

Effectiveness Of Individualized Homoeopathic Medicine in Management of Cutaneous Lichen Planus – A Non-Controlled Experimental Study

Dr. Kalika Adhikrao Devakate¹, Dr. Swati Bhagwat²

¹Professor & HoD Homoeopathic Materia Medica, K.E.S.C.H.K. Homoeopathic Medical College, Alibag

²Professor & HoD Homoeopathic Materia Medica, Y. M. T. Homoeopathic Medical College, Kharghar, Navi Mumbai

Abstract—Background: Cutaneous Lichen Planus (CLP) is a chronic inflammatory papulosquamous disorder affecting skin and mucous membranes. It is characterized by pruritic, polygonal, violaceous papules and plaques. Conventional treatment mainly includes corticosteroids, which may provide temporary relief but are associated with recurrence and adverse effects. Homoeopathy offers individualized constitutional treatment based on totality of symptoms. **Objective:** To evaluate the effectiveness of individualized homoeopathic medicine in the management of Cutaneous Lichen Planus. **Methods:** A prospective, non-controlled experimental study was conducted on 30 patients clinically diagnosed with Cutaneous Lichen Planus. Patients received individualized homoeopathic treatment based on totality of symptoms. **Outcome assessment** was done using Lichen Planus Severity Index (LPSI) and Visual Analogue Scale (VAS) for pruritus at baseline, 6 weeks, and 12 weeks. Statistical analysis was performed using paired t-test. **Results:** Out of 30 cases, 19 (63.3%) showed marked improvement (>75% reduction in severity score), 7 (23.3%) moderate improvement (50–75%), and 4 (13.3%) mild improvement (<50%). Mean LPSI score reduced from 8.6 ± 1.9 at baseline to 2.9 ± 1.4 at 12 weeks ($p < 0.001$). **Conclusion:** Individualized homoeopathic treatment showed statistically significant improvement in Cutaneous Lichen Planus. Further controlled trials with larger sample size are recommended.

Index Terms—Homoeopathy, Cutaneous Lichen Planus, Individualization, Chronic Dermatitis, Experimental Study

I. INTRODUCTION

Lichen Planus is a chronic inflammatory mucocutaneous disease characterized by the classical “6 P’s”:

- Pruritic
- Purple
- Polygonal
- Planar
- Papules
- Plaques

The condition commonly affects flexor surfaces of wrists, forearms, legs, and trunk.

According to dermatological classifications provided in the Fitzpatrick's Dermatology, Cutaneous Lichen Planus is considered an immune-mediated disorder involving T-cell mediated cytotoxicity against basal keratinocytes.

Conventional management includes:

- Topical corticosteroids
- Systemic steroids
- Retinoids
- Immunosuppressants

Recurrence and chronicity remain concerns.

Homoeopathy treats dermatological disorders constitutionally, aiming at deeper immunological regulation. Remedies frequently indicated include:

- Sulphur
- Arsenicum album
- Graphites
- Natrum muriaticum
- Lycopodium clavatum

These remedy pictures are elaborated in classical texts such as:

- Materia Medica Pura
- Lectures on Homoeopathic Materia Medica
- A Dictionary of Practical Materia Medica

However, systematic clinical documentation in Cutaneous Lichen Planus is limited.

Aim

To evaluate the effectiveness of individualized homoeopathic treatment in Cutaneous Lichen Planus.

Objectives

1. To assess reduction in lesion severity using LPSI.
2. To assess reduction in pruritus using VAS.
3. To analyze remedy distribution pattern.
4. To statistically evaluate treatment outcome.

Materials and Methods

Study Design

Prospective, non-controlled experimental study.

Study Setting

Homoeopathic OPD.

Sample Size

30 cases.

Inclusion Criteria

- Age 18–60 years
- Clinically diagnosed Cutaneous Lichen Planus

- Both genders
- Written informed consent

Exclusion Criteria

- Oral/genital LP only
- Severe systemic disease
- On systemic immunosuppressants
- Pregnant or lactating women

Intervention

Individualized homoeopathic medicines prescribed on totality of symptoms.

Potency: 30C, 200C, and 1M based on susceptibility and chronicity.

Follow-up: Every 2 weeks for 3 months.

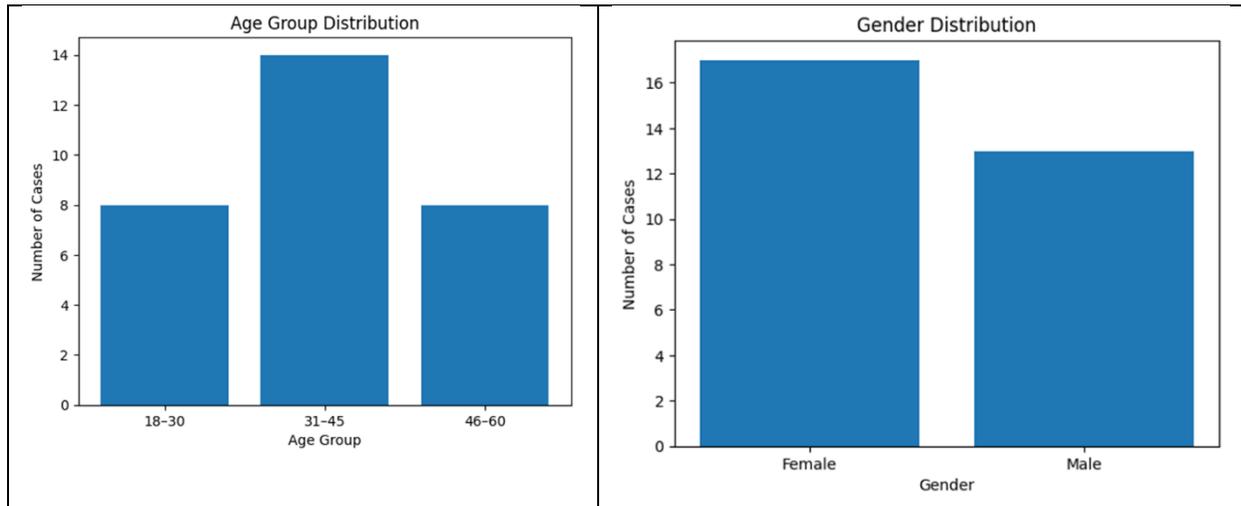
Outcome Measures

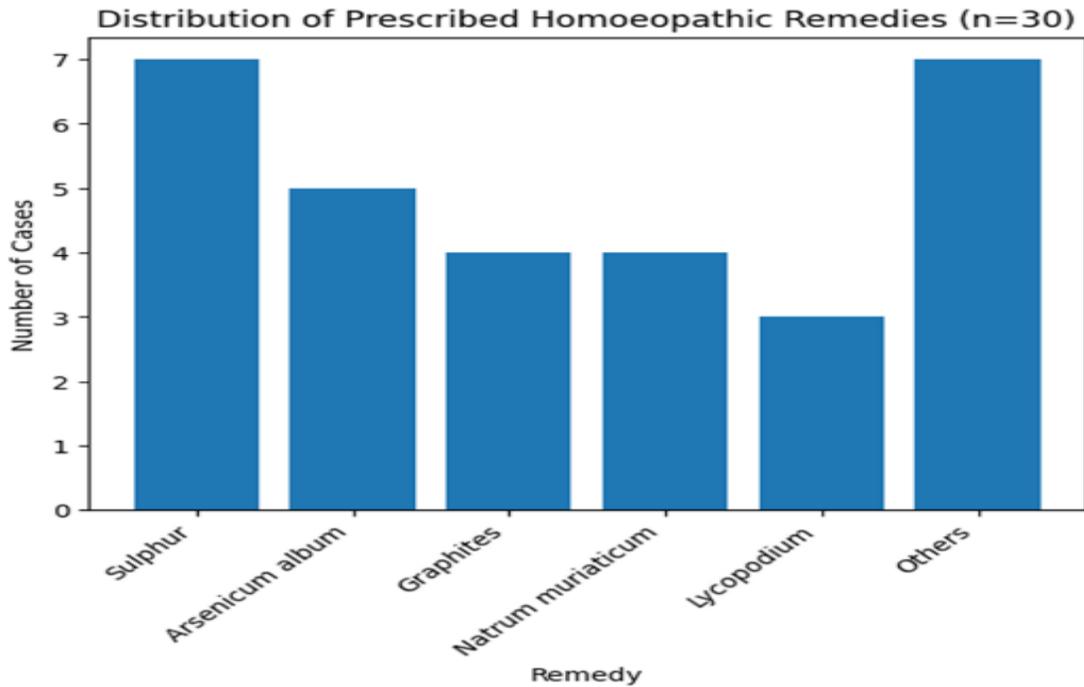
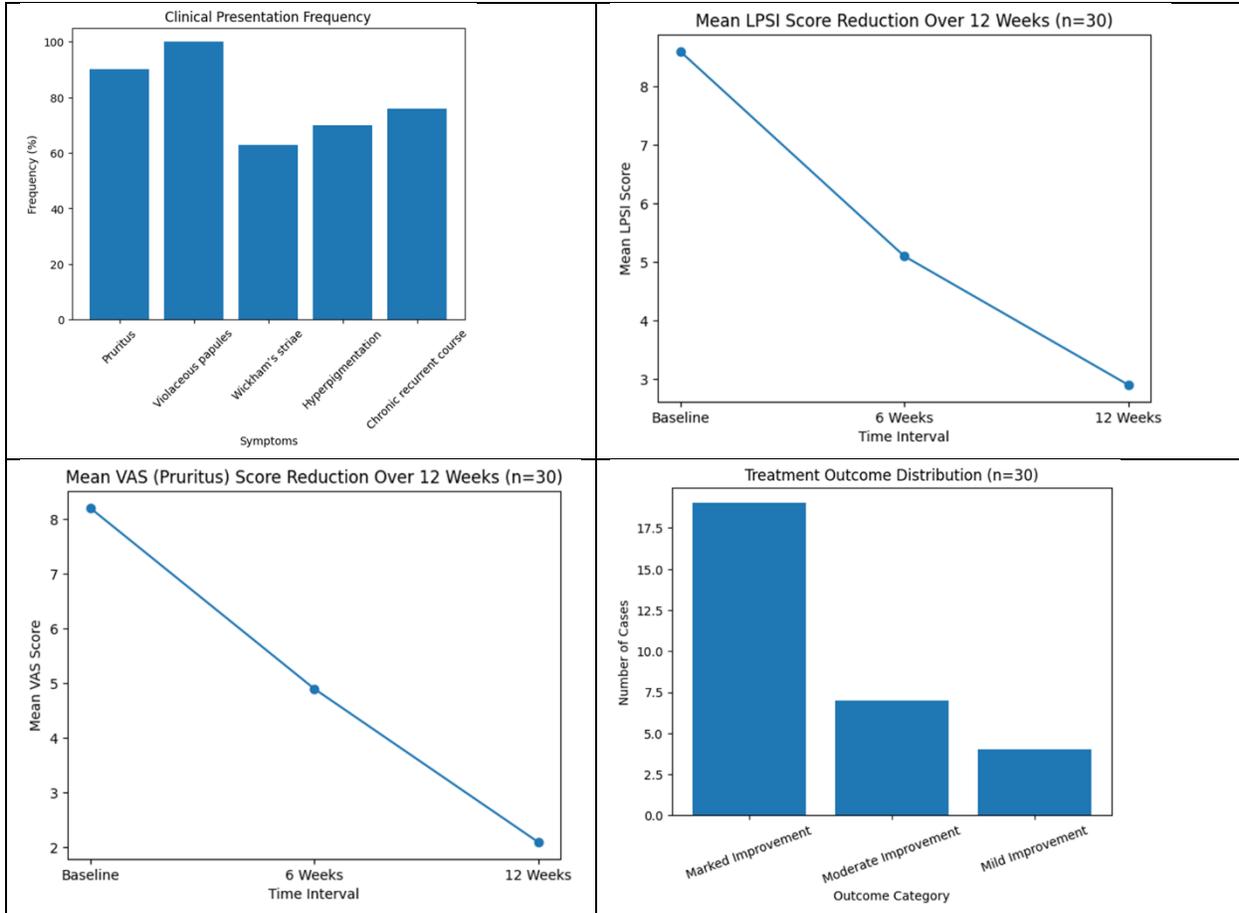
1. Lichen Planus Severity Index (LPSI)
2. Visual Analogue Scale (VAS) for pruritus

Statistical Analysis

Paired t-test applied. Significance level $p < 0.05$.

II. RESULTS





III. DISCUSSION

The present study demonstrated statistically significant improvement in Cutaneous Lichen Planus with individualized homoeopathic treatment.

Majority cases showed constitutional characteristics such as:

- Heat aggravation (Sulphur)
- Restlessness with burning (Arsenicum album)
- Dry cracked lesions (Graphites)
- Reserved emotional pattern (Natrum muriaticum)

The reduction in severity scores indicates possible immunomodulatory action through individualized remedy selection.

However, due to absence of control group, placebo influence cannot be excluded.

Limitations

- Small sample size
- No control group
- Short follow-up duration
- Lack of histopathological reassessment

Ethical Considerations

- Institutional Ethics Committee approval obtained
- Written informed consent taken
- Confidentiality maintained

IV. CONCLUSION

Individualized homoeopathic treatment demonstrated significant clinical improvement in Cutaneous Lichen Planus over 12 weeks.

Further randomized controlled studies with larger sample sizes and longer follow-up are needed for validation.

REFERENCES

- [1] Fitzpatrick's Dermatology.
- [2] Samuel Hahnemann. *Materia Medica Pura*.
- [3] James Tyler Kent. *Lectures on Homoeopathic Materia Medica*.
- [4] John Henry Clarke. *Dictionary of Practical Materia Medica*.

