



A Clinical Case Report On The Homoeopathic Management Of Alopecia Areata

¹Dr. T Mamatha, ²Dr. Aiman Sultana ¹Associate Professor, ²Intern

¹Department of Homoeopathic Materia Medica,

¹Devs Homoeopathic Medical College & Hospital, Hyderabad, Telangana, India

Abstract: Alopecia areata (AA) is an autoimmune disorder causing patchy, non-scarring hair loss. It can progress to alopecia totalis or universalis. Conventional treatments include corticosteroids, but homeopathy offers promising individualized remedies. This article examines homeopathic approaches in managing AA, focusing on personalized treatments targeting both physical symptoms and underlying factors. **Case summary-** A 17-year-old male presented with alopecia areata. The patient was treated with individualised homoeopathic medicine over a period of 6 months. There was significant improvement with homoeopathic treatment, with complete disappearance of symptomatology without any recurrence.

Index Terms - Alopecia Areata, Autoimmune Disorder, Homoeopathy.

I. INTRODUCTION

Alopecia areata (AA) is an autoimmune disorder marked by patchy, non-scarring hair loss on the skin. It typically presents as one or more well-defined, round or oval patches of hair loss on the scalp or body. In more advanced cases, the condition can progress to affect the entire scalp (alopecia totalis) or even the entire body (alopecia universalis). It occurs when the immune system mistakenly attacks hair follicles in the anagen (growth) phase, causing hair loss. While hair is lost, the follicles are not permanently damaged and can potentially regrow hair. The condition disrupts the normal hair growth cycle by removing the immune privilege of the follicles, leading to the onset of alopecia areata. (1) It is often associated with other autoimmune conditions like psoriasis, lupus, rheumatoid arthritis, vitiligo, thyroid disorders, atopic dermatitis, pernicious anemia, allergic rhinitis, and diabetes. (2) The global incidence of alopecia areata (AA) is around 2%. It can affect individuals of all ages and genders. (3) A study conducted on North Indians showed a higher prevalence of alopecia areata in men (M: F = 2:1), with 88% of cases occurring in individuals under 40. Childhood onset was more common in girls and women, while severe alopecia was more frequently seen in boys and men, especially those with an earlier age of onset. (4) AA presents in various forms, with the most common being patchy AA, where round patches of hair loss appear on the scalp. These patches may stay isolated or merge, with the skin remaining smooth and healthy. AA can progress to alopecia totalis (complete scalp loss) or alopecia universalis (total body hair loss). Other patterns include ophiasis (band-like hair loss on the occipital and temporal scalp) and inverse-ophiasis (central hair loss). Diffuse alopecia areata, a rare subtype, causes widespread hair thinning, especially in women. AA can also affect facial hair and nails, and atypical regrowth patterns are occasionally observed. (5) At present, conventional treatment for alopecia areata includes topical and systemic corticosteroids, minoxidil, anthralin, immunotherapy, phototherapy, sulfasalazine, PUVA, and other agents like cyclosporine A and methotrexate. Camouflage helps with appearance, while some treatments, like calcineurin inhibitors and biologicals, are ineffective. (6) A key aspect of managing alopecia areata is providing psychological

support and educating patients about the condition, which contributes to long-term improvement. (7) There is limited research on the use of homeopathic treatments for alopecia areata (AA), with only a few case reports published. These reports highlight that individualized homeopathic remedies have shown promising results, with patients experiencing significant long-term improvement and no recurrence of symptoms. Given that AA is a chronic autoimmune disorder with potential genetic influences, homeopathic treatment should be tailored to each patient's unique symptoms and constitutional background, addressing both the physical and underlying miasmatic factors to achieve optimal results. (8) Homoeopathic literature cites several remedies for alopecia, including Phosphorus, Thallium, Sepia, Syphilinum, Alumina, Graphites, Selenium, Arsenicum album, Natrum muriaticum, Nitricum acidum, Vinca minor, Pix liquida, Floricum acidum, and Phosphoricum acidum. (9)

II. CASE REPORT

II.1 History

A 17-year-old male presented with progressive hair loss over the vertex region for the past two months. Initially, it was only scalp hair fall, but his mother later noticed that his eyelashes had also started thinning and gradually falling out. His mother, who had once battled alopecia areata herself, now watched with growing concern as history seemed to repeat itself in her son. Raised by a single mother, the patient had always found solace in her presence. Until the 10th grade, he studied in the school where she taught, a place that felt safe and familiar. However, transitioning to intermediate college marked a significant change—he now had to travel alone by van, no longer seeing his mother throughout the day. Though he had no issues with his friends, he admitted, “Somehow, I don’t like it there.” One particular incident left a deep emotional scar. A peer taunted him, reminding him that he had no father. Though he tried to dismiss it, the words lingered, fueling a fear he had long carried—the fear of being alone. “Since childhood, I never had a father’s support. Now even my mom is leaving me alone at home when she goes to school,” he shared. His fears extended beyond loneliness—he found himself unable to bear being alone during storms, the sound of thunder heightening his anxiety. In addition to his emotional turmoil, the patient reported a marked craving for ice cream, often seeking it as a source of comfort and his thermal reaction was chilly. Despite being an intelligent and active child, his emotional distress was evident. His mother, recalling her own battle with alopecia, feared that the stress weighing on her son’s young shoulders was triggering his hair loss. The burden of growing up without a father, the shift to an unfamiliar environment, and the overwhelming fear of solitude seemed to manifest not only in his mind but now also on his scalp—silently shedding strands of his distress. The patient has given his consent for his images & other clinical information.

Following a thorough case taking and analysis, the symptoms were evaluated to form the totality. Based on this assessment, repertorisation was carried out.

The following characteristic symptoms were considered for

repertorization: 1. Taciturn

2. Timid in nature

3. Ailments from being

scorned 4. Anxious when
alone

5. Desires for company

6. Fear that something will

happen 7. Fear of
thunderstorm

8. Desires for ice creams

9. Hair falling out, alopecia

Repertorisation was done using Homopath Zomeo Pro Software⁽¹⁰⁾ and the repertorial result is shown in Table 1.

Symptoms: 9	Remedies: 749	Show Repertorisation Tools												Prescribe	Remedy List	Record	Replace	View All	More Results
Remedy Name	Phos	Lyc	Sulph	Sep	Acon	Nat-m	Tritic-vg	Ars	Calc	Verat	Kali-c	Rhus-t							
Totally	34	27	20	19	18	18	7	21	20	19	17	17							
Symptoms Covered	9	8	8	8	7	7	7	6	6	6	6	6							
Kingdom																			
[Complete] [Mind]Scorn:Ailments from, agg.: (36)	3	2	1	1	2	3	1			2									
[Complete] [Mind]Anxiety:Alone, while: (47)	4	4		1	2		1	4			1	3							
[Complete] [Mind]Company:Desire for: (260)	4	4	1	3	3	1	1	4	3	3	4	1							
[Complete] [Mind]Fear:Happen:Something will: (315)	4	4	3	3	4	3	1	3	4	3	2	4							
[Complete] [Mind]Fear:Thunderstorm, of:Thunder, especially of: (4)	3		1																
[Complete] [Mind]Taciturn, indisposed to talk: (557)	4	3	4	3	3	4	1	3	3	4	3	4							
[Complete] [Mind]Timidity: (255)	4	4	4	4	3	3	1	4	4	4	4	4							
[Complete] [Generalities]Food and drinks:Ice-cream:Desires: (55)	4	3	3	1	1	1	1		3	3									
[Complete] [Head]Falling out, hair, alopecia:Spots, in, alopecia a...	4	3	3	3		3		3	3		3	1							

Table1- Repertorization table

II.2 Intervention

First prescription: 25/06/2024, Phosphorous 200C single dose was given.

Basis of prescription: Considering the repertorial totality, miasmatic analysis, and consultation with materia medica, Phosphorous 200C single dose was prescribed.

II.3 Follow up & outcomes

DATE	SYMPTOMATOLOGY	PRESCRIPTION
26/7/2024	Hair fall reduced, no visible regrowth of scalp; persistent shedding of eyelashes.	SL x 1 month x BD x 6 pills
22/8/2024	Hair fall significantly reduced, early signs of regrowth seen; slow shedding of eyelashes.	Phosphorous 1M x 1 dose SL x 1 month x BD x 6 pills
25/9/2024	New hair growth visible, bald patches shrinking; initial regrowth seen in eyelashes.	SL x 1 month x BD x 6 pills
20/10/2024	Noticeable hair growth, bald patch filling in; steadily regrowing of eyelashes.	SL x 1 month x BD x 6 pills
27/11/2024	Scalp hair fully recovered with healthy growth; eyelashes almost fully regrown.	SL x 1 month x BD x 6 pills
25/2/2025	Healthy scalp hair sustained, no signs of relapse; eyelashes fully regrown and stable.	SL x 1 month x BD x 6 pills

III. Result

The patient showed steady improvement following the administration of Phosphorus 200. Hair regrowth on the scalp began by the second month, with bald patches progressively shrinking over the following months [Figure-1]. Eyelash regrowth was slower but noticeable by the third month, achieving full recovery by the sixth month [Figure-2]. In addition to physical recovery, the patient reported improved emotional well-being. His anxiety, particularly linked to loneliness and thunderstorms, diminished significantly over time. The patient's mother, who had initially been concerned due to her own history of alopecia areata, expressed relief and satisfaction with the outcome.



Figure-1 Before treatment



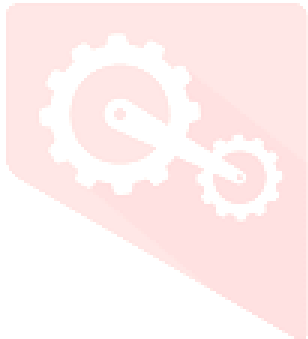
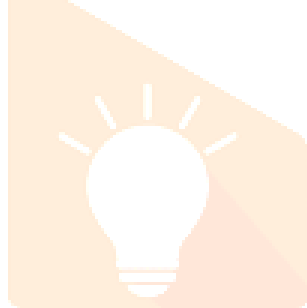
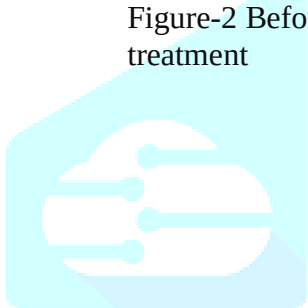
After treatment



Figure-2 Before treatment



After treatment



IV. DISCUSSION

This case highlights the successful resolution of alopecia areata with Phosphorus 200, emphasizing the significance of addressing both the physical condition and underlying emotional stress. Emotional turmoil, particularly the patient's fear of abandonment and insecurity stemming from social distress, likely contributed to the onset and progression of his hair loss. The selection of Phosphorus was guided by the patient's unique symptom profile, including emotional sensitivity, fear of being alone, a craving for ice cream— all key indicators for this remedy. The steady improvement in both scalp hair and eyelashes underscores the remedy's efficacy in promoting hair regrowth while supporting emotional balance. This case reinforces the holistic approach of homeopathy, where individualized treatment aims to restore overall well-being. The patient's complete recovery further emphasizes the importance of early intervention, careful case analysis, and consistent follow-up.

Further documentation of similar cases could contribute valuable insights into the role of homeopathic remedies in managing emotionally triggered autoimmune conditions like alopecia areata.

REFERENCES

- [1] Lepe K, Syed HA, Zito PM. Alopecia Areata. [Updated 2024 Feb 8]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2025 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK537000/>
- [2] Biran R, Zlotogorski A, Ramot Y. The genetics of alopecia areata: New approaches, new findings, new treatments. *J Dermatol Sci*. 2015;78:11–20. doi: 10.1016/j.jdermsci.2015.01.004.
- [3] Fricke AC, Miteva M. Epidemiology and burden of alopecia areata: A systematic review. *Clin Cosmet Investig Dermatol* 2015;8:397-403.
- [4] Sharma VK, Dawn G, Kumar B. Profile of alopecia areata in Northern India. *Int J Dermatol*. 1996 Jan;35(1):22-7. doi: 10.1111/j.1365-4362.1996.tb01610.x. PMID: 8838924.
- [5] Lintzeri, D.A., Constantinou, A., Hillmann, K., Ghoreschi, K., Vogt, A. and Blume-Peytavi, U. (2022), Alopecia areata – Current understanding and management. *JDDG: Journal der Deutschen Dermatologischen Gesellschaft*, 20: 59-90. <https://doi.org/10.1111/ddg.14689>
- [6] Seetharam KA. Alopecia areata: An update. *Indian J Dermatol Venereol Leprol* 2013;79:563-575
- [7] Brzezińska-Wcisło L, Bergler-Czop B, Wcisło-Dziadecka D, Lis-Święty A. New aspects of the treatment of alopecia areata. *Postepy Dermatol Alergol* 2014;31:262-5.
- [8] Biswas B, Roy PS, Hazra A. Treatment of alopecia areata with individualised homoeopathic medicines: An evidence-based case series. *J Integr Stand Homoeopathy* 2022;5:67-73.
- [9] William Boericke. *New Manual of Homoeopathic Materia Medica and Repertory*. 4th print edition. New Delhi: M. Jain Indian books and periodicals Publishers Pvt Ltd; P. 774,775,777,778,781.
- [10] Hompath (2024) Zomeo Homeopathic Software (Version 13.5.8) [Computer software]. Hompath. <https://hompath.com/Zomeo>