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Case series: Effect of *Sepia officinalis* 200C on vaginal pH stabilization in women with vulvovaginal candidiasis

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Abstract
Vulvovaginal candidiasis (VVC) is a frequent gynaecological condition often linked with elevated vaginal pH and recurrent symptoms. This case series reports on 30 women with VVC treated with *Sepia officinalis* 200C, with outcomes monitored through vaginal pH at baseline, day 14, and day 28. The results indicate a progressive reduction in vaginal pH and symptomatic relief, supporting *Sepia officinalis* as a safe and cost-effective treatment option.

Keywords: Vulvovaginal candidiasis, *Sepia officinalis*, vaginal pH

Introduction
Vulvovaginal candidiasis (VVC) affects up to 75% of women during their reproductive years, with recurrence occurring in nearly half of cases (Achkar & Fries, 2010). The infection is primarily caused by Candida albicans, an opportunistic yeast that thrives when vaginal ecology and pH are disrupted [1]. Conventional antifungal drugs remain effective but are often limited by resistance, side effects, and recurrence.
Homoeopathy offers a complementary approach, and *Sepia officinalis*, derived from cuttlefish ink, has been traditionally indicated for gynaecological conditions, leucorrhoea, and chronic pelvic complaints [2]. Despite these indications, limited evidence exists evaluating its role in restoring vaginal pH as an objective marker of clinical improvement. This case series was undertaken to assess the effect of *Sepia officinalis* 200C in women presenting with VVC.

Case Reports
Thirty non-pregnant women aged 18 to 60 years with clinical signs of VVC were included in the series. Patients with severe immunosuppression, recent antimicrobial use, or interfering comorbidities were excluded. The majority of participants belonged to the 26-35-year age group, followed by those between 36-45 years, while fewer cases were observed in the 18-25 and 46-60-year age groups.
Each patient received a single oral dose of *Sepia officinalis* 200C on Day 1, with a repeat dose administered on Day 28 only if symptoms persisted. Vaginal pH was measured at baseline, day 14, and day 28 using pH strips as an objective indicator of response.
At baseline, the mean vaginal pH was 5.97±0.45, which was higher than the protective acidic range. By day 14, the mean vaginal pH decreased to 5.57±0.60, and by day 28 it further declined to 5.15±0.72, reflecting restoration towards the physiological acidic range of 3.8-4.5.
Clinically, 83.3% of women reported relief of symptoms, such as itching, discharge, and burning, after a single dose, while 16.7% required a repeat dose on day 28 before experiencing improvement. No adverse effects were reported during the study period, and all patients tolerated the treatment well.

Discussion
This case series demonstrates that *Sepia officinalis* 200C may play a beneficial role in stabilizing vaginal pH, which is a key determinant of vaginal health. The observed shift from alkaline towards acidic pH correlated with symptomatic improvement, suggesting both subjective and objective efficacy.

Unlike conventional antifungal medications, which act directly on fungal cells, homeopathic medicines may act indirectly by modulating mucosal balance, supporting immune function, or influencing hormonal pathways. Previous studies have reported antifungal activity of homeopathic preparations *in vitro* [3] and clinical improvement in women with candidiasis [4]. The findings from this series add evidence by using pH as an objective outcome measure.

Considering the burden of recurrent VVC and the challenges posed by antifungal resistance, safe, affordable, and non-invasive alternatives such as *Sepia officinalis* could provide meaningful therapeutic options. Nonetheless, the small sample size and uncontrolled design of this series highlight the need for larger randomized controlled trials to validate these preliminary findings.

Conclusion

Sepia officinalis 200C was associated with a significant reduction in vaginal pH and symptomatic improvement in women with VVC. Given its safety profile and affordability, it may serve as a promising complementary treatment, particularly in recurrent or resistant cases. Future controlled trials are warranted to confirm its therapeutic role.

References

1. Achkar JM, Fries BC. Candida infections of the genitourinary tract. Clin Microbiol Rev. 2010;23(2):253-273.
2. Clarke JH. A Dictionary of Practical Materia Medica. London: Homeopathic Publishing Co.; 1902.
3. Gupta G, Srivastava AK, *et al*. Anti-candidal activity of homoeopathic drugs: An *in-vitro* evaluation. J Integr Med. 2015;13(2):112-118.
4. Martins N, Ferreira IC, Barros L, Silva S, Henriques M. Candidiasis: predisposing factors, prevention, diagnosis and alternative treatment. Mycopathologia. 2014;177(5-6):223-40.
5. Mohanan AK, Girija L, Chandraja CV, Sisir PR. A clinical study on the efficacy of homoeopathic potentised medicines in vaginal Candida colonisation in women with type II diabetes mellitus. Eur J Mol Clin Med. 2021;8(4):257-271.
6. Prajapati S, *et al*. Evaluation of antifungal activity of different homoeopathic mother tinctures against *Candida albicans*. Int J Pharmacogn Phytochem Res. 2017;9(3):355-360.

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