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Different types of dermatophytes infections and their homoeopathic management: Review article

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Abstract

Dermatophytes are microorganisms that affect human beings globally. It significantly impacts an individual's overall health and quality of life, leading to symptoms such as itching, redness, swelling, and multiple lesions, mostly effect on Individuals with teenagers, adults, children, and immune deficiencies are more prone to widespread infections. It gets transmitted through close contact with clothes, utensils etc. Typically, these infections are at their worst during summer and the rainy season, but they will often heal on their own during the winter months. Homoeopathy is a holistic system of medicine that focuses more on dynamic concepts than materialistic concepts. We have studied some review papers, research journals, and survey reports to gather more knowledge about the effectiveness of homoeopathic medicine on dermatophyte infection. We found that there are different individualised homoeopathic medicines like Sulphur, Rhus Tox, Sepia, Tellurium, Psorinum Thuja Occidentalis, Mezereum, Borax, Graphites, Arsenicum iodatum, Apis Melifica, etc. This review article is solely dedicated to summarizing all the above literature on the different parameters like different types of dermatophyte infections like Tricho-dermatophytes, Glabrous dermatophytes, Intertriginous dermatophytes, Palmo-plantar dermatophytes, ungual dermatophytes, their cause, clinical representation, pathological diagnosis, and homoeopathic management to treat this. It is one of the most common complaints in the homoeopathic practice, Patient may represent various conditions during the visit to a homoeopath. Sometimes patients may come asymptomatic with different conditions.

Keywords: Dermatophytes, homoeopathic medicine, dermatophytic infection, homoeopathic management

Introduction

Dermatophytes are a group of fungi that only infect the superficial cutaneous keratinized tissue layers and break down the keratin for their growth, they can't invade the subcutaneous tissue layers of the skin, Those Dermatophytes are also known as tinea or ringworm ^[1, 2]. The three most common genera of dermatophyte fungi that cause ringworm are Trichophyton, Microsporum, and Epidermophyton ^[3, 4, 5, 6]. Dermatophytes are generally classified based on the affected location: Tinea capitis affects the scalp, T. Corporis affects non-hairy skin, T. cruris affects the groin, T. pedis affects the foot, T. barbae affects bearded areas of the face and neck, and T. unguium affects the nails plate and bed, T. manuum affect one or both hands. T. Favus is a type of chronic ringworm involving hair follicles and scalp ^[1, 3, 7, 8]. Clinical representation of the severity of the skin infection like redness, itching, ring-like multiple lesions and corticosteroid-modified lesions. It is chronic and recurring in type. Dermatophytes are easily get transmitted through close contact with clothes, utensils, items of furniture, towels, etc. which are contaminated with infectious agents from the infected person and also lack of awareness, low socioeconomic status, poor hygienic lifestyles, damp weather conditions can lead to the swift proliferation of various dermatophyte species ^[2, 4, 5, 6, 9, 10]. A cumulative analysis of dermatophyte cases from 1939 to 2021 shows that tinea corporis (32.4%) was the most common infection in India, followed by tinea cruris (19.7%) and tinea unguium (17.9%). Tinea capitis (13.3%), tinea pedis (4.1%), tinea manuum (1.9%) and other lesions were also observed ^[11]. I have gone through previously published research journals and articles about the effects of dermatophyte organisms in tropical and sub-tropical regions globally. Currently, fungal skin infections not only induce physical discomfort but also hamper the daily quality of life ^[9]. Homoeopathic medicines are undoubtedly the most effective treatment available for dermatophytic infections. It is an indisputable fact that homoeopathy, as a holistic medical system, offers unparalleled benefits to patients.

Aims and Objectives

The purpose of our study was to review articles published in the field of homoeopathic treatment between 2000 and 2023. We aimed to determine whether these articles were peer-reviewed and to assess the value of homoeopathic treatment by compiling curative indications from various textbooks of homoeopathic Materia medica. Our analysis included case reports, case series, past survey reports, and we focused on the most relevant and informative sources. By conducting this review, we aimed to gain a better understanding of the impact of homoeopathy on the field of medicine.

Methodology

Data synthesis

We have gone through electronic databases, published research papers or literatures, homoeopathic books, review papers, survey reports, case reports to collect reliable information for our review literature preparation.

Books

Textbook of Microbiology by Dr C P Baveja, Illustrated Textbook of Dermatology by JS Pasricha & R Gupta, Diseases of the Skin by Dr Farokh J. Master, Textbook of Pathology by Harsh Mohan, Boericke's Materia Medica with Repertory by William Boericke's, Allen's Keynotes by H.C. Allen, Gems of Homoeopathic Materia Medica by dr. J D Patil etc.

Internet Search Engines

After conducting thorough research on platforms such as Google Scholar, PubMed, and Research Gate, we investigated into various research journals, including the International Journal of Homoeopathic Science, International Journal of Health Sciences, International Journal of Ayush Case Reports, Sustainability -Agri-food and Environmental Research, International Journal of Health Sciences and Research, International Journal of Advanced Ayurveda, Yoga, Unani, Siddha and Homeopathy, and EAHRC etc.

Criteria

We included different case studies, case reports, and different observational or experimental studies which were published in different journals as mentioned above.

Discussion about dermatophytes

Different types of dermatophytes and their classification



Trichophyton Dermatophytes: T. Capitis, T. Barbae
Tinea Capitis

Microsporon and trichophyton are the causative fungi, and they affect boys more frequently than girls, as boys have short hair and play with each other's caps more often. More commonly affected regions are occipital and temporal [5, 12]. The salient clinical manifestation: -The fungus grows in the stratum corneum of the epidermis, entering the hair follicle through their mouths, penetrating the cuticle and cortex of the hair, it's growing inside the hair as well. consequently, the hair weakens and breaks, producing alopecia which is always Partial and broken stumps can be seen from the microscopy examination is so irregularly broken and of hair structure mosaic pattern of the mycelia of fungus, both inside the hair structure [5, 6, 13].

Tinea capitis is a fungal infection that affects the scalp and has three different types. The non- inflammatory types are spread through infected humans and cause circular patches or partial alopecia with thin greyish scales and black dot types [5, 6, 14, 15, 16]. On the other hand, inflammatory types are caused by the spread from animals to humans and are characterized by small boil-like lesions with little oozing, redness, and sometimes painlessness [5, 6, 15]. The most severe form of tinea capitis is called Favus, which is caused by the dermatophyte fungus Trichophyton schoenleinii. It results in the honeycomb destruction of the hair shaft [5, 6, 15].



Fig 1: T. Capitis infection on the scalp

Tinea barbae

Fungal infections can occur in areas of the face where there is facial hair such as the beard, moustaches, and eyebrows. They are often spread through direct contact with an infected person or with infected animals such as cattle. The clinical manifestation of this infection may not be immediately noticeable, but it is usually characterized by the appearance of scaly patches or vesiculopustular, accompanied by inflammation and intense itching in the affected areas [5, 6, 15].



Fig 2: T. Barbae infection on beard areas

Glabrous dermatophytes: Tinea corporis tinea corporis
Fungal infections are a common occurrence in daily life. The most common cause is the Trichophyton fungus, followed by Epidermophyton and Microsporum [5, 6, 117]. The silent clinical manifestation: - Itching is a common symptom, and the skin lesions are usually circular and well-

defined. They appear on exposed, non-hairy skin areas neck, arm, face, and legs [5, 6, 16, 18]. The size and appearance of the lesions vary depending on the individual's sensitivity and the virulence of the fungus. Inflammation of the skin in the form of vesicles and pustules is often seen at the lesion's periphery, contributing to the centrifugal spread [5, 6, 15]. Skin redness, papulovesicular lesions, scaling, and hyperpigmentation may sometimes occur [5, 6, 19].



Fig 3: T. Corporis infection on non-hairy skin areas

Intertriginous dermatophytes

Tinea cruris

Fungal infections caused by Epidermophyton and Trichophyton are quite common [5, 6, 20]. They often appear on the inner thighs and can spread to the scrotum, penis, vulva, perineum, buttocks, and trunk [5, 6, 14]. These infections can also be found on fingers, toes, and armpits due to humidity and heat in skin folds that promote infection [5, 6, 20]. Sexual intercourse and contact with infected toilet seats are common modes of transmission.

Symptoms of this infection include intense itching, small lesions, well-defined patches, redness, inflammation, and scaling [5, 6, 20]. Chronic lesions may show signs of hyperpigmentation and nodulation with a well-defined papulo-vesicular border [5, 6, 15].



Fig 4: T. Cruris infection on intertriginous areas

Palmo-Planter Dermatophytes

Tinea Pedis & Tinea Mannum

Skin areas with a thick stratum corneum, such as the soles and palms, are commonly affected by pedis and T. mannium. This condition is more prevalent in tropical and subtropical regions during summer, with men being more frequently affected than women. The clinical manifestation is often silent, with sharply demarcated lesions on the soles and palms that may have varying degrees of hyperpigmentation, blisters, slight itching, scaling, and oozing. In the chronic hyperkeratotic variety, there may be well-defined patches, powdery scaling on erythematous thickened bases of soles, sides of feet, and palms of hands, as well as the roughness of skin, and sometimes ulcers may develop [5, 6, 14, 15, 21].



Fig 5: T. Pedis, & T. Mannum infection on palmo-planter areas.

Ungual dermatophytes

Tinea unguium

Fungal infection of the nail plate typically begins with the deposition of fungus underneath the distal free edge of the nail. If the nail bed is affected, it may cause the accumulation of powdery material under the distal parts of the nail bed, leading to thickening of the nail plate, discolouration, a dull surface, abnormal angle of the nail bed, and nail deformities. Usually, there is no pain or itching, but in rare cases, pain may occur [5, 6, 15, 22].



Fig 6: T. Unguium infection on the unguial region.

Homoeopathic management

Homoeopathic treatment is based on a thorough investigation of the patient's physical and mental status to identify the totality of symptoms. By applying the principle of similia, the most effective remedy is selected to treat dermatophyte infections. Homoeopathic remedies have been proven to improve overall health, leading to a successful cure. Numerous studies have identified specific homoeopathic remedies that are highly effective in treating dermatophyte infections. There are some homoeopathic remedies mentioned below which the study has done previously.

Sulphur: It is the most frequently used great antipsoric homoeopathic remedy for treating dermatophyte infections, patients having complaints of dry, dirty, scaly unhealthy skin with itching, scratching caused burning sensation, sometimes worse in scratching and washing, pimply eruptions, pustules, hang-nails, excoriation especially folds areas, scalp dry with falling of hairs, worse washing, from the heat of bed, sometimes skin complaints that relapse, many time observed skin affections that have been treated by medicated soaps and wash, with associated constitutional others symptoms have been cured [14, 19, 23, 24, 25, 26].

Rhus toxicodendron: It is also a great remedy for treating dermatophyte infection, patients having complaints of red circular swollen, intense itching, and burning eczematous eruptions with a tendency to scale formation. sometimes recurrent bacterial infection characterized by a large red patch on the skin of the body, vascular lesion, cellulitis, herpes-like eruption worse during rainy weather, at rest, at night, in rest condition and amelioration in dry weather, rubbing, warm application applied with associated constitutional symptoms have been a cured [23, 24, 25, 26].

Sepia: This remedy is selected when patients having complaints of circular patches, itching, and swelling of skin at various parts of the body, not relieved by scratching, apt to change to burning. Soreness of skin and itching in bends of joints, with itching on between fingers, sometimes spot on the skin with regular occurrence, some herpes circinate on isolated spots on upper parts of the body, with deformity of nails, all complaints are aggravation on dampness, sweat, washing, and amelioration on warmth, pressure, from cold bath, sitting cross-legged with associated constitutional symptoms have been a cured [14, 19, 23, 24, 25, 26].

Tellurium: This remedy can be helpful for patients who experience slight inflammation, red spots on the scalp and

other areas, and prominent herpes-like eruptions behind the ears and on the eyelids. It can also help with itching of the hands and feet, ring-shaped lesions in various parts of the body that have an offensive odor, and complaints that worsen with friction, touching, cold weather, rest, and at night. When accompanied by constitutional symptoms, these complaints have been cured with the use of Tellurium [14, 19, 23, 25, 26].

Thuja occidentalis: This remedy is recommended for treating dermatophyte infections and patients with complaints of unhealthy dirty brownish colour of the skin, mottled spots on the skin, scaly, dry eruptions on the skin. Eruptions burn violently after scratching. Eruptions on covered parts only. Pustular eruptions face skin waxy and greasy, and genital folded areas lesions with worse from cold damp air, from the heat of the bed, and motion, better from drawing up limbs, left side. When accompanied by constitutional symptoms, these complaints have been cured with the use of Thuja [23, 24, 25, 26].

Graphites: It is an effective remedy for various skin diseases. Its symptoms are quite evident, including moist scabby eruptions on the scalp, face, bends of joints, between fingers, and behind the ears. It also causes cracking, bleeding, and oozing of a thick, and tenacious discharge from the corners of the mouth and eyes. Graphites are useful for treating fissured eczema and severe itching accompanying the eruptions. It can also help with dry and scaly skin, hair loss, and skin eruptions with a tendency to malignancy such as pimples, keloids, fibromas, eczema, acne, cancer of the breast, and hard and painful cicatrices. Additionally, it can help with erysipelas that start on the face and spread to other parts. Skin complaints tend to worsen during bed warmth at night, during weather changes, and before and during menstruation. However, they improve in the dark, from wrapping up, and by exposure to open air [19-26].

Psorinum: Psorinum is a highly effective remedy for chronic skin conditions that persist even after using the appropriate medication. The skin all over the body, especially on the face looks dirty, despite being washed properly. It has a dull, dark, and unpleasant appearance, as if it is covered in dirt, and cannot be cleaned thoroughly. The skin is rough, lumpy, and easily cracked, sometimes causing bleeding. It also becomes scaly and itchy, particularly when the patient is warm or in contact with woollen fabric. When the patient scratches the affected area, it becomes raw and scabby. Even when the affected area begins to heal, the itching can persist, leading the patient to scratch it again. The skin appears unhealthy with a dingy, dirty appearance, covered with capillary blood vessels and enlarged veins. This is the condition that exists before the eruptions appear. The eruptions include papules, pimples, crusts, boils, and vesicles that ooze watery moisture. Over time, the crusts and vesicles blend together, resulting in thick and hardened skin. A fresh crop of eruptions then emerges from beneath the old crusts, accompanied by rawness, itching, tingling, crawling, and bleeding. Symptoms worsen with bathing and when warm in bed [14, 23, 24, 25, 26].

Arsenicum iodatum: This medicine is used to treat various skin conditions. Some of the common skin conditions that can be treated with this medication include dry and scaly skin that is also itchy, as well as marked exfoliation of skin in large scales, which can leave a raw exuding surface beneath. Other conditions that this medication can treat

include ichthyosis, venereal bubo, debilitating night sweats, eczema of the beard that is watery oozing, and itchy - and gets worse with washing, and acne that is hard, shotty, indurated base with pustule at the apex [19, 23, 24, 25, 26].

Bacillinum: -Bacillinum is an indicated remedy for fungal infections such as ringworms of the scalp, groin, and other areas of the body. It produces ringworm and pityriasis vesicularis all over the skin. Symptoms may worsen at night, while lying down in bed, in the early morning, or in cold air. Symptoms may improve with warmth [23-26].

Antimoinum crudum: Skin complaints: The skin of the patient becomes very thick and dirties at various places. There is a tendency for abnormal growth of skin. Nails of the fingers crack, grow in and can split, Warts and horny spots. Eczema with gastric derangements. Pimples, vesicles and pustules. Urticaria, measles-like eruptions. Itching when warm in bed. Dry skin. Warts. Dry gangrene. Pustular eruptions with burning and itching, worse at night. Large horny corns on the soles of feet, very painful when walking, especially over hard surfaces. The corners of the mouth cracked and fissured. Nostrils are sore, cracked and crusty. The skin looks very dirty and unhealthy [23, 24, 25, 26].

Hepar sulphuris: - Skin: It is a very good remedy for skin diseases. For example, psoriasis, abscesses, eczema, eruptions, boils, itch, acne rash, urticaria, herpes, etc. Moist eruptions in folds of skin and itching in the bends of joints; skin is extremely sensitive and suppurates easily; pimples form around ulcers. Humid eczema of the scalp, sore and sensitive to touch. Eczema of the scrotum and genital organs; boils. Every little injury suppurates. In boils and abscesses where suppuration is inevitable, Hepar, if given in low potency hastens suppuration and heals quickly. However, if given in high potency it aborts the abscess. Ulcers are very sensitive to contact, bleed easily, burn and sting. Cannot bear to be uncovered; wants to be wrapped up warmly and relieved by hot application. Discharges of Hepar are corroding and smell like old cheese. Hepar skin sweats profusely without any relief. It has splinter-like pains [23, 24, 25, 26].

BORAX: - Ringworm: It is useful for ringworm. itching intense, worse at night when undressing, from bathing; immense quantities of white, bran like scales; oozing behind the ears, in the hair, in folds of skin with rawness and soreness; fiery red skin. Amelioration: Cool wind, open air, motion. Aggravation: In a closed room, from motion, exertion, weather changing, damp cold, draught, awakening, noise, thinking of it, mental excitement, music, the pressure of waistband, standing, periodically. Erysipelas in the face, itching on the back of finger joints, unhealthy Skin, herpes, erysipelatos inflammation with swelling and tension, trade eruption on fingers and hands, itching and stinging, ends of hair becoming tangled [23-26].

Arum triphyllum: -Raw bloody surface anywhere, impetigo contagiosa, scarlet-like rash, corners of mouth sore and cracked, lips chapped and burning, Aggravation: From cold wind, northwest wind, cold wet, singing, talking, speaking, night, lying down. Amelioration: Warmth [23-26].

Apis mellifica: Apis mellifica is very useful in urticaria. Skin is very sensitive to touch; is waxy, painful and oedematous; stinging, burning, smarting, pricking and itching of the skin in erysipelas; swelling, especially under lower eyelids. All symptoms go from right to left. Aggravation: Worse from heat, hot bath, by lying down,

after sleep, afternoon at 3 pm, in a hot and warm room, from touch, pressure, getting wet. Amelioration: Cold applications, cold bathing, open air, changing position, uncovering, getting erect, cool open air, expectoration, cold water. It acts on the skin, and mucous membranes, which get affected – swollen and inflamed; particularly in the eyes and where there is loose tissue; thus it causes oedema and anasarca [23-26].

Argentum nitricum: Brown, tense & hard, drawing in the skin, as from a spider-web, or dried albuminous substance, irregular blotches, Aggravation: Night, warm room, fire, summer, the warmth of bed, warm drinks, ice cream, uncovering, rising from sitting position, inspiration, touching the parts, thinking intensely, riding, menses, sweets eating after, from emotions. Amelioration: Stimulants, cool open air, fresh air, washing with cold water, tight bandage, sitting, eructation [23-26].

Anagallis: This homoeopathic remedy has a marked effect on the skin. It is often used to treat skin itching and dryness, as well as bran-like eruptions. The vesicles and swellings that occur on folded joints, especially on the hands and fingers, are also common symptoms that Anagallis can help alleviate. In addition to its dermatological benefits, Anagallis has been found to provide relief from associated constitutional symptoms, such as tingling and itching all over the body [23-26].

Mascanella: Skin symptoms include dermatitis with excessive vesiculation, oozing of sticky serum and crust formation, erythema, vesicles, blisters, as from scalds, heavy brown crusts and scabs, erysipelas [23-26].

Kalium sulphuricum: - When it comes to skin diseases, Ferrum phosphoricum is recommended for the first stage, followed by Kalium muriaticum for the second stage, and Kalium sulphuricum after that. This treatment is suitable for all skin eruptions with watery, yellow, and foul-smelling discharges, as well as dry skin and sudden suppression of eruptions. Additionally, if the skin is peeling with or without sticky secretions, ringworm of the scalp or beard with abundant scales, burning, or itching this remedy is also effective. It's important to note the colour of the tongue when selecting the appropriate treatment. The symptoms worsen after from exertion, in summer from touch, high temperature, warmth, motion, at night, early morning, and evening, or in a closed room. Cold, cold drinks, rubbing, and exposure to cold open air can alleviate the symptoms [23-26].

Lycopodium clavatum: This remedy is used for various skin conditions such as violent itching, acne, fissured eruptions, and brown spots. It is also effective for dry, shrunken skin, chronic eczema, and offensive perspiration, especially in the axilla and feet. Symptoms worsen from 4 to 8 pm, after consuming cold drinks, while lying on the right side, and after consuming bed or being exposed to heat or warm air. Symptoms improve with damp weather, loosening clothing, passing urine, consuming warm drinks and food, being in the open air, and uncovering the head [23-26].

Medorrhinum:- This remedy is greatly used in chronic inflammatory dermatophytosis and it is characterized by the

formation of scutula, which are small and crusty lesions on the skin. The affected area is intensely itchy, especially at night and when the person thinks about it. In babies, there may be a fiery red rash around the anus, and copper-like spots can appear on different parts of the body. The symptoms are aggravated by damp and cold weather, slight touch, and during daytime from sunrise to sunset, as well as from heat, bathing in salty water, and early in the morning, between 3 to 4 am. On the other hand, the symptoms can be relieved by being in the fresh air, being fanned, hard rubbing, and at sunset [23-26].

Rhus venenata: - Itching, vascular inflammation red patches of skin, many rashes on the skin, skin is dark red, erythema nodosum, itching relieved by applied on hot water [23-26].

Tuberculinum: -This medicine is also useful for ringworm infection, patients having complaints of patches of skin becoming rough and inflamed with blisters which cause intense itching and sometimes bleeding, bran like scales, infolds of skin with rawness and soreness, fiery redskin, melioration: Cool wind, open air, motion. worse at night when undressing, from bathing [19, 23-26].

Mezereum: Skin affections: It is a very useful remedy for the eczematous appearance of skin. Eczema with intolerable itching, worse by a warm bath, in bed. Itching changing place on scratching, coldness after. Eruptions ooze an acrid, gluey moisture, form thick crusts, scabs with pus beneath or chalky white in colour. Deep, hard and painful ulcers that itch and burn surrounded by vesicles and shining, fiery red areola. Herpes zoster with burning pain. Aggravation: At night, after suppressions, the warmth of bed, from cold air, damp air, touch. Amelioration: By open air, wrapping up, the heat of the stove [23-26].

Calcarea carbonica: This remedy is recommended for treating dermatophyte infections and patients with complaints of unhealthy skin producing ulceration with burning and itching, petechial eruption, nettle rash, Aggravation: In the morning, evening, after midnight, from cold air, during full moon, from wet weather, from washing, cold water, stretching the affected part. Amelioration: Dry weather, lying on the painful side. When accompanied by constitutional symptoms, these complaints have been cured with the use of calcarean carbonica [23-26].

Antipyrine: This medicine act on the Vaso motor Centre, causing dilatation of capillaries of the skin and consequent circumscribed patches of hyperemia and swelling, erythema, eczema, intense itching, urticaria appearing and disappearing suddenly, dark blotches on skin of the penis. When accompanied by constitutional symptoms, these complaints have been cured with the use of antipyrine [23-26].

Results

From Previous studies, we have seen that dermatophyte infections have become a major health issue. All previous study reports showed that the person who suffered from different types of dermatophyte infections are distinguished by the area of the body affected, in older individuals with decreased immune response, and adults also affected due to poor hygienic condition, topical corticosteroid use, poor

blood circulation, also including diabetes person. Then after the proper case-taking we take homeopathically and evaluate the symptoms, conduct reliable tests, and suitable management for specific types of dermatophyte infections chosen. We have to find a homoeopathic remedy based on the homoeopathic law of similia. Then After treatment, the patient experiences gradual improvement in skin and mental condition, resulting in an enhanced daily quality of life.

We have found from the database that there are about 89 researches were done in 5 years on dermatophyte infection in India of which free full-text access papers were only 30. In last five years, we found very few researches on dermatophytes infection and homoeopathic management.

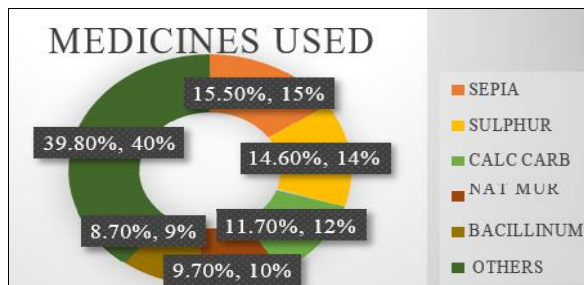


Fig 7: Homoeopathic medicine in the management of dermatophytosis; a clinic- epidemiological study with pre-post comparison design



Fig 8: Effectiveness of Homoeopathy in Tinea corporis and Tinea cruris – A Prospective, Longitudinal Observational Study.

Discussion

Dermatophyte infections are a common occurrence worldwide. Our review covers various types of dermatophytes, including their causes, clinical features, and diagnostic methods. We also analyzed the prevalence of these infections across different age groups and genders. Through our analysis of various homoeopathic sources, including articles, journals, and Materia Medica books, we found that homoeopathic medicines have proven to be highly effective in treating dermatophyte infections. There are few pieces of evidences mentioned below Alam S *et al.* in 2020 presented a retrospective study on Tinea which shows that about 35% of people are affected from Tinea corporis which is commonest followed by T. cruris, T. pedis, T. capitis those infections are predominant in males and mostly affected age group is 21-40 yrs. Individualized homoeopathic medicines are used to treat the patients most common of them are Sulphur, sepi, psorinum, telluriam, and arsenic album. Sharma R *et al.* in 2022 presented a case report on homoeopathic medicine's effect on tinea that shows Lycopodium shows great effectiveness on tinea infection and the medicine was selected according to symptomatology. Singh A K *et al.* in 2020 presents a case series of dermatophytic infections that shows 30c, and 200c potencies of medicines like Sanicula aqua, Sepia succus, Mercurius solubilis, Sulphur give significant results on tinea infections. Uttamchandani PA *et al* in 2019 present case reports on the effects of homoeopathic medicines on dermatophytes infection that shows 30c, and 200c potencies of medicines like Rhus toxicodendron, Arsenic album, Apis mellifica give significant results. Acharya A *et al* in 2021 presents an observational study in Tinea corporis and Tinea cruris that shows both T.corporis and T.cruris equally affecting the population. 19 homoeopathic medicines are used depending upon symptomatology.

Conclusion

Dermatophyte infections are a global concern affecting people of all ages and genders, with a higher prevalence among teenagers, children, and older adults. The government has launched awareness programs to combat this issue, but communication gaps remain, making it challenging to treat patients in critical conditions. To address this, we need to identify potential causes, specific symptoms, lifestyles, and the patient's medical and family history. The homoeopathic system can then be employed to provide appropriate treatment. Recent studies we have demonstrated the effectiveness of homoeopathic medicine in treating dermatophyte infections, and these findings should be integrated into clinical practice in institutions and private clinics.

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