

# A biological foray to stop the evolution from the simplest psoriasis punctata to other more serious skin disorders by the aids of natural antihistamine and antibiotics

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## ABSTRACT

Scope of our research is to attempt to treat the unpredictable transition from the very first step of psoriasis (punctata) towards the second step (guttata) before the process develops to other more serious and risky manifestations of psoriasis (diffusa or laepriformis). The remedies are totally natural and are administered both orally and topically. It must be stressed that psoriasis punctata shall be treated with antihistamine and psoriasis guttata with antibiotics. We have chosen all natural remedies. We did not use corticosteroids nor sun (even because the season did not permit sun baths). We have recruited two girls (pupils at the University of one of the AA) and we have had the chance to notice that the rapidity of the regression of the symptoms of the psoriasis may depend on the phenotypes: one volunteer was black haired and the other blond haired.

**Key words:** Psoriasis punctata; Psoriasis guttata; Hemp; Provençal pycnogenol; Chestnut honey

## INTRODUCTION

There's no cure for psoriasis. The only goal is to manage symptoms.

This is the chief categorical imperative ere to penetrate the demesne of this kinds of skin plagues.

An enormous range of types of psoriasis (circinata, diffusa, discoidea, geographica, guttata, gyrata, inveterate, ostracea, palmaris, plantaris, punctate, universalis, vulgaris, scalp psoriasis, erythrodermic psoriasis) exists and involves all races, ages and sexes and often some of these requires diverse approaches to be treated and cured such as UV rays, PUVA, corticosteroids, trenitoin, methotrexate, antibiotics, salicylic acid or zinc chloride or thanaka powder [1].

Lilienthal [2] identified a sort of evolution from a very first and primary starting manifestation (the psoriasis

punctata) in other consequential ones: Lilienthal's contribution is very intriguing.

He affirms that apart the aethiology the very first manifestation is the psoriasis punctata, represented by minuscule spots that increase slowly and acquire in a short time the size of a lentil and the appearance of a drop of mortar (this second manifestation is called psoriasis guttata) [3].

Simultaneously with the growth of the first crop, others of the same kind, present themselves in the intervening spaces of the skin. By their extension larger spots are produced, attaining the size of different coins (and this step is called psoriasis circumscripta or nummularis).

As the disease goes on, different patches approach each other and become fused in one giving rise to irregular shapes and sizes and thus a very large extent of the body may be involved [4].

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The sobriquet for this stage of the disease is psoriasis diffusa.

When the eruption involves only a limited extent of space, the epidermic scales may become loosened and fall off, leaving bright-red, slight elevated spots or we notice only a partial desquamation especially in the middle of single circular patches, giving rise to psoriasis orbicularis (lepra Willani or psoriasis laepriformis).

By the blending together of numerous smaller patches, differently arranged, a variety of irregular forms are produced and when they take a serpentine form the final disease is called psoriasis gyrate.

Psoriasis punctata is the first step, characterized by strong itching and its diagnose may be mistaken sometimes, resembling other skin diseases [5].

Corticosteroids are not the best way to treat psoriasis punctata. This is the most important assertion.

The best method is to administer antihistamines, both topically and orally, even if after some week, especially if the patient is exposed to sun rays, psoriasis punctata becomes psoriasis guttata.

Since there is not a neat distinction between psoriasis punctata and guttata, idest there is not a range of time to confirm the evolution from one to another, we have made up our mind to treat the first (the punctata) employing natural antihistamines and using natural remedies to prevent the second type of psoriasis. (the guttata) in order to avoid that the evolution goes on to the stage of “diffusa” or even to the “laepriformis” [6,7].

Forsooth psoriasis guttata [8] is a skin condition in which small, droplet-shaped, red patches appear on the: arms, legs, scalp, trunk.

It is the second most common form of psoriasis. Psoriasis, presently, is an inflammatory skin condition that causes skin redness and irritation. It typically affects children and adults under 30 years old. Respiratory illnesses or viral infections are common triggers. According to the National Psoriasis Foundation (NPF), about 10 percent of people who have psoriasis will develop this type of psoriasis.

Unlike plaque psoriasis, which has raised lesions, the spots caused by guttate psoriasis aren't very thick. Spots

are typically small. They may have a covering of thin, flaky skin called scales [9].

Guttate psoriasis isn't contagious. It can't spread to others through skin-to-skin contact. Spots often clear up with minor treatment. Guttate psoriasis may be a lifelong condition for some, or it may appear later as plaque psoriasis.

Guttate psoriasis flare-ups are often sudden. The breakouts typically involve small, red marks that intensify and expand. They can cover large portions of the body or may remain in smaller patches.

Lesions of guttate psoriasis typically appear: small in size, red or dark pink, separate from each other, on the trunk or limbs, thinner than plaque psoriasis lesions [10].

The real cause of psoriasis guttata is unknown, even if it is to be considered the second stage after the psoriasis punctata, but research indicates that it's an autoimmune disorder. This means that the body's natural defense system attacks healthy cells. In psoriasis, the immune system targets the skin, which results in a rapid growth of skin cells. This causes the redness and flaky skin typical of psoriasis.

Among the best remedies to defeat psoriasis guttata there are: Topical creams or ointments that represent the first line of treatment for this type of psoriasis; Steroids suppress the body's immune response, resulting in fewer excess skin cells; Other therapies and strategies that can help control symptoms, such as.

Dandruff shampoos, Lotions that contain coal tar or cade oil and antibiotics apt to combat Beta-hemolytic streptococci infection that is the major contributing environmental factor. The typical route of infection is the upper respiratory system. Rarely it is also caused by a skin infection surrounding the anus (perianal streptococcal dermatitis) [11,12].

It is well known that the biological combinaison HEMP The classic “HEMP” formula (Hydrastis, Echinacea, Myrrha, and Phytolacca) is indeed effective to treat streptococcal epidermal infections [13].

Other AA refer that Pseudomonas aureoginosa is involved too in the occurrence of Psoriasis guttata and therefore some AA [14] refer that Honey could represent a special touchesane for treating this type of Psoriasis.

## MATERIALS AND METHODS

We have had the chance to recruit two girls (23 and 24 y. old: the first was an Iranian black-haired girl, pupil at the University and the second was a blond Sicilian) who presented the strange skin manifestation that encompasses the passage from psoriasis punctata to psoriasis guttata.

It has been easy to determine it owing to a questionnaire about redness, itching and so on.

They signed liefly and with pleasure the informed consent for the experimentations.

The proof consisted in:

The oral supplementation of a mix of provencal pycnogenol and Piedmont grape seed glyceric extracts (60 drops twice a day) and a hydromel made of *Hydrastis canadensis*, *Echinacea purpurea*, *Commiphora myrrha* and *Phytolacca bogotensis* leaf aqueous extracts and chestnut honey to spread on the injured zones of the body only the night before to go to bed.

The oral administration stands for the supplementation of antihistamine, meanwhile the topical ointment represents the preventive antibiotic treatment to inhibit the transformation of the primary psoriasis in the second type.

The proof lasted 7 days.

## RESULTS

Itching disappeared after the third day in the case of the Iranian, that is the black haired volunteer and after the 4<sup>th</sup> day in the case of the blond girl.

The flaring up of redness and flaky skin tends to evanesce after the 4-5<sup>th</sup> day, and specifically after the 4<sup>th</sup> day in the blond girl and after the 5<sup>th</sup> day in the case of the black haired one.

After 7 days skin appears safe and clear in both the cases.

Itching is not present anymore both in the Iranian and in the Sicilian, even if it does not mean absolutely that Psoriasis is defeated (as we announced at the beginning of this communication).

## DISCUSSIONS AND CONCLUSIONS

It is unpredictable the reason why in the case of the blond volunteer itching disappears after 4 days and redness after the 5<sup>th</sup>, meanwhile in the case of the black haired volunteer itching disappears after the 3<sup>rd</sup> day and redness after the 4<sup>th</sup>.

We utterly support the thesis that different phenotypes react differently to this type of natural treatment perhaps it could be true even as far as chemical medications are concerned to cure psoriasis.

### Statement of Human and Animal Rights

All procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional and national) and with the Helsinki Declaration of 1975, as revised in 2008.

### Statement of Informed Consent

Informed consent was obtained from all patients for being included in the study.

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