

Homeopathic Management of Planter Dermatositis and Recurrent URTI Evidence based Case Report

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[Cite this paper as:](#) Ragini M. Raut, Nilofer M. Shaikh, Sameer S. Nadgauda, (2025) Homeopathic Management of Planter Dermatositis and Recurrent URTI Evidence based Case Report. *Journal of Neonatal Surgery*, 14 (12s), 1002-1006.

ABSTRACT

Background: Dermatitis of the palms and soles is a skin condition characterized by inflammation, redness, scaling, and sometimes itching or pain in these areas. It can manifest in various forms, such as dyshidrotic dermatitis, hyperkeratotic palmar dermatitis, or contact dermatitis. Dyshidrotic dermatitis often presents as small, itchy blisters on the palms and soles, which may rupture and cause crusting. Hyperkeratotic palmar dermatitis, on the other hand, is marked by thickened, scaly skin and painful fissures, primarily on the palms. Contact dermatitis can result from exposure to irritants or allergens, leading to localized inflammation. Factors like frequent handwashing, exposure to harsh chemicals, or underlying conditions such as atopic dermatitis can contribute to the development of this condition. Treatment typically involves identifying and avoiding triggers, using topical corticosteroids or emollients, and in severe cases, systemic medications or phototherapy. Early diagnosis and management are essential to prevent complications and improve quality of life

Methods: Homeopathic medicine selected by prescription based on mind symptoms and gestures alone, in low potency, single medicine and infrequent repetition, can be implemented with good results. Pulsatilla in 30 potency single dose stimulation can be implemented on symptom similarity.

Result: In planter dermatosis and recurrent URTI patient after 3 doses of homeopathic medicine Pulsatilla in 30 potency at every 10 minutes time interval as a first stimulation, in next 15 days follow up patient was comfortable, with next few follow ups case recovered.

Conclusion: Accuracy in homeopathic prescription by concept of individuals' mental state and gestures used to express their feelings in the illness yields good clinical results in case of planter dermatosis and recurrent URTI. After treatment with homeopathic medicine, clinical and evidence based results can be achieved.

Keywords: planter dermatosis, Recurrent URTI, Pulsatile, a, Homeopathic medicine.

1. INTRODUCTION

Juvenile plantar dermatosis typically affects children aged 3 to 14 years, with the average age being 8. It is slightly more common in boys than girls and is rarely seen in adults. Although an association with conditions such as atopic dermatitis, asthma, and hay fever has been suggested, juvenile plantar dermatosis may be triggered by several factors, including:

- Repetitive friction from the foot moving up and down inside a shoe
- The occlusive effect of covered footwear, particularly synthetic shoes (e.g., nylon or vinyl)
- Excessive sweating (hyperhidrosis), followed by rapid drying, which can lead to cracking and fissures
- Genetic sensitivity of the skin
- Climatic changes, with worsening during hot, sweaty summer months and colder winter months when boots are worn. As a result, there is no consistent seasonal pattern.

Juvenile plantar dermatosis affects the weight-bearing areas of the soles of the feet, presenting as itchy or painful, shiny red skin with a glazed appearance and loss of the epidermal ridge pattern.

It typically involves both feet symmetrically and is characterized by:

- Painful cracks, fissures, and scaling
- Initial involvement of the plantar aspect of the great toes (ball of the big toes), followed by the Fore foot and sometimes the heel
- The toe-webs and instep are usually spared, helping differentiate it from tinea pedis
- In rare cases, the palms and fingertips may also be affected

The most common complication is painful cracks and fissures, which may take weeks or months to heal. Secondary bacterial infections are uncommon.

Juvenile Plantar Dermatitis can be difficult to differentiate from other skin conditions such as:

- Atopic eczema
- Keratolysis exfoliativa (focal peeling)
- Plantar psoriasis
- Tinea pedis
- Allergic contact dermatitis

Diagnosis is based on clinical findings.

To rule out fungal infections like tinea pedis, skin scrapings may be taken, and patch tests for contact allergy to footwear might be conducted. Skin biopsy is rarely necessary, but histology often shows epidermal spongiosis and dermal inflammation centred around sweat ducts.

There is no universally effective treatment, but general recommendations include:

- Reducing friction by wearing well-fitting shoes, preferably leather and avoiding shoes made from synthetic materials
- Wearing two or more pairs of cotton or wool socks to reduce friction and changing socks regularly
- Applying moisturizing creams with urea or petrolatum after bathing and before bed, and using barrier creams during the day (reapplied every 4 hours)
- Scheduling quiet times with minimal walking to allow fissures to heal

Although there is limited evidence supporting these interventions, they may help alleviate symptoms and improve comfort.

Case Report:

17/02/2024

A 07 years old girl k/c/o Planter Dermatitis came with complaints of cracking of soles and palms, sweating of palms, recurrent cough and cold with yellow discharge from the nose, because of pain not putting feet on the ground.

Mental state: she is very mild and for every question answers with nodding of the head, few words she utters with very low tone, and shy.

Vital data:

Pulse: 80 bpm BP: 110/70mmhg Temp:97.6, Weight:17 kg

Local examination revealed –dryness of soles, cracked soles with bleeding, painful to touch, sweaty palms

Provisional diagnosis: planter dermatosis

Data processing:

Analysis of case:

1. Answering nodding by
2. Mildness
3. Timidity

Totality of symptoms:

Answering nodding by (Pulsatilla single remedy), Mildness, Timidity

Intervention: Written informed consent was given by the parent before starting the treatment. She was prescribed Pulsatilla 30 (3 powder doses) on 1st day and followed by sac lac 3 pills tds for 7 days. She was advised to avoid walking bare foot and applying oil and eat fresh food and fruits, increase water intake. She was advised to come for follow up after 2 week.



Stramonium- This remedy has a presentation of fear and panic as reaction to the disease, whatever be the diagnosis. Intensity and facial expression off her decides this remedy.

Results: The use of Homoeopathic medicines such as Pulsatilla 30 as indicated medicine based on mental state of patient can treat Planter Dermatositis with URTI and clinical and evidence based results can be obtained.

Follow up table:

Date	Follow up	Treatment Given
17/02/2024	C/o Dry soles, cracked soles, painful cracks, bleeding from the cracks, sweaty moist palms. Cough and cold on and of every week, with yellow discharge from nose, needs frequent allopathic medicine for recurrent URTI, also nebulization every week. Patient answers by nodding head, with very low tone and mild and shy.	Rx 1. Pulsatilla 30, 3 powders 1 at 15 minutes interval today. 2. Sac lac 30, 3 pills tds for 15 days
04/03/2024	C/o Dry soles relieved, cracks reduced, not painful, No bleeding from the cracks, Reduced sweat and moistness of palms. No Cough and cold since last medicine, Patient answers by nodding head, with very low tone and mild and shy.	Rx 1. Pulsatilla 30, 1 powder stat. 2. Sac lac 30, 3 pills tds for 2 months



<p>4/07/2024 C/o</p>	<p>Dry soles relieved cracks reduced, not painful, No bleeding from the cracks, Reduced sweat and moistness of palms. No Cough and cold since last medicine, Patient answers by nodding head, with very low tone and mild and shy.</p>	<p>Rx 1. Pulsatilla 30, 1 powder stat. 2. Sac lac 30, 3pills tds for 2months</p> 
<p>5/12/2023</p>	<p>Mild Dryness of soles No cracks, not painful, No bleeding from soles, Palms not moist or sweaty. No Cough and cold since last 5months, Patient shy and mild.</p>	<p>Rx 1. Strammonium 200, 2 powders 1at15 mins interval today. 2. Sac lac 30, 3pills tds for 7days</p> 

2. DISCUSSION:

The evaluation and treatment of Planter Dermatositis with recurrent URTI with considering man in disease was prescribed in low potency. With Regular follow-ups, care of skin and good nutrition and medication treatment of Planter Dermatositis with recurrent URTI with homeopathic medicine is successful.

Knowledge of homeopathic medicine with prescription based on the mental state of the patient clears all the complaints in various systems (skin and respiratory) and helps in early and complete recovery.

3. CONCLUSION:

With Homoeopathic medicines Planter Dermatositis with recurrent URTI can be treated with complete recovery.

Source of Funding: None

Conflict of Interest: None

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