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Managing Post-COVID Diffuse Hair Thinning through homeopathy at Dr Batra's

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ARTICLE INFO	ABSTRACT	CASE STUDY
<p>Article History Received: April 2025 Accepted: June 2025</p> <p>Keywords: Hair Thining, Homeopathy, Dr Batra's</p> <p>Corresponding author Dr P. Desai*</p>	<p>Hair thinning is a progressive condition characterized by reduced hair volume and density, often caused by a combination of genetic, hormonal, environmental, and post-infectious factors. In the homeopathic system of medicine, hair thinning is understood through an individualized, holistic lens that takes into account genetic predisposition, mental and emotional states, past illnesses, and miasmatic background. This paper presents a case of a young male who developed hair thinning following a COVID-19 infection. The case highlights the patient's positive clinical response to individualized homeopathic care and integrative therapy, emphasizing the efficacy of a non-invasive approach in addressing chronic hair conditions at Dr Batra's.</p>	

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INTRODUCTION

Hair thinning, also referred to as alopecia or reduced hair density, is a multifactorial condition that can arise due to genetic predisposition, hormonal changes (especially dihydrotestosterone sensitivity), autoimmune conditions, nutritional deficiencies, stress, infections like COVID-19, and improper hair care practices^[1]. A common variant in men is **androgenetic alopecia**, whereas **telogen effluvium** is a reversible condition often triggered by infections, fever, or psychological stress^[2].

Signs and symptoms of hair thinning include a gradual reduction in hair volume, visible scalp, widening of hair parting, and excessive hair shedding. Dandruff, scalp

itching, or flaking may co-exist, especially in cases with poor scalp hygiene. Over time, untreated hair thinning can lead to permanent hair loss, affecting confidence, emotional well-being, and quality of life.

The global burden of hair disorders is substantial, with over **60% of men and 40% of women** experiencing some degree of hair loss during their lifetime^[3]. The COVID-19 pandemic has further contributed to a surge in hair-related complaints due to stress, immune response, and inflammatory sequelae^[4].

CASE PROFILE

A 26-year-old working male presented with complaints of hair thinning that had been gradually worsening over the past seven months. The issue began shortly after a

COVID-19 infection, initially marked by significant hair fall rather than thinning. Over time, the hair fall reduced, but thinning became more noticeable and persistent.

He reported associated dandruff, which tends to worsen when the hair remains unwashed. He has been using Indulekha oil regularly but has not observed much improvement. There are no other systemic complaints. Family history is positive for hair thinning in his mother and sister, suggesting a genetic predisposition. He has no significant past medical history.

On examination, the scalp was mostly clear, with occasional flakes noted. There was no major inflammation or tenderness, and the hair pull test showed minimal active shedding. The patient underwent 10 sessions of XOGEN therapy, which resulted in a visible reduction in hair thinning and some regrowth. Hair fall significantly decreased, and overall hair volume and texture improved. However, the patient chose not to continue with further sessions due to financial limitations.

At the last evaluation, hair thinning remained improved, hair fall was minimal, and the regrowth appeared stable. The scalp continued to be largely healthy, with only minor flaking. The patient is currently opting to monitor progress and wait before deciding on further treatment.

Physical Generals

Diet: Non-vegetarian, occasional intake of junk/processed food

Appetite: Normal; hunger at regular intervals

Desire: Craves spicy food, fried snacks, eggs, and chicken

Aversion: Mild aversion to overly sweet items

Thermal Reaction: Chilly patient

Thirst: Moderate (1.5–2 liters/day), Prefers small sips throughout the day

Stools: Regular, well-formed - Occasionally hard if water intake is low

Urine: Normal in frequency and quantity, Clear; no odor or burning

Perspiration: Moderate, N.O.,N.S.

Sleep: Sound and refreshing, Sleeps 6–7 hours per night

Dreams: Occasionally remembers dreams, Mostly routine or work-related; not disturbing

Examination

Scalp: Clear with mild flaking (dandruff +)

Hair: Diffuse thinning over crown and frontal areas; no patchy loss

Hair Pull Test: Mildly positive (1/4)

General Appearance: Well-nourished; no pallor or systemic signs

Vitals & Systemic Exam: Within normal limits

Nails & Skin: Normal

Mental Generals –

A 26-year-old male who currently works in the IT field, specifically in network engineering and digital marketing. He was raised in a modest and grounded family setup. His father is a peon in a government school and his mother is a homemaker. He shares a close bond with his family, particularly with his sister who is employed in an IT firm (Fractal Analytics). Despite a good relationship with his parents, he admits to feeling irritated at times, especially when he has to repeatedly explain things to them, which tests his patience.

His upbringing was largely independent, especially in his later years. He completed his B.Com degree under parental pressure, although his true interest lay in IT. Feeling unsupported and unguided in his early career decisions, he took the initiative to explore the field himself, enrolled in a course from Bandra Polytechnic, managed his own admission process, and eventually secured an internship and a job in network engineering. He also does digital marketing and video editing work, mainly as a backup plan. Previously, he worked in celebrity PR and

social media management, which he now does part-time.

He describes himself as quiet, introverted, and emotionally sensitive. He prefers solitude and rarely forms deep friendships. Past experiences have deeply affected him—particularly an incident where a close friend failed to return ₹1.5 lakhs he had borrowed from the patient (money that the patient had taken from his parents). This betrayal left a lasting impression, after which he decided to distance himself from people emotionally. Now, apart from his family, he maintains a guarded relationship with others, believing that only family truly stands by you in difficult times.

He is extremely attached to his parents and becomes anxious, especially due to his father's repeated hospitalizations and recent angioplasty. He strongly desires to provide a comfortable life for his parents. His anxiety often leads to hypersensitivity and emotional overwhelm. He stresses out easily—especially in response to shocking news such as accidents or death—and tends to brood over such events for a long time. He avoids emotionally disturbing movies or situations, as they linger in his mind.

Temperamentally, he has an angry disposition. He may react strongly if provoked or emotionally hurt, often choosing to leave the space to avoid escalation. After calming down, he returns quietly and resumes normal interaction. During childhood, he faced internal stress and pressure, especially in academics and decision-making, but he managed it on his own without much emotional sharing. He had no major episodes of bullying but was reserved, with limited interaction with teachers or peers. He never had many friends and even now prefers to spend time with work or family rather than socialize.

Overall, he presents as an emotionally sensitive, introverted individual with strong family ties, a history of emotional hurt, and suppressed feelings due to past betrayals. He displays anxiety, brooding tendencies, and internalizes his emotions, revealing them only when he truly connects with someone at a deeper level.

Past History

N.S

Family History

N.S

Case analysis - Reportorial totality

Repertory used	Rubrics selected
Synthesis Repertory	MIND - RESERVED MIND - ANGER MIND - QUIET disposition MIND - AILMENTS FROM - deceived; from being MIND - AILMENTS FROM - cares, worries MIND - COMPANY - aversion to

Repertory screenshot

Remedies	ign.	nat-m.	nux-v.	staph.	lyc.	ph-ac.	aur.	calc.	sep.	caust.	lach.	vanil.	ars.	con.	puls.	mag-c.	verat.	op.	cham.	alum.
Serial Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Symptoms Covered	6	6	6	6	6	6	5	5	5	5	5	5	5	5	5	5	5	5	4	4
Intensity	15	15	14	12	11	10	10	9	9	8	8	8	7	7	7	6	6	5	9	8
Result	6/15	6/15	6/14	6/12	6/11	6/10	5/10	5/9	5/9	5/8	5/8	5/8	5/7	5/7	5/7	5/6	5/6	5/5	4/9	4/8
Clipboard 5																				
MIND - RESERVED	2	3	1	2	1	1	1	2	1	1	1	1	1	1	2	1	1	1	1	1
MIND - ANGER	3	3	4	3	3	2	3	2	3	2	2	3	3	2	1	2	1	1	4	2
MIND - QUIET disposition	2	1	1	1	1	3	1	2	1	2	2	1	1	1	1	1	2	1	1	2
MIND - AILMENTS FROM - deceived; from being	4	3	2	1	3	1	3		1		1				1		1	1		
MIND - AILMENTS FROM - cares, worries	1	1	3	2	1	2		2		2		2	1	1		1				
MIND - COMPANY - aversion to	3	4	3	3	2	1	2	1	3	1	2	1	1	2	2	1	1	1	3	3

Selection of Remedy

• Constitutional Remedy:

○ Natrum Muriaticum

- Reserved, introverted nature
- Emotionally sensitive and brooding
- Past grief from betrayal (friend who didn't return money)
- Difficulty expressing emotions unless there is a strong emotional connection

• Intercurrent Remedies:

○ Thuja occidentalis

- For after-effects of suppression and deception

- Suited to reserved personalities with fixed ideas and emotional blocks
- Helps address the deeper constitutional layer (A/F being deceptive, reserved, sensitive)

• Acute Remedies:

○ Weisbaden

- For hair fall and promoting new hair growth

○ Mezereum

- For flaky dandruff with scalp irritation
- Suited in cases where the scalp is dry, scaly, and sensitive

Miasmatic approach

Symptoms	Psora	Sycosis	Syphilis	Tubercular
Mind – Reserved		✓		✓
Mind – Anger	✓	✓	✓	

Mind – Quiet disposition	✓	✓		✓
Mind – Ailments from being deceived		✓	✓	
Mind – Ailments from cares, worries	✓			✓
Mind – Company – aversion to		✓	✓	✓

MATERIALS AND METHODS

Synthesis repertory was used for repertorization

RESULTS

Month	Progress	Prescription
1st Month (Dec 2024)	Hair fall present; scalp flaky; patient anxious about thinning	- Natrum Muriaticum 200C – 2 doses/week (1st week only) - Wiesbaden 200C – 2 doses every alternate day - Mezereum 30C – 2 doses every alternate day - Kali Sulph 6X – LA, once/week with curd
2nd Month (Jan 2025)	Mild relief in hair fall; dandruff persists	- Natrum Muriaticum 200C – 2 doses/week (1st week only) - Wiesbaden 200C – 2 doses every alternate day - Kali Sulph 6X – LA once/week with curd
3rd Month (Feb 2025)	Hair fall reduced; visible thinning improvement and early signs of regrowth (Xogen 5 sessions done)	- Natrum Muriaticum 200C – 2 doses/week (1st week only) - Wiesbaden 200C – 2 doses every alternate day - Kali Sulph 6X – LA once/week
4th Month (Mar 2025)	Hair fall better; scalp clear; thinning improving further	Continued same as above; good compliance noted. No new additions.
5th Month (Apr 2025)	Hair thinning visibly improved; 10 Xogen sessions completed; patient happy results	- Natrum Muriaticum 200C – 2 doses/week (1st week only)
6th Month (May 2025)	Hair fall absent; regrowth maintained;	No change in prescription; supportive care continued
7th Month (June 2025)	Hair thinning stable; scalp healthy with mild flakes; emotional health better	- Natrum Muriaticum 200C – 2 doses/week (1st week only) - Wiesbaden 200C – 2 doses every alternate day - Kali Sulph 6X – LA once/week
8th–12th Months	No relapse reported; patient continues to maintain hair volume and texture naturally	Repetition of Nat Mur and Wiesbaden as needed; LA continued occasionally for scalp care

DISCUSSION & CONCLUSION

This case highlights the journey of a young adult male dealing with post-COVID hair thinning, compounded by emotional sensitivity, past betrayal, and underlying anxiety due to familial responsibilities. Despite having a genetic predisposition to hair loss and facing challenges like dandruff and emotional stress, the patient showed consistent improvement with a holistic, individualized approach. Over the course of several months, there was visible regrowth, stabilization of hair fall, and a significant improvement in scalp health.

The case also illustrates how deeply emotional and psychological stressors can impact physical health, particularly conditions like hair thinning. By addressing the patient as a

The transformation



whole—considering his mental state, life experiences, and emotional triggers—sustainable results were achieved. The patient's progress was further supported by non-invasive therapies and regular follow-ups, demonstrating that chronic conditions like diffuse hair thinning can be effectively managed without resorting to aggressive interventions.

This case reinforces the importance of understanding each patient's unique life space and emotional framework. Through a patient-centered, consistent, and supportive therapeutic approach, both physical and emotional well-being were positively impacted, resulting in restored confidence and a better quality of life.

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