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"STUDY THE IMPORTANCE OF INDIVIDUALIZATION IN HOMOEOPATHIC MANAGEMENT IN CASES OF ACNE"

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ABSTRACT **Background:-**Acne has and is been affected by lots of people worldwide. Mostly affecting the adolescent and the adult causing anxiety of appearance leading to low self-confidence and anti-social, which hinders the quality of life. The objective of this study was to evaluate the effectiveness of the homoeopathic intervention in treatment of Acne.

Method :- It is a non-randomised, open level, prospective, single arm, non-controlled, experimental, short-term, before and after comparison study. 36 patients were enrolled, out of which 30 patients completed the entire 5follow ups and 6 patients were drop-outs. The outcome measure is measured by Global Acne Grading Scale (GAGS) scores. Paired t-test is used to check the effectiveness of the individualized homoeopathic treatment before and after.

Results:-The study reflects that the individualized Homeopathic medicines were effective. The overall response of the treatment was observed that out of 30 patients 16 (36.67%) patients were relived, 12 (40.00%) patients got moderate improvement, 2 (6.67%) patients had slight improvement. Data suggest that individualized homoeopathic medicines is effective in treatment of acne.

Conclusion :- The study suggested that homoeopathic treatment might have beneficial effects in patients suffering from Acne.

KEYWORDS : Homoeopathy, Individualization, Acne.

1. INTRODUCTION

In aph. 82, Dr.Hahnemann has written " although, by the discovery of that great source of chronic diseases, as also by the discovery of the specific Homoeopathic remedies for the psora, medicine has advanced some steps nearer to a knowledge of the nature of the majority of disease; it has to cure, yet, for settling the indication in each case of chronic (Psoric) disease, the physician is called on to cure,its the duty of a careful apprehension of its ascertainable symptoms and characteristics is as indispensable for the Homoeopathic physician as it was before that discovery, as no real cure of this or of other disease can take place without a strict particular treatment (individualisation) of each case of disease only that in this investigation some differences are to be made when the affection is an acute and rapidly developed disease, and when it is a chronic one; seing that , in acute disease, chief symptoms which strike us and become evident to the senses more quickly, and hence much less time is required for tracing the picture of the disease and less questions are required to be asked. [1]

No two persons in the universe are similar to each other ; two atoms of one or some substance are not alike to each other; even though twins of the parents are not alike . so how can we say one diseases in two persons is the same. That's why, there is a need of individualisation and after that a strict particular treatment of each case of the disease is to be done.

DEFINITION:-
1.1 ACNE:-

Acne vulgaris affects lots of people even though there is a multitude of the anti acne products on the market,there is still no effective treatment that can prevent and cure this disease.[2]

The severity of acne vulgaris is highly associated with inflammation response to propionibacterium acnes(p.acnes) now referred to as antibacterium acnes(c.acnes), an opportunistic skin bacterium in the human skin microbiome.

Aetiology and pathology:-
- Levels of circulating sex hormones and ration of androgen to estrogen.
- Alteration in the pattern of keratinization within the sebaceous follicles.
- Colonization of follicular microbial flora.
- Immunological factors
- Environmental factors.

Clinical features:-
Mostly affects the face but may also appear on other areas, especially the upper back, chest, shoulders and neck. Manifest with pleomorphic lesions like comedones, papules,nodules and cysts. Extensive scarring can follow.

Acne severity is graded as:-[3]
Grade I – mild – comedones, Occasional papules
Grade II – moderate – comedones, may papules, few pustules
Grade III – severe – predominantly pustules, nodules and abscesses
Grade IV – cystic – mainly cysts/ abscesses, widespread scarring

1.2 INDIVIDUALIZATION:

The process of differentiating from one to another by some unique features,which is closely similar to one another is called individualization.

This concept was first introduced by Dr. Hahnemann and is mentioned in in his book "organon of medicine" in aphorism no.82. and was introduced for treating diseases. As he stated in his book that every individual is characterized by some unique features which guide us to differentiate that particular individual is different from other individual belonging to the same class or group.

When every individual differs from one another even their sufferings or disease or symptoms differs even though they

have the same disease. And so thus the medicine for each an every individual differs to bring out the cure.

Individualization of patient : As homoeopathy treats the patient and not the disease while taking the case we need to find out the charateristics which makes it different from other cases. This is what individualizing a patient means.

Individualization of drug : Dr.Hahnemann in his book ''organon of medicine'' in aphorism no.118 says ''each medicine exhibits peculiar actions on the humans frame, which are not produced in exactly the same manner by other medicinal substance of a different kind''.

So from this we know that the power of medicine to cure a disease is particular to the type of disease which is able to produce the same type of symptoms and not other symptoms.[4]

According to James Tyler Kent: Says that there cannot be any alternate or substitute for one remedy to another in our Homoeopathy .

So the physician must be be able to distinguish between 2 individuals when there is similarity . To be able to extinguish what medicine to give when similarity arises we must individualize the patient as a whole first.

He gave an example of sec. cor and Ars. Album.
He also explains how generals will help in individualizing i.e when two similar remedies of comes up, a single generals will help to rule out that particular remedy.[5]

2. MATERIALS AND METHODS :-
2.1 Study Settings :-The study will carried out Bharati Vidyapeeth Homoeopathic hospital, Katraj. It is Non-Randomised, open level, prospective, single arm, non-controlled, experimental, short-term, before and after comparison study. Collection of data will be done through acne Score. Minimum 30 cases satisfying the case definition, inclusion, exclusion criteria will be studied. Help of guide, senior homoeopathic physicians. The time duration will be 18 months. Follow up will be differ from patient to patients.

INCLUSION CRITERIA :-
• Patients fulfilling case definition
• Written Consent Form.
• Sex- Both Male & Female.
• Age- all age group

EXCLUSION CRITERIA:-
• Emergency Medical Conditions.
• Malignancy.
• Surgical Cases Etc.
• Pregnancy.
• Lactating Mother.
• Psychiatric Patient.

2.2 Selection of sample, study design and duration of study:
• Sample size: 30 cases
• Study Design: It is a pragmatic single arm intervention.

End point classification- Effectiveness
Mode of intervention- Oral route.
• Duration of study: 2019-2021

2.3 Data collection:
• Standard Homoeopathic Hahnemannian case proforma
• GAGS scoring

2.4 Dose and strength of Drug:
Drug will be administered in various potencies (200, 1M, 10M, 50M, C M) on the basis of law of Homoeopathic Philosophy as

per the instruction given by Dr. Samuel Hahnemann in 5th edition of Organon of medicine.

2.5 Outcome assessment:
GAGS scoring will be used for assessing the outcome of the patient before and after the treatment.
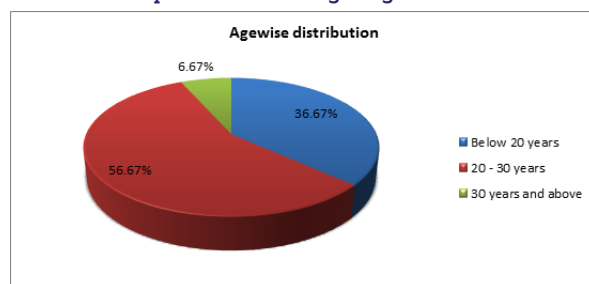
2.6 **Statistical techniques and Data analysis:**
 Statistical analysis of the result was by using paired sample t-test. The graph and figure were to be provided with the help of Excel software (Version 13)

3.OBSERVATION AND RESULT :-
Observation of all the 30 cases which were studied in the period of one and a half year are explained with the help of Tables, Pie diagram, and graphs as per the requirement.
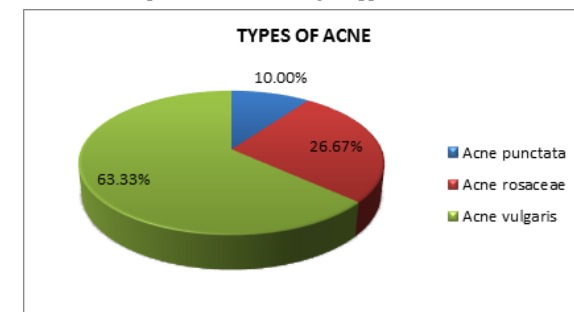
Distribution of patients according to Age

Fig 1. Pie chart response No. of Patients and Age wise

Data observed in age group below 30 years n=11 (36.67%), 20-30 years n=17 (56.67%), 30 years and above n=2 (6.67%).
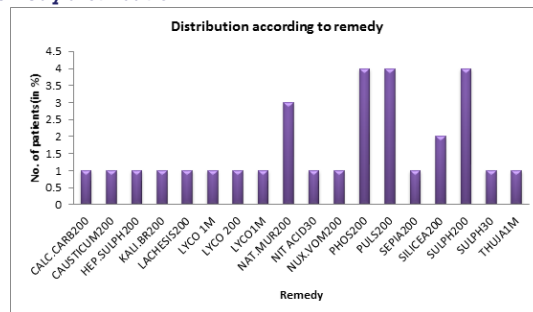
Distribution of patients according to type of acne

Fig.2. Pie diagram of distribution of types of Acne.

The above bar diagram shows that Acne punctata = 10% , Acne Rosaceae = 26.67% and Acne Vulagaris = 63.33% which shows that Acne vulgaris is the most affected.

Remedy distribution

Figure 11 :- Effectiveness of the medicines (%)

On analyzing 30 cases it was found that after prescribing an individualized Homoeopathic remedy to the patients their

GAGS score shows improvement. Potency was then selected according to the response given by the patients after the first prescription and the follow-ups, totality of symptoms (includes mentals, physicals and charateristics symptoms), reportorial totality, and susceptibility of the patients.out of which Sulph, Puls, Phos and Nat mur are the most common remedy prescribed.

Table: 3 Distribution of patients according to GAGS score of patients Pre-Intervention and Post-Intervention Data :-

Parameter	Before Intervention		After Intervention	
GAGS Score	F	%	f	%
Mild	11	36.67%	16	53.33%
Moderate	12	40.00%	12	40.00%
Severe	3	10.00%	2	6.675
Very severe	4	13.33%	0	0.00%

Fig. 3. Distribution of patients according to GAGS score.

Table shows that before treatment 36.67% of the patients had mild acne, 40% had moderate, 10% had severe and 13.33% had very severe acne.After treatment no one had very severe acne, only 6.67% patients had severe acne, 40% had moderate acne and most (53.33%) had mild acne. So, we can say treatment is effective as percentage of severity reduced.

Table 4: Descriptive statistics of GAGS score before and after intervention

Variable	Mean ± SD	T-value	p-value	Decision
Score before treatment	23.57 ± 10.01	10.77	0.000**	Reject H_0
Score after treatment	18.30± 9.38			
Difference	5.267 ± 2.677	Difference is Highly Significant		

Test used: Paired t-test, **: Highly Significant Difference, T-value: Test Statistic value

Before treatment GAGS score was 23.57 ± 10.01, after treatment GAGS score reduced to 18.30± 9.38. To check the effectiveness of treatment paired t-test was used. Test statistic value is 10.77 and p-value (0.000) is very small, it suggests that we reject H_0 and accept H_1 that is, Individualisation is useful in Homeopathic management of Acne.

4.CONCLUSIONS
Data observed in age group of below 20 years n=11 (36.67%), 20-30 years n=17 (56.67%), 30 years and above n=2 (6.67%). Sex ratio was Male:Female =7 (23.33%) : 23(76.67%) .

In this research of homoeopathic medicines in the treatment of acne 11 medicines were prescribed to the patients according to the symptoms similarity of each individual and following observations were made.

After studying Acne with Homoeopathic individualized prescribing we got satisfactory results and improvement is seen in the patients GAGS score.

The overall response of the treatment was observed that out of 30 patients 16 (53.33%) patients were relieved, 12 (40.00%) patients got moderate improvement, 2 (6.67%) patients had slight improvement.

The research shows that the homoeopathic medicine tested in this observational study leads to relief of symptoms and improves the quality of life. The study was observed and the overall response of the treatment shows that 90% of patients got relieved from these medicines.

5 . CONFLICT OF INTEREST

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