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Homoeopathic intervention in dual autoimmune disorders: A case report on management of vitiligo and hashimoto thyroiditis

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Abstract

Background: Vitiligo and Hashimoto Thyroiditis often occur as chronic autoimmune disorders that require careful evaluation and individualised management. This case study examines the usefulness of homoeopathic interventions in addressing the complexities of Vitiligo and Hashimoto Thyroiditis through evidence-based methodologies. **Case Summary:** A 57-year-old woman initially sought medical attention for a noticeable whitish discolouration on the left side of her lips. Subsequent evaluations unveiled the presence of hypothyroidism, marked by elevated Anti-TPO levels, exposing the dual autoimmune nature of her condition. The patient's concerns centered on the aesthetic impact of vitiligo on her lips and the broader health implications of Hashimoto's Thyroiditis. The coexistence of vitiligo and Hashimoto's thyroiditis required simultaneous evaluation of both dermatological and thyroid-related findings. The patient underwent homoeopathic treatment at the outpatient department of the Regional Research Institute for Homoeopathy, Shimla. Following the intervention, recovery from the signs and symptoms of both vitiligo and Hashimoto's Thyroiditis was observed. Photographic evidence and serological investigations, including Serum TSH and anti-TPO, demonstrated significant improvement in the conditions. This evidence-based case report highlights the potential positive role of Homoeopathy in the management of complex dual autoimmune conditions, providing insights into the successful recovery of the patient both clinically and serologically.

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CASE REPORT

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ABSTRACT

Background: Vitiligo and Hashimoto Thyroiditis often occur as chronic autoimmune disorders that require careful evaluation and individualised management. This case study examines the usefulness of homoeopathic interventions in addressing the complexities of Vitiligo and Hashimoto Thyroiditis through evidence-based methodologies.

Case Summary: A 57-year-old woman initially sought medical attention for a noticeable whitish discolouration on the left side of her lips. Subsequent evaluations unveiled the presence of hypothyroidism, marked by elevated Anti-TPO levels, exposing the dual autoimmune nature of her condition. The patient's concerns centered on the aesthetic impact of vitiligo on her lips and the broader health implications of Hashimoto's Thyroiditis. The coexistence of vitiligo and Hashimoto's thyroiditis required simultaneous evaluation of both dermatological and thyroid-related findings. The patient underwent homoeopathic treatment at the outpatient department of the Regional Research Institute for Homoeopathy, Shimla. Following the intervention, recovery from the signs and symptoms of both vitiligo and Hashimoto's Thyroiditis was observed. Photographic evidence and serological investigations, including Serum TSH and anti-TPO, demonstrated significant improvement in the conditions. This evidence-based case report highlights the potential positive role of Homoeopathy in the management of complex dual autoimmune conditions, providing insights into the successful recovery of the patient both clinically and serologically.

Keywords: Autoimmune disorders, Case study, Evidence-based, Homoeopathy, Hashimoto thyroiditis, Vitiligo

Introduction

Vitiligo and Hashimoto's thyroiditis (HT) are distinct autoimmune conditions that frequently coexist, particularly in children and adolescents. Epidemiological evidence indicates that the prevalence of HT is up to 2.5 times higher in individuals with vitiligo than in age- and sex- matched healthy controls, with HT often developing after the onset of vitiligo. This strong association highlights the importance of early screening and timely management when either condition is diagnosed.¹

The management of autoimmune diseases remains complex, with conventional treatments ranging from physical therapy, NSAIDs, corticosteroids, DMARDs, anticytokine therapies, intracellular pathway inhibitors, co-stimulation blockade, biological agents targeting T- and B-cell function, regulatory T-cell modulation, to stem cell transplantation. Despite this wide therapeutic spectrum, many autoimmune conditions show variable response, treatment resistance, and risks of toxicity, prompting the development of newer biologics with improved efficacy and safety, as well as interest in hematopoietic stem cell

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transplantation for refractory cases.^{2,3} Vitiligo, affecting 0.5–2% of the global population, is now recognised as an autoimmune disorder characterised by melanocyte loss and significant psychological impact; in 2011, segmental vitiligo was classified separately from non-segmental types.⁴ Hashimoto thyroiditis, the leading cause of hypothyroidism in developed countries, involves immune-mediated destruction of thyroid tissue through antithyroid antibodies, leading to fibrosis and variable early-stage presentations, making diagnosis challenging.^{5,6} As no curative treatment exists in conventional medicine, lifelong thyroid hormone replacement remains the standard approach, effectively managing hypothyroid symptoms but not altering the underlying autoimmune pathology. Supportive lifestyle and dietary measures may complement medical management to promote overall well-being.⁶

Homoeopathy, as an alternative medical system, has been explored for its potential role in autoimmune conditions. While more research is needed to fully understand its mechanisms and efficacy, proponents of Homoeopathy believe that it can provide a holistic approach to addressing autoimmune disorders.⁷ Homoeopathic treatments aim to stimulate the body's innate healing abilities and restore balance by using highly diluted substances derived from plants, minerals, or animals. The selection of remedies is individualised, considering the unique symptoms and constitutional characteristics of each person. A study by Chauhan et. al suggests that Homoeopathy may help modulate the immune system, alleviate symptoms, and promote overall well-being in individuals with autoimmune conditions.⁸

There is potential for Homoeopathy to play a role in the treatment of autoimmune conditions. This case report provides encouraging findings that suggest Homoeopathic interventions may offer benefits in addressing the symptoms and improving the quality of life for individuals with these autoimmune disorders. However, it is essential to note that further research is necessary to validate these results and establish the broader applicability of Homoeopathy in managing autoimmune conditions.

Patient information

A case of a 57-year-old woman presenting with whitish discolouration on the left side of her lips for the last one to two years is reported here. As the case reached a standstill during follow-up, the patient was advised to undergo a blood investigation. On 14th November 2022, a thyroid profile and Anti-TPO assessment were conducted. These tests revealed

hypothyroidism along with Anti-TPO positivity, indicating an underlying autoimmune process affecting both the pigmentary cells and the thyroid gland.

The patient had a past medical history of surgical excision of carcinoma of the cervix, for which she underwent a cycle of radiotherapy two years ago. Following this treatment, the patient's current complaints began to appear.

Clinical findings

The lady was an ectomorph with a whitish complexion. Her pulse rate was 80/min, temperature was 98.6°F, and her blood pressure was 110/80 mm Hg.

During general physical examination, no significant clinical findings were observed. However, during systemic examination, a whitish discolouration was noted on the left side of the lip [Fig. 1].

Generalities

The patient reported a moderate appetite and a moderate thirst for lukewarm water. There were reportedly no significant desires, aversions, or intolerances. Stool and urine were normal. Sleep was reported as sound and refreshing. Perspiration was scanty, with no notable observations. Regarding thermal reaction, the patient exhibited sensitivity to both extreme temperatures but particularly struggled with cold weather, indicating a predominantly chilly disposition. She was a working professional in the bank, having an intellectual and sedentary work routine. The patient was always in a hurry and restless about the things she needed to do in her day-to-day life. She found it difficult to stay in one place due to her restlessness. Also, she was very anxious because of her condition.

Diagnostic assessment

The patient presented with a two-year-old depigmented patch on the left side of the lips, clinically suggestive of vitiligo. As the case reached a standstill, thyroid profile and Anti-TPO tests were performed on 14th November 2022, revealing hypothyroidism with Anti-TPO positivity, confirming Hashimoto's thyroiditis. Her past history of cervical carcinoma treated with surgery and radiotherapy was recorded, but was not contributory to the current condition.

So, the patient was diagnosed as a case of Vitiligo (lip), along with Hashimoto's thyroiditis (autoimmune hypothyroidism).



Fig. 1. Baseline photograph of the patient's lips dated 11th May, 2022.

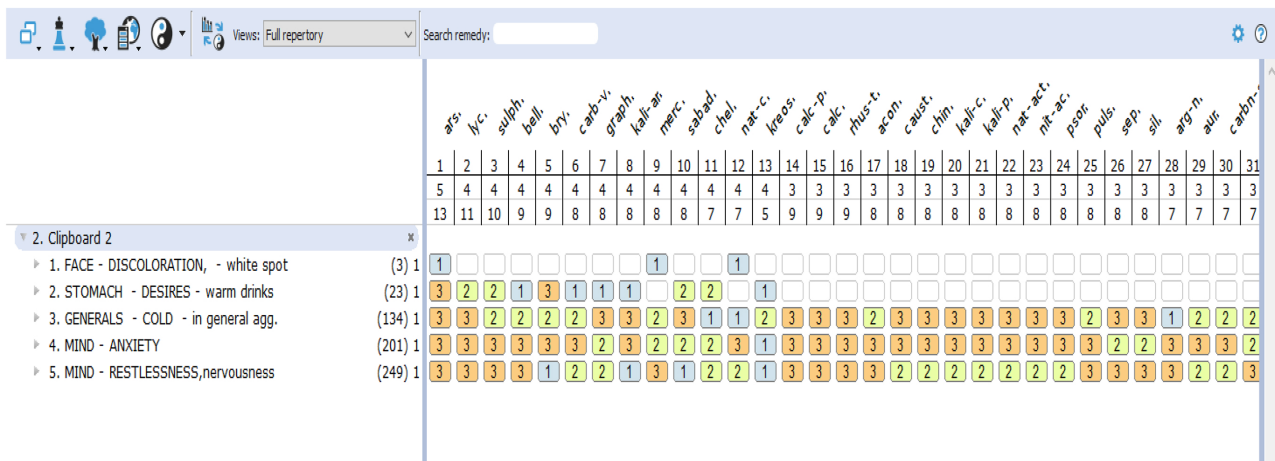


Fig. 2. Repertorisation sheet using Radar Opus.

Therapeutic intervention

The totality of symptoms taken for repertorisation, using Murphy’s Homoeopathic Repertory by Robin Murphy⁹ and Kent’s repertory of Homoeopathic Materia Medica by James Tyler Kent¹⁰ in RADAR Opus, included whitish discoloration on the left lip, moderate thirst for lukewarm water, unable to tolerate the cold weather and the presence of anxiety and restlessness in the patient’s behaviour while doing her work or performing her duty. After complete and thorough case-taking, distinctive individualising features were noted, thus aiding in the selection of a homoeopathic similimum. Following the repertorisation process (Fig. 2), the most similar homoeopathic medicine *Arsenicum album* was prescribed in three doses, OD for 3 days in sugar of milk, followed by *Arsenicum sulphuratum flavum* 30C, 4 pills, BD for 30 days. The medicines were procured from a GMP-certified pharmaceutical company.

The patient was provided with general management guidance to support her condition,¹¹ which included prioritising self-care by limiting excessive sun exposure, regularly monitoring the affected skin, maintaining a healthy lifestyle through balanced

nutrition, adequate sleep, and routine physical activity, and adopting stress-reducing practices such as mindfulness or light exercise.

Follow-up and outcome

Over the course of a one-year follow-up (Table 1), a remarkable reduction in depigmented spots was observed (Fig. 3), accompanied by significant improvements in the patient’s thyroid profile. Blood examinations revealed a notable decrease in TSH levels and a drastic reduction in Anti-TPO antibodies compared to earlier readings, all achieved without the use of hormone replacement therapy.

The Modified Naranjo Criteria¹² score, applied to evaluate causality, was calculated to be +9, indicating a positive cause-and-effect relationship between the homoeopathic medicine given to the patient and the positive outcome (Table 2).

Discussion

The present case report reflects a holistic and individualised application of homoeopathic therapeutics

Table 1. Follow-up table.

DATE OF FOLLOW-UP	SYMPTOMS	PRESCRIPTION	JUSTIFICATION OF PRESCRIPTION
11 th MAY, 2022	Baseline characteristics. (Fig. 1)	<i>Arsenicum album</i> 200C/ 3 dose/ OD × 3 days in sugar of milk Followed by: <i>Arsenicum sulphuratum flavum</i> 30C/ BD/ 2 weeks, 4 pills each time.	<i>Arsenicum album</i> 200C was selected based on the patient's constitutional profile and occupational characteristics, aligning with classical homoeopathic principles for moderate potency selection. ^{13,14} The incorporation of <i>Arsenicum sulphuratum flavum</i> based on organospecific medicine principles reflects a targeted strategy to address pigmentary changes in depigmented spots. <i>Arsenicum sulphuratum flavum</i> is known for its potential impact on pigmentation, and its selection in this context indicates a tailored approach to address the specific manifestation of the patient's condition. This choice demonstrates a consideration of not only the general symptoms but also the organ-specific aspects, showcasing a holistic and individualised approach to homoeopathic prescribing. ¹⁴
04 th June, 2022	All complaints same as before.	<i>Arsenicum album</i> 200C/ 3 dose/ OD × 3 days in sugar of milk Followed by: <i>Arsenicum sulphuratum flavum</i> 30C/ BD/ 3 weeks, 4 pills each time.	Repetition of first prescription as the case was standstill.
11 th July, 2022	Pigmentation starts appearing in the white spot.	No medicine was given as improvement continued	No medicine was prescribed, as the patient's complaint improved.
03 rd August, 2022	Around 20–25% improvement in the non-pigmented spot.	No medicine was given as improvement continued	No medicine was prescribed, as the patient's complaint improved.
28 th September, 2022	The case remains at a standstill, with no discernible improvement observed in comparison to the previous follow-up.	<i>Arsenicum album</i> 200C/ 3 dose/ O.D × 3 days in sugar of milk Followed by: <i>Arsenicum sulphuratum flavum</i> 30C/ BD/ 2 weeks, 4 pills each time	Repetition of first prescription as the case is standstill after initial improvement.
14 th Nov, 2022	More pigmentary changes seen; Blood tests reveal Subclinical hypothyroidism (TSH 9.35 uIU/ ml) along with Anti TPO antibody +ve (Anti TPO > 1300 U/ml).	<i>Arsenicum sulphuratum flavum</i> 30C/ BD/ 2 weeks, 4 pills each time	As the case started improving, only continuing with the second medicine.
22 nd December, 2022	Patient condition at a standstill position, no further progress.	<i>Arsenicum album</i> 200C/ 3 dose/ OD × 3 days in sugar of milk Followed by: <i>Arsenicum sulphuratum flavum</i> 30C/ BD/ 2 weeks, 4 pills each time	Repetition of earlier prescription, as the case was in a standstill position, as per the principle of Homoeopathy. ¹⁴ Simultaneously, the patient was advised a routine blood profile to check the thyroid status.
18 th Jan, 2023	Patient's condition remained at a standstill, re-evaluation of the case conducted.	<i>Natrum muriaticum</i> 30C/ BD/ 5 days weeks, 4 pills each time	Following James Tyler Kent's 10 th observation, ¹⁴ the case was reevaluated as it reached a standstill. With the new diagnosis of Hashimoto thyroiditis and emerging symptoms like heat intolerance and cravings for spicy and salty foods, the second prescription was guided by Kent's principle that 'the second observation is made when the case comes to a standstill ... then you have some guide to the administration of the medicine.' This ensured the prescription aligned with the patient's evolving condition.

(Continued.)

Table 1. Continued.

DATE OF FOLLOW-UP	SYMPTOMS	PRESCRIPTION	JUSTIFICATION OF PRESCRIPTION
03 rd March, 2023	Skin lesion started improving and new symptoms also improved along with restlessness and anxiety.	No medicine was given as improvement continued	As the symptoms start improving.
06 th April, 2023	Skin lesion started improving and her report values for Hashimoto thyroiditis started improving. Dated 24.03.2023 TSH- 3.462 uIU/ mL Anti TPO- 589.3 U/ mL	No medicine was given as improvement continued	As the vitiligo spot and blood profile for the Hashimoto thyroiditis start improving.
12 th May, 2023	As more re-pigmentation begins to manifest in the lesion, the patient concurrently reports a new complaint of pain in the lower legs from the last 10 days, characterised by cramps that intensify at night but alleviate with continuous motion.	<i>Rhus tox.</i> 200C/ TDS / 5 days, 4 pills each time	In response to the emergence of new acute symptoms over the past few days, <i>Rhus tox</i> has been prescribed. This remedy not only addresses the current totality of symptoms but also complements the therapeutic action of <i>Natrum mur.</i> , which was previously administered. ¹⁵
19 th June, 2023	Anxiety and restlessness improved. Vitiligo spot was improved a lot, and her thyroid profile was again done on 09.06.2023 in order to know the TSH status. Dated 09.06.2023 TSH 6.64 uIU/ mL	No medicine was given as improvement continued	As vitiligo spot improved (Fig. 3) and her blood profile for Hashimoto thyroiditis is better than before.

Table 2. Modified naranjo criteria for homoeopathy (MONARCH).

Domain	Patient's answer	Score
1. Was there an improvement in the main symptom or condition for which the homoeopathic medicine was prescribe?	Yes	+2
2. Did the clinical improvement occur within a plausible timeframe relative to the medicine intake?	Yes	+1
3. Was there a homoeopathic aggravation of symptoms?	No	0
4. Did the effect encompass more than the main symptom or condition (i.e., were other symptoms, not related to the main presenting complaint, improved or changed)?	No	+1
5. Did overall well-being improve? (Suggest using a validated scale or mention about changes in physical, emotional, and behavioral elements)	Yes	+1
6. a. <i>Direction of cure</i> : did some symptoms improve in the opposite order of the development of symptoms of the disease?	Not sure	0
b. <i>Direction of cure</i> : did at least one of the following aspects apply to the order of improvement in symptoms: –from organs of more importance to those of less importance? –from deeper to more superficial aspects of the individual? –from the top downwards?	Not sure	0
7. 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?	Not sure	0
8. Are there alternative causes (i.e., 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)	No	+1
9. Was the health improvement confirmed by any objective evidence? (e.g., investigations, clinical examination, etc.)	Yes	+2
10. Did repeat dosing, if conducted, create similar clinical improvement?	Yes	+1
Total score = +9		



Fig. 3. Post-interventional photograph of the lesion dated 19.06.2023.

in the management of a co-presentation of two autoimmune diseases—Vitiligo and Hashimoto's Thyroiditis. While the concurrence of these conditions is mentioned in conventional medical literature, it remains scarcely documented in homoeopathic clinical publications, and this case is presented to contribute to the limited homoeopathic evidence available on such coexisting conditions.

Homoeopathy emphasises the principle of individualisation, taking into account the totality of symptoms at mental, emotional, and physical levels, as well as miasmatic tendencies. In this case, the constitutional prescription of *Arsenicum album* 200C was guided by the patient's symptom totality and occupational profile, as outlined in the posology chapter of classical homoeopathic texts.^{13,14} The patient's intellectual profession, refined sensitivity, anxiety traits, and skin affinity justified the use of a moderate potency (200C), which is suitable for patients of medium vitality and complex pathology.

Subsequently, *Arsenicum sulphuratum flavum* 30C was employed as an organopathic remedy, in line with organ-specific indications for pigmentary disorders, particularly in vitiligo. Published case-based literature has previously highlighted the potential of homoeopathic medicines in modulating pigment metabolism and immune activity in vitiligo cases, although further systematic research is warranted.¹⁵⁻¹⁸

When the case reached a therapeutic standstill, and Hashimoto's thyroiditis was revealed through routine laboratory investigations (elevated TSH and anti-TPO antibodies), a shift in remedy was warranted. According to James Tyler Kent's 10th Observation on Second Prescription ("new symptoms indicating a change in remedy"), *Natrum muriaticum* 30C was selected based on emerging symptoms.¹⁴ This change of similimum reinvigorated the case progress, in alignment with dynamic prescribing principles that honour the evolving nature of chronic diseases.

Moreover, *Rhus toxicodendron* 30C was introduced to manage acute episodes of lower leg pain. This remedy was selected on the basis of acute totality and was found to be complementary to the chronic prescription, echoing the approach described in homoeopathic acute-chronic dual management models.¹⁹

Notably, over the course of treatment, improvements were not only seen in the pigmentary lesions of vitiligo but also in thyroid markers, including a reduction in TSH and anti-TPO antibody levels. This reflects the potential systemic action of well-indicated homoeopathic remedies in autoimmune modulation. The multiple remedies administered throughout the treatment course exemplify the flexibility and adaptability of the homoeopathic approach, as each prescription is justified by the evolving needs of the case.

Clinical improvement included repigmentation in vitiligo lesions and reduction in thyroid markers, suggesting possible systemic autoimmune modulation. These observations are consistent with anecdotal evidence supporting individualised homoeopathic interventions but require cautious interpretation. As it is a single-patient observation, the absence of controls, limited follow-up, and inability to exclude other influencing factors restrict generalizability. However, controlled studies and longer follow-ups are essential to substantiate these findings and assess the sustainability of therapeutic outcomes.

Conclusion

The presented case report sheds light on a noteworthy application of homoeopathic medicine in managing a dual autoimmune condition encompassing Vitiligo and Hashimoto thyroiditis. However, given the complexity of dual autoimmune conditions, additional research, rigorous clinical trials, and larger sample sizes are required to substantiate the efficacy and reproducibility of the outcomes observed in this case report.

Declaration of the patient's consent

The author certifies that they have obtained the patient's written consent. In the form, the patient has given her consent for her images and other clinical information to be reported in the journal. The patient understands that her name and initials will not be published, and due efforts will be made to conceal her identity; however, anonymity cannot be guaranteed.

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Conflicts of interest

There are no conflicts of interest.

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Intervention homéopathique dans les doubles maladies auto-immunes: Étude de cas sur la prise en charge du vitiligo et de la thyroïdite de Hashimoto

Contexte: Le vitiligo et la thyroïdite de Hashimoto surviennent souvent comme des maladies auto-immunes chroniques qui nécessitent une évaluation minutieuse et une prise en charge individualisée. Cette étude de cas examine l'utilité des interventions homéopathiques pour aborder la complexité du vitiligo et de la thyroïdite de Hashimoto à l'aide de méthodologies fondées sur des preuves. **Résumé du cas:** Une femme de 57 ans a initialement consulté pour une décoloration blanchâtre notable sur le côté gauche de sa lèvre. Des examens ultérieurs ont révélé la présence d'une hypothyroïdie, caractérisée par des taux élevés d'anti-TPO, mettant en évidence la double nature auto-immune de sa maladie. Les préoccupations de la patiente portaient sur l'impact esthétique du vitiligo sur ses lèvres et les implications plus larges de la thyroïdite de Hashimoto sur sa santé. La coexistence du vitiligo et de la thyroïdite de Hashimoto a nécessité une évaluation simultanée des manifestations dermatologiques et thyroïdiennes. La patiente a suivi un traitement homéopathique au service de consultations externes de l'Institut régional de recherche en homéopathie de Shimla. Après ce traitement, une amélioration des signes et symptômes du vitiligo et de la thyroïdite de Hashimoto a été observée. Les preuves photographiques et les analyses sérologiques, notamment le dosage de la TSH et des anticorps anti-TPO, ont démontré une amélioration significative de son état. Ce cas clinique, étayé par des preuves, met en lumière le rôle positif potentiel de l'homéopathie dans la prise en charge des affections auto-immunes complexes associées, et explique la guérison réussie de la patiente, tant sur le plan clinique que sérologique.

Homöopathische Intervention bei dualen Autoimmunerkrankungen: Ein Fallbericht zur Behandlung von Vitiligo und Hashimoto-Thyreoiditis zusammenfassung

Hintergrund: Vitiligo und Hashimoto-Thyreoiditis treten häufig als chronische Autoimmunerkrankungen auf, die eine sorgfältige Diagnostik und individuelle Therapie erfordern. Diese Fallstudie untersucht den Nutzen homöopathischer Interventionen bei der Behandlung der komplexen Zusammenhänge von Vitiligo und Hashimoto-Thyreoiditis anhand evidenzbasierter Methoden. **Fallbeschreibung:** Eine 57-jährige Frau suchte zunächst wegen einer auffälligen weißlichen Verfärbung an der linken Seite ihrer Lippe ärztliche Hilfe auf. Weiterführende Untersuchungen ergaben eine Hypothyreose mit erhöhten Anti-TPO-Werten, wodurch die duale Autoimmunnatur ihrer Erkrankung deutlich wurde. Die Patientin sorgte sich um die ästhetischen Auswirkungen der Vitiligo auf ihre Lippen und die weiterreichenden gesundheitlichen Folgen der Hashimoto-Thyreoiditis. Das gleichzeitige Auftreten von Vitiligo und Hashimoto-Thyreoiditis erforderte eine simultane Abklärung der dermatologischen und schilddrüsenbezogenen Befunde. Die Patientin wurde in der Ambulanz des Regionalen Forschungsinstituts für Homöopathie in Shimla homöopathisch behandelt. Nach der Intervention zeigte sich eine Besserung der Symptome beider Erkrankungen. Fotodokumentation und serologische Untersuchungen, darunter die Bestimmung von Serum-TSH und Anti-TPO, belegten eine signifikante Verbesserung des Zustands. Dieser evidenzbasierte Fallbericht unterstreicht das Potenzial der Homöopathie in der Behandlung komplexer, dualer Autoimmunerkrankungen und liefert Erkenntnisse über die erfolgreiche klinische und serologische Genesung der Patientin.

दोहरे स्वप्रतिरक्षित विकारों में होम्योपैथिक हस्तक्षेप: विटिलिगो और हाशिमोटो थायरॉइडाइटिस के प्रबंधन पर एक केस रिपोर्ट

पृष्ठभूमि: विटिलिगो और हाशिमोटो थायरॉइडाइटिस अक्सर दीर्घकालिक स्वप्रतिरक्षित विकार होते हैं जिनके लिए सावधानीपूर्वक मूल्यांकन और व्यक्तिगत प्रबंधन की आवश्यकता होती है। यह केस स्टडी साक्ष्य-आधारित पद्धतियों के माध्यम से विटिलिगो और हाशिमोटो थायरॉइडाइटिस की जटिलताओं को दूर करने में होम्योपैथिक हस्तक्षेपों की उपयोगिता की जांच करती है। **केस सारांश:** एक 57 वर्षीय महिला ने अपने होंठों के बाईं ओर दिखाई देने वाले सफेद धब्बे के लिए चिकित्सा सहायता ली। अतिरिक्त मूल्यांकनों से हाइपोथायरायडिज्म का पता चला, जो बढ़े हुए एंटी-टीपीओ स्तरों से चिह्नित था, जिससे उनकी स्थिति की दोहरी स्वप्रतिरक्षित प्रकृति का पता चला। रोगी की चिंताएं उसके होंठों पर विटिलिगो के सौंदर्य संबंधी प्रभाव और हाशिमोटो थायरॉइडाइटिस के व्यापक स्वास्थ्य प्रभावों पर केंद्रित थीं। विटिलिगो और हाशिमोटो थायरॉइडाइटिस की एक साथ मौजूदगी के लिए त्वचा संबंधी और थायरॉइड संबंधी दोनों लक्षणों का एक साथ मूल्यांकन आवश्यक था। मरीज का इलाज शिमला स्थित क्षेत्रीय होम्योपैथी अनुसंधान संस्थान के बाह्य रोगी विभाग में होम्योपैथिक तरीके से किया गया। उपचार के बाद, विटिलिगो और हाशिमोटो थायरॉइडाइटिस दोनों के लक्षणों में सुधार देखा गया। फोटोग्राफिक साक्ष्य और सीरम टीएसएच और एंटी-टीपीओ सहित सीरोलॉजिकल जांचों से स्थिति में महत्वपूर्ण सुधार स्पष्ट हुआ। यह साक्ष्य-आधारित केस रिपोर्ट जटिल दोहरी स्वप्रतिरक्षित विकारों के प्रबंधन में होम्योपैथी की संभावित सकारात्मक भूमिका को उजागर करती है, और मरीज के चिकित्सकीय और सीरोलॉजिकल दोनों तरह से सफल उपचार के बारे में जानकारी प्रदान करती है।

Intervención homeopática en trastornos autoinmunes duales: Informe de un caso sobre el manejo del vitiligo y la tiroiditis de Hashimoto

Antecedentes: El vitiligo y la tiroiditis de Hashimoto a menudo se presentan como trastornos autoinmunes crónicos que requieren una evaluación cuidadosa y un manejo individualizado. Este estudio de caso examina la utilidad de las intervenciones homeopáticas para abordar las complejidades del vitiligo y la tiroiditis de Hashimoto mediante metodologías basadas en la evidencia. **Resumen del caso:** Una mujer de 57 años consultó inicialmente por una notable coloración blanquecina en el lado izquierdo de sus labios. Evaluaciones posteriores revelaron la presencia de hipotiroidismo, caracterizado por niveles elevados de anti-TPO, lo que expuso la naturaleza autoinmune dual de su condición. Las preocupaciones de la paciente se centraban en el impacto estético del vitiligo en sus labios y las implicaciones generales para la salud de la tiroiditis de Hashimoto. La coexistencia de vitiligo y tiroiditis de Hashimoto requirió la evaluación simultánea de hallazgos dermatológicos y tiroideos. La paciente se sometió a tratamiento homeopático en la consulta externa del Instituto Regional de Investigación de Homeopatía de Shimla. Tras la intervención, se observó una recuperación de los signos y síntomas tanto del vitiligo como de la tiroiditis de Hashimoto. La evidencia fotográfica y las pruebas serológicas, incluyendo la TSH sérica y los anti-TPO, demostraron una mejoría significativa de sus afecciones. Este informe de caso, basado en la evidencia, destaca el potencial papel positivo de la homeopatía en el manejo de enfermedades autoinmunes duales complejas, proporcionando información sobre la recuperación exitosa de la paciente, tanto clínica como serológicamente.

顺势疗法在双重自身免疫性疾病中的应用：白癜风合并桥本甲状腺炎病例报告

摘要背景：白癜风和桥本甲状腺炎常表现为慢性自身免疫性疾病，需要仔细评估和个体化治疗。本病例研究旨在通过循证方法探讨顺势疗法在应对白癜风合并桥本甲状腺炎的复杂性方面的有效性。**病例概要：**一位57岁女性因左侧嘴唇出现明显的白色斑块就诊。后续检查发现其患有甲状腺功能减退症，表现为抗甲状腺过氧化物酶抗体（Anti-TPO）水平升高，揭示了其疾病的双重自身免疫性质。患者主要关注白癜风对其唇部美观的影响，以及桥本氏甲状腺炎带来的更广泛的健康问题。由于白癜风和桥本氏甲状腺炎同时存在，因此需要同时评估皮肤科和甲状腺相关指标。患者在西姆拉地区顺势疗法研究所门诊部接受了顺势疗法治疗。治疗后，白癜风和桥本氏甲状腺炎的体征和症状均有所缓解。照片和血清学检查（包括血清促甲状腺激素和抗甲状腺过氧化物酶抗体）显示病情显著改善。这份循证病例报告强调了顺势疗法在治疗复杂的双重自身免疫性疾病方面的潜在积极作用，并深入分析了患者临床和血清学方面的成功康复。