



# ACNE IN HOMOEOPATHY: MIASMATIC, THERAPEUTIC AND REPERTORIAL APPROACH

Dr.Khyati Thakkar <sup>1</sup>

<sup>1</sup>Assistant professor, Department of Materia medica Rajkot Homoeopathic Medical College, Parul University, Rajkot, Gujarat, India.

Correspondence Address:- Dr.Khyati Thakkar<sup>1</sup> Assistant professor, Department of Materia Medica Rajkot Homoeopathic Medical College B/H Jaynath Complex ,Makkam Chowk, Rajkot 360002.

Email:- [khyati.thakkarrhmc@paruluniversity.ac.in](mailto:khyati.thakkarrhmc@paruluniversity.ac.in)

## Abstract

Skin is the outer covering of human body which protects the internal organs. There are various diseases which can appear on the skin leading to psychological stress the patient suffering. Acne is a condition in which hair follicles get plugged with oil and dead skin cells causing and pain and redness which further leads to psychological trauma, as it makes the person isolate from the society. By prescribing appropriate homoeopathic treatment and management, the acne can get a cure, as homoeopathic medicines works as holistically and therapeutically depending upon the cases.

**KEYWORDS :** Skin, Acne, Homoeopathy.

## INTRODUCTION

Acne is one of the commonest skin disorders. It has been estimated that 70 per cent of the populations have some clinically evident acne at some stage during adolescence.

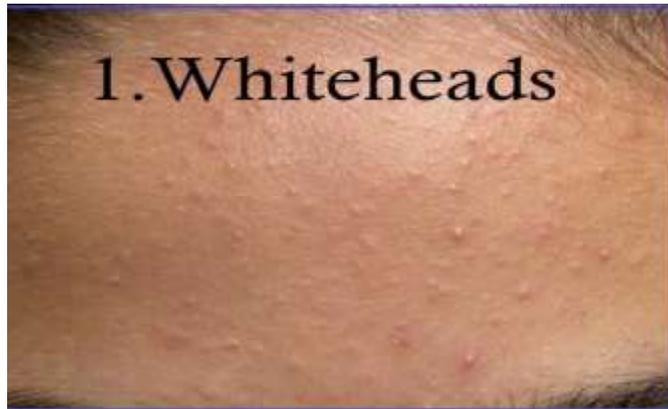
## DEFINITION

Acne (**acne vulgaris**) is a disorders in which hair follicles develop obstructing horny plugs (**comedones**), as a result of which inflammation later develops around the obstructed follicles, causing tissue destruction and scar formations.

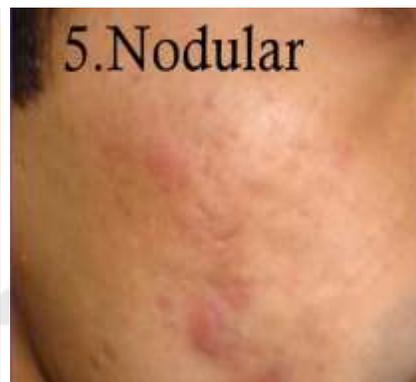
## CLINICAL FEATURES

The earliest feature of the disorders is increased rate of sebum secretion, making the skin look greasy seborrhoea).

- Blackheads or comedones usually accompany the greasiness.
- They often over the side of the nose and the forehead, but can occur anywhere.



- ❑ Comedones are follicular plugs composed of follicular debris and compacted sebum.
- ❑ They have pigmented tips from the melanin pigment deposited by the follicular epithelium at the level.
- ❑ Accompanying the visible comedones are numerous invisible comedones, many of which do not have pigmented tips.
- ❑ Inflamed, reddened papules develop from blocked follicles. These are often quite tender to the touch and may be set quite deep within the skin.
- ❑ Sometimes they develop pus at their tips(pustules), but these may also arise independently.
- ❑ In a few patients, some of the papules become quite large and persist for long periods – they are then referred to as nodules.



- ❑ In severely affected patients, the nodules liquefy centrally so that cysts are formed.
- ❑ In reality, the lesions are pseudocysts, as they have no epithelial lining.
- ❑ This type of severe acne is known as cystic or nodulocystic acne can be very disabling and disfiguring.

- ❑ When the large nodules and cysts eventually subside, they leave in their wake firm, fibrotic, nodular scars, which some times become hypertrophic or even keloidal.
- ❑ The scars are often quite irregular and tend to form ‘bridges’.
- ❑ Even the smaller inflamed papules can cause scars and these tend to be pock-like or are triangular indentations.
- ❑ There is a very rare and severe type of cystic acne known as acne **fulminans** in which the acne lesions quite suddenly become very inflamed.
- ❑ At the same time the affected individual is unwell and develops fever and arthralgia.
- ❑ Laboratory investigation reveals a polymorphonuclear leucocytosis and odd osteolytic lesions in the bony skeleton.
- ❑ The cause of this disorders is not is not clear, although it has been suggested that it is due to the presence of a vasculitis that is somehow precipitated as a result of the underlying acne.

## CLINICAL COURSE

- ❑ For most of those affected, the disorder is annoying and may be troublesome, but is not of enormous significance because it is limited in extent and only last few, the condition is a disaster, as it is disabling and persistent, with wave after wave of new lesions.
- ❑ Although the natural tendency for resolution, it is difficult to know in any individual patient when the condition will improve.
- ❑ The majority have lost their acne by the age of 25 years, but some tend to have the occasional lesion for very much longer.
- ❑ In some women there is pronounced premenstrual flare of their acne some 7-10 days before the menses begin.
- ❑ Acne improves in the summer time and sun exposure seems to improve the condition of many patients.
- ❑ However, the heat does not produce improvement and, indeed, can make it much worse.
- ❑ Soldiers with acne in hot, humid climates often become disabled by it suddenly worsening, with large areas of skin covered by inflamed and exuding acne lesions, and have to be evacuated home or to a cooler climate.

## EPIDEMIOLOGY

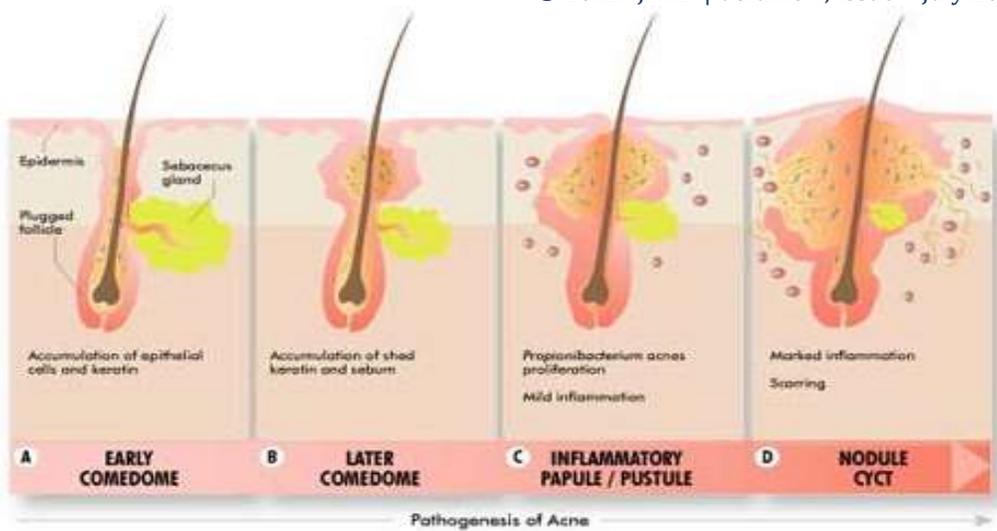
- ❑ Some 70 per cent of populations develop some evident acne at some point during adolescence and early adult life, but perhaps only 10-20 per cent request medical attention for the problem.
- ❑ This proportion varies in different parts of the world, depending on the racial mixture, the affluence and the sophistication of medical services.
- ❑ Onset is usually at puberty or a little later, although many patients do not appear troubled until the age of 16 or 17 years.
- ❑ Males appear to be affected earlier and more severely than women.
- ❑ Acne lesions sometimes appear on the cheeks and chin of infants a few weeks or months of age and even a little later than that.
- ❑ This infantile acne is usually trivial and short lived.



## PATHOGENESIS OF ACNE

There is increased production of sebum because of sebaceous gland hyperplasia. Androgens stimulate the sebaceous gland to enlarge and produce more sebum.

- ❑ Normally, the keratinocytes are shed off as single cells into the lumen and then excreted out, but, in acne, keratinocytes are retained and they accumulate due to their increased cohesiveness.
- ❑ Some gram positive, non motile rods are found in follicles and they stimulate the production of pro-inflammatory mediators and lipase and which leads to an increased number of propionibacterium acnes.
- ❑ Inflammatory cells and mediators cell efflux in the disrupted follicle which leads to formation of papules, pustules, nodules & cysts.



## TYPES OF ACNE

### ACNE VULGARIS

The cause depends on the relation between severity of acne and sebum excretion rate. Elevated sebum excretion can be because of hormones responsible for acne vulgaris are androgens and progesterone which increase the acne and whereas estrogens reduce the acne.



### SYMPTOMS

- Locations - Face, shoulders, upper chest and back, but may extending to the buttocks.
- Open comedones – They are caused due to plugging by keratin and sebum.
- Closed comedones – They are caused due to accelerations of sebum and keratin deeper in the pilo-sebaceous ducts.
- **Mild form** is dominated by the presence of comedones which can be caused by substances such as tars, chlorinated hydrocarbons etc.

- **Moderate** or **severe** acne can also be because of some systemic disorder. patients of PCOD & Menstrual irregularities need investigations

### **3.ACNE CONGLOBATA**

- ❑ Suppurating acne. Chronic relatively uncommon. Young males affected. More frequent on back, chest and shoulders; occasionally on buttocks and thighs ;double or triple comedones, inflammatory papules, nodules and cyst; burst on the surface or burrow within the skin, forming interconnecting sinus tracts. Heal with disfiguring scars. Acne conglobata ,past of follicular of follicular retention tried;hidradenitis suppurative and dissecting folliculitis of the scalp.

### **SPECIAL TYPES OF ACNE**

#### **ACNE FROM DRUGS AND CHEMICAL AGENTS**

- ❑ Androgens provide the normal 'drive' to the sebaceous glands.It is increased secretion of these hormones that is responsible for the increased sebum secretion at puberty. When given therapeutically for any reason, they can also cause an eruption of acne spots.
- ❑ Glucocorticoids, such as prednisolon, when given to suppress the signs of rheumatoid arthritis or some other chronic inflammation, can also induce troublesome acne. Why this should be so has never been adequately explained.
- ❑ Glucocorticoids do not seem to increase the rate of sebum secretion, and the acne lesion appear (unlike ordinary acne)all the same stage of development.
- ❑ Interestingly, corticosteroid creams can, uncommonly, also cause acne spots at site of the application.



#### **OIL ACNE**

- ❑ Workers who come into contact with lubricating oils develop an acne like eruption at the site of contact, consisting of small papules, pustules and comedones.this is often observed on the fronts of the thighs and forearms, where oil-soaked overalls come in contact with the skin.

- ❑ A similar ‘acne form folliculitis’ some time arises at sites of application of tar-containing ointments during the treatment of skin disease.



- ❑ Some cosmetic seem to aggravate or even cause acne.
- ❑ This is because they sometimes contain comedo- inducing (comedogenic) agents, such as cocoa butter and derivatives and some mineral oils, that can induce acne. This cosmetic acne is less of a problem now that cosmetic manufacturers are aware of it.

**CHLORACNE ACNE**

- ❑ Chloracne is an extremely severe form of industrial acne due to exposure to complex chlorinated naphthalene compounds and dioxin. Epidemics have occurred after industrial accidents such as occurred in Seveso in Italy, in which the population around the factory was affected. The compounds responsible are extremely potent, and lesions continue to develop for months after exposure. Typically, numerous large, cystic-type lesions occur in this form of industrial acne.

**EXCORIATED ACNE**

- ❑ This disorder is most often seen in young women. Small acne spots around the chin, forehead and on the jaw line are picked, squeezed and otherwise altered by manual interference. The resulting papules are crusted and often more inflamed than routine acne spots. Often, the patients have little true acne and the main cosmetic problem is the results of the labor of their fingers.<sup>[8]</sup>

**MIASMATIC APPROACH <sup>[6]</sup>**

PSORIC	SYCOTIC	SYPHILITIC	TUBERCULAR
1. Dry, itching pimples.	1. Small, reddish, flat, vesicular eruptions, which do not heal fast and recur during the menstrual period.	1. Hard acne appears on the face.	1. Pimples are small, painful and recurrent.

2.Dirty, dry and harsh appearance of skin	2. The skin is oily and tip of the nose appears red.	2.The skin of the face is oily.	2.The eyes are sunken and face appears pale although the chine is slightly flushed.
3.Itching occurs without pus discharge.	3.Pigment metabolism is disturbed and hyperpigmentation or depigmentation occur in patches or are diffused in different parts.	3.Ulceration with pus and blood occurs.	3.Pimples with bleeding.

## THERAPUTICS<sup>[1][2][4][5]</sup>

### 1. ACIDUM MURIATICUM

- Eruption of scabious pimples on face, forehead, and temples; whole face red; every summer.

### 2. ACIDUM PHOSPHORICUM

- Acne, blood-boil.

### 3.ACIDUM PICRICUM

- Acne along edges and sides of nose, indurate, elevated papules, rather dark red, painless but sore to touch, very small pustules on tips.
- Pimples on face and neck that he had for Years were now increased in number and size.

### 4. AGARICUS MUSCAIUS

- Pimple, hard like flea-bites.
- Burning, itching, redness, and swelling, as from frostbites.
- Miliary eruption, with intolerable itching and burning.
- Angioneurotic oedema; rosacea.
- Swollen veins with cold skin.
- Circumscribed erythematous, papular and pustular and oedematous lesions.

### 5. AMBRA GRISEA

- Face, pimples on.
- Tickling and itching titillation in the face, with eruption of pimples; the same in the forehead, and in the region of the whiskers

## 6.AMMONIUM MURIATICUM

- Itching and titillation, giving an impulse to scratch, followed by eruption of pimples.

## 7.ARNICA MONTANA

- Black and blue.
- Itching, burning, eruption of small pimples.
- Crops of small boils. [Ichthyol; Silica].
- Ecchymosis.
- Bed sores. [Bovine locally.]
- Acne indurata, characterized by symmetry in distribution.

## 8.ARSenicum BROMATUM

- Acne rosacea with violent papules on nose; worse in spring.
- Acne rosacea in young people.

## 9.ASTERIUS RUBENS

- Red.
- Pimples on side of nose, chin and mouth.
- Disposition to pimples at adolescence.

## 10.BELLADONNA

- Acne rosacea.
- Dry and hot; swollen, sensitive; burns scarlet, smooth.
- Eruption like scarlatina, suddenly spreading.
- Erythema; pustules on face.
- Glands swollen, tender, red.
- Boils.
- Suppurative wounds.
- Alternate redness and paleness of the skin.
- Indurations after inflammations.

### 11. BOREX VENETA

- Whitish pimples, with red Eruption of pimples areola.
- On the face, the nose, and the lips

### 12. BROMIUM

- Acne, pimples and pustules.
- Boils on arms and face.
- Glands stony, hard, especially on lower jaw and throat.

### 13. CALCAREA PHOSPHORICA

- At puberty : acne in anemic girls with vertex headache and flatulent dyspepsia, >>by eating.
- Coppery face full of pimple.
- Acne in the face; red pimples, filled with a yellowish pus , with shooting pains on being touched.

### 14. CALCAREA SILICATA

- Pimples, comedones, wens.
- Pimples and pustules on the face.

### 15. CALCAREA SULPHURICA

- Pimples and pustules on the face.
- Many little matterless pimples under the hair, bleeding when scratched.
- Cuts, wounds, bruises, etc., unhealthy, discharging pus; they do not heal readily.
- Yellow, purulent crusts or discharge.
- Purulent exudations in or upon the skin.
- Skin affections with yellowish scabs.

### 16. CARBO ANIMALIS

- Pimples on forehead and face.
- Acne rosacea.
- Verruca on hands and face of old people, with bluish color of extremities.
- Glands indurated, swollen, painful, in neck, axillae, groin, mammae; pains lancinating,

cutting, burning. [Con.; Merc. iod. flav.]

Burning, rawness and fissures; moisture.

#### 17.CHELEDONIUM MAJUS

Painful red pimples and pustules.

Dry heat of skin; itches, yellow.

Old, spreading, offensive ulcers.

Wilted skin.

Sallow, cold, clammy.

#### 18.CLEMATIS ERECTA

Purulent pimples, painful on being touched at the root, and on the point of the nose.

Purulent pimples on the chin.

#### 19.COBALTUM

Skin dry, pimples about nates ,chin, hairy scalp.

#### 20.COMOCLADIA DENTATA

Pimples red and itches.

Redness all over, like scarletina.

#### 21. CROTALUS HORRIDUS

Acne; of all varieties; of masturbation; of drunkards.

#### 22. CROTON TIGLIUM

Eruptions of pimples.

Inflammation of the face and of the nose; swelling of the face.

#### 23.CYCLAMEN

Acin young women, itching better scratching and appearance of menses.

#### 24.EUPHRASIA OFFICINALIS

Eruption of small miliary pimples round the eyes.

#### 25.GRANATUM

Itching pimples.

Sensation as if pimples would break out.

## 26.GUAIACUM OFFICINALE

- Pimples around eyes

## 27.HEPAR SULPHUR

- Acne in youth.
- Putrid ulcers, surrounded by little pimple

## 28. ICHTHYOLUM

- Acne rosacea
- Heat and irritation; itching scaly and crabs of boil.

## 29.IODUM

- Acneous eruption on right side of face.
- Pimples on face, with burning and itching, twitching of right upper eyelid, and twitching in other parts.

## 30. KALI HYDRIODICUM

- Acne rosacea.
- Purple spots, small boils, glands enlarged, indurated.
- Rough nodules all over, worse any covering; heat of body intense.

## 31.KALI MURATICU

- Acne, erythema with vesicle containing thick, white contents.

## 32.KRESOTUM

- Acne
- pustular pimples on chin and cheek, which are covered with yellowish scabs.

## 33. Ledum pal

- Red pimples on forehead and cheeks; stinging when touched.
- Acne on forehead, sticking pain therein.

## 34 NATRUM MURIATICUM

- Itching and eruption of pimples on face and forehead.

### 35.MAGNESIA SULPHURICUM

- Small pimples over the whole body,that itch violently.

### 36. OLENDER

- Scurfy pimples.
- Itching.

### 37.PSORINUM

- Acne rosacea.
- Pimple oozing and acrid fluid that burns and excoriates the glands.
- Acne all forms, simplex, rosacea;<during menses, from coffee,fats,sugar,meat; when the best selected remedy fails or only palliates.

### 38. RADIUM

- Small pimples; erythema and dermatitis,with itching,burning,swelling and redness.

### 39. SANGUINARIA CANADENSIS

- Acne with scanty menses.

### 40.SEPIA

- Pimples on forehead near hair.

### 41.SULPHUR

- Acne
- 3 Pimply eruption, pustules,rhagades,hang-nails.

### 42.SULPHR IODATUM

- Acne, papular eruption on face.
- Itching.

### 43.TEREBINTHINA

- Acne
- Erythema; itching pustular, vesicular eruption.

## REPERTORIAL APPROCH

### KENT REPERTORY<sup>[7]</sup>

- FACE, ERUPTION ,

- acne : *Ant-c.*, *ars-i.*, *ars.*, **Aur.**, *bar-c.*, *bell.*, *calc-s.*, **Calc-sil.**, *calc.*, **Carb-an.**, **Carb-s.**, **Carb-v.**, **Caust.**, *chel.*, *con.*, *cop.*, *crot-h.*, *eug.*, **Hep.**, *iod.*, **Kali-br.**, *kreos.*, *lach.*, *led.*, *med.*, *nat-m.*, *nit-ac.*, **Nux-v.**, *ph-ac.*, *psor.*, *puls.*, *sabin.*, *sanic.*, *sel.*, **Sep.**, **Sil.**, *sul-i.*, *sulph.*, *thuj.*, *tub.*, *uran.*
- becoming heated agg. : *Caust.*
- fire, near a : *Ant-c.*
- forehead : *Ant-c.*, *ars.*, *aur.*, *bar-c.*, *bell.*, *calc.*, *caps.*, **Carb-an.**, **Carb-s.**, **Carb-v.**, **Caust.**, *cic.*, *clem.*, **Hep.**, *kreos.*, *led.*, *nat-m.*, *nit-ac.*, **Nux-v.**, *ph-ac.*, **Psor.**, **Rhus-t.**, **Sep.**, **Sil.**, **Sulph.**, *viol-t.*
- lips : *Cadm.*, *caps.*, *hydr.*
- forehead : *Ant-c.*, *ars.*, *aur.*, *bar-c.*, *bell.*, *calc.*, *caps.*, **Carb-an.**, **Carb-s.**, **Carb-v.**, **Caust.**, *cic.*, *clem.*, **Hep.**, *kreos.*, *led.*, *nat-m.*, *nit-ac.*, **Nux-v.**, *ph-ac.*, **Psor.**, **Rhus-t.**, **Sep.**, **Sil.**, **Sulph.**, *viol-t.*
- lips : *Cadm.*, *caps.*, *hydr.*
- nose : *Calc-p.*, *cann-s.*, *caps.*, **Caust.**, *graph.*, *sel.*, *sulph*

#### Skin, eruptions

- pimples : *Agar.*, *alum.*, *am-m.*, *ambr.*, *anan.*, *ant-c.*, *apis.*, *ars-i.*, *ars.*, *arum-t.*, *aster.*, *aur.*, *bar-c.*, *bar-m.*, *bell.*, *berb.*, *bor.*, *bov.*, *calc-p.*, *calc-s.*, **Calc.**, **Carb-an.**, *carb-s.*, *carb-v.*, **Caust.**, *chel.*, *cic.*, *clem.*, *coloc.*, *con.*, *crot-h.*, *dros.*, **Eug.**, *gels.*, *glon.*, **Graph.**, *hep.*, *hura.*, *hydr.*, *hydr.*, *indg.*, *iod.*, *jug-r.*, *kali-ar.*, **Kali-c.**, *kali-chl.*, *kali-n.*, *kali-s.*, **Kreos.**, *lach.*, *led.*, **Lyc.**, *lyss.*, *mag-m.*, *meny.*, *meph.*, **Merc.**, *mosch.*, *mur-ac.*, *nat-a.*, *nat-c.*, **Nat-m.**, *nat-p.*, *nat-s.*, **Nit-ac.**, **Nux-v.**, *ol-an.*, *pall.*, *par.*, *petr.*, *ph-ac.*, *phos.*, *psor.*, *puls.*, *rhus-t.*, *sabin.*, *sanic.*, *sars.*, *sep.*, *sil.*, *sol-t-ae.*, *staph.*, **Sulph.**, *syph.*, *tarax.*, *tarent.*, *thuj.*, *til.*, *vinc.*, *zinc.*
- night agg. : *Mag-m.*
- bluish : *Lyss.*
- burning : *Aphis.*, *cic.*
- when touched : *Nat-s.*
- cold air agg. : *Ars.*
- confluent : *Cic.*, *psor.*, *tarent.*
- copper colored : *Kali-i.*
- elevated margins : *Verat.*
- greenish : *Cupr.*
- inflamed : *Bry.*, *chel.*, *stann.*, *sulph.*
- insects, as from : *Ant-c.*
- itching : *Ant-c.*, *asc-t.*, *caust.*, *con.*, **Graph.**, *hep.*, *mur-ac.*, *ol-an.*, *pall.*, *psor.*, *sep.*, *til.*, *zinc.*
- when warm : *Ant-c.*, *cocc.*, *til.*

- moist after scratching : **Graph.**
- menses, before, agg. : *Mag-m.*
- during : Dulc., eug., graph.
- purplish halo with : **Merc.**
- warm room agg. : *Mag-m.*
- washing agg. : *Nux-v., sulph.*
- merc., mur-ac., nat-c., nat-m., nat-s., *nit-ac.*, ph-ac., *psor.*, puls., *sep.*, *sil.*, staph., stront., *sulph.*, **Tell.**, til., zinc.
- when warm : Caust., sars., *tell.*, til.
- moist : *Calc.*, graph., kali-c., nat-s., ol-an., puls., sil., sulph., thuj., zinc.
- painful : Ant-c., apis., arg-m., arn., *cist.*, cocc., con., dulc., graph., kali-c., kali-chl., kali-i., lach., mur-ac., nat-c., nit-ac., nux-v., phos., plb., puls., seneg., spong., squil., staph., sulph., verat.

### Boenninghausen's repertory <sup>[3]</sup>

- Skin, Eruptions
- Pimples, papules, etc. :- Acet-ac., Acon., Agar., *Alum.*, *Am-c.*, *Am-m.*, Ambr., Anac., ANT-C., Ant-t., *Arg-m.*, Arg-n., Arn., Ars., Aur., Bar-c., Bell., Benz-ac., Bor., Bov., Brom., Bry., Bufo, *Calc.*, Canth., *Caps.*, Carb-ac., Carb-an., *Carb-v.*, CAUST., Cham., Chel., Chin., Chlf., Chlor., *Cina*, *Clem.*, Cocc., Con., Cop., Cub., *Cupr.*, Cycl., Dig., *Dros.*, Dulc., Euphr., *Graph.*, Guai., *Hell.*, *Hep.*, Hydr-ac., Hyos., Iod., Iodof., Kali-bi., *Kali-c.*, Kali-chl., Kali-n., Led., Lyc., *Mag-c.*, *Mag-m.*, Mang., Merc., *Mez.*, Mgs., Mosch., *Mur-ac.*, *Nat-c.*, Nat-m., NIT-AC., *Nux-v.*, Op., Par., *Petr.*, Ph-ac., Phos., Piloc., Pip-n., Pix, *Plb.*, Psor., Puls., Rhus-t., Sabad., *Sars.*, *Sel.*, Seneg., SEP., *Sil.*, *Spig.*, Spong., Squil., Stann., Staph., Stram., *Stront.*, *Sul-ac.*, Sulfon., Sulph., Tarax., Thuj., *Valer.*, *Verat.*, Viol-t., ZINC.
- Fleshy young people [in], with coarse habits; bluish red, pustules on face, chest, shoulders --**  
Kali br.  
**Scrofulous [in] --** Bar. c., Brom., *Calc. c.*, Calc. p., Con., *Iod.*, Merc. s., *Mez.*, *Sil.*, *Sul.*  
**Tubercular children [In] --** Tub.  
**Cachexia [with] --** Ars., Carbo v., Nat. m., Sil.  
**Gastric derangements [with] --** Ant. c., *Carbo v.*, Cim., Lyc., *Nux v.*, Puls., Robin.  
**Glandular swellings [with] --** Brom., Calc. s., Merc. s.  
**Indurated papules [with] --** Agar., Arn., Ars. iod., Berb. v., Bov., Brom., *Carbo an.*, Cob., Con., *Eug. j.*, Iod., *Kali br.*, *Kali iod.*, Nat. br., Nit. ac., Robin., *Sul.*, Thuya.  
**Menstrual irregularities [with] --** Aur. m. n., Bell., Bellis, *Berb. aq.*, Berb. v., Calc. c., Cim., Con., *Eug. j.*, *Graph.*, *Kali br.*, Kali c., Kreos., Nat. m., Psor., *Puls.*, *Sang.*, Sars., Thuya, Ver. a.

**Pregnancy [with]** -- Bell., Sab., Sars., Sep.

**Rheumatism [with]** -- Led., Rhus t.

**Sexual excesses [with]** -- *Aur.*, Calc. c., Kali br., *Phos. ac.*, Rhus t., Sep., Thuya.

**Scars unsightly [with]** -- Carbo an., Kali br.

**Symmetrical distribution [with]** -- Arn.

#### ❑ **RERERENCES**

- 1.Allen H.C.,Keynotes and Characteristics with Comparisons.v., New Millenium
- 2.Boericke w. Pocket Manual of Homoeopathic Materia Medica.
- 3.Boger Boenninghausen's characteristics & repertory by C.M.Boger
- 4.Clarke J.H., Dictionary of Practical Materiya Medica.
- 5.Encyclopaedia of Homoeopathic Pharmacopoeia, B.jain publishers,New Delhi.
- 6..Miasmatic prescribing by Dr.Subrata Kumar Banerjea
- 7.Repertory of the homoeopathic Materia Medica by J.T.Kent
- 8.ROXBURG'S Common skin disease by R.MARKS.

