

Review Article

The Study of Urticaria and Its Management with Apis Mellifica and Dulcamra

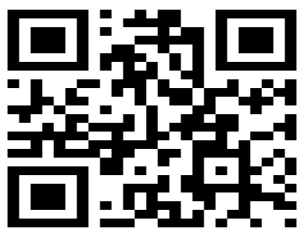
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ABSTRACT

Urticaria is a commonly seen clinical condition where there is a transient eruption of raised and circumscribed erythematous or oedematous swellings of superficial dermis, associated with itching. Urticaria is also known as nettlerash or hives. It characterised by weals-spots or patches of raised red or white skin. each of which usually clears away in a few hours to be replaced by other fresh wheals. typically occurs on face, hands and feet although any where can be affected. Homoeopathy offers effective and permanent solutions to urticaria. Urticaria often occurs at different times or together in the same person. They occur in about 15% population at the same time or the other in their lives, women being affected more commonly than men. Homoeopathy has maximum scope in the treatment of urticaria, as modern medicines has nothing more to offer other than antihistaminics. The correct Homoeopathic Similimum when selected on the basis of intensity of disease as well as systemic causes, emotional & numerous other factors commonly affecting the condition, administered in minute dose stimulates the body's defense mechanism boosts up the immunity & develop resistance against disease.

Keywords: Urticaria, Homoeopathy, Erythematous, Synthesis



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INTRODUCTION

Definition: Urticaria is commonly seen condition where there is transient eruptions of raised and circumstances erythematous or oedematous swelling of the superficial dermis, associated with itching.

Prevalance: Approximately 15 to 20 % of general population will have urticaria. Its common in damp areas.

Pathophysiology: urticaria tends to occur due to a local release of histamine, bradykinins, kallikrein or acetylcholine from the granules of mast cells and basophils. This causes an intradermal edema due to capillary and arteriolar dilatation, increase vascular permeability via H1 and H2 receptors on blood vessels, with occasional leukocyte infiltration.

Urticaria has three major mechanisms.

Most commonly it is a manifestation of acute IgE mediated (type 1) hypersensitivity reaction, with

histamine as its primary mediator released from mast cells. Sometimes urticaria can be manifestation of immune complex reaction or complement mediated reactions, specific drug reactions or due to an idiopathic cause.

Types of urticaria:

Urticaria can be broadly classified in terms of "duration" or its trigger factors'.

1. In terms of duration, urticaria can be divided into acute and chronic. Acute urticaria is usually self limited and weal commonly resolves within 24 hours, but may last upto 4 to 6 weeks. In chronic urticaria the weals continue daily or on most days for longer than 6 weeks.

2. Classification in terms of trigger factors, it can be divided into:

a) Non immunologic or nonallergic or ordinary urticaria: These are caused by degranulation of mast cells and histamine release

by mechanism not involving antigen antibody reaction.

The most commonly seen causative factors of nonallergic urticaria are:

Drugs: Anesthetics, Angiotensin Converting Enzymes Inhibitors, Aspirin etc

Foods: Chocolate, Eggs, Fish, Milk etc

Food Additives: Hydroxybenzoil etc

Inhalants: Grass Pollens, House Dust etc

Infections: Pharyngitis, Gastrointestinal, Genitourinary, Respiratory, Fungal ,Malaria, etc.

Systemic disorders: Amyloidosis, Carcinom, Hyperthyroidism, SLE etc.

Physical: Cold, Excercise, Friction, Perspiration ,Pressure And Sunlight.

Miscellenious: Contact With Nickel, Nail Polish, Rubber, Plant, Creams, Detergent, Or Lotions.

b) Immunologic or allergic or idiopathic or autoimmune urticaria:

Genes tend to play a role in a few urticarial conditions, where a strong personal or family history of atopic disorders can usually be found. Angioedema and a few rare urticarial variants can be of a hereditary type occurring due to a C1 esterase inhibitor deficiency.

Clinical features:

1. The urticarial lesions begin as itchy erythematous macules which develop into weals consisting of pale-pink or red, oedematous, raised skin areas, of varying shapes and sizes often with surrounding flare.

2. These usually transient and migratory lesions can form linear, annular(circular) or arcuate(serpiginous) patterns, and can occur anywhere on the body in variable numbers.

3. Extreme itching especially at night.

4. Lesions resolve leaving normal skin.

5. Half of the cases are associated with angioedema

Diagnosis:

Specific laboratory studies are not generally indicated. Instead a detail personal and family case history is taken in suspected clinical cases especially as regards to previous attacks ,and an attempt has been made to find out the trigger factors, though in more than half of the cases the no particular cause can be traced.

Fluoroimmunoassay may be helpful in detection of food allergies.

Skin patch test to find out specific allergen if needed

Differential diagnosis:

Anaphylaxis

Erythema multiforme

Prognosis: The prognosis of urticaria is good.

Homoeopathic management:

Apis Mellifica: The characteristic of urticaria is the stinging and itching as if from bee stings. The itching is always worse at 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. There is burning pain. Generalized anasarca as a strong concomitant to the urticaria. Change of weather, warmth, and exercise cause troublesome itching and burning urticaria. The urticaria is worse during both chill as well as fever. The urticaria sometimes accompanies asthmatic troubles.

Modalities- Worse, heat in any form; touch; pressure; late in afternoon; after sleeping; in closed and heated rooms. - Better, in open air, uncovering, and cold bathing.

Dulcamara: Hives come on at night, especially when the 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 oedema of glands; feverish 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 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 praecordial region, restlessness and sleeplessness, night-sweats turbid, dark urine, diarrhoea, pains in limbs. Urticaria from gastric disorders.

Modalities: Worse, at night; from cold in general, damp, rainy weather. Better, from moving about, external warmth.

These are only two homoeopathic drugs there are many such drugs in homoeopathy that has wonderful results and complete cure of urticaria.

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