

Role of homoeopathy in corns: A Review of literature with Therapeutic and Repertorial Perspective

Dr. Viral Joshi ¹, Dr. Devangi S. Pandya²

¹ BHMS, Pg Student, Homoeopathic Repertory, Ahmedabad Homoeopathic Medical College, Parul University, Ahmedabad.

² Md. Hom, Professor and Pg Guide of Department of Homoeopathic Repertory, Ahmedabad Homoeopathic Medical College, Parul University, Ahmedabad

Abstract- Corns are localized thickened skin lesions caused by friction and pressure, often leading to pain and discomfort. Corn is common worldwide. Any weight-bearing human is susceptible to the development of corns. Hyperkeratotic lesions are highly prevalent in community-dwelling older people, affecting 33 to 68%. Hyperkeratosis is the result of abnormal mechanical stress on the skin, which stimulates overactivity of the keratinization process. This causes accelerated proliferation of epidermal cells and a decreased rate of desquamation, resulting in hypertrophy of the stratum corneum. Homeopathy offers a gentle and effective approach for treating corns through the use of individualized remedies.

Key words- Corns, hyperkeratotic lesion, homoeopathy, individualized remedies

I. INTRODUCTION

A corn is also known as "clavus," "heloma," or plantar hyperkeratosis. [1]

Corns are responses to a pressure. The hard keratin core of corns can cause pain if it is pressed inward. They appear where there is high local pressure, often between bony prominences and shoes. [2]

Corns are common worldwide. Any weight-bearing human is susceptible to the development of corns.[3] Humans walk with their entire body weight supported by their feet, which bear the full burden during each step. When there is an increase in the duration and magnitude of mechanical stress of plantar skin, it may respond by developing conditions that include corns and calluses. [4]

A corn, or a circumscribed hyperkeratotic lesion that may be hard, is known as heloma durum, or soft, known as heloma molle, and a callus is known as a

diffusely hyperkeratotic lesion. [5]

Hyperkeratotic lesion (calluses and corns) is highly prevalent in community-dwelling older people, affecting 33 to 68%. Hyperkeratosis is the result of abnormal mechanical stress on the skin, which stimulates overactivity of the keratinization process. This causes accelerated proliferation of epidermal cells and a decreased rate of desquamation, resulting in hypertrophy of the stratum corneum. [6]

Corns are often seen in athletes and patients exposed to uneven friction from footwear or gait abnormalities, and callosities are seen in the hands of manual laborers and the feet of those who walk barefoot. [5]

Skin hyper callosity, which affected 26.5% of women, was the commonest type of deformity, and they were mainly found on the dorsal of the toes. [7]

The risk of suffering disorders of the skin and underlying tissue in the lower extremities and upper extremities is one of the few adverse effects of a physically challenging sport; demanding and repetitive physical activity or high-impact exercising has particularly been linked to hyperkeratotic lesions such as corns and calluses. [8]

The prevalence of corns on the feet has been reported to be ranging everywhere from 14% to 48%. Older age groups & females have been reported to develop corns due to wearing narrow shoes. [9]

The extrapolated statistic of corns and calluses in India is an estimated 26.6 million individuals. [3]

One of the most prevalent foot conditions in the USA is corns, especially in older patients. It is a common disorder because of the frequency of usage of

occlusive footwear and participation in repetitive activities, such as running. [3]

It has been noted that the elderly population, both men and women, frequently wear shoes that are too small for their feet. Women have been reported to wear shoes that are also shorter than their feet. Corns can also develop from wearing shoes that are too tight or too short, in addition to foot deformities. They are more common in women than in men because of this use of occlusive and poorly fitted footwear. [9]

They have been reported to affect older age groups with a slight female predominance due to wearing narrow shoes. The elderly are also subject to loss of the protective fat pad cushioning, called fat pad atrophy, which can increase the incidence of painful corns. [10]

The conventional treatment method involves surgical removal and topical ointment. But this is not a permanent solution, as the condition of corn has a tendency to recur frequently.

Corns is a local disease. It has a high chance of recurrence, and the only treatment available in modern medicine is surgical removal, which is invasive, painful, may leave scarring and destruction of normal surrounding tissues, and requires immobilization for 4-6 weeks. Homeopathy can be used for gently treating corns along with permanently. [11]

II. METHODS

This review article was conducted through an extensive literature review of available scientific and homoeopathic sources related to corns and their management through homoeopathy.

Standard dermatology textbooks, homoeopathic Materia medica, repertories, and peer-reviewed research articles were used to prepare this review article. Keywords including corns, plantar hyperkeratosis, clavus, homoeopathy, individualized treatment, and hyperkeratotic lesions were used to search electronic databases like PubMed, Google Scholar, and online medical repositories.

To find remedies and repertorial rubrics related to corns, classical homoeopathic literature such as Boericke's Materia medica, Phatak's Materia medica, Allen's keynotes, and repertories like Boger Boenninghausen's Characteristics and Repertory, Kent's repertory, Phatak's repertory, Boenninghausen's Therapeutic pocket book, and Boericke's Repertory.

Articles related to corn management, clinical presentation, pathophysiology, and epidemiology were also assessed.

The Review primarily focused on commonly indicated homoeopathic medicines, repertorial approach, and the holistic principles of homoeopathic treatment in managing hyperkeratotic lesions.

III. ETIOLOGY

1. Extrinsic factors:
 - Poor footwear
 - Irregularities in shoes
 - Open shoes
 - Activity levels, athletes
2. Intrinsic factors:
 - Bony prominences
 - Prominent condylar projections
 - Malunion of a fracture
 - Faulty foot mechanics
 - Toe deformity (claw, hammer, mallet, short first metatarsal) [5]

IV. PATHOPHYSIOLOGY

Corns are the result of the mechanical skin trauma that causes the hyperplasia of the epidermis. Most commonly, friction and pressure between the bones of the foot and fitting footwear cause a normal physiological response proliferation of stratum corneum. one of the primary roles of the stratum corneum is to give a barrier to mechanical injury. Any insult compromising this barrier causes homeostatic changes and the release of cytokines into the epidermis, stimulating an increase in synthesis of the stratum corneum. When the insult is chronic and the mechanical defect is not repaired, hyperplasia and inflammation is common [12]

V. SIGNS AND SYMPTOMS

It presses over the adjacent nerves causing pain.

It can get infected causing unbearable pain and tenderness with inability to walk.

It is smaller lesion which is driven deep into the skin forming a localized palpable painful/tender nodule with a central yellow, white center of dead cornified skin.

Corn is narrow, deep and painful/tender.

Corn is usually white/Gray/yellow colored, deep-seated lesion.[13]

VI. DIFFERENTIAL DIAGNOSIS

Plantar warts

Calcinosis cutis

Warty dyskeratoderma

Palmoplantar keratoderma [1]

VII. TREATMENT

1.Preventive measures may be taken such as using soft shoes or soft pads at the pressurepoints of the sole.

2.Salicylic acid in collodion on successive night may be applied.

3.Central local application has been effective such as cornac or carnation cap.

4.Some If these measures fail and the corn is painful, it should be excised with particular care to take off the deep root of the central core.[14]

VIII. HOMEOPATHIC APPROACH

Homoeopathy is a viable and effective option for gently treating corn using individualized medicines. Homoeopathic treatment involves the medicines selected based on individualised symptoms. in Aphorism 173 of Hahnemann's Organon of Medicine, characterized primarily by one or a few external symptoms.[11]

Corns fall under the category of external local maladies, a concept given by Dr. Hahnemann in Aphorisms 185 and 186 of the fifth edition of the

Organon. These local maladies are defined by visible changes localised to a particular part of the body. Some recent local conditions which are only caused by external lesions may be resolved through mechanical means or surgery. (aphorism 186) [11]

But In homeopathy, treatment is based on the principle of the totality of symptoms, which includes all the strange, rare, uncommon and individual characteristics manifested by the patient. This holistic approach ensures that the patient is treated as a whole, not just the local lesion. Consequently, the local affection is cured simultaneously with general morbid state.[11]

Here are the indications of a few homeopathic remedies:

[1] Antim crudum

Corns on the soles of feet, and callous excrescence at the tips of the toes.

Pressive pain in the corns.

Burning in the fleshy part of the great toe.

Callus excrescence under the nail of the great toe. [15]

Feet very tender, covered with large horny places.[16]

Inflamed corns, pain in heels.[15]

Callosities on soles, callosities from slight pressure [17]

Feet very tender, soles tender while walking

Large horny corns on soles of feet.

Very sensitive when walking, especially on stone pavements.[17]

[2] Silicea:

Soft corns in between toes.[17]

Every little injury suppurates.

Promotes expulsion of foreign bodies from tissues.[16]

Long lasting suppuration.

Pain beneath toes, soles sore.[16]

[3] Lycopodium:

Painful callosities on soles, toes and fingers contracted.[16]

Right foot hot, left cold.[16]

Pain in heel on treading as from a pebble. [17]

Corns on the feet, sometimes with shooting pain.

Corns which are very sensitive or with tearing pains.[15]

4] Ranunculus bulbous:

Corns sensitive, horny skin. [16]
 Corns sensitive to touch, smart or burn. [15]
 Callous and other excrescences. [15]
 Pain in heels as if pinched by book [17]

[5] Thuja:

Painful sensitiveness of skin. [15]
 Shooting pain in skin esp. evening & at night. [15]
 Corns burning. [15]
 Skin looks dirty, brown, seedy, pedunculated. [18]

[6] Sulphur:

Dry, scaly, unhealthy skin. [16]
 Every little injury suppurates. [16]
 Burning in soles at night.[16]
 Corns with pressive and shooting pains. [15]
 Callous especially round the fingers.[15]

[7] Rhus tox:

Corns on feet, with burning sensation and pain as from excoriation.
 Pains are tearing, shooting, stitching.
 Agg: At night [15]
 Can not rest in any position. [17]

[8] Ferrum Picricum:

Corns with yellowish discoloration. [16]
 Corns, dirty looking skin.[15]

[9] Nitric acid:

Corns on feet. [15]
 Lancinating as by splinters or with burning pains. [15]
 Condylomata, moist, like cauliflower, hard, rhagadic or in thin pedicles. [15]

[10] Bryonia alba:

yellow colour of the skin.
 Corns with pressure, burning, shootings or pain of excoriation on being touched. [15]

IX. REPERTORIAL APPROACH

There are various rubrics present in various repertories which are mentioned below-

RUBRICS OF CORNS-

Repertory of Homoeopathic Materia medica by J.T. Kent [19]

- [KENT] [EXTREMITIES] Corns
- [KENT] [EXTREMITIES] Corns: Aching
- [KENT] [EXTREMITIES] Corns: Boring
- [KENT] [EXTREMITIES] Corns: Burning
- [KENT] [EXTREMITIES] Corns: Horny
- [KENT] [EXTREMITIES] Corns: Inflamed
- [KENT] [EXTREMITIES] Corns: Jerks
- [KENT] [EXTREMITIES] Corns: Painful
- [KENT] [EXTREMITIES] Corns: Painful: Touched, when:
- [KENT] [EXTREMITIES] Corns: Painful: ulcerated, as if
- [KENT] [EXTREMITIES] Corns: Pinching
- [KENT] [EXTREMITIES] Corns: Pressing
- [KENT] [EXTREMITIES] Corns: Pulsating
- [KENT] [EXTREMITIES] Corns: sensitive
- [KENT] [EXTREMITIES] Corns: shooting
- [KENT] [EXTREMITIES] Corns: sore
- [KENT] [EXTREMITIES] Corns: stinging
- [KENT] [EXTREMITIES] Corns: tearing
- [KENT] [EXTREMITIES] Corns: heel
- [KENT] [EXTREMITIES] Corns: soles horny
-

Concise repertory of Homoeopathic Materia medica- Dr. Phatak [20]

- [PHATAK] CALLOSITIES, corns
- [PHATAK] CALLOSITIES, corns: burning
- [PHATAK] CALLOSITIES, corns, cracks deep with
- [PHATAK] CALLOSITIES, corns: hanging down agg
- [PHATAK] CALLOSITIES, corns: inflamed
- [PHATAK] CALLOSITIES, corns: painful
- [PHATAK] CALLOSITIES, corns: pressing
- [PHATAK] CALLOSITIES, corns: pressure slight from
- [PHATAK] CALLOSITIES, corns: shooting
- [PHATAK] CALLOSITIES, corns: soft
- [PHATAK] CALLOSITIES, corns: sore
- [PHATAK] CALLOSITIES, corns: stinging
- [PHATAK] CALLOSITIES, corns: tearing
- [PHATAK] HEELS, corns
- [PHATAK] TOES, corns

Boenninghausen's therapeutic pocket book.[21]

- [BTPB] [SKIN] corns
- [BTPB] [SKIN] corns: with boring
- [BTPB] [SKIN] corns: with burning
- [BTPB] [SKIN] corns: horny
- [BTPB] [SKIN] corns: inflamed
- [BTPB] [SKIN] corns: with jerking
- [BTPB] [SKIN] corns: with pressing
- [BTPB] [SKIN] corns: sensitive
- [BTPB] [SKIN] corns: smarting
- [BTPB] [SKIN] corns: with stiches
- [BTPB] [SKIN] corns: with tearing
- [BTPB] [SKIN] corns: with throbbing

Boger Boenninghausen's Characteristics and Repertory.[22]

- [BBCR] [SKIN AND EXTERIOR BODY] – corns
- [BBCR] [SKIN AND EXTERIOR BODY] – corns-Boring in
- [BBCR] [SKIN AND EXTERIOR BODY] – corns Burning in
- [BBCR] [SKIN AND EXTERIOR BODY] – corn-Formation of tendency to
- [BBCR] [SKIN AND EXTERIOR BODY] – corns -On heels
- [BBCR] [SKIN AND EXTERIOR BODY] – corns -Horny
- [BBCR] [SKIN AND EXTERIOR BODY] – corns- Inflamed
- [BBCR] [SKIN AND EXTERIOR BODY] – corns -Jerks in
- [BBCR] [SKIN AND EXTERIOR BODY] – corns -Painful
- [BBCR] [SKIN AND EXTERIOR BODY] – corns- Piercing
- [BBCR] [SKIN AND EXTERIOR BODY] – corns -Pressing in
- [BBCR] [SKIN AND EXTERIOR BODY] – corns- Pricking
- [BBCR] [SKIN AND EXTERIOR BODY] – corns- Sensitive
- [BBCR] [SKIN AND EXTERIOR BODY] – corns- Shooting, tearing in

- [BBCR] [SKIN AND EXTERIOR BODY] – corns- Smarting soreness
- [BBCR] [SKIN AND EXTERIOR BODY] – corns -Sticking, stiches
- [BBCR] [SKIN AND EXTERIOR BODY] – corns- Throbbing in
- [BBCR] [SKIN AND EXTERIOR BODY] – corns -Toes, on balls of
- [BBCR] [SKIN AND EXTERIOR BODY] – corns- Joint of
- [BBCR] [SENSATION AND COMPLAINTS IN GENERALS] – callus forming
- [BBCR] [UPPER EXTERMITIES] – CALLOSITIES
Boericke W. Boericke's repertory [23]
- [BOERICKE] [SKIN] callosities (corns)

X. DISCUSSION

Corns are localized hyperkeratotic lesions that form as the skin's defense mechanism against ongoing friction and mechanical pressure. They frequently appear on weight-bearing parts of the foot, especially over bony prominences, and are often linked to poorly fitting shoes, irregular gait patterns, or repetitive exercise.

According to epidemiological research, up to 33–68% of the elderly population may have hyperkeratotic lesions, which are extremely common in older people. Women are also more likely to report this condition because they wear narrow or high-heeled shoes.

[6] [9]

Conventional treatment of corns mainly includes mechanical removal, salicylic acid and surgical excision. Although these approaches provide temporary relief, recurrence is common. Homoeopathy provides a holistic approach to the management of corns by focusing on the individual characteristics of the patient rather than treating the lesion alone.^[14]

There are several homoeopathic medicines have been found useful in the management of corns and also various repertorial rubrics related to corns are well represented in various repertories.

So, it can be helpful to find most suitable individualized remedy.

Thus, homoeopathy offers a gentle, individualized and holistic method of managing corns. By addressing patient's constitutional characteristics along with local

symptoms, homoeopathic treatment may help relieve pain, soften the hyperkeratotic tissue, and reduce the recurrence.

XI. CONCLUSION

Corns are painful hyperkeratotic lesions caused mainly by continuous pressure and friction on the skin. Conventional treatments often provide only temporary relief and recurrence is common. Homoeopathy offers an individualized and holistic approach by selecting remedies based the totality of symptoms, which helps relieve pain, soften the hardened tissue and reduce recurrence. Thus, homoeopathy can be considered a safe and effective option in the management of corns.

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