

## Short Commentary

# A Case of Atopic Dermatitis That Healed Virtually Completely After A Number of Intradermal Injections with A Non-Specific Antigen Solution

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A 3-year-old boy, who had had an atopic dermatitis since shortly after birth, visited my clinic on October 24, 2012 (Figure 1). I started injecting him with 0.1ml of 10 to the 25 fold-diluted (with saline) Neurotropin, a product of Nippon Pharmaceutical Company, Osaka, Japan, consisting of extract of rabbit skin inflamed with inoculation of Vaccine virus intradermally alternately on both upper arms at 2~3 day intervals. Immediately after I repeated the injection 38 times, the patient scratched his own body and made the skin condition considerably worse. I started using 0.1ml of 10 to the 32 fold-diluted Neurotropin to accommodate the worsened skin condition. After I treated the patient with 111th injection with the more diluted solution, he claimed of a worse itchiness and a more erythematous skin color. Then I started using 0.1ml of 10 to the 36 fold-diluted Neurotropin. After a 20-time repetition of this injection, I started using 0.1ml of 10 to the 39 fold-diluted Neurotropin because his skin condition became worse again presumably due to increase in the patient's sensitivity to the injected antigen. After a 7-time repetition of it, the patient's cheek skin became worse. Then, I started using 0.1ml of 10 to the 44 fold-diluted Neurotropin. After an 83-time repetition of that, his skin condition became worse, again. I started using 0.1ml of 10 to the 47 fold-diluted Neurotropin. After a 38-time repetition of that, his skin condition became worse. I started using 0.1ml of 10 to the 50 fold-diluted Neurotropin. After a 10-time repetition of it, the patient claimed itchiness at his right-side abdomen. I started using 0.1ml of 10 to the 66 fold-diluted Neurotropin. After a 4-time repetition of it, his skin condition became worse.

I started using 0.1ml of 10 to the 69 fold-diluted Neurotro-

pin. After a 31-time repetition, his skin became neither better nor worse. Then, I started using 0.1ml of 10 to the 75-fold diluted Neurotropin.

Currently, he keeps receiving it. At the 226th injection, I changed the injection-site from the upper arm to the navel-edge because the latter has a thicker skin so that the duration-time of the injected solution in the skin becomes longer resulting in a quantitative increase in the synthesis of the non-specific antibody (Figure 2).



Figure 1



Figure 2

In conclusion, his atopic dermatitis has healed virtually completely. The mechanism of action of the above-described treatment has not been explained clearly, yet. However, a hypothetical mechanism has been proposed [1].

## Reference:

1. Okazaki, K (2007) Treatment of Allergic Diseases: Application to Clinical Practice of a New Concept of Mutual Substitutions of Antibody Molecules on the Surface of Mast Cells. Allergy Asthma Clin Immunol 3: 36.