

EVALUATION OF THE EFFICACY OF PIX LIQUIDA FOR ALOPECIA AREATA: A CASE REPORT

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ABSTRACT

Alopecia areata is an autoimmune disease primarily characterized by visible, non-scarring hair loss in various parts of the head. Alopecic patches generally have a discoid form but sometimes shape may vary from discoid forms. Every age group and both genders are impacted by the condition. Alopecia areata is caused by impairment in the hair follicle's immune system. A thirty year old man was consulted for alopecia areata. The patient was prescribed Pix Liquida, a homoeopathic medication. Alopecia severity was assessed using the Severity of Alopecia Tool (SALT) score. The patient recovered after using the homoeopathic medication Pix Liquida.

INTRODUCTION

Scarring and non-scarring alopecia are the two main types. Fibrosis, inflammation, and hair follicle loss are linked to scarring alopecia. Non-scarring alopecia is treatable because the hair follicles remain intact despite the absence or shrinkage of the hair shafts.[1] Alopecia Areata often manifests as distinct, localized, non-scarring patches of

alopecia, typically on the scalp. Beard, body hair, eyelashes, and eyebrows might all be impacted. Alopecia universalis is the total loss of all hair, whereas alopecia totalis is the total loss of scalp hair. There could be nail pitting [2] Alopecia areata is common type of alopecia which can occur in both male and female equivalently and it can start at any age on the scalp.

Etiopathogenesis: One of the primary and most important factor in etiopathogenesis of Alopecia Areata is immunological factor. Cytokines produced by the dermal papillae in lesions attract lymphocytes to the perifollicular region and also stimulate their proliferation. Strong major histocompatibility complex (Class I and Class II) found to be present in affected follicles in contrast to normal hairs. AA also seen in association with other auto-immune diseases namely auto-immune thyroid disease, pernicious anemia, vitiligo, and atopy. Another important factor is genetic factor as AA seen in some families hence it may have a genetic basis.[3]AA is an autoimmune disease with a high genetic component. Approximately twenty percent of patients with AA have a familial history. [2]An emotional factor is one of the important triggering factors in some patients who develop AA. [3]

Clinical Features: Morphology: This condition's typical first lesion is a smooth, completely bald, confined area. Typically, round or oval patches of hair are completely lost, mainly on the scalp, beard, eyebrows, eyelashes, and less frequently on other body parts with hair. The patches range in diameter from 1 to 5 cm. Although a scattered pattern can also be observed, the distribution of hair loss is often uneven.[4]The SALT score has been widely used to assess the extent of scalp hair loss in patients with alopecia areata (AA).In the SALT scoring system, the scalp is divided into regions comprising the right side (18%), the left side (18%), the occipital region (24%), and the vertex or top of the scalp (40%) of the total scalp area.The scalp surface area separated into four quadrants, and the percentage of hair loss is then calculated. The overall SALT score is calculated as a weighted average of hair loss percentages, with each value weighted according to the proportion of the scalp

region it represents.[5]Pix Liquida is a homoeopathic remedy derived from liquid tar.[6]Tar and its components have an impact on many mucous membranes.[7]Pix liquida has been shown to be beneficial for alopecia. Signs on the skin are important. It works well as a cough treatment. Bronchial symptoms after influenza. Another symptom of this remedy is flaky eruptions. Another common Notable effect of the remedy is intense itching. [8]

Material and Method: The study was carried out with the permission of the Institutional Ethics Committee (IEC). A quasi-experimental study has been conducted with a one-group pre-and-post design, testing the efficacy of homoeopathic drug Pix Liquida. The purpose of this study is to compare the condition of patients with Alopecia Areata before and after using Pix Liquida, a single homoeopathic remedy. The study comprised patients who gave informed consent and fulfilled the inclusion and exclusion criteria. Depending on the needs of each patient, homeopathic medicinal potencies of 30C, 200C, and 1M were administered.The SALT score was used during the initial consultation, the fourth follow-up, and the eighth follow-up to evaluate patient progress and the severity of the illness.

A CASE REPORT:

CHIEF COMPLAIN:

A Patient aged 30 years, married male consulted at the outpatient department first time on 03-03-'23 for the complaint of Alopecia Areata, i.e. Loss of hair from circular patch of scalp region. He was employed in local company. Patient was completely conscious and oriented. Patient was suffering from presenting complaint of hair loss from one patch of scalp since 1 Year. Bald Patch was located at the Posterior region of scalp. Loss of hair was visible from the alopecic patch. No any history of injury to that part. The area of the

patch was gradually increasing as described by the patient. Patients do not experience any burning sensation at area of the patch. Patient does not experience any itching sensation at the area of the bald patch. No any oozing discharge was noticed nor even experienced by patient.

Treatment taken: No any treatment taken for the presenting complain previously.

Comorbidities: Patient does not suffer with any other disease or comorbidities.

Past Illness: Suffered with – Between the ages of 15 and 16, he had severe acne for which he took treatment.

Family History: Mother: suffering from hypertension.

Personal History: Appetite: Good

Thirst: 09-10 Glasses/Day

Urine: Regular, Normal

Stool: Regular, Normal

Sleep: Regular, Sound

Perspiration: Moderate, Generalised

Likes: He prefers warm drinks and soups, as cold food and drinks trigger coughing.

Life Space Investigation: The patient generally likes to spend time alone. He likes to read novels of various genres. He also enjoys playing cricket but cannot spare time for it due to his daily routine. He feels good at his workplace and likes to be involved in his work. He likes to talk a lot with his father's friend, whom he considers a good friend and mentor. He can easily talk to him and share various life events and situations. He always meets him before making any important decision in his life. He does not have friends of his own age group and considers his father's friend both a friend and a guide, as he has been comfortable sharing various topics and situations with him since childhood. About one and a half years ago, his father's friend left his hometown and shifted to another town due to some reasons. Since then, the patient has found it difficult to meet him whenever

needed. Initially, he used to call and talk to him, but it was not always possible for both of them. Gradually, the contact and conversations became negligible. Afterwards, the patient started becoming irritated and would get angry over small events.

General Examination

Patient was Conscious, Cooperative & oriented with time, place and person during the case evaluation.

Vital Data:

PR – 74 beats/ min

Temp – Afebrile at the time of examination

BP- 128/80 mm Hg

RR-16 /min

Body Weight: 78 kgs

Built: Moderately built and nourished.

Scalp – No dandruff, no itching

Hairs – Overall Black hairs

Eyes Conjunctiva - pink

Sclera – clear

Ears- no discharge

Nose- no DNS/ Polyps

Mouth: -

Buccal mucosa- Pink.

Teeth – hygiene maintained

Tongue – pink

Gums – Non bleeding

Neck – no lymphadenopathy

Nails- healthy

No pallor, clubbing, cyanosis, icterus & pedal oedema

Local examination: At the Back of the scalp i.e. at the occipital region, well defined circular bald patch present. Skin of the bald area is smooth and shiny. At the periphery of the patch short, broken hairs was present. No any signs of injury were present at bald patch. Skin at the area of the bald patch was not showing any change in the colour compared to patient's skin.

Area of the bald patch was non tender on examination.

Skin of the bald patch was not showing any rise of temperature

There was no any burning sensation at area of the bald patch.

There was no any itching sensation at area of the bald patch

No any oozing discharge was present.

SYSTEMIC EXAMINATION:

CNS, CVS, RS, GIT, GUT: NAD

Totality of symptoms:

1. Introvert in nature.
2. Loss of hair from one circular patch from back of scalp
3. Loss of hair from 1 Years

4. Likes to read novels

5. Easily becomes irritated and angry

6. He prefers warm drinks and soups, as cold food and drinks trigger coughing.

Diagnosis: Alopecia Areata.

The diagnostic assessment was conducted based on a detailed clinical evaluation and physical findings, which were essential in ruling out Alopecia Areata.

Prescription: Patient prescribed with Homoeopathic drug PIX LIQUIDA 30 C one dose at the time of first consultation.

Sr. No	First Prescription/ Follow up	Complain at the time of consultation /Follow up	Homoeopathic Medicine prescribed with Dose and Duration
01	First Prescription (03-03- '23)	Presenting complain of Alopecia Areata	Pix Liquida 30 one Dose, Placebo four globules twice a day (BD) for 15 days
02	1 st follow up (15 th Day) (18-03-'23)	No any improvement seen in the complain of the patient	Placebo four globules twice a day (BD) for 15 days
03	2 nd Follow up: (30 th Day) (03-04-'23)	Good improvement seen in complain of the patient as compared to 1 st Follow up of the patient but Still bald patch is visible.	Placebo four globules twice a day (BD) for 15 days
04	3 rd Follow up: (45 th Day) (18-04-'23)	Good improvement seen in complains of the patient as compared to 2 nd Follow up of the patient but Still bald patch is faintly visible.	Placebo four globules twice a day (BD) for 15 days
05	4 th Follow up: (60 th Day) (03-05-'23)	Good improvement seen in complain of the patient as compared to 3 rd Follow up of the patient but Still bald patch is faintly visible.	Placebo four globules twice a day (BD) for 30 days
06	5 th Follow up: (90 th Day) (05-06-'23)	Good improvement seen in complain of the patient. No bald patch visible	Placebo four globules twice a day (BD) for 30 days
07	6 th Follow up: (120 th Day) (05-07-'23)	Good improvement seen in complain of the patient. No bald patch visible	Placebo four globules twice a day (BD) for 30 days
08	7 th Follow up: (150 th Day) (04-08-'23)	Good improvement seen in complain of the patient. No bald patch visible	Placebo four globules twice a day (BD) for 30 days
09	8 th Follow up: (180 th Day) (04-09-'23)	Good improvement seen in complain of the patient. No bald patch visible	Placebo four globules twice a day (BD) for 30 days

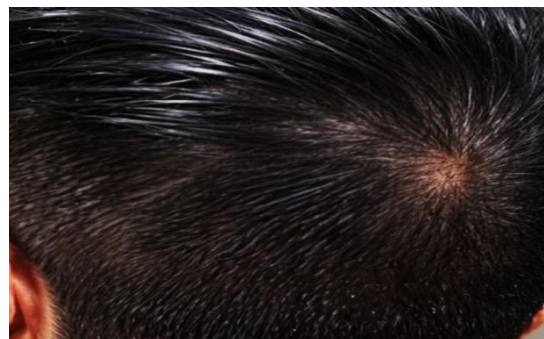
SALT SCORE before and after administration of Homoeopathic remedy Pix Liquida

Sr.No.	DUARATION AT WHICH SCORE EVALUATED	SALT SCORE
1	SALT SCORE At first consultation	0.27
2	SALT score at 60 th Day i.e. at the 4 th Follow up	0.03
3	SALT score at 180 th i.e. at the Day-8 th Follow up	0

BEFORE



AFTER



Discussion:

The patient was carefully assessed in compliance with homoeopathic rules and principles. Following the initial consultation, a 30 C potency of homoeopathic medicine Pix liquida was administered to patient. Homoeopathic medicine Pix Liquida was used consistently to treat patient as needed because the study's goal was to treat Alopecia Areata with one treatment—Pix Liquida. After one month duration of treatment potency of the Pix Liquida not changed from 30 C to next higher potency i.e. 200 C as there was significant improvement seen in the patient's complain. Patient assessed for the duration of the six months. For the first four follow-ups, or up to sixty days, the patient was assessed every fifteen days. Followed by it patient assessed at the interval of 30 days. Thus, Patient assessed for the six months i.e., for 180 days. The SALT score was used to analyse the improvement in the bald

patch. By the 180th day SALT score showed zero value which is indicative of absence of Alopecia Areata. The patient showed improvement after the treatment administered during the given course of time. This also indicates the efficacy of Homoeopathy and the homoeopathic remedy Pix liquida in relation to the patient's condition. Homoeopathy was founded over 200 years ago by Dr. Samuel Christian Hahnemann. Over time, it has grown to become one of the most popular forms of alternative medicine in the USA and Europe. It is founded on the principle of "like cures like," where highly diluted substances are used therapeutically by producing symptoms similar to those seen in healthy individuals.[9] For over 200 years, homoeopathy has been recognized worldwide as a legitimate medical system, contributing to treatment, education, and research across various healthcare institutions and medical schools.[10] Autoimmune disorders, including Alopecia Areata, often relapse

or fail to respond adequately to conventional treatments.[11]Structured interviews commonly reveal that many patients seek homoeopathy due to dissatisfaction with certain aspects of conventional medical care. [12]

Conclusion:

In autoimmune conditions such as Alopecia Areata, homoeopathic treatments yield results only when they are carefully prescribed and thoroughly evaluated during follow-up. Thus, homoeopathy holds the potential to restore a sick individual to a state of health. The present case shows notable improvement in the patient's condition, further supporting the efficacy of homoeopathy and the remedy Pix liquida. SALT is a widely used tool for assessing the severity of alopecia areata. It is considered valuable because it effectively reflects significant increases or decreases in disease severity.

Abbreviations: AA-Alopecia Areata, SALT-Severity of Alopecia Tool

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Statement of patient consent: The author has obtained all the necessary patient consent forms. The patient understands that their personal identity will remain undisclosed, but full anonymity cannot be assured.

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Conflicts of interest: The authors declare that they have no conflicts of interest.

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