# ere's h citch the itc

by ROBERT J. SIGNORE, DO, DiHom

Ahhh ... springtime! After a cold Midwestern winter, it's a joy to hear the morning songbirds chirping again, feel the warm sunshine on our skin after months of hiding under heavy layers, and see the landscape change from drab greys to vibrant greens. With all the flowers and plants pushing up through the ground, it's as if the earth is waking up from a long winter's nap!

As we eagerly venture forth into the great outdoors again, it's important to remember that a few of those pretty plants can present us with big problems. If you've ever had a case of poison ivy, poison oak, or poison sumac, you know what I'm talking about. The red skin rash, often with swelling and fluid-filled blisters, is bad enough-but it's the incessant itching that can drive you crazy!





#### Strong sap

Contact with poison ivy, oak, or sumac plants is the most common cause of allergic rash from plants in the United States. It's estimated that 85% of people are allergic to urushiol oil, a chemical in the sticky sap of the leaves, stems, and roots of these plants, and some 50 million people in the country suffer with reactions each year. The plants can be found in every state except Alaska and Hawaii.

Although direct contact with the sap must take place for a reaction to occur, it's tenacious stuff, easily sticking to clothing, skin, or tools, and it remains potent for up to five years! That's why people sometimes swear they got a poison ivy rash without exposure to the plant, and they're probably right; they got it secondhand from contact with the sap, such as handling an old rake or weed-whacker or cuddling a dog or cat that touched the plant. (Animals do not appear to suffer from poison ivy sensitivity.) Proximity to a lawnmower that's cutting poison ivy plants or to a fire that's burning the ivy can be another avenue for exposure to

the sap, this time via airborne particles. Although poison ivy sap can spread in these insidious ways, the skin rash, itself, is not contagious to others.

The allergic reaction typically begins 12 to 48 hours after exposure to the sap and lasts at least two or three weeks. Severe reactions—especially when the rash covers large parts of the body and/ or affects sensitive skin areas such as the face—can lead to missed work and school, lost sleep and wages, and significant health care expenditures. I've heard of people describing severe reactions as "the worst experience of my life."

#### An ounce of prevention ...

If you're reading this, you probably know that certain homeopathic remedies have a reputation for helping to soothe acute poison ivy reactions. [See "5 Remedies to Intercept the Itch" on page 28.] But once a strong allergic reaction gets going, it can be difficult to quell it, even with the best of care.

And what about people who are extremely allergic to poison ivy and/or who cannot avoid contact with the plants because of where they work, live, or play? These are the unfortunate folks who suffer with recurrent severe reactions every year. Did you know that there is a time-honored approach that homeopaths use preventively—to help these people avoid allergic reactions from happening in the first place?

I didn't used to know this, but I do now. And I want to share this very helpful clinical information with as many people as possible. That's why I published an article about preventing poison ivy dermatitis in the January 2017 issue of Dermatology Online Journal.(1) I want to raise awareness with my dermatology colleagues of the potential value, cost-effectiveness, and safety of homeopathic medicine with regard to poison ivy allergic patients. I also like that the Dermatology Online Journal's medical articles can be easily accessed online 24/7, free of cost, by both laypersons and medical professionals worldwide.

So, how did I, a specialist in conventional dermatology in Tinley Park, Illinois, ever get involved in studying and writing about homeopathy for the prevention of poison ivy?

#### A patient's misery

Here's what happened: back in 2004 (before I knew about homeopathy), I had a patient who was highly allergic to poison ivy. Byron\* ran his own professional landscaping and lawn care service. Each spring and summer, he suffered terribly from poison ivy and would come to me in agony with itching and inflammation on large areas of his skin. Sometimes, his poison ivy rash was so severe that I had to give him shots of Kenalog® (a cortisone-like steroid) to help him heal. After ten years of this, Byron finally asked, "Come on Doc, isn't there anything you can do to prevent poison ivy in the first place?"

Byron had a good point—we had tried every conventional method we knew to keep him from getting poison ivy. Still, here he was, suffering miserably with itchy blisters from those pesky plants.

#### Leaves of three, let them be ...

In dermatology, our first step is to educate patients about what poison ivy plants look like, so they can avoid contact with them. In Byron's case, he knew what they looked like, yet because of his occupation, it was almost impossible for him to avoid them.

We advise people not to touch poison ivy, but if they must, we have them wear protective clothing. We also advise them to use vinyl gloves or blue nitrile gloves when pulling out poison ivy plants; the trouble is, these gloves can easily get punctured by weeds and brush in the process of weed-pulling. (A little known fact: poison ivy oil has the ability to pass through latex rubber gloves.)

Until very recently, we also advised people to apply barrier protectant creams to help prevent the poison ivy oil from contacting the skin. While patients some-

They got it secondhand from contact with the sap, such as handling an old rake or weed-whacker or cuddling a dog or cat that touched the plant.



times complained that the creams were inconvenient to apply or failed in stopping a rash, barrier creams at least offered some protection. Unfortunately, the product I always recommended, IvyBlock, has been discontinued recently, and I know of no others with the same active ingredient.

Finally, if patients do have skin contact with poison ivy, oak, or sumac, we have them scrub it off as quickly as possible with Tecnu® or rubbing alcohol, in hopes of dissolving the oily urushiol off their skin before their immune systems recognize it and start producing itchy blisters. Often, however, by the time hikers and mountain bikers get back to their cars to get the solvents to wash off the poison ivy oil, too much time has passed for the solvents to be effective! So, you can see why conventional methods for preventing poison ivy don't always work so well.

#### In search of solutions

My patient Byron had tried all these preventive techniques, but to no avail. Moved by his plight, I wanted to help him somehow. "I'm going to the annual Academy of Dermatology meeting soon," I told him, "and I've signed up for a lecture on alternative medicine and dermatology. Maybe I can learn something to help you prevent your poison ivy dermatitis."

So, I eagerly attended the two-hour lecture. At the end of it, I realized that the dermatology professor had taught us a lot of interesting facts about alternative medicine and skin diseases, but, unfortunately, he hadn't mentioned anything that could keep my patient Byron's skin from breaking out again from poison ivy.

Just then, a dermatologist in the audience stood up and asked the presenter a very insightful question. I could tell immediately that she was well-versed in complementary and integrative medicine, so after the lecture, I asked if she knew of anything to prevent poison ivy contact dermatitis. Dr. Helen Torok replied that her husband, Len Torok, was a homeopathic physician and that his patients seemed to have good success with a homeopathic remedy called Rhus toxicodendron 30c (which is actually made from highly diluted poison ivy leaf tincture). He

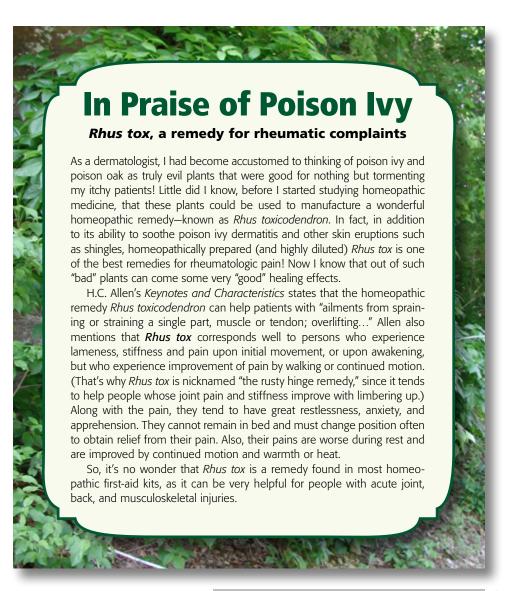
## That's why I published an article about preventing poison ivy dermatitis in the January 2017 issue of **Dermatology Online Journal.**

instructed his patients who wished to avoid getting poison ivy to dissolve one pellet by mouth each month during poison ivy season (e.g., from March to November in my area) as a natural preventative measure. I thanked Dr. Torok for her advice and was glad to have something to take home that might benefit my patient.

#### A very successful trial

Shortly after returning from the meeting, I happened to see Byron's wife

in my office and told her what I had learned. She assured me that she would tell her husband about the homeopathic Rhus tox protocol for preventing poison ivy. For the next six months, I didn't hear anything back from them. Did the homeopathic remedy not work? Did he decide not to try it? I couldn't tell. Finally, I saw Byron's wife in my office a year later. "So, did the homeopathic remedy work? Did it help his poison ivy any?" I asked. "Oh, yes, my husband hasn't had



### Byron ran his own professional landscaping and lawn care service. Each spring and summer, he suffered terribly from poison ivy.

another case of poison ivy since he began taking it!" she said.

It's now been more than a decade that I've been following Byron, my professional landscaping patient, as he uses homeopathic Rhus tox to prevent poison ivy dermatitis. For his first nine years on the protocol, he never got another case of poison ivy rash, despite frequent

known occupational exposures to the plant. (This is remarkable, considering that during the previous ten years, he had suffered many debilitating outbreaks each and every year!) During the following year and a half, he had two cases of poison ivy: once when he forgot to take his Rhus tox, and once when he ran out of it. Byron has been so thankful that we both learned about homeopathic medicine from Dr. Torok!

#### On a mission to learn

That 2004 trial of Rhus tox 30c with my landscaper patient was my first experience prescribing homeopathic medicine. It sparked my interest, to say the least, and in 2007, I enrolled in the British Institute of Homeopathy's introductory course and later completed their diploma course. I have been studying classical homeopathic medicine ever since.

Wanting to learn more about the role of homeopathy in the prevention of poison ivy, oak, and sumac dermatitis, I

# Overpowering Poison Ivy

# 5 Remedies to Intercept the Itch

here are many homeopathic remedies that can help soothe the awful itching of poison ivy, oak, and sumac dermatitis. But, for maximum relief, you have to choose the right one—by closely matching the remedy's indications to the characteristic symptoms of the person with poison ivy. The closer the remedy matches that individual, the better the relief. Below are some of the most commonly used homeopathic remedies for acute allergic contact dermatitis from poison ivy. (For further reading and more remedy choices, be sure to read Dr. Joel Kreisberg's helpful manual: Homeopathic Handbook for Poison Ivy and Poison Oak.)

For best results, you can usually start with the indicated remedy in a 30c potency. When treating an "acute" condition such as poison ivy, you may need to repeat the remedy frequently (e.g., 3 or 4 times a day, or even more frequently depending on the severity of symptoms). If the itching or other symptoms do not improve after several doses, then it's time to try another remedy. If you are still not successful, then see a professional homeopath for further care. (Visit the National Center for Homeopathy's website www.homeopathycenter.org to find a homeopathic practitioner

Note: If you develop a fever, trouble breathing or swallowing, swelling of eyelids shut, rash on the face or genitals, or severe itching that interferes with sleep, then you must see a dermatologist or qualified healthcare professional immediately.

- 1. **Rhus toxicodendron** For many poison ivy patients, the itching is worse with heat. But, in people needing Rhus tox, their itching really gets better with very hot showers! So, a rash that stops itching when the person is in a hot shower often indicates that Rhus tox will help. Other indications include: Great restlessness, anxiety, apprehension. Must change position often to obtain relief. Yellow blisters; much swelling, inflammation, burning, itching, stinging. Worse during rest and better with motion. Better with warmth or hot applications.
- 2. Croton tiglium Intolerable itching of skin, but so tender or sensitive that the patient is unable to scratch! The itching is better by gentle rubbing. Intense itching of genitals may occur. (For this reason, Massimo Mangialavori, MD's helpful mnemonic is: "Scrotum" tiglium.)

Sensation "as if the skin were hide-bound." (Dr. Mangialavori explains that this means the patient's skin is so swollen that it is difficult to move the affected area; the skin has swelled so much, that it feels like it would explode.) Croton tiglium patients may also have a copious watery diarrhea, and they may develop an acute eczema over the whole body.

- **3. Anacardium orientale** Blistering eruptions discharging yellow liquid and forming crusts, which change to wart-like growths. Burning, stinging, and unbearable itching of the skin. Burning sensation changes to an extremely painful itching, combined with pricking, like stings of insects. Warts on palms of hands. Great and urgent desire for stool, but with effort the desire passes away, without an evacuation; rectum seems powerless, with sensation as if plugged up. Irresistible desire to curse and swear.
- 4. Graphites A prominent finding in poison ivy patients needing *Graphites* is that their ruptured blisters ooze a sticky clear fluid. Features may include: swelling of both ears, with moist eruption behind ears, with fissures, scabs, and itching. Moist eczema on face. Itching blotches on various parts of body, from which oozes a watery, sticky, transparent fluid. Nails brittle, crumbling, deformed, painful, and sore, as if ulcerated. Graphites patients may have eyelid eczema (eruption moist and fissured), constipation (with large, knotty stools), and obesity.
- 5. Sulphur Itchy eruptions, which are relieved by scratching-it feels good to scratch. Scratching may also cause burning. The person may feel worse from the heat of the bed. All discharges are acrid and excoriating, wherever they touch. In general, Sulphur patients are warmblooded and feel worse in a warm room. They often have dry, itchy, burning, and scaly skin. People who need Sulphur tend to have hot feet—they often uncover their feet at night. They can be sloppy and untidy, extroverted, and sometimes egotistical. They may desire sweets, spicy foods, and cheese. They tend to have loose stools and diarrhea in the morning.

#### REFERENCES CONSULTED:

- 1. Hering's Guiding Symptoms
  2. Allen's Keynotes and Characteristics
- 3. Nash's Leaders in Homeopathic Therapeutics 4. Kreisberg's Homeopathic Handbook for Poison Ivy and Poison Oak



searched the National Center for Homeopathy's website. A nice summary of acute poison ivy treatment and prevention appeared in the May 2000 issue of *Homeopathy Today*, written by Dr. Timothy Dooley.(2) He included an anecdote about a conventional medical colleague with extreme sensitivity to poison ivy who was treated with homeopathy 40 years earlier—and the colleague never had another poison ivy reaction.

In the same issue of Homeopathy Today was a reproduction of a 1956 article on poison ivy desensitization in the Medical Times by Dr. Elmer Gross of the Department of Dermatology at Temple University School of Medicine, who prescribed a daily dose of Rhus tox 3X for six weeks beginning in March, followed by thrice weekly doses until the end of the poison ivy season.(3) Of 161 patients on this prophylactic regimen, 120 patients had a reduction in the severity and frequency of recurrent poison ivy episodes. Later, I obtained a report on a larger clinical study conducted by Dr. Gross that was published in a 1958 issue of Industrial Medicine and Surgery.(4) In it, he evaluated 455 patients on the same *Rhus tox* 3X regimen, including 177 tree service workers, and found that 77% were either free of poison ivy dermatitis or experienced milder attacks.

Interestingly, Dr. Gross was a conventional dermatologist, not a homeopath. Yet, he used Boericke & Tafel's homeopathic product called Oral Ivy<sup>TM</sup> (*Rhus tox* 3X solution) with good success in preventing poison ivy dermatitis! After more research via Google Books online, I discovered that other conventional dermatologists in the late 1950s also used *Rhus tox* 3X solution to prevent poison ivy with similar success.

In the July/August 2003 issue of the *International Journal of Pharmaceutical Compounding*, I found a clinical study by Michael Stein and Eric Parsons that examined the use of homeopathic *Rhus tox* 6X and 12X solutions for preventing poison ivy dermatitis in 56 patients. A dose was given on day 0, day 7, day 14, and then at monthly intervals from March through September. They reported that 45% of patients had no poison ivy reac-

tion that year, and 48% had fewer or less severe reactions. Also, 96% of patients said they would be willing to use the regimen again.(5)

In speaking with my homeopathic colleagues at the National Center for Homeopathy annual meetings, I learned that many homeopaths already knew how to prevent poison ivy and oak with Rhus tox. Yet, most of my dermatology colleagues did not seem to know about this very helpful clinical tip. That's why I published my article, "Prevention of poison ivy dermatitis with oral homeopathic Rhus toxicodendron," in the Dermatology Online Journal.(1) The article describes the extent of the problem of poison ivy allergies and then offers clinical experiences from the previously mentioned journals, as well as my own clinical experiences using homeopathy to prevent poison ivy dermatitis. In addition to spreading the word about homeopathy for prevention of poison ivy dermatitis, the article could serve as an introduction for newcomers to homeopathic medicine.

#### In the great outdoors again

So, who would benefit most from taking homeopathic Rhus tox to prevent poison ivy? I think it's people who experience severe, recurrent poison ivy, oak, or sumac dermatitis despite their best efforts at prevention—including those who get bouts of poison ivy every summer even while wearing protective clothing and using barrier creams. These folks generally fall into two categories: outdoor workers who can't easily avoid exposure to the plants (firefighters, forest workers, tree service company workers, employees of electric, telephone, and cable services) and outdoor enthusiasts (mountain bikers, hikers, campers, gardeners) who love their activities so much that they won't let itchy blisters curtail their enjoyment.

One of my patients who has benefited greatly from *Rhus tox* prevention is employed as a cellular phone tower technician. He routinely climbs cell towers that are 100 feet or higher, with absolutely no fear of heights! But he does fear the poison ivy and oak that often infest the grounds surrounding cell towers. In the past, he would get severe, recurrent bouts of poi-

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son ivy dermatitis that "drove him crazy" and could only be soothed with shots of systemic steroids to reduce the inflammation and itching. Nowadays, however, a single monthly pellet of homeopathic *Rhus tox* 30c keeps him climbing those cell towers free of blisters! He still occasionally gets a few mildly itchy bumps—but nothing like the severe poison ivy attacks that used to plague him. And he no longer has to be treated with systemic steroids with their attendant side effects—another big advantage.

In fact, I like to think of homeopathic medicine in the prevention of poison ivy rash as a "steroid-sparing" therapy. If we prevent poison ivy dermatitis by offering the *Rhus tox* protocol to those who are most at risk, many people will not have to take systemic steroids!

#### The method

With my patients who are prone to poison ivy rash, I have continued to recommend the protocol suggested by Dr. Torok: one pellet of *Rhus tox* 30c by mouth, once a month from the beginning to the end of poison ivy season, which is March to November in my area of the Midwest. Based on clinical experience, I think the beneficial hypo-sensitization effects of one pellet of *Rhus tox* 30c last only about a month, which is why a dose needs to be taken monthly.

It's worth noting, however, that different potencies and dosing schedules of *Rhus tox* have been recommended in some of the clinical studies mentioned earlier in this article—typically lower potencies, taken more frequently. The homeopathic companies that sell products aimed at preventing poison ivy also offer *Rhus tox* in a lower potency, such as Boericke & Tafel's Oral Ivy™ in a 3X alcohol solution and Washington Homeopathic Product's Be Gone™ Poison Ivy in 4X pills. I do



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not have personal experience using these methods, but many other homeopaths and poison ivy sufferers have found them to work well.

#### A classical perspective

The prevention of poison ivy, oak, and sumac dermatitis by taking oral doses of the homeopathic remedy Rhus toxicodendron is a very simple clinical tip that has helped thousands of people.(1, 4) I don't think Dr. Samuel Hahnemann, the founder of homeopathic medicine, would object to this technique. In fact, in the Organon (6th Edition), Dr. Hahnemann wrote in the footnote of paragraph 33 about his successful administration of the homeopathic remedy Belladonna to prevent children from getting scarlet fever in the terrible epidemic of Koenigslutter. He stated that "...all the children who took a very small dose of Belladonna early enough remained free of this highly contagious childhood disease." So, Hahnemann clearly endorsed the use of homeopathic remedies to prevent diseases in healthy people!

Since the hypo-sensitization effect of a dose of Rhus tox 30c only seems to last for about a month, it is clear that this method of prevention does not cure a person's underlying allergy to poison ivy, however. For this reason, many classical homeopaths would probably start by treating patients like Byron with an individualized homeopathic remedy (i.e., a "chronic" or "constitutional" remedy) before poison ivy season—a remedy that matches the totality of the patient's individualized expression of illness-rather than using the Rhus tox prevention protocol described in this article. The goal would be to greatly reduce the person's susceptibility to poison ivy outbreaks in the future, as well as to heal the person on a much deeper level.

I have heard anecdotal reports from homeopathic colleagues who attest to having reduced or eliminated a person's sensitivity to poison ivy with classical homeopathic prescribing alone. I would

greatly encourage them to gather and publish their successful cases of patients "cured" of their poison ivy sensitivity by homeopathic treatment. It would be most important to demonstrate this to our conventional medical colleagues, because a cure for poison ivy sensitivity has remained elusive in dermatology. As the noted scientific researcher and dermatologist Dr. Anthony Gaspari has said, "Immune tolerance is the holy grail of immunology."(6)

#### **End the misery**

So, if you suffer from recurrent severe bouts of poison ivy dermatitis, you might want to try the Rhus tox protocol described in this article to see if it helps. Let us know if it does! (If you are already under the care of a homeopath, however, please check with them first.) For potentially deeper healing, you will also want to schedule a consultation with a professional homeopath for constitutional treatment. You can go to the National Center for Homeopathy's website to find a homeopathic practitioner near you: www.homeopathycenter.org.

\* The individual's name has been changed to protect patient confidentiality.

#### FOOTNOTES:

FOOTNOTES:
1) Signore RI. Prevention of poison ivy dermatitis with oral homeopathic Rhus toxicodendron. Dermatology Online Journal. 2017: 23 (1), January 2017 (letter). http://escholarship.org/uc/item/3rm4r9hk
2) Dooley, T. Healing and preventing poison ivy/oak. Homeopathy Today. May 2000. www.homeopathycenter.org/homeopathy-to-day/beyond-flat-earth-medicine-healing-and-preventing-poisonivyoak

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3) What ever happened to ... Desensitization to Poison Ivy.

Homeopathy Today. May 2000. http://www.homeopathycenter. org/homeopathy-today/what-ever-happened-desensitization-poi-

4) Gross, ER. An oral antigen preparation in the prevention of poison ivy dermatitis: results in 455 cases of ivy sensitivity. *Industrial Medicine and Surgery*. 1958: 27(3), 142-144. [PMID:13513172] 5) Stein MF, Parsons E. Effectiveness in Oral *Rhus tox* Solution for Poison Ivy Prevention. *Int J Pharm Comp*. 2003:7(4); 273-275. [PMID:23979697]

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6) Gaspari A. National Public Radio Interview, August 14, 2008.
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# **Know your foe!**

Both poison ivy and poison oak grow as vines (twining up and around trees or across the ground) and as bushes. There are different varieties of poison ivy and oak, too, so it's a good idea to become familiar with how they look and where they grow. To see many photos and maps, visit: www.poison-ivy.org. Poison sumac, which is less common, grows as a shrub in wetland areas of the eastern U.S.



**Poison Ivy** 





**Poison Oak** 





**Poison Sumac** 

