

HOMEOPATHY IN URTICARIA AN INTEGRATIVE PATH TO RELIEF**Dr. Arun Nishad^{*1}, Dr. Ayushi Malhotra² and Dr. Aanchal Budhiraja³**

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ABSTRACT

Urticaria, characterized by itchy, red welts on the skin, is a common dermatological condition that can significantly affect quality of life. Conventional treatments like antihistamines offer relief but may not address the root cause in every case. This article explores the role of constitutional homeopathy as a complementary or alternative approach in managing urticaria. By considering the patient's overall physical, emotional, and mental state, homeopathic remedies aim to stimulate the body's self-healing ability. We also discuss the potential benefits, limitations, and the need for further research through clinical trials to substantiate the efficacy of homeopathy in treating urticarial.

KEYWORDS: Chronic urticaria, Homoeopathy, angioedema, Health related quality of life.

INTRODUCTION

Urticaria ('hives') is caused by localised dermal oedema secondary to a temporary increase in capillary permeability. If oedema involves subcutaneous or sub-mucosal layers, the term angioedema is used.^[1] which affects deeper sub dermal and or sub mucosal sites and appears as brawny, nonpitting edema typically

without well-defined margins and without erythema unlike other forms of edema and recurrent, pruritic (itchy), pink-to-red oedematous (swollen) lesions that often have pale centres (wheals). The lesions can range in size from a few millimeters to several centimetres in diameter, and are often transient, lasting for less than 48 hours.^[2] The common perspective of physicians on chronic urticaria (CU) refers to a benign disorder with no pain and no threat to function or life from the patient perspective, CU affects as many dimensions of the (HRQOL) as some life threatening diseases or well-recognized disabling chronic skin disorders, such as psoriasis or atopic dermatitis. Pruritus as well as swelling and wheals triggered by unavoidable events, such as pressure or sweating, greatly contribute to HRQOL impairment.^[3]

EPIDEMIOLOGY – It has been estimated that 22% of individuals will at some point in their lives develop urticaria. It was the fourth most important allergic condition after rhinitis, asthma and drug allergy.^[19]

AGE GROUP - Although persons of any age may experience urticaria but it occurs most frequently after adolescence, with the highest incidence in young adults. Point prevalence, on the other hand, is about 1% of the general population, denoting the percentage of people afflicted by the condition at a given point in time.^[4]

GENDER - There is a strong female predilection research shows that women are primarily affected, especially those in their fourth and fifth decades of life.

PREVALENCE - CSU is estimated at between 0.23% and 1.8% of the population in the U.S. and internationally. Notably common is chronic urticaria, which is defined as symptoms that last longer than six weeks^[5]

According to a research done on students, a particular form of cholinergic urticaria affects roughly 4.16% of young adults between the ages of 18 and 22.^[6]

Key Regions with Notable Urticaria Rates

- ❖ **North India** - This area has seen research on cold-induced urticaria, a subtype of the condition. In comparison to western countries, cold urticaria may be underdiagnosed because of the mostly tropical climate. Studies, however, suggest that it does exist; instances have been documented in states like Punjab and Himachal Pradesh.^[7]
- ❖ **West Bengal and Gujarat**- Chronic urticaria is frequently reported in urban centres such

as Kolkata (West Bengal) and Ahmedabad (Gujarat). These areas have a higher concentration of healthcare facilities, leading to better diagnosis and reporting of cases^[8]

- ❖ **South India** - According to a study conducted at a government tertiary care hospital in South India, patients who visit dermatology clinics frequently have chronic urticaria, especially women in their fourth and fifth decades of life.^[9]
- ❖ **General Trend** - Low-middle socio-development index (SDI) areas—which may include some parts of India—had higher rates of urticaria because access to treatment and environmental exposures have a major impact on the burden of disease.^[10]

ETIOLOGICAL FACTORS - The underlying causes of urticaria can be diverse and are generally categorized into several key triggers

1. Allergic Reactions - The most frequent cause of urticaria is an allergic reaction. This occurs when the immune system mistakenly identifies a harmless substance as a threat, leading to the release of histamines common allergens are following.

- ❖ Foods (e.g., nuts, eggs, seafood)
- ❖ Medications (e.g., antibiotics, no-steroidal, anti-inflammatory drugs)
- ❖ Insect stings or bites
- ❖ Latex and certain plants (e.g., poison ivy)

The histamine release results in fluid leakage from blood vessels, causing the characteristic swelling and itchiness associated with hives.^[11-12]

2. Physical Triggers - Certain physical factors can also provoke hives, are following.

- ❖ Pressure on the skin (e.g., from tight clothing)
- ❖ Temperature changes (e.g., heat, cold, or sweating)
- ❖ Sunlight exposure
- ❖ Vibration (e.g., from activities like mowing the lawn)
- ❖ Water exposure (in rare cases)

These triggers can lead to a condition known as physical urticaria, where the hives occur in response to specific stimuli.

3. Infections - Infections, whether viral, bacterial, or fungal, can also lead to the development of hives. Common infections associated with hives include.

- ❖ Viral infections (e.g., the common cold, COVID-19)
- ❖ Bacterial infections (e.g., strep throat)
- ❖ Urinary tract infections

In some cases, the hives may be a symptom of the infection itself rather than a direct allergic reaction.^[11-12-13]

4. Stress and Emotional Factors - Emotional stress and anxiety can exacerbate or trigger hives in some individuals. The relationship between stress and hives can create a cycle where stress leads to hives, which in turn causes more stress due to discomfort and embarrassment.^[14]

5. Underlying Health Conditions - Chronic urticaria may sometimes indicate an underlying health issue, such as

- ❖ Autoimmune disorders (e.g., lupus, rheumatoid arthritis)
- ❖ Thyroid disease
- ❖ Celiac disease

In these cases, hives may persist for extended periods, often requiring medical evaluation to identify and treat the underlying condition.^[11-12]

CLINICAL TYPES

1. SPONTANEOUS URTICARIA

A. ACUTE SPONTANEOUS URTICARIA - Spontaneous occurrence of wheals and/or angioedema for a total duration of fewer than six weeks.

B. CHRONIC SPONTANEOUS URTICARIA-(CSU) - Spontaneous occurrence of wheals and/or angioedema for a total duration of six weeks or more. This is synonymous with "chronic urticaria" and "chronic idiopathic urticaria."

C. CHRONIC INDUCIBLE URTICARIA-(CINDU) - Occurrence of wheals for a total duration of six weeks or more, which is inducible by physical factors (*e.g., touch, pressure extremes*). This is synonymous with **physical urticarial**.^[15]

2. PHYSICAL URTICARIA

- ❖ **Cold contact urticaria**- bring out by cold object, air, fluids, wind
- ❖ **Delayed pressure urticaria**- bring out by vertical pressure, wheals arising after 3-12 hour
- ❖ **Heat contact urticaria** – bring out by localized heat exposure
- ❖ **Cholinergic urticaria** - (triggered by sweating)
- ❖ **Solar urticaria** – bring out by UV and visible light
- ❖ **Demographic urticaria** – bring out by mechanical shearing force, wheals arising after 1-

5minutes

- ❖ **Vibratory urticaria/Angioedema** – bring out by vibrations for example jackhammer
- ❖ **Aquagenic Urticaria** - Aquagenic urticaria is a rare form where hives develop after contact with water, regardless of its temperature
- ❖ **Contact Urticaria** - This type occurs when the skin comes into direct contact with an allergen, leading to localized hives at the contact site
- ❖ **Hereditary Angioedema (HAE)** - While not strictly urticaria, HAE is a related condition characterized by recurrent episodes of swelling in various parts of the body, including the hands, feet, face, and airway.^[16-17]

PATHOPHYSIOLOGY - Mast cells and basophils become activated and cause urticaria and angioedema. The release of immunological mediators is a result of mast cell degranulation. Histamine is the main mediator; it binds to endothelial cells' and sensory nerves' H-receptors. On the other hand, a number of cytokines and chemokine's, prostaglandin, and leukotriene's are also associated. In the end, this causes a rise in vascular permeability, or vasodilatation, which causes dermal edema and the recruitment of inflammatory cells.

Activation of mast cells can be divided into immunological and non-immunological processes

Immunological activation - is mediated by effectors of adaptive immunity binding receptors on mast cells. In type 1 hypersensitivity, crosslinking of allergen with IgE on sensitized mast cells leads to acute urticaria and anaphylaxis. In CSU, however, immunological activation of mast cells is thought to occur independently of allergen-IgE complexes and may involve IgG (type 2 hypersensitivity), circulating immune complexes (type 3 hypersensitivity), and T-cells (type 4 hypersensitivity)

Non-immunological - activation can be mediated by physical factors, as in CIndU, as well as food and drug molecules independent of adaptive immunity. In CSU, it may be that the threshold for activation by external stimuli is reduced.^[18]

HISTOPATHOLOGY - The upper and mid-dermis interstitial edema, mixed inflammatory perivascular infiltrates, and dilated venules and lymphatic arteries that allow serum to escape into the surrounding tissue are among the histological characteristics of urticaria.

Similar features are also seen in angioedema, but they are more deeply ingrained in the subcutaneous and lower dermis. Although it is not a standard part of the workup for CSU, a biopsy of the affected skin for histology may be taken into consideration if the rash is unusual. Since leukocytoclasia and vasculitis are not associated with CSU, other diagnosis needs to be promptly considered.^[20]

DIAGNOSTIC CRITERIA OF CHRONIC URTICARIA

The diagnosis of urticaria is primarily clinical and is based on the following criteria

1. History and Symptoms

Wheals (Hives) - The hallmark of urticaria is the presence of wheals—raised, red, itchy welts on the skin. Wheals can vary in size and shape and typically resolve within 24 hours, though new lesions may appear as others resolve.

Angioedema - In some cases, deeper swelling occurs, particularly around the eyes, lips, throat, and genitals. Angioedema may last longer than 24 hours and can cause discomfort.

Pruritus (Itching) - Itching is usually intense, often worse at night.

Duration of Symptoms

Acute Urticaria - Symptoms lasting less than 6 weeks.

Chronic Urticaria - Symptoms persisting for more than 6 weeks

Triggers: Identifying potential triggers like food, medications, infections, or physical stimuli (pressure, cold, and heat) helps in the diagnosis

2. Physical Examination: Observation of typical hives, which are transient, red or flesh-colour, and raised. Checking for signs of angioedema

3. Associated Features - Absence of systemic symptoms: Urticaria typically does not cause systemic symptoms like fever, except in rare cases associated with specific syndromes. No lasting skin changes the skin usually returns to normal after the wheal resolves.

4. Differential Diagnosis - Conditions such as erythema multiform, contact dermatitis, or vasculitis should be ruled out as these may present with similar skin findings but have different underlying mechanisms and durations.

5. Laboratory Tests (when needed) - In chronic or atypical cases, tests such as complete

blood count (CBC), C-reactive protein (CRP), erythrocyte sedimentation rate (ESR), thyroid function tests, and allergy testing may be performed, Skin biopsy is usually unnecessary unless the urticaria is atypical or suspected to be part of a systemic disease.

COMPLICATION OF CHRONIC URTICARIA - Chronic urticaria, often referred to as chronic hives, is a dermatological condition characterized by persistent, itchy welts or hives that last for more than six weeks. While the primary symptoms are skin-related, chronic urticaria can lead to several complications that affect both physical and mental health.

❖ **Physical Complications**

❖ **Angioedema** - This is a condition where deeper layers of skin swell, often affecting areas such as the face, lips, throat, and extremities. Angioedema can occur alongside hives and may lead to discomfort or difficulty breathing if it affects the throat.

❖ **Joint Pain and Swelling** - Some individuals with chronic urticaria report experiencing joint pain or swelling, particularly during severe flare-ups. This can complicate mobility and daily activities.

❖ **Fatigue**: Persistent itching and discomfort can disrupt sleep patterns, leading to significant daytime fatigue. Many patients report difficulties falling asleep or waking frequently due to itching.

❖ **Gastrointestinal Symptoms**: In some cases, individuals may experience stomach issues such as nausea or abdominal pain during flare-ups, which can further complicate their overall health status.

❖ **Airway compromise** – In severe cases angioedema can affect the tongue, throat and larynx leading to life threatening breathing difficulties or airway obstruction.

❖ **Psychological Complications**

❖ **Emotional Distress**: The chronic nature of the condition can lead to significant emotional distress. Patients often experience anxiety and depression due to the unpredictability of flare-ups and the impact on their quality of life.

❖ **Social Isolation**: The visibility of hives and associated discomfort may lead individuals to withdraw from social situations, exacerbating feelings of isolation and impacting mental

health.

- ❖ **Quality of Life Impairment:** Chronic urticaria can severely affect daily functioning, including work productivity and personal relationships. Patients may find it challenging to engage in normal activities due to the persistent symptoms.^[28-29-30]

CLINICAL FEATURES^[21]

- ❖ Urticaria is characterized by pruritic pink-to-red papules and plaques typically with central pallor. These can vary in size and shape as the plaques coalesce together.
- ❖ Urticaria is fleeting, and each wheal remains for fewer than 24 hours without any residual ecchymosis or pigmentation.
- ❖ There may be a predilection for pressure-prone areas such as the waistline, axilla, and groin, but urticaria can generally affect any part of the skin.
- ❖ Secondary changes from scratching may be evident on examination of the skin, including excoriations, erosions, and haemorrhagic crust.
- ❖ Concurrent angioedema occurs in up to 40%, characterized by subcutaneous or sub mucosal edema affecting non-dependent areas, most commonly lips, peri-orbital, genitals, and extremities.
- ❖ Patients complain of discomfort or pain rather than pruritus. This may take longer to resolve - up to 72 hours - and is the primary manifestation of CSU in 10% of patients

DIFFERENTIAL DIAGNOSIS

- ❖ **Urticarial vasculitis** is a small vessel vasculitis characterized by wheals that persist for greater than 24 hours, associated with pain rather than an itch, and which resolve with residual ecchymosis and / or pigmentation.
- ❖ **Papular urticaria** is a persistent insect bite reaction characterized by clusters of pruritic papules, often with a central punctum, which persists for days to weeks.
- ❖ **Mastocytosis** encompasses a group of disorders resulting from the accumulation of clonal populations of mast cells in the skin and other organs. **Darier sign**, where a wheal can be induced by rubbing the affected skin, is pathognomonic.
- ❖ **Auto-inflammatory syndromes** such as **cryopyrin-associated periodic syndromes (CAPS)** and **Schnitzler syndrome** may present with urticarial eruptions in association with fever, arthralgia, and systemic symptoms.
- ❖ **C1-esterase inhibitor deficiency**, either hereditary or acquired, should be considered in patients who present with isolated angioedema in the absence of an urticarial rash.

- ❖ **Bullous pemphigoid** is an immunobullous disease affecting the elderly. The pre-bullous phase is characterized by pruritus and urticarial plaques, which evolve to tense bullae
- ❖ **Anaphylaxis** is a potentially life-threatening type I hypersensitivity reaction that most often presents acutely with cutaneous symptoms of hives and angioedema.^[22]

ICD-11 CLASSIFICATION OF URTICARIA

The International Classification of Diseases, 11th Revision (ICD-11) provides a comprehensive classification system for urticaria, a common skin condition characterized by the development of hives, swelling, and itching. The ICD-11 categorizes urticaria into the following main types.

SPONTANEOUS URTICARIA (EB00)

- ❖ Acute Urticaria (EB00.0): Urticaria lasting less than six weeks, often due to IgE-mediated allergies, infections, or unknown causes
- ❖ Chronic Urticaria (EB00.1): Urticaria lasting more than six weeks, with no identifiable cause in most cases.^[26]
- ❖ Spontaneous Urticaria, Unspecified (EB00.Z)

INDUCIBLE URTICARIA

- ❖ Urticaria Due to Physical Factors (EB01)
- ❖ Dermatographic Urticaria (EB01.0)
- ❖ Delayed Pressure Urticaria (EB01.1)
- ❖ Cold Urticaria (EB01.2)
- ❖ Cholinergic Urticaria (EB01.3)
- ❖ Solar Urticaria (EB01.4)
- ❖ Heat Urticaria (EB01.5)
- ❖ Vibratory Angioedema (EB01.6)
- ❖ Aquagenic Urticaria (EB01.7)
- ❖ Urticaria Due to Other Physical Factors (EB01.8)
- ❖ Urticaria Due to Unspecified Physical Factor (EB01.9)

OTHER URTICARIA

- ❖ Urticaria Due to Specific Identified Causes (EB02)
- ❖ Urticaria Due to Unspecified Causes (EB0Y)

This comprehensive classification system helps healthcare providers accurately diagnose and manage different types of urticaria based on their underlying causes and clinical presentation.^[23-24-25-26-27]

HOMEOPATHIC APPROACH TO URTICARIA

Homeopathy is a system of alternative medicine that aims to treat individuals holistically using highly diluted substances. In the context of urticaria (hives), which is characterized by itchy, raised welts on the skin, constitutional homeopathy focuses on treating the individual as a whole rather than just addressing the symptoms?

ROLE OF CONSTITUTION APPROACH IN URTICARIA

- 1. Holistic Approach:** Homeopathy treats the person, not just the disease. A homeopath will consider various aspects of your physical, emotional, and mental health. This holistic view helps in selecting a remedy that matches your overall state, potentially addressing underlying causes or triggers of urticaria.
- 2. Individualized Treatment:** Homeopathic remedies are tailored to the individual's unique symptoms and overall constitution. For instance, two people with urticaria might experience different triggers or have different patterns of rash, and each would receive a remedy based on their specific case.
- 3. Constitutional Remedies:** These are remedies selected based on the individual's overall health, personality, and life circumstances. For example, remedies like **Urtica Urens** or **Rhus Toxicodendron** might be considered, but the choice will depend on a detailed assessment by a trained homeopath.
- 4. Potential Benefits:** Some people find that homeopathy can help in managing symptoms, reducing the frequency and severity of outbreaks, and improving overall well-being. The idea is that by addressing the individual's overall health and susceptibility, homeopathy can help in balancing the body's response to allergens or irritants.
- 5. Chronic Cases:** For chronic urticaria, where conventional treatments might have limited efficacy or involve significant side effects, homeopathy offers a different approach. The aim is often to find a remedy that supports the body's natural healing processes and reduces the dependency on conventional medications.
- 6. Integration with Conventional Care:** While some people may experience benefits from homeopathy, it's important to integrate it with conventional medical care. Severe or

persistent cases of urticaria should be managed in consultation with a healthcare provider to ensure comprehensive treatment.

HOMEOPATHIC THERAPEUTICS FOR URTICARIA^[31-32-33-34-35]

ANTIMONIUM CRUDUM – Skin is very much sensitive to bathing with cold water and heat or warmth in any form especially during summer in exposure to sunlight with marked agglutination swelling of eyelids. Urticaria has measles-like eruption. Itching when warm in bed with great dryness of skin worse << in evening, from heat, acids, wine, water, and washing in open air, during rest very useful in solar or aquagenic and urticaria vasculitis. Itching especially in the neck, chest back and limbs eruptions which appear chiefly in the evening, or which itch in the heat of the bed, and prevent sleep miliaria eruptions and nettle-rash Tumours and blisters, as if from the stings of insects similar to chicken-pox, with shooting pain on pressure thick hard scabs, often honey-yellow, here and there a crack oozing a green sanious fluid, burning as if immersed in hot embers urticaria white, with red areola, which itch fearfully desire for sour food acid pickles and thickly coated white milky tongue marked features for prescribing.

APIS-MELLIFICA – Acts on cellular tissues causing the edema of skin and mucous membranes also very useful for Itching associated with angioedema at various such as below eye lids or face cheeks surrounding the nose the very characteristic effects of the sting of the bee furnish unerring indications for its employment in disease. Swelling or puffing up of various parts, edema, red rosy hue, stinging pains, soreness, intolerance of heat, and slightest touch, and afternoon aggravation are some of the general guiding symptom Erysipelas inflammations into various parts of the skin with marked constricted sensations. Sensation of stiffness and as of something torn off in the interior of the body with characteristic bag like redness swelling puffiness under the eyelids with decrease thirst Worse, heat in any form; touch; pressure; late in afternoon; after sleeping; in closed and heated rooms. Right side. Better, in open air, uncovering, and cold bathing.

ARSENIC ALBUM – Urticaria with great burning and restlessness

Urticaria associates with great burning swelling and Oedma papular eruption dry rough scaly skin worse by cold weather or cold air exposure and scratching after with great burning and restlessness marked aggravation at mid-night with ice coldness of body < worse during wet weather, cold food or drink better slight warm or heat or warm drinks or warm application.

ASTACUS FLUVIATILIS – Urticaria associate with liver affections

This is an effective medication that be used to treat, both acute and chronic urticarial forms. Nettle Rashes are visible on the entire body and are at an increased sensitiveness to air. It is recommended for liver diseases and liver-related symptoms that are accompanied by urticaria.

BRYONIA-ALBA - Bryonia Alba useful when atmospheric influences

warm weather after cold days or when winter starts approaching or when days are warm and night is cold to manifest its action most markedly with simultaneous rheumatic articular pains and seen dryness at the level of skin where's swellings; dropsically effusions into synovial and serious membranes level, open air evening or nightly exacerbations of complaints with sleeplessness urticaria Itching of worse from motion mouth lips skin is dry frequently or persistently with great thirst for a large quantity in long intervals also is a very marked feature for prescribing.

BOVISTA LYCOPERDON – Urticaria induced by walking or using skin cosmetics

Chronic tendency of urticaria trigger by least mental or physical excitement with rheumatic lameness especially during walking with great awkwardness drop or falling things from hand hives itching worse not relived from scratching << by getting warm heat or walking and from bathing.

CALCAREA CARBONICA - Nettlerash, which always disappears in the fresh air elevated red stripes on tibia, with severe itching and burning after rubbing very much a desire for cold food, sour food eggs, fast-food or indigestible food. prone to get affected by diarrhoea and patient fair fatty flabby very useful in cases of Collingric or heat induced urticaria Petechial Form of eruption where urticaria appear as in pin point small red dot shape of eruption with marked redness and itching with lots of perspiration generalised or may localised into body various of parts trigger by exertion or exercises physical or mental cold in any form example Air, water, weather, food or drinks, water washing rain dampness better by dry warm hot weather.

CAUSTICUM – Chronic nettle rash associated with chronic rheumatic arthritic and paralytic affections more suitable to dark complexioned and rigid fibre persons urticaria induced more by tension stress or worry deep seated , itching with Eruptions coming more fully in fresh air with decided aggravation and itching from the heat of the bed especially more intense in

night bed time with great burning rawness soreness of skin with itching Itch suppressed by mercury or sulphur; burning itch with tingling or stinging sensation with swelling of surrounding parts sometimes called "buzzing" swelling eruptions resembling scabies miliary eruptions and nettle-rash with itching and humid tatters << worse dry cold winds in clear fine weather cold air from motion of carriage or while think about complaints and prong long-lasting grief is background ailment of diseases.

DULCAMARA – Very useful medicine for urticaria especially when hot days and cold nights towards close of summer arrive or returning , eruption and itching worse due to getting wet or dampness or cold weather exposure due to, eruption and itching more at hands , arms , or face around the menstrual period.

RHUS TOX - Intense itching of skin with burning marked redness and swollen appearance with prickling or tickling sensation itching < worse after scratching or touch with marked peculiar restlessness itch over whole body chiefly in hairy parts with stinging and tingling sensation generally eruption pattern of nettle rash is vesicular in form appear more especially in spring and autumn and damp – rainy season and after rain or getting wet, especially at night during resting better >> by warm and dry weather by motion / movement, rubbing, warm application.

NATRUM SULPHUR – Useful in aquagenic urticaria induced by living in damp houses basements, cellars worse in rainy weather by exposure or contact in water in any form suitable in change of weather from dry to wet as the hydrogenoid constitution the state in which there is extreme sensitiveness to damp, wetting, bathing, watery foods, and residence near fresh water, especially standing water, itching while undressing.

HEPAR SULPHUR - Chronic and recurring urticaria with great sensitiveness to slightest touch Angioneurotic edema, craving for sour and strong things are very characteristic worse, from dry cold winds; cool air; slightest draught, from touch; lying on painful side. Better, in damp weather, from wrapping head up, from warmth, after eating, covering.

URTICA URENS – Very useful medicine for urticaria when Rheumatism associated with urticaria-like eruptions much itching burning and blotches appear upon skin with much burning heat formication sensation and violent itching consequences of suppressed nettle rash erythema, with burning and stinging Angioneurotic edema lips, nose, and ears swollen, lids

so oedematous that they could scarcely be opened symptoms of urticaria associate with rheumatism and gout return at the same time every year. Gout and uric acid diathesis.

LESSER KNOWN HOMEOPATHIC MEDICINES FOR URTICARIA

ANACARDIUM ORIENTALE – Intense itching with great mental irritability vesicular form of eruption with swelling. Urticaria eruptions like poison-oak itching and eruption >> better by rubbing or and after eating but short time afterwards they return with great fatigue and trembling and extreme weakness in the limbs << worse due to warmth heat or hot application and scratching.

ANTIPYRINUM – Acts especially on the vasomotor centres, causing dilatation of capillaries of skin and consequent circumscribed patches of hyperaemia and swelling. Acute erythema multiform intense pruritus urticaria appearing and disappearing suddenly with internal coldness, angioneurotic-oedma with swelling and puffiness of eyelids and lips with red swollen face.

CHLORALUM HYDRATUM - It has a marked effect on the skin, producing erythema ecchymosis which symptoms have been utilized homoeopathically with much success especially in the treatment of hives urticaria like Red blotches, like measles. Urticaria, worse, spirituous liquors, hot drinks eating and night, Erythema aggravated by alcoholic drinks, with palpitation; causes pain in tendons and extensors. Intense itching surface of body stone-cold wheals come on from a chill better, warmth purpura Violent stinging-itching over whole body Diffuse inflammatory redness like Scarlatina Urticaria, coming out at night, disappearing by day Wheals come on suddenly from a chill; so long as she remains in the warmth is not troubled with them.

COPAIVA OFFICINALIS – Very useful for chronic urticaria especially in children, hives with fever and constipation eruptions like roseola erysipelatos inflammation especially around abdomen, circumscribed lenticular patches with mottled appearance and intolerable itching, lentil-sized, measles-shaped exanthema in clusters flowing into one another nettle-rash, pale, red or bright red with violent itching associates with jaundice.

DOLICHOS PRURIENS –General intense itching of skin without eruption with marked disturb liver functions, useful especially in cases of senile pruritus, urticaria and itching

associates with jaundice especially into old age, constipation with intense itching of skin also cover hemorrhoidal diathesis itching worsen at night or due to warmth.

FAGOPYRUM ESCULENTUM – General and excessive itching with or without eruption most marked on joints, pubes, pudenda, and hairy portions of body generally marked pruritus and urticaria especially in old age peoples itching better by bathing in cold water worsen by scratch touch warm from exposure to sunlight itching of hands deep in vesicular postular eruptions swollen and hot skin and phlegmonous dermatitis.

FORMICA RUFA – Medicine prepare from crushed live ants and it is very useful medicine for rheumatism gouty pain arthritis associate with urticaria or hives with intense redness itching and burning into skin nettle rash appear especially around joints with peculiar formication or ants running over skin sensation with much profuse sweating << worse from cold and cold washing dampness before snowstorm >> better by warmth pressure and rubbing.

FRAGARIA VESCA – Swelling of whole body with faintness with complete prostration and convulsions and petechial erysipelatus urticaria like eruptions and swollen pippy or strawberry tongue useful in cases where due to eat strawberries poisoning or anaphylaxis reactions occur and also useful for those who are sensitive to their action have been utilised in homeopathy.

HISTAMINUM – It is very effective homeopathic medicine against histamine and allergic reactions. It is useful in histamine allergic reactions, itching chronic urticaria or hives Effective for itching, skin rashes, redness, swelling Alleviate swelling, chronic urticaria, chronic hives.

ICHTHYOLUM – Very useful medicine for urticaria when lots heat and irritation into skin it is strongly antiparasitic medicine useful in parasitic infection induced urticaria with tendency to formation of boil in crop also useful in pruritus or hive especially during pregnancy with burning and irritation.

RHUS VENENATA – vesicular form of wheals eruption with intense itching and erysipelas inflammation with dark red appearance forming of erythema nodosum especially around joints at level of skin nightly aggravation of itching with pain in long bones nettle rash itching better by hot warm water washing or bath or application.

SEPIA OFFICINALIS – ringworm like eruption every spring. Urticaria on going in open air; better in warm room itching; not relieved by scratching; worse in bends of elbows and knees Hyperidrosis and bromidrosis. Sweat on feet, worse on toes; with offensive odour from sweat and skin.

UVA URSI - Urticaria without itching associate with chronic vesicle or bladder irritation and urinary tract infection.

TILIA EUROPAEA – Urticaria, with violent itching and burning like fire after scratching, small red itching pimples, profuse warm sweating especially during sleep with rheumatic pain.

REPERTORIAL APPROACH ACCORDING TO DIFFERENT REPERTORIES

1. KENT REPERTORY

Urticarious (nettle-rash) :- Acon., Am-c., Am-m., Anac., Ant-c., Ant-t., **APIS**, Ars., Bar-c., Bell., Berb., Bov., Bry., Bufo, **CALC.**, Camph., Carb-an., Carb-v., **CAUST.**, Chin., Cic., Cocc., Con., Cop., Croto-t., **DULC.**, Form., Graph., **HEP.**, Ign., Ip., Kali-br., Kali-c., Kali-m., Kreos., Lach., Led., **Lyc.**, Mag-c., Merc., Mez., Nat-c., **Nat-m.**, Nat-p., Nat-s., Nit-ac., Nux-v., Op., **Petr.**, Ph-ac., Phos., Pic-ac., Pip-n., Psor., **Puls.**, **RHUS-T.**, Rob., Rumx., Ruta, Sabin., Sars., Sec., Sel., **Sep.**, Sil., Staph., Stram., **Sulph.**, Ter., Thuj., Urt-u., Ust., Valer., **Verat.**, Zinc.^[36]

2. A SYNOPTIC KEY OF THE MATERIA MEDICA

Skin, eruptions, urticarious, hives, wheals, etc

Ant-c., Ap., Calc-c., Caust., Dulc., Grap., Hep., Pho., *Rhus-t.*, Sep., Sil.^[37]

3. REPERTORY by Oscar E. BOERICKE:

URTICARIA (hives, nettle rash) -- Acon., Anac., Anthrok., Ant. c., Antipyr., Apium gr., Apis, Ars., Astac., Berb. v., Bombyx, Bov., Calc. c., Camph., Chin. s., Chloral, Cim., Cina, Condur., Con., Cop., Crot. t., Dulc., Fagop., Fragar., Hep., Homar. fl., Ichth., Ign., Ipec., Kali c., Kali chlor., Medusa, Nat. m., Nat. p., Nit. ac., Nux v., Petrol., Puls., *Rhus t.*, Rhus v., Robin., Sanic., Sep., Stann., Stroph., Strych. p., Sul., Tereb., Tetradyne., Triost., Urt., Ustil., Vespa.

4. Chronic -- Anac., Ant. c., Antipyr., Ars., Astac., Bov., Calc. c., Chloral, Condur., Cop., Dulc., Hep., Ichth., Lyc., Nat. m., *Rhus t.*, Sep., Stroph., Sul., Urt.

5. **Nodosa** -- Bov., Urt.

6. **Tuberous** -- *Anac.*, Bolet. lur.

7. CAUSE

8. **Emotion [from]** -- *Anac.*, Bov., Ign., Kali br.

Exertion, excessive [from] -- Con., Nat. m.

Exposure [from] -- Chloral., *Dulc.*, Rhus t.

Gastric derangement [from] -- *Ant. c.*, Ars., Carbo v., Cop., *Dulc.*, Nux v., *Puls.*, Robin., Triost.

Menstrual conditions [from] -- Bell., *Cim.*, *Dulc.*, Kali c., Mag. c., *Puls.*, Ustil

Shellfish, roe [from] -- Camph.

Suppressed malaria [from] -- Elat.

Sweat [from] -- Apis.

9. CONCOMITANTS

10. **Catarrh [with]** -- Cepa, *Dulc.*

Chill [with]

11. **Intermittents [of]** -- Ign., Nat. m.

12. **Constipation, fever [with]** -- Cop.

Croup [with], alternating -- Ars.

Diarrhœa [with] -- Apis, Bov., *Puls.*

Edema [with] -- *Apis*, Vespa.

Erosion [with], on toes -- Sul.

Itching [with], burning after scratching; no fever -- *Dulc.*

Liver disturbance [with] -- Astac.

Petechial disturbance, or erysipelatous eruption [with] -- Fragar.

Rheumatic lameness, palpitation, diarrhœa [with] -- Bov., *Dulc.*

Rheumatism [with], alternating -- Urt.

Sequelé [with], from suppressed hives -- Apis, Urt.

Sudden coming and going [with] -- Antipyr.

Sudden, violent onset; syncope [with] -- Camph.

13. MODALITIES

14. AGGRAVATIONS

15. Climacteric [At] -- Morph., Ustil.

Menstrual period [At] -- *Cim.*, *Dulc.*, Kali c., Mag. c.

Night [At] -- Ant. c., Ars.

Bathing, walking in A. M. [from] -- Bov.

Cold [from] -- Ars., *Dulc.*, Rhus t., Rumex, Sep.

Exertion, exercise [from] -- Apis, Calc. c., Hep., Nat. m., Psor., Sanic., Urt.

Fruit, pork, buckwheat [from] -- Puls.

Open air [from] -- Nit. ac., Sep.

Spirituos drinks [from] -- Chloral.

Warmth [from] -- Apis, *Dulc.*, Kali c., Lyc., Sul.

Children [In] -- Cop.

Periodically, every year -- Urt.

16. AMELIORATIONS

17. Cold water [from] -- Apis, *Dulc.*

Hot drinks [from] -- Chloral.

Open air [from] -- Calc. c.

Warmth [from] -- Ars., Chloral, Sep.^[38]

CONCLUSION

Homeopathy plays a potential role in managing urticaria by addressing individual symptoms and promoting holistic healing. While clinical evidence remains mixed, personalized homeopathic treatments may offer relief in some cases. Further research with rigorous trials is essential to fully understand its effectiveness in treating urticaria.

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