requires careful management and education.

Physician Collaboration:

Successful integration necessitates open communication and collaboration between dermatologists and homoeopathic practitioners to optimize treatment plans²⁷.

CONCLUSION

Integrating homoeopathy with conventional psoriasis treatments offers a complementary approach that could enhance therapeutic outcomes, reduce adverse effects, and improve the overall quality of life for patients. While the evidence supporting homoeopathy is still emerging, its individualized, non-toxic approach holds potential as an adjunct to conventional care. Further research through well-designed clinical trials is essential to establish its efficacy and guide integrative strategies in psoriasis management. The selection of homoeopathic remedies for psoriasis is individualized based on the totality of the patient's symptoms, including physical, mental, and emotional factors. Remedies like Arsenicum Album, Graphites, Sulphur, Sepia, and others have shown potential in alleviating the symptoms of psoriasis, reducing the frequency of flare-ups, and promoting holistic well-being²⁸. While homoeopathic treatments may not replace conventional therapies, they can be integrated as complementary approaches to improve the quality of life for psoriasis patients. Further clinical research and studies are needed to validate the effectiveness of these remedies in larger populations.

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