

Case Report

Integrated Yoga and Naturopathy Approach for Chronic Urticaria: Impact on Symptom Relief and Quality of Life

Jeyashree Kannan¹, Premalatha Palanimurugan², Pandiaraja Muthupandi³

From, ¹MD Scholar, Department of Naturopathy, ²AMO/Grade 2 Lecturer, Department of Naturopathy, ³HOD, Department of Naturopathy, International Institute of Yoga and Naturopathy Medical Sciences, Chengalpattu-603001.

ABSTRACT

Background: Chronic urticaria is a mast cell-mediated skin condition marked by transient pinkish wheals and itching lasting five to ten minutes. We describe a 20-year-old female with a 10-year history of environmentally triggered itching, burning sensations, and transient allergic wheals. Following a more thorough history, it was determined that the patient had chronic urticaria. **Methods:** In the outpatient section, a 28-day yoga and naturopathy intervention was provided. Following the intervention, the patient's quality of life significantly improved as symptoms and episodes gradually subsided. **Result:** The CU-QOL (Chronic urticaria quality of life questionnaire) and UAS7 (weekly Urticaria Activity Score) showed improvement in scores. The IgE level dramatically dropped. Throughout the course of treatment, no negative side effects were noticed. **Conclusion:** Thus Yoga and naturopathy appears to be associated with reduced symptoms and improved quality of life, although further research is needed to confirm these effects. Therefore, this study can be conducted in the future with a larger sample size and a longer treatment duration.

Key words: Chronic urticaria, Mud application, Aromatherapy, Ear acupuncture, Neem water enema.

Chronic urticaria is the mast cell mediated disturbing allergic skin condition characterized by angioedema, itchy wheals or both (1). They lasts less than 4 hours on an episode but the name chronic is derived if this condition exists longer than 6 weeks in an individual (1, 2). Its prevalence is 1 to 5% in the general population (1). Triggering factors includes physical stimuli such as heat, cold, exercise, sweat, pressure or sunlight and also stress is known to aggravate the condition. IgE autoantibodies against auto-allergens or against the mast cells high-affinity receptor (FcεRIα) are the two main causes of it. The former causes mast cell degranulation, which releases histamines, bradykinin, leukotrienes, and cytokines. This increases vascular permeability, which causes vasodilatation and urticaria symptoms. Upregulation of IL-3 and TNF-alpha expression also found to be involved in chronic urticarial (2).

Detailed history taking indicating wheals characterized by swelling and erythema, itching/burning sensation and skin appearance returning to normal within 1–24 hours aids in diagnosis (3). Elimination and avoiding triggers or the causes constitute the first line of treatment. Other conventional treatments includes anti-histamines, corticosteroids, Cyclosporine, Omalizumab, Leukotriene receptor antagonists (4). Tools such as Urticaria Activity Score (UAS7) and

Chronic Urticaria Quality of Life Questionnaire (CU-Q2oL) used to assess the severity of itching and number of wheals and also the quality of life of an individual with urticaria (5).

Acupuncture modulates immune responses—specifically by inhibiting Th2 cell differentiation to reduce IgE production, thereby reducing the symptoms of urticaria (6, 7, 8). Naturopathy, a drugless system of medicine which includes various therapies like aromatherapy, mud therapy, diet therapy, enema reduces the symptoms of urticaria by exerting its anti-inflammatory and anti-oxidant property and also by reducing the level of histamine (8, 9, 10, 11, 12, 13). Yoga- A mind body therapy works well on this condition by its parasympathetic predominance (14, 15).

CASE REPORT

A 20-year-old female patient reported to the OP Department with the complaint of allergic wheals for the past ten years, which are characterized by burning and itching sensations that continue for five to ten minutes when exposed to environmental stimuli such walking, exercise, and perspiration. The patient's quality of life declined as they struggled to carry out daily tasks. IgE was found to be higher (311.2 Ku/L) and the patient was diagnosed with chronic urticaria based on a thorough history. It disrupted social activity and sleep. Bowel movement was regular and

Access this article online

Received – 10th August 2025
Initial Review – 20th August 2025
Accepted – 13th September 2025

Quick response code



Correspondence to: Dr. K. Jeyashree, Department of Naturopathy, International Institute of Yoga and Naturopathy Medical Sciences, Chengalpattu-603001.

Email: jeyashreedoctor97@gmail.com

micturition of normal frequency with regular menstrual cycle. Appetite and digestion was good.

On initial evaluation, vital signs were within normal limits: heart rate 72 bpm, respiratory rate 15 cpm and Afebrile. The patient measured 167 cm in height, weighed 55 kgs, and had a BMI of 21.4 kg/m².

LOCAL PHYSICAL EXAMINATION:

Sl. NO	PARAMETERS	FINDINGS
1.	Site of lesion	Upper limbs
2.	Character of lesion	Pink to red in colour
3.	Distribution	Asymmetrical
4.	Itching	Present during episodes
5.	Wheals	Present during episodes
6.	Temperature	Slightly raised over the lesions
7.	Edema	Present during episodes
8.	Discharge	Absent
9.	Burning sensation	Present

The primary goal of the treatment plan was to lower IgE, histamine, and other inflammatory mediators, which are the primary causes of allergic skin reactions and itchy skin diseases. Additionally, dietary restrictions are provided.

TREATMENT	DURATION
Ear acupuncture(anti-histamine point) and lung meridian massage	Twice a week
Neem water enema	Once a week
Mud application	Every day
Aroma oil application(lavender oil and tea tree oil)	Every day
Deep relaxation technique	Twice a week
Diet restrictions	28 days

Diet restricted are tomatoes, sea foods (Fishes, prawns, crabs), meat, eggs, citrus fruits (Lemons, Oranges, Grapes), fermented foods, pineapples and papaya.

RESULT



Figure 1: depicting the wheals before the intervention



Figure 2: depicting the decrease on severity of wheals after the intervention

The patient's condition started to progressively get better during the course of treatment. The number of urticaria episodes and the severity of wheals changed significantly after the 28-day intervention. Score improvements were observed on the CU-QOL and UAS7. Throughout the course of treatment, no negative side effects were noticed. The IgE level reduced from 311.2 Ku/L to 99.5Ku/L.

QUESTIONNAIRE	PRE SCORE	POST SCORE
CU-QOL	51	27
UAS7	88	24

DISCUSSION

Ear acupuncture at anti-histamine point reduces the symptoms of urticaria by regulating the imbalance of Th1/Th2 cells by inhibiting the differentiation of Th cells to Th2, thereby reducing the synthesis of IgE and inhibiting the occurrence of allergic reactions (6). Lung meridian is related to moisture and so lung meridian massage is known to decrease the dryness in the body by tonification as dryness of skin is also one of the possible triggers of urticaria (7, 8).

Neem water enema exerts its anti-helminthic effect as parasites also known to be the cause of flaring up of symptoms of chronic urticaria as it is known to disrupt gut-skin axis (9, 10). Mud application reduces the symptoms of urticaria by its anti-inflammatory effect which is known to reduce the inflammatory markers like interleukin I, TNF α and is also known to have anti-oxidant effect by increasing the myeloperoxidase and glutathione peroxidase enzyme activity (11).

Lavender oil application exerts anti-inflammatory effect by its relation to G protein-coupled receptor or interference with the intercellular second messengers involved in occurrence of symptoms of urticaria by activating mast cells and triggering agents (12). Tea tree oil exerts anti-inflammatory and anti-oxidant effect by reducing the production of inflammatory mediators and superoxide by

monocytes (13). Deep relaxation technique regulates the autonomic nervous system by increasing the activation of limbic system causing parasympathetic predominance as stress induced dysautonomia causing depressed parasympathetic activity is one of the main etiology for exacerbation of urticaria symptoms (14, 15).

Diet that are restricted in the treatment protocol tends to stimulate the release of endogenous histamines in general which would flare up the allergic symptoms. So avoidance of those triggering foods decreases the level of histamine and thus decreasing the urticaria symptoms. In general, the binding of allergens to IgE on mast cells triggers the release of histamine which then acts on immature dendritic cells (DCs) holding histamine receptors. As a result, naive CD4(+) T cells polarized toward a TH₂ phenotype which favours IgE production, leading to increased histamine secretion by mast cells, thus creating a positive feedback loop that could contribute to the severity. Decreased histamine because of these dietary restriction breaks the feedback loop thereby decreases IgE level inturn (16, 17).

CONCLUSION

According to the study's findings, an integrative treatment approach that includes yoga, naturopathy, acupuncture, and aromatherapy might effectively reduce the symptoms of chronic urticaria and enhance quality of life. To confirm these findings and demonstrate the long-term viability and effectiveness of yoga and naturopathy in the treatment of chronic urticaria, more studies with bigger sample sizes are necessary.

Patient consent: The patient's signed informed consent was obtained for treatment and publication without revealing the patient's identity.

Guarantor: Corresponding author is guarantor of this article and contents.

Limitations: The findings of this study should be interpreted with caution due to its single-case design and absence of long-term follow-up.

Future directions: This study can be done with larger populations in future with longer duration.

REFERENCE

- Papapostolou N, Xepapadaki P, Katoulis A MM. Comorbidities of Chronic Urticaria: A glimpse into a complex relationship. *Front Allergy*. 2022; 3.
- Hon KL, Leung AKC, Ng WGG LS. Chronic Urticaria: An Overview of Treatment and Recent Patents. *Recent Pat Inflamm Allergy Drug Discov*. 2019; 13(1):27–37.
- Vestergaard C DM. Chronic spontaneous urticaria: latest developments in aetiology, diagnosis and therapy. *Ther Adv Chronic Dis*. 2015; 6(6):304–13.
- Kayiran MA AN. Diagnosis and treatment of urticaria in primary care. *North Clin Istanbul*. 2019; 6(1):93–9.
- Moolani Y, Lynde C SG. Advances in Understanding and Managing Chronic Urticaria. *F1000Res*. 2016;16(5).
- Ding, Xiaojun MB, Huang, *et al.* Effectiveness and safety of ear acupuncture for allergic rhinitis: A protocol of randomized controlled trial. *Med (Baltimore)*. 2021; 100(12).
- Lugović-Mihić L, Bukvić I, Bulat V JI. Factors contributing to chronic urticaria/angioedema and nummular eczema resolution - which findings are crucial? *Acta Clin Croat*. 2019; 58(4):595–603.
- Yong-Cheol Jeon. Treatment for an Adult Patient With Psoriasis with Traditional Korean Medicine, Especially Sa-Am Acupuncture and Herbal Medicine. *J Acupunct Meridian Stud [Internet]*. 2016; 9(2):88–92. Available from: <https://doi.org/10.1016/j.jams.2016.01.008>
- Joshi FP. Krimighna (anthelmintic) role of Neem Oil (medicated oil of *Azadirachta indica* Linn.) and adjuvant Ayurvedic therapies in the management of anal myiasis: A case report. *J Ayurveda Integr Med*. 2022; 13(4).
- Cai R, Zhou C, Tang R, *et al.* Current insights on gut microbiome and chronic urticaria: progress in the pathogenesis and opportunities for novel therapeutic approaches. *Gut Microbes*. 2024; 16(1).
- Murthy Ch, Kumar N, Ratnakumari E RD. Role of Naturopathic Diet and Treatment Modalities in the Successful Management of Psoriasis Vulgaris in an Adolescent Girl: A Case Report. *J Nutr FASTING Heal*. 2022; 10(1):7–10.
- Kajjari S, Joshi RS, Hugar SM, *et al.* The Effects of Lavender Essential Oil and its Clinical Implications in Dentistry: A Review. *Int J Clin Pediatr Dent*. 2022; 15(3):385–8.
- Koh KJ, Pearce AL, Marshman G, *et al.* Tea tree oil reduces histamine-induced skin inflammation. *Br J Dermatol*. 2002; 147(6):1212–7.
- Yang S, Chen L, Zhang H, *et al.* Beyond the itch: the complex interplay of immune, neurological, and psychological factors in chronic urticaria. *J Neuroinflammation*. 2025; 22(1).
- Rahman F. Effect of Deep Relaxation Technique on Cardiac Autonomic Dysfunction in Type 2 Diabetes Mellitus. *J Bangladesh Soc Physiol*. 2018; 13(1):22–8.
- Yulia O Shulpekova, Vladimir M Nechaev, Irina R Popova, *et al.* Food Intolerance: The Role of Histamine. *Nutrients*. 2021; 13(9):3207.
- Hua Xie SHH. Roles of histamine and its receptors in allergic and inflammatory bowel diseases. *World J Gastroenterol*. 2005; 11(19):2851–2857.

How to cite this article: Kannan J, Palanimurugan P, Muthupandi P. Integrated Yoga and Naturopathy Approach for Chronic Urticaria: Impact on Symptom Relief and Quality of Life. *Indian J Integr Med*. 2025; 5(4):261-263.

Funding: None;

Conflicts of Interest: None Stated