

Melasma: A Homoeopathic Approach

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ABSTRACT

Melasma is an acquired pigmentary disorder. Its Pathogenesis is complex and involves the interplay of various factors, such as genetic predisposition, UV radiations, hormonal factors & drugs. It is characterized by symmetrical hyperpigmented macules on face. Tropical bleaching agents, chemical peels have been shown to provide only minimal improvement in condition. It can generally affect a patient's quality of life by causing embarrassment, fear of negative appraisal, frustration by discoloration. There are numerous effective homoeopathic treatments for melasma, but the choice is specific to the patient and takes into account both the patient's physical and mental symptoms. Homoeopathy has an individualistic and holistic approach prescription according to a different type of clinical presentation of cases.

Keywords: Hyperpigmentation, Melasma, Pigmentary disorders, Chloasma, Homoeopathy.

INTRODUCTION

Melasma (also known as chloasma or the "mask of pregnancy") is a typical acquired symmetric dark hyperpigmentation of the face and neck in both men and women who are genetically prone to it. The psychosocial effects could be disastrous. The pigmentation, which can be light or dark and shows no indications of irritation, develops gradually. In the epidermis, melanocytes are more numerous and more

active, while in the dermis, melanophages are more prevalent.¹

ETIOLOGY SUN EXPOSURE

It is well known that UV radiation induces melanocyte proliferation. Although the number of melanocytes is similar in lesional and perilesional skin, melasma can be caused by biologically more active melanocytes in the affected skin. In melasma lesions, there is increased stem cell factors from fibroblast and tyrosine kinase receptor c-kit, as well as the expression of vascular endothelial growth factor (VEGF). VEGF could have a direct influence on melanogenesis through its receptor on melanocytes as well as on vascular endothelial cells supported by the observation of increased number and size of blood vessels in melasma lesions, and by the finding that human melanocytes in vitro express VEGF receptors, which on exposure to UV radiation may release cytokines and soluble factors such as plasminogen, which might be a possible cause of hyperpigmentation in melasma.^{2,3}

GENETIC

Melasma development may be significantly influenced by genetic predisposition. A favourable family history of the illness is reported by about 50% of people. The

development of melasma in identical twins has been documented.⁴

BIOLOGICAL EFFECTS

Some people's melasma development may be influenced by hormones.

Obstetric patients have been observed to present with the mask of pregnancy. Unknown is the exact mechanism. The third trimester of pregnancy often sees an increase in the levels of the hormone's oestrogen, progesterone, and melanocyte-stimulating hormone. Women who are postmenopausal and administered progesterone are more likely to develop melasma than women who are just given oestrogen; this suggests that progesterone is primarily responsible for the formation of melasma.^{4,5}

THYROID DISEASE

Patients with melasma have a fourfold increased risk of thyroid illness. Melanocytic and lentiginous nevi have been shown to be associated with the development of melasma. This would suggest a connection between pigmentation and the melasma growth process.⁴

EPIDEMIOLOGY

Prevalence:-

The most vulnerable populations are those who are black, Asian, or Hispanic. Fitzpatrick skin phototypes III and IV are affected, and it frequently lasts for many years.⁶

Age: Peak occurrence 30-50 years.

Gender: Females > Male.

It frequently happens during pregnancy and when oestrogen is used, such as with oral contraceptives or with some types of hormone replacement therapy (ART) after menopause.^{7,8}

CLASSIFICATION

Melasma shows three patterns based on distribution of lesions

- 1) Centrifacial (63%)
- 2) malar (21%)

- 3) mandibular (16%)

The majority of patients have centrifacial and malar patterns.

Usually, the lines separating the coloured patches are extremely distinct.

Histologically Melasma can be classified into four types

- Epidermal
- Dermal
- Mixed
- Dark Skin types.^{9,10,11}

Distribution:

The nose and malar areas commonly exhibit symmetrical affection.

In more severe cases, the sides of the face, forehead, and chin are affected.¹²

Morphology:

Larger brown patches are produced when well organized, 2 to 5 mm, light to dark brown macules combine in the middle. At the periphery macules still have a fairly distinct outline but become asymmetrical.¹³

Histopathology

All epidermal layers have an elevated level of melanin.

The DOPA stain reveals an increase in melanocyte quantity and activity.

CLINICAL FEATURES: -

- 1) Clearly distinct patches or macules of hyperpigmentation.
- 2) Serrated or uneven margins are both possible. In most cases, shape is geographical.
- 3) The cheeks, nose, forehead, and supraorbital regions of the face are typical sites
- 4) Chin, upper lip, and forearm dorsa may also be impacted.^{7,14}

HOMOEOPATHIC APPROACH: -

Today, homoeopathy is a fast-expanding system that is used all over the world. Its power comes in its obvious efficacy in treating the ill person holistically by encouraging internal harmony at the mental, emotional, spiritual, and physical levels.

RUBRICS RELATED TO MELASMA:

Rubric (A Synoptic Key of Materia Medica by C.M. Boger)

Chloasmae

SKIN-pigmented.¹⁶

Rubric (Phatak)

Skin-spots-pigmented.¹⁷

Rubric (Murphy)

Chloasma, skin

Menopausal period, in

Sun, agg.¹⁸

Rubric (Boericke)

Chloasma-liverspots, moth patches.¹⁹

Rubric (BBCR)

Cholasmae

Spots, maculae, black

Sun (heat of),in the agg.²⁰

HOMOEOPATHIC MANAGEMENT: -

The drugs listed below indicate the therapeutic compatibility, although this is not an exhaustive and conclusive treatment plan.

SEPIA OFFICINALIS

One of the best medicines for melasma is Sepia. There are yellow-brown spots on the face, particularly on the cheeks, forehead, and nose. over the top of the cheeks and nose. Under the eyes, there are dark circles. facial discolouration following childbirth, menopause, and pregnancy. There is Leucorrhoea with moth spots on the forehead. For people with rigid Fiber and dark hair it is suited.^{15,19}

CADMIUM SULPH

For melasma with yellow streaks on the nose and cheeks, Cadmium Sulphate is beneficial. The hue ranges from brown to yellowish. Sun and wind exposure make the colour worse. The face itches.¹⁹

LYCOPodium CLAVATUM

Lycopodium is effective medicine for melasma that has greyish-yellow discolouration of the cheeks and blue circles under the eyes. Premature old looking face. Flatulent issues are a constant complaint for

Lycopodium patients. The individual likes warm foods and beverages. There is a distinct desire for sweets.^{15,19}

COPAIVA OFFICINALIS

When brown patches appear on the face due to melasma, copaiva is given. presence of lenticular areas that are clearly defined and itchy. Mottled appearance.¹⁹

ARGENTUM NITRICUM

Argentum Nitricum is a medicine for melasma, the face to appear sunken, aged, pale, and bluish. Old man's sickly, muddy-coloured, sunken greyish appearance. Brown, tight, and rigid skin. Desires for sugars.^{15,19}

CAULOPHYLLUM THALICTROIDES

Caulophyllum is recommended when moth spots appear on the forehead with leucorrhoea. Skin discoloration in women with uterine and menstrual diseases. The skin was dry and hot.^{15,19}

PLUMBUM METALLICUM

Plumbum Met is recommended for melasma that causes yellow, corpse-like spots on sunken cheeks. Face skin is oily and glossy. Face emaciated and pale. Dark brown spots on the skin.^{15,19}

SULPHUR

Sulphur is best suited for filthy, unclean individuals who are prone to skin conditions. The best treatment for skin pigmentation is after local medication. The skin is unclean, rough, dry, and unhealthy. old looking spotted face. The person has burning and itching on their face, which is better by scratching and worse by the heat.^{15,19}

THUJA OCCIDENTALIS

Thuja Occidentalis is great for treating melasma, which causes pale, waxy, glossy skin and dark under-eyes. Brown patches and dryness might be seen on the skin. Dirty looking skin.^{15,19}

CONCLUSION

Skin disorders are frequently noticeable to others. The patient is quite socially anxious as a result of this. The colour and texture of a person's skin, together with their hair and nails, all have a significant impact on their visual appeal. Homoeopathy treats Melasma holistically by addressing the physical, emotional, and mental elements of each unique person. Homoeopathy provides a safe and effective remedy for Melasma by focusing on treating the underlying cause with no adverse effects on the body.

Declaration by Authors

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