

## Review Article

### Homoeopathic Remedies in Management of Warts A Case Report

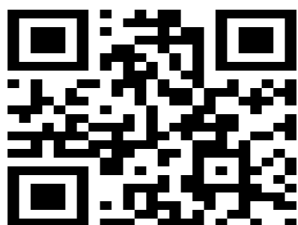
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#### ABSTRACT

Warts or verrucae are one of the common cutaneous viral infections, caused by human papilloma virus. They are benign skin growths that develop on different parts of the body and come in various forms. Warts are common worldwide and affect approximately 10% of population in India. In school aged children, the prevalence is as high as 10% to 20%. The estimated prevalence in adults is much lower at about 3-5 % out of total affected population.

**Keywords:** Warts, Miasm , Homoeopathic treatment



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#### INTRODUCTION

Warts are common worldwide and affect approximately 10% of population in India. In school aged children, the prevalence is as high as 10% to 20%. The estimated prevalence in adults is much lower at about 3-5 % out of total affected population. It is rare in infants and elderly individuals, but can impact people of all ages. The prime age falls between 12 and 16 years. Plane warts are more commonly seen in children and females than in adult males. Genital warts are most prevalent among individuals aged 20 to 29 years old. Genital warts show a small male predominance. Although there are numerous options available for treating warts, it can be challenging, especially when dealing with several or stubborn warts. Different types and locations of warts may require specific treatments. Cryotherapy using liquid nitrogen is a frequently used treatment method for warts in the traditional treatment method but chances of recurrences are frequent.

#### DEFINITION

A wart is a small, circumscribed, epidermal and papillary elevation of skin. According to

Taber's Encyclopedic Medical Dictionary, a wart is a circumscribed cutaneous elevation resulting from hypertrophy of the papillae and epidermis. These are common amongst children and adolescents, although they may be encountered at any stage. HPV is the main cause of development of wart.

#### PATHOGENESIS OF WARTS-

Warts are caused by HPV. Several subtypes of this spherical DNA virus have been identified and each appears to be responsible for a different morphological type of wart. These wart virus sub-types are morphologically identical but differ immunologically and in Amino acid sequence.

#### AETIOLOGY OF WARTS

The major causes of warts are :-

- 1) Human Papilloma virus – (HPV) – A DNA virus which has not been cultured in vitro.
- 2) Homosexuality
- 3) Heterosexuality
- 4) STD (genital warts)
- 5) Vulvitis or Balanitis
- 6) Genital ulceration

- 7) Trauma  
The common sites of Warts
1. Dorsum of hands
  2. Fingers
  3. Beneath the nails
  4. Soles
  5. Prepuce of Penis
  6. Coronal sulcus
  7. Vagina
  8. Vulva
  9. Cervix
  10. Face
  11. Urinary meatus

#### PROGNOSIS OF WARTS

Genital warts appear to be more contagious than other types of warts. They not only spread on patient's own skin through auto-inoculation but, they can be passed on to sexual partners. Left untreated, there is the same tendency for eventual, spontaneous disappearance as found in verruca vulgar

#### COMPLICATIONS OF WARTS-

Formation of keloids after removal of warts.

- Epidermodysplasia verruciformis :- Bowen's disease and invasive squamous cell carcinoma

develops in photo- exposed areas

#### DIAGNOSIS-

1. Characteristic warty appearance with a rough, dry stippled surface.
2. Presence of pseudo-Koebner's phenomenon, especially in plane warts.
3. Typical histology – Enlarged koilocytes
  - Keratinocytes with eccentric pyknotic
  - Nucleus, and peri-nuclear halo.
4. Electron Microscopy – which shows distinctive viral particles if enough fields are examined.

#### HOMOEOPATHIC THERAPEUTICS

Anacardium occidentale

The juice of this medicine has been locally used as an application to corns, warts, hard excrescences, ringworm and obstinate ulcers. Umblicated vesicles are present on the skin. The base of warts is wide with umblicated point

Antimonium crudum

The warts are horny. The choice of this remedy in the case of warts is determined by the symptoms which develop in the mental

and gastric sphere. He eats beyond the capacity of his digestion; therefore, the mental and skin symptoms are due to this disturbance. White coated tongue is a guiding symptom for this remedy.

Antimonium tartaricum

Warts present especially at the back of glans penis. Warts after vaccination (when thuja and silicea are not indicated). Warts with pale cyanotic face and stertorous breathing. Violent pain in sacro lumbar region, the slightest effort to move causes retching and cold sweat.

Aurum metallicum

Warts around anus and on the tongue has been cured with this medicine associated with other constitutional symptoms. Mental depression and suicidal tendencies present

#### WARTS IN DIFFERENT REPERTORIES KENT'S REPERTORY<sup>(28)</sup>

#### CHAPTER EYE

WARTS. ( See Condylomata )

CONDYLOMATA : – Arund. , *calc.* ,

*cinnb.* , *merc.* ,

*nit-ac.* , *phos.* , *staph.* , **thuja**

*canthi*: *Calc.* , *nit-ac.*

*eyebrows*: *Anan.* , *caust.* , *thuj.*

*eyelids*: *Caust.* , *cinnb.* , *nit-ac.* , *sulph.* ,

**thuj.**

*right, lower*: *Nit-ac.*

*bleeding when touched* : *Nit-ac.*

*iris* : *Cinnb.* , **Merc.** , *staph.* , *thuj.*

*sclerotics* : *Arund.*

#### EAR

Wart like growth behind ear, inflamed and ulcerated ; *Calc.*

On the ears : *bufo*

#### NOSE :-

WARTS: **Caust.** , *Nit-ac.* , **Thuj.**

*inside nose*: *Nit-ac.* .

#### FACE :-

WARTS: *Calc.* , **Caust.** , **Dulc.** ,

*nit-ac.* , *sep.* , *sulph.* , **thuj.**

*chin* : *Lyc.* , **Thuj.**

*lips* : *Caust.* , *kali-s.* , **Nit-ac.** , *thuj.* .

*mouth, around*: *Cund.* , *psor.*

#### MOUTH

WARTS: *Ph-ac.*

Tongue: Aur. , *aur-m-n.* , lyc. , mang. , staph.

EXTERNAL THROAT

WARTS: Nit-ac. , sil . , thuj .

RECTUM

WARTS. ( See Condylomata. )

CONDYLOMATA : *Arg-n.* , aur. , *aur-m.* , benz- ac. , *caust.* , **Cinnb.** , euphr. , jac- c. , *lyc.* , *merc.* , *merc-c.* , *nal-s.* , **Nit-ac.** , petr. , sabin. , sep. , staph. , sulph. , **Thuj.**

CHEST

WARTS on sternum : Nit-ac.

BACK

WARTS: Nit-ac. , sil . , thuj.

Cervical region: Nit-ac. , **thuj.**

Genitalia : Female

Warts : (See Condylomata)

Condylomata (See Excrescences ) : *Calc.* , *euphr.* , *lyc.* , *merc.* , *sabin.* , *sars.* , *staph.* , **thuja**

Uterus (cervix) : Cub. , *Kreos.* , *merc.* , **Nit-ac.** , sec. , tarent. , **Thuj.**

Bleeding : *Merc.* , thuj.

Cauliflower : *Crot-h.* , *graph.* , *kali.ar.* , *kreos.* , *lac-c.* , *phos.* , **Thuj**

Watery : Sec. , thuj

EXTREMITIES

WARTS, upper limbs : Ars. , *calc.* , *caust.* , *dulc.* ,

*lyc.* , *merc.* , *nat- c.* , *nat-s .* , *nit-ac.* , *rhus-t.* , *sep.* , *sil.* , sulph. , thuj .

Elbow, bend of; Calc-f.

Forearm : Sil .

Wrist: Ferr-ma.

Hand : Anac. , *ant-c.* , **Bar-c.** , *berb.* , *bor.* , bufo,

**Calc.** , **Caust.** , **Dulc.** , *ferr.* , ferr-ma. , ferr-pic. ,

WARTS, hand.

*fl-ac.* , *kali -c.* , *kali- chl.* , *lach.* , *lyc.* , **nat-c.**

, *nat-m.* , **Nit-ac.** , *phos.* , *ph-ac.* , *psor.* , **rhus-t.** ,

*sep.* , sil . , **Sulph.** , **Thuj.**

flat : *Berb.* , **Dulc.** , *lach.* , *ruta* , *sep.*

horny: *Ant-c.* , *caust.* , *sep.* , *thuj.*

itching: *Sep.*

large : *Dulc.*

sensitive : *Nat-c.*

sore ; *Ambr.* , *fl-ac.* , *ruta.*

**A -case report**

Date: 05/07/2024

Name :- XYZ

Sex :- Male

Age :- 55 years

Religion: Hindu

Occupation: Service

Marital status: Married

**Chief Complaint**

LOCATION	SENSATION	MODALITY	CONCOMITTANT

<p>On Neck, anteriorly, on both the sides but majorly on right side</p>	<p>Multiple warts of skin colour</p>		
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**History of chief complaint** – Had a history of warts earlier also 5-6 years ago but had got them removed surgically but it recurred back 6 months ago. Not a known case of any major illness.

**Associated complaint** – Not a known case of any major illness

**Past history** – Suffered from Anxiety neurosis 5 years ago, have taken homoeopathic treatment for it

**Family history** – Father died due to old age

Mother had HTN and died due to cardiac failure.

Doesn't have any siblings.

**Physical generals-**

1. Appearance – Patient appears to be obese , Wt – 96kg and Ht – 5.1’
2. Taste – Prefers sweet more
3. Diet – Mixed, Has 3 meals a day
4. Appetite – Cannot tolerate hunger, gets irritable due to hunger. Takes an antacid due to frequent episodes of acidity.
5. Thirst - Thirsty
6. Desire – More for non-veg food
7. Craving – Sweets, Requires sweets everyday
8. Aversion – Nothing specific
9. Intolerance – Nothing specific
10. Food /Drinks -
- 11..Sleep – Sound and Refreshing
12. Dreams – Not remembered
  
13. Habit – Nothing specific
14. General modality – Cannot tolerate cold weather

**Natural elimination-**

1. Perspiration – Scanty , only on exertion
2. Urine – 5-6 times a day/ at night occasionally
3. Stool – Satisfactory, once a day, no complaints

**Thermals :-** Chilly

**Life Space Investigation :-**

Warts doesn't cause any complaint but patient is concerned about his appearance getting affected due to warts. Patient is very reactive in terms of anger but expresses mostly to family members. He had started with an accountant job in his career and now is the director of the institute in the firm academically. He left the actual field work and started training students of the firm because he feels the actual field work was very stressful. He used to have alot of anxiety everyday at office. He is very straightforward to people below his position level and very polite to his superiors. He was always afraid to express to his superiors. Even now when any new thing has to be taken up he feels anxious. Even as a child he used to be very anxious before exams. Never participated in any extra curricular activities. Shy and introvert. Likes everything to be organized and planned prior , if anything happens suddenly becomes anxious. Responsible towards his duty at work and also in family. Average in decision making , requires support of wife. He is a father to a daughter. His daughter says that he is very short tempered and behaves very rudely with the workers of his office. The only stress he faces presently he says , is of his job , as he has become the director now and if things doesnt work properly he gets irritated.

**General Physical examination-**

1. Height – 5.1’

- 2. Built – Well built, obese, Wt- 96kg
- 3. Pallor – Not Seen
- 4. Icterus - Not Seen
- 5. Cyanosis - Not Seen
- 6. Lymph nodes – Not palpable
- 7. Oedema – Not present
- 8. Clubbing – not seen
- 9. Tongue- Clean

**Vital Data :-**

BP - 130/90 mm Hg  
 Pulse Rate – 85 bpm  
 RR - 15 cycles/ min  
 Afebrile

**Systemic examination**

RS – Clear, bilateral air entry  
 CVS – S1, S2 Heard  
 CNS – Conscious , well oriented  
 GIT – Soft, non- tender

**Local examination :-** Warts are of skin colour, jagged, multiple and larger on right side as compared to left side  
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**Laboratory Investigation (if required) -**  
 Not required

**Final diagnosis –** Filiform Warts and the Score according to Outcome Assessment scale comes to be 03

**Analysis and Evaluation of Symptoms**

SYMPTOMS	
1. Anxiety before any event	Mental general characteristic symptom
2. Angry, expresses only to inferiors	Mental general characteristic symptom
3. Concerned about his appearance	Mental general characteristic symptom
4. Shy	Mental general characteristic symptom
5. Craving Sweets	Physical general characteristic symptom

6. Thermally Chilly	Physical general characteristic symptom
7. Cannot tolerate hunger	Physical general characteristic symptom
8. Multiple, skin coloured, jagged growths over neck region, more on right side.	Physical particular characteristic symptom

**Totality of Symptoms**

- 1. Anxiety before any event
- 2. Angry, expresses only to inferiors
- 3. Concerned about his appearance
- 4. Shy
- 5. Craving Sweets
- 6. Thermally Chilly
- 7. Cannot tolerate Hunger
- 8. Multiple skin coloured jagged skin growths, warts over anterior aspect of nect, more on right side

**Miasmatic Diagnosis –** Psoro- Sycotic Case

**Remedy Selected –** Calcarea carb

**Potency Selected -** 200

**First Prescription –**

**Rx**

- Calcarea carb 200, 1 dose
- Sac lac 4 pills TDS For one month

**General Management including Auxillary measures :-**

- 1. Avoid frequent touching to warts.
- 2. Do not pull or prick to warts.
- 3. Do not apply anything locally on warts.
- 4. Wash hands if you touch to warts.

**Follow – Ups**

FOLLOW- UP	SYMPTOMS	EXPLANATION	PRESCRIPTION
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First 06/08/2024	Warts remain same, itching on and off over warts. Acidity reduced No other complaints	Some relief of the complaints.	Sac lac 4 pills TDS , for 1 month.
Second 08/09/2024	Warts reduced abit, itching persist, warts have become smaller and black and pointed No other complaints	Relief of complaints in severity.	Sac lac 4 pills TDS , for 1 month.
Third 08/10/2024	Warts have reduced in number, residyual warts visible. Mild itching. No other complaints	Severity of complaints reduced. Hence improved.	Sac lac 4 pills TDS , for 1 month.
Fourth 12/11/2024	Warts reduced all over. Skin appears clear. No other complaints	Total disappearance of symptoms, with general well-being.	Sac lac 4 pills TDS , for 1 month.

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