

A CASE BASED ILLUSTRATION OF HOMOEOPATHIC TREATMENT FOR PARONYCHIA

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Abstract:

Paronychia is a common infection of the skin surrounding the nails, presenting with inflammation, redness and tenderness. Homeopathy offers a gentle and effective approach to treating paronychia, an infection of the nail folds. Homeopathy can reduce inflammation, pain, and swelling, promoting faster recovery and preventing recurrence. This holistic treatment not only addresses the symptoms but also supports the body's ability to heal from within, making it a promising alternative for those seeking a natural solution to paronychia.

Keywords: Paronychia, Nail infection, Paediatrics, Homoeopathic Treatment, Constitutional Remedy.

INTRODUCTION

Paronychia is the term applied to inflammation of the tissues at the sides of the nail, in a long term the paronychial skin gets thickened and reddened. In major cases the side of the nail that is the space between the nail fold and the nail plate becomes tender and may express pus. Acute paronychia typically occurs after a break in the skin, with infection starting in the paronychium along the nail's side, leading to local redness, swelling, and pain. Chronic paronychia, on the other hand, is more common in individuals frequently exposed to damp environments and is often linked to contact dermatitis. It presents as a red, firm, semicircular swelling around the nail base, with the cuticle of the distal portion of the PNF(proximal nail fold) detaching. Over time, this results in the retraction of the surrounding paronychial tissue. In long term the persistent low-grade inflammation may develop into subacute painful exacerbation. If not treated properly in several years there may total loss of the nail and sometimes scarring in the nail.

A CASE OF PARONYCHIA TREATED WITH CONSTITUTIONAL REMEDY

Primary data :

NAME : XYZ

AGE : 15 years

GENDER : Male

OCCUPATION : Student

ADDRESS : Surat

QUALIFICATION : 10th STD

Chief Complain :

Tenderness and swelling in the proximal nail fold of first right toe nail with slight yellowish discharge. There is sore pain on touch and complain aggravates on wearing socks and shoes. There was oozing of blood sometime along with sticky clear discharge, the complain is present since 6 months and started gradually, the patient had taken antibiotics multiple times but pain and discharge appears again and the complain doesn't subside.



There was No Past History of any major illnesses.

Family History : Mother ; Alive/Healthy

Father : Alive/Hypertensive

Personal History :

Appetite : Adequate

Thirst : 2-3 Lt/day, Thirsty

Desire : Cold drinks +++ and citrus juices+++,paneer, sweet

Aversion : Not specific

Stool : NAD

Urine : NAD

Perspiration : Profuse more on palms and soles.

Sleep : 7-8 hours a day, refreshing

Dreams : Not specific

Thermal : Chilly

Mentals:

He is an introverted individual, often only speaking to those he is familiar with. He has an older sister who went abroad for studies, they share a good bond. He is more close to his mother . He is not good in other subjects but is good in math and computer, he is very much interested in learning about computers more. He is stubborn, he sticks to his beliefs. They once went to a restaurant where he specifically craved a sandwich, but when he was told they were out of it, he became upset. Despite feeling hungry, he refused to order anything else. He didn't accept any alternative and returned from restaurant hungry. He gets offended very easily when someone makes fun of him in front of others or his mother says something about his marks or studies to others in front of him, he becomes easily upset and may stay silent for hours. Preferring solitude, he often spends his time immersed in gadgets and playing video games. With a strong talent for art and craft, he enjoys inventing new things, showing a creative and innovative side. He tends to favour indoor activities over outdoor ones and has a small circle of close friends.

PHYSICAL EXAMINATION

General appearance : Lean, thin and tall with wheatish complexion (eats well but still thin)

- Temperature : 98.5F
- BP : 110/70 mmHg
- Pulse : 74/min
- R/R : 16/min

SYSTEMIC EXAMINATION


- CVS : S1S2 present
- CNS : Patient is conscious and oriented
- RS : Clear
- P/A : Soft

According to the above case details the Totality of symptoms made was :

1. Obstinate Child
2. Artistic abilities
3. Introverted

4. Offended easily
5. Perspiration in palms and sole
6. Felon in nail

Selection of rubrics with repertorisation :

 Screenshot

	sil.	sulph.	nit-ac.	merc.	carc.	nat-m.	petr.	phos.	tub.	calc.	nux-v.	puls.	sep.	acon.	caust.	caps.	cham.
1. Clipboard 1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1. MIND - OBSTINATE - children (37) 1	7	6	6	5	5	5	5	4	4	4	4	4	4	4	4	4	4
2. MIND - ART - ability for (16) 1	14	12	8	9	8	8	6	6	11	8	8	8	8	7	7	6	6
3. MIND - INTROSPECTION (118) 1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
4. MIND - OFFENDED, EASILY (139) 1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
5. EXTREMITIES - PERSPIRATION - Foot - Sole (31) 1	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
6. EXTREMITIES - PERSPIRATION - Hand - Palm (109) 1	3	2	3	2	2	2	1	2	2	2	2	2	2	2	2	2	2
7. EXTREMITIES - FELON - Nail; beginning in (46) 1	3	3	1	2	1	1	1	2	2	2	3	3	3	2	1	1	2

According to the above repertorisation and reference from Materia Medica the medicine chosen was :

Rx. SILICEA 200 , 4 pills, OD for 3 alternative days

Follow up after 15 days :

After



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