Plantar warts treated with homoeopathic medicine Antimonium crudum: A case report

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Abstract

**Introduction**: Plantar warts are cutaneous lesions brought on by human papilloma virus infection. There is a range of alternative treatment available for it, including cryotherapy, chemical cauterisation, curettage, electrodessication and laser removal. However, a majority of these treatments can leave scars or may provide only temporary relief. **Case Summary**: A 19-year-old female presented with multiple, right-sided plantar warts and was successfully treated by a single, individualised homoeopathic medicine, *Antimonium crudum* 200C for two months. The improvement was assessed through photographs taken in subsequent follow-up visits. The case was monitored further for a period of six months without any recurrence. This case report indicates the possibility of a long-lasting cure with personalised homoeopathic care in cases of plantar warts.

**Keywords**: *Antimonium crudum*, Dermatology, Homoeopathy, Plantar warts, Skin

**Introduction**

Plantar warts, also known as verruca plantaris, are cutaneous lesions on the plantar aspect of the foot. These develop as a result of keratinocytes infection with the human papilloma virus (HPV).[1] The annual incidence of plantar warts is 14%.[2] Children and teenagers account for the majority of instances. However, some groups, like those with impaired immune systems, are more likely to develop plantar warts, which can cause discomfort, shame and, in some rare instances, cancer. The frequency of plantar warts varies with age, sex, race and health status. In addition, different rates of plantar wart incidence are linked to geographic, seasonal, behavioural and socioeconomic factors.[1]

Although many therapies are available such as cryotherapy, salicylic acid, cantharidin, bleomycin, intralesional immunotherapy and/or laser therapy, none has been proven to be particularly helpful in all individuals.[3]

According to Homoeopathy, skin conditions are the outward signs of internal dysfunctions. While many studies on warts have shown positive results of Homoeopathy in treating the condition,[4-7] a few studies[8-10] have shown inconclusive results. This case report provides additional evidence of the positive effect of homoeopathic treatment of plantar warts. In this case report, treatment outcome was systematically documented through pictographic evidence, and possible causal attribution was evaluated using Modified Naranjo Criteria for Homeopathy (MONARCH).[11] The case is reported in accordance with the HOM-CASE guideline.[12]

**Patient Information**

A female patient, aged 19 years, came to the Regional Research Institute of Homoeopathy, Agartala, Tripura, India, with the complaint of painful lesions on her sole of right foot [Figure 1]. The complaint was present for the past 10 years, for which she was prescribed some analgesics and conventional ointment, without much relief.

Her past history was largely insignificant, except history of chicken pox in childhood. Her mother was suffering from...
Warts on the sole of the right foot.

Thirst reduced

Pain in head, on exposure to the sun

Desire for sour things

Hot patient

Irritable

Sleep was sound in nature. She could not tolerate the sun's heat, which caused headache. Her thermal reaction was hot. Her periods were regular, lasting 4–5 days.

On local examination, many small warts were found to be coalesced together to form one big patch on the sole. The warts were rough to touch, had a yellowish-grey colour, with irregular margins and had an oval shape. The collective size of the lesions measured 3.5 cm. There was no discharge from these lesions. The consistency of these lesions was firm and rough to touch, with a grainy texture. The local temperature was normal. The distribution pattern of the lesions followed a mosaic pattern [Figure 1].

The patient appeared to be very irritable, and she reported to be annoyed by little things. Her memory was good. She had a good appetite and had a craving for sour foods, especially pickles. Her thirst was reduced, and her tongue was dry and white coated. She reported a moderate amount of sweat that did not leave any unpleasant odour or stains on the clothing. Her bowel movements were regular, and her stools had a semisolid consistency. She had no complaints related to urination. Her sleep was sound in nature. She could not tolerate the sun’s heat, which caused headache. Her physical examination revealed no pallor, oedema, jaundice, cyanosis or lymphadenopathy.

On local examination, many small warts were found to be coalesced together to form one big patch on the sole. The warts were rough to touch, had a yellowish-grey colour, with irregular margins and had an oval shape. The collective size of the lesions measured 3.5 cm. There was no discharge from these lesions. The consistency of these lesions was firm and rough to touch, with a grainy texture. The local temperature was normal. The distribution pattern of the lesions followed a mosaic pattern [Figure 1].

The following symptoms were considered for repertorisation:

- Irritable
- Desire for sour things
- Thirst reduced
- Pain in head, on exposure to the sun
- Hot patient
- Warts on the sole of the right foot.

Considering the above symptomatology, two medicines appeared to be closely indicated for the case upon repertorisation, i.e., *Antim. crud.* and *Pulsatilla nigricans* [Figure 2]. *Antim. crud.* covered all six symptoms with the maximum score of 14. *Pulsatilla nigricans* also scored a similar score but did not cover all the symptoms. Moreover, *Pulsatilla nigricans* did not cover the main complaint, warts. On the basis of the repertorial analysis and consultation with homoeopathic materia medica, which additionally confirmed the following symptoms: Dry, white-coated tongue and overweight in appearance, *Antim. crud.* was prescribed.[16,17]

Therapeutic intervention

On the day of the first consultation (24 July 2021), three doses of *Antim. crud.* 200C, procured from a Good Manufacturing Practices certified pharmaceutical company, were prescribed in globule sized 30 and advised to be taken in the morning on an empty stomach for three consecutive days. The medicine was prescribed for a limited duration as per the need and was followed by placebo pills for the rest of the duration.

Follow-up and outcomes

The patient reported a significant improvement in the subsequent follow-ups. A summary of outcomes and related pictures are shown in Table 2 and Figures 1, 3-5.

The MONARCH was used to analyse the causal attribution between homoeopathic medication and the improvement in the patient. The modified Naranjo criterion score was "+8", indicating a possible causal attribution of the recorded result to the homoeopathic treatment [Table 3].

Discussion

The overgrowth of skin and mucosal membrane resulting from human papilloma virus results in plantar warts. They spread directly from one person to another and are contagious, especially in areas where the epidermal barrier has been compromised. It is unclear whether different therapies are effective or not for plantar warts. Other frequent modes of treatment such as cryotherapy and topical therapies are advised which are expensive and lack adequate evidence for being effective. To reduce the transmission of the virus and

**Clinical findings**

**General examination**

The patient was overweight and had a fair complexion. Her blood pressure was 114/76 mmHg. Her physical examination revealed no pallor, oedema, jaundice, cyanosis or lymphadenopathy.

**Diagnostic assessment**

The diagnosis of plantar warts was based on the characteristic appearance and distribution of the lesions, following the guidelines of ICD-10, code B07.0[13] [Figure 1].

**Repertorial analysis**

To create the totality in accordance with the guidelines outlined in the Organon of Medicine,[14] a thorough case-taking and symptom evaluation were done [Table 1]. Table 1 also presents the miasmatic analysis of each symptom. The patient's background was multi-miasmatic, with a psoroscyptic predominance. The repertorisation was carried out by Radar Opus 3.0.16 software using the Repertory of J.T. Kent, giving more importance to mental and physical generals than to particular symptoms [Figure 2].[15]

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Table 1: General and miasmatic analysis of the symptoms

<table>
<thead>
<tr>
<th>Symptom category</th>
<th>General analysis</th>
<th>Psora</th>
<th>Sycosis</th>
<th>Syphilis</th>
<th>Tubercular</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental generals</td>
<td>Irritable</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical generals</td>
<td>Hot patient</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Desire for sours</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Thirst less</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Particulars</td>
<td>Wart on sole</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Past history</td>
<td>Chickenpox</td>
<td></td>
<td></td>
<td></td>
<td>Acute miasm</td>
</tr>
<tr>
<td>Family history</td>
<td>Asthma</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Lumber spondylosis</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 2: Follow-ups

<table>
<thead>
<tr>
<th>Day of visit</th>
<th>Sign and symptoms</th>
<th>Prescription</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st visit, 24 July 2021</td>
<td>First prescription [Figure 1].</td>
<td><em>Antimonium crudum</em> 200 C, 3 doses, to take the medicine in the early morning on an empty stomach for consecutive 3 days.</td>
</tr>
<tr>
<td>2nd visit, 16 August 2021</td>
<td>Improving, i.e., the lesion became soft and pain reduced [Figure 3], headache upon exposure to sun less intense, irritability unchanged and thirst increased slightly.</td>
<td>No medicine was prescribed as improvement continued.</td>
</tr>
<tr>
<td>3rd visit, 02 September 2021</td>
<td>Skin lesions improving [Figure 4]. No headache when exposed to the sun, irritability reduced and thirst increased.</td>
<td>No medicine was prescribed as improvement continued.</td>
</tr>
<tr>
<td>4th visit, 23 September 2021</td>
<td>Warts completely resolved; normal skin restored [Figure 5].</td>
<td>No medicine was prescribed as improvement continued.</td>
</tr>
</tbody>
</table>

Figure 2: Repertorisation sheet

Figure 3: 2nd visit (during treatment 16 August 2021)

Figure 4: 3rd visit (during treatment 02 September 2021)

keeping in mind the cosmetic value, better knowledge and self-management are recommended.[18]

The effectiveness of homoeopathy in treating warts has been widely reported.[6,7] In a study, out of 52 cases, warts
Table 3: Assessment after 2 months of treatment by Modified Naranjo Criteria for Homoeopathy

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Domains</th>
<th>Yes</th>
<th>No</th>
<th>Not sure/NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Was there an improvement in the main symptom or condition for which the homeopathic medicine was prescribed?</td>
<td>+2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Did the clinical improvement occur within a plausible timeframe relative to the medicine intake?</td>
<td>+1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Was there a homeopathic aggravation of symptoms?</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Did the effect encompass more than the main symptom or condition (i.e., were other symptoms, not related to the main prescribing complaint, improved or changed?)</td>
<td>+1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Did overall well-being improve (suggest using validated scale)?</td>
<td>+1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>A. Direction of cure: did some symptoms improve in the opposite order of the development of symptoms of the disease?</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>B. Direction of cure: did at least one of the following aspects apply to the order of improvement of symptoms:</td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>-from organs of more importance to those of less importance</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>-from deeper to more superficial aspects of the individual</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>-from the top downwards</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Did ‘old symptoms’ (defined as non-seasonal and non-cyclical symptoms that were previously thought to have resolved) reappear temporarily during the course of improvement?</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Are there alternative causes (other than the medicine) that – with a high probability – could have produced the improvement? (consider known course of disease, other forms of treatment and other clinically relevant interventions)</td>
<td>+1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Was the health improvement confirmed by any objective evidence? (e.g., investigations, clinical examination, etc.)</td>
<td>+2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Did repeat dosing, if conducted, create similar clinical improvement?</td>
<td>0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total score = +8 (maximum score = +13, minimum score = −6)

In the case reported here, Antim. crud. was given in the 200th potency as per the totality of symptoms. The patient reported improvement just after two weeks of treatment, followed by complete disappearance of the warts of ten years’ duration in only two months. Her complaint that persisted for ten years was resolved within two months after medication. The treatment, thus, had a positive and quick effect. This result was seen not only in her physical condition of warts but the patient also reported a perceived reduction in irritability in her day-to-day affairs.

At every follow-up consultation, the patient was enquired regarding compliance in taking medicines as per the prescribed dose. The patient reported to have complied with the advice, and had no concerns regarding her tolerance for the intervention, nor experienced any adverse reactions during the course of treatment. She also did not mention any worsening of her pre-existing problems or any other complaints that could indicate a homoeopathic aggravation.

The patient was monitored for six months, but no recurrence was reported. The MONARCH score was used to assess the causal attribution of clinical results to homoeopathic treatment. The overall score was +8, which was close to the maximum score of +13, thus demonstrating the positive effect of Homoeopathy in improving the case [Table 3].

**Conclusion**

This case study demonstrates the significance of Homoeopathy in treating plantar warts with individualised medicine, based on indications. Even though earlier RCTs have not shown significant results, new trials with better research designs are warranted, given the known clinical success of homoeopathy in this condition, as also exhibited in this case.

**Declaration of patient’s consent**

The authors certify that they have obtained written, informed consent from the patient for using her images and other clinical
information for reporting in a scientific journal. The patient understands that her name and initials will not be published, and due efforts will be made to conceal her identity, but anonymity cannot be guaranteed.

**Financial support and sponsorship**
Nil.

**Conflict of interest**
None declared.

**References**

Verrues plantaires traitées avec un médicament homéopathique *Antimonium crudum* : un rapport de cas

**Introduction:** Les verrues plantaires sont des lésions cutanées provoquées par une infection par le virus du papillome humain. Il existe une gamme de traitements alternatifs disponibles, notamment la cryothérapie, la cautérisation chimique, le curetage, l’électrodessiccation et l’élimination au laser. Cependant, la majorité de ces traitements peuvent laisser des cicatrices ou ne fournir qu’un soulagement temporaire. **Résumé de cas:** Une femme de 19 ans s’est présentée avec de multiples verrues plantaires du côté droit et a été traitée avec succès par un seul médicament homéopathique individualisé, *Antimonium crudum* 200C pendant deux mois. L’amélioration a été évaluée à l’aide de photographies prises lors de visites de suivi ultérieures. Le cas a fait l’objet d’un suivi plus approfondi pendant une période de six mois sans qu’il n’y ait de récidive. Ce rapport de cas indique la possibilité d’une guérison durable avec des soins homéopathiques personnalisés en cas de verrues plantaires.

Mit homöopathischem Arzneimittel behandelte Plantarwarzen *Antimonium crudum*: Ein Fallbericht


प्लांटार मस्से का होमोपैथी दवा एंटिमोनियम क्रूडम से किया गया इलाज़: एक केस रिपोर्ट

**परिचय:** प्लांटार मस्से हुम्म्न पेप्लिलोमा वायरस संक्रमण द्वारा त्वचीय घात होते हैं। इसके लिए वैद्यकीय उपचार का एक श्रेखला उपलब्ध है, जिसमें क्रयोथरपी, रसायनक तुलना, खुरचना, इलेक्ट्रोडेसिकेशन और लेजर सर्जरी शामिल हैं। हालांकि, इनमें से अधिकांश उपचार निश्चित छोड़ सकते हैं या केवल अस्थायी सहायता प्रदान करते हैं। केस सरायेसः एक 19 वर्षीय महिला कई दे तरफ प्ल्टार मस्से के साथ आई और उसका दो महीने के लिए एक सेशन व्हायरिंग ने द्वारा छह महीने के साथ आई और उसका दो महीने के लिए एक एकल, व्हायरिंग होमोपैथी दवा, एंटिमोनियम क्रूडम, 200C द्वारा सफलतापूर्वक इलाज किया गया। अनुबंधी दौरों में लिए गए फोटोग्राफ के माध्यम से सुधार का आकलन किया गया। इस मामले की बिना किसी पुनरात्मकता के छह महीने की अवधि तक निष्कर्ष तक गई। यह केस रिपोर्ट प्ल्टार मस्से के मामले में व्हायरिंग होमोपैथी देखभाल के साथ दैनिकस्थित समय एक समायोजन की संभावना को दर्शाता है।

Verrugas plantares tratadas con medicina homeopática *Antimonium crudum*: reporte de un caso

**Introducción:** Las verrugas plantares son lesiones cutáneas provocadas por la infección por el virus del papiloma humano. Existe una gama de tratamientos alternativos disponibles para ello, que incluyen crioterapia, cautérrización química, curetaje, electrodesección y extracción con láser. Sin embargo, la mayoría de estos tratamientos pueden dejar cicatrices o pueden proporcionar solo un alivio temporal. **Resumen del caso:** Una mujer de 19 años presentó múltiples verrugas plantares del lado derecho y fue tratada con éxito con un único medicamento homeopático individualizado, *Antimonium crudum* 200C durante dos meses. La mejoría se evaluó a través de fotografías tomadas en visitas de seguimiento posteriores. El caso fue monitorizado durante un periodo de seis meses sin ninguna repetición. Este caso clínico indica la posibilidad de una curación duradera con atención homeopática personalizada en casos de verrugas plantares.

用顺势疗法药物锑治疗的跖疣：病例报告

**简介：** 跖疣是由人瘤病毒感染引起的皮肤病变。有一系列替代疗法可供选择，包括冷冻疗法、化学烧灼、刮宫术、电干燥和激光去除。然而，这些治疗中的大多数都会留下疤痕或只能暂时缓解。**病例摘要：** 一名19岁女性出现多发性右侧跖疣，并成功接受了单一的个体化顺势疗法药物 *Antimonium crudum* 200C治疗了两个月。在随后的随访中通过拍摄的照片评估了改善情况。对该病例进行了为期六个月的进一步监测，没有再次发生。该病例报告表明，在跖疣病例中，通过个性化的顺势疗法护理可以长期治愈。