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Kapil Das

Senior Research Fellow
(Homoeo), Regional Research
Institute of Homoeopathy,
Agartala, Tripura, India

Nabanita Debnath

Post Graduate Trainee,
Department of Practice of
Medicine, National Institute of
Homoeopathy, Kolkata,
West Bengal, India

MSR Piraveen

Assistant Medical Officer
(Hom), E.S.I. Hospital,
Thathaneri, Madurai, Tamil
Nādu, India

Homoeopathic treatment of irritant contact dermatitis: Case series

Kapil Das, Nabanita Debnath and MSR Piraveen

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Abstract

Contact dermatitis, an inflammatory skin disorder brought on by external agents, which can be broadly divided into two types: irritant contact dermatitis (ICD) and allergic contact dermatitis (ACD). A case series of four ICD instances were presented here, each of which was effectively treated with individualised homoeopathic medicines, and the outcomes were evident within 1-2 months. In each case, clinical presentation or physical findings (pre & post treatment) were utilised to assess the individual therapeutic response of a homoeopathic medicine, which further clarified the importance of constitutional treatment in homoeopathy.

Keywords: Contact dermatitis, irritant contact dermatitis, homoeopathy, case series

Introduction

Contact dermatitis is a common inflammatory skin condition characterized by erythematous and pruritic skin lesions after contact with a foreign substance. The condition can be categorized into two types as irritant or allergic Contact dermatitis ^[1]. Irritant contact dermatitis (ICD) is most frequently caused by occupational exposure to an industrial or household agent; whereas Allergic contact dermatitis (ACD) is a delayed hypersensitivity reaction to a foreign substance that comes into contact with the skin ^[1, 2].

ICD presents as Burning, pruritus, pain with Surface appearance of dryness, redness and chapping or fissured skin, whereas Pruritus is the dominant symptom in ACD with Surface appearance of Vesicles and bullae. Lesion borders in ICD are Less distinct, whereas ACD constitutes Distinct angles, lines, and borders ^[1, 2].

The management of ICD can be divided into treating the active case and prevention. Topical corticosteroids, soap substitutes, and emollients are widely accepted as the treatment of established contact dermatitis ^[3].

Homoeopathy can play an important role in treating conditions like contact dermatitis as an alternative therapy. Various Homoeopathic drugs like *Sulphur*, *Arsenic Album*, *Graphitis*, *Petroleum* etc can be useful in treating contact dermatitis ^[4].

Case Presentation

Case 1

A 42-year-old male visited the Out Patient Department (OPD) of National Institute of Homoeopathy (NIH) on 10/08/2021 with complaining of burning itching eruption on both hands for 3-4 months. Surface of both hands are dry and scaly. Sensation of burning pain in both hands (Figure 1a & 1b). Pain is < from cold application, night and > by applying hot application on affected parts. Patient was completely better 4 months back, then eruption start to appear on both hand due to continues exposure to cement and dust during his construction work. There was no significant past and family history found.

Patient was restless, cooperative and Anxious regarding his complaints.

His appetite was less. He had desires for sour and coffee with no particular aversion for food. His thirst was very much, but little at a time. His thermal reaction was ambithermic. His stool & urine was regular and clear. His perspiration was moderate and sleep was disturbed & less.

Corresponding Author:

Kapil Das

Senior Research Fellow
(Homoeo), Regional Research
Institute of Homoeopathy,
Agartala, Tripura, India



Fig 1a & 1b: Showing palmar & dorsal aspect of both hands respectively (before treatment).

His built was normal and nutrition was good. Blood Pressure – 128/80 mm Hg, pulse – Regular with 74 bpm, respiratory rate – 18/min and Temperature – 98°F. No other systemic abnormality was found on clinical examination.

The case was diagnosed as ICD based on history and clinical presentation. The diagnosis comes under specific

code, EK02.02 in ICD-11, which depicts of Irritant contact dermatitis due to exposure to acids, alkalis or other specified chemical irritants ^[5].

Case Analysis

Analysis and evaluation were done after detailed case taking and a case totality was constructed. [Table 1]

Table 1: Analysis and evaluation

Characteristic Mental Generals	<ul style="list-style-type: none"> • Restless • Anxious regarding his complaints
Characteristic Physical Generals	<ul style="list-style-type: none"> • Appetite- decreased • Desire- sour, tea, coffee • Disturbed Sleep • Thirst- very much, but little at a time
Characteristic particulars	<ul style="list-style-type: none"> • Burning itching eruption on both hands with burning pain sensation • Surface of both hands are dry and scaly • Pain is < from cold application, at night and > by applying hot application on affected parts

In this case, repertorisation was carried out by the Zomeo computer software, using Kent Repertory ^[10]. After repertorisation, the top ranked medicines were Arsenic (22/10), Sulphur (21/10) and Lachesis (14/9). Repertorial result shown in Figure 1.

Therapeutic Intervention and Follow-Up

Considering the repertorial totality and consultation with Materia Medica, *Arsenic Album* was selected as individualised homoeopathic remedy for this case. Advised

for avoid exposure, maintain regular and healthy diet.

He received initially 3 doses of *Arsenic Album* in OD for 3 days and slight aggravation notice on his skin eruption. Itching and Burning sensation also slightly increased, hence placebo was prescribed in his second prescription (07/09/2021). After which improvement of his presenting symptoms was observed and again placebo was prescribed in his 3rd visit (11/10/2021). At 3 months after treatment his skin eruption was completely cured and Itching & Burning sensation did not notice further (Figure 3a & 3b).

Remedy	Ars	Sulph	Lach	Rhus- t	Phos	Merc	Nat-m	Sep	Lyc	B
Totality	22	21	14	14	13	12	11	11	11	1
Symptoms Covered	10	10	9	7	9	6	7	6	4	;
Kingdom	Minerals	Minerals	Animals, Sarcodes	Plants	Minerals	Minerals	Minerals	Animals, Sarcodes	Plants	Pla
[Kent] [Mind]RESTLESSNESS, NERVOUSNESS: (249)	3	3	2	3	1	3	2	3	3	;
[Kent] [Mind]ANXIETY:Health, about: (33)	1	1	1		2			2		
[Kent] [Stomach]APPETITE:Diminished: (112)	1	1	2	1	1	1	1	1	2	
[Kent] [Stomach]DESIRE:Sour,acids,etc.: (77)	2	2	2	1	2		2	2		
[Kent] [Stomach]DESIRE:Tea: (5)										
[Kent] [Stomach]DESIRE:Coffee: (30)	2	1	1				1			
[Kent] [Sleep]DISTURBED: (42)	2	3				1	1	1		
[Kent] [Stomach]THIRST:Small quantities,for: (20)	3	2	2	2	1				3	
[Kent] [Stomach]THIRST:Unquenchable: (50)	3	2	2	2	3	2	2			
[Kent] [Extremities]ERUPTION:Hand:Itching: (11)					1					
[Kent] [Extremities]ERUPTION:Hand:Scales: (13)						2		2		
[Kent] [Extremities]ERUPTION:Burning: (8)	3			3		3				
[Kent] [Extremities]ITCHING:Burning on scratching: (7)		3	1		1					
[Kent] [Extremities]DRYNESS:Hands: (40)	2	3	1	2	1		2		3	

Fig 2: Repertorial sheet for case 1



Fig 3a & 3b: showing palmar & dorsal aspect of both hands respectively (After treatment).

Case 2

A 50-year-old male visited the OPD of NIH on 16/11/2021 with complaining of skin eruption with violent itching on both hands and feet for 7-8 months. Surface of both hands and feet are dry and unhealthy (Figure 4a & 4b). Sensation of burning with violent itching in both hands and feet, which is > by scratching on affected parts and < by warmth, washing, at night. Patient was better 6 months back, then

eruption appear due to continues exposure to cement and dust during construction work. Patient was already had allopathic mode of treatment initially but his complaints did not resolved completely. Patient also complaining about cramps in both calve along with occasional slight low back pain for 1 month. His mother was suffered from Diabetes Mellitus (DM).



Fig 4a & 4b: Showing palmar hand & dorsal aspect of feet respectively (before treatment).

Patient was forgetful and irritable

His appetite was less. He had no particular aversion for food but has much desire for sweet. His thirst was moderate. His thermal reaction was hot. His stool & urine was regular and clear. His perspiration was moderate and sleep was disturbed & less.

His built was normal and nutrition was good. Blood Pressure – 120/84 mm Hg, pulse – Regular with 78 bpm, respiratory rate – 19/min and Temperature – 98°F.

No other systemic abnormality was found on clinical

examination.

The case was diagnosed as ICD based on history and clinical presentation. The diagnosis comes under specific code, EK02.02 in ICD-11, which depicts of Irritant contact dermatitis due to exposure to acids, alkalis or other specified chemical irritants.⁵

Case Analysis

Analysis and evaluation were done after detailed case taking and a case totality was constructed. [Table 1]

Table 2: Analysis and evaluation

Characteristic Mental Generals	<ul style="list-style-type: none"> • Forgetful • Irritable
Characteristic Physical Generals	<ul style="list-style-type: none"> • Appetite- decreased • Desire- sweet • Sleep- less, light, slightest noise awakens.
Characteristic particulars	<ul style="list-style-type: none"> • Skin eruption with violent itching and burning sensation on both hands and feet • Surface of both hands are very dry and unhealthy. • Complaints > by scratching on affected parts and < by warmth, washing, at night • Cramps in both calves with slight low back pain.

In this case, repertorisation was carried out by the Zomeo computer software, using Kent Repertory ^[10]. After repertorisation, the top ranked medicines were Sulphur (28/11), Lycopodium (22/9) and Rhus tox (20/10). Repertorial result shown in Figure 5.

Therapeutic Intervention and Follow-Up

Considering the repertorial totality and consultation with Materia Medica, *Sulphur* was selected as individualised

homoeopathic remedy for this case.

He received initially a single dose of *Sulphur* 30 in early morning empty stomach. Improvement of his dryness of skin and Skin eruption was observed. Although his other complaints like itching, burning sensation and Cramps in both calves was recured after initial improvement. Hence *Sulphur* 200 in a single dose was prescribed in second visit (14/02/2022). After which improvement of his presenting complaints follows and did not recur further.

Remedy	Sulph	Lyc	Rhus-t	Merc	Phos	Calc	Ars	Sep	Nat-c	Nat
Totality	28	22	20	19	19	19	18	17	16	16
Symptoms Covered	11	9	10	10	9	8	10	8	8	8
Kingdom	Minerals	Plants	Plants	Minerals	Minerals	Minerals	Minerals	Animals, Sarcodes	Minerals	Minerals
[Kent] [Mind]FORGETFUL (SEE MEMORY): (153)	2	3	2	3	3	2	1	1		2
[Kent] [Mind]IRRITABILITY (SEE ANGER): (245)	3	3	3	2	3	3	2	3	3	3
[Kent] [Stomach]DESIRES:Sweets: (36)	3	3	2	1		2	1	2	2	1
[Kent] [Sleep]SLEEPLESSNESS:Noise,from slight: (9)					1					
[Kent] [Extremities]DRYNESS:Hands: (40)	3	3	2		1		2		2	2
[Kent] [Extremities pain]PAIN:Burning:Hand: (74)	3	1	2	1	2	2	2	2	1	1
[Kent] [Extremities pain]PAIN:Burning:Foot: (78)	3	2	1	2	2	2	2	2	2	2
[Kent] [Skin]ERUPTIONS:Itching: (109)	3	2	3	2	2	2	3	3	1	3
[Kent] [Skin]ITCHING:Scratching :Amel: (94)	2		1	1	3	3	1	2	3	
[Kent] [Skin]ERUPTIONS:Itching:Warmth :Agg: (12)	2	2		3						
[Kent] [Skin]ERUPTIONS:Itching:Washing :Agg: (2)	1									
[Kent] [Skin]ERUPTIONS:Itching:Night: (18)			2	3			2			
[Kent] [Extremities]CRAMPS:Calf: (120)	3	3	2	1	2	3	2	2	2	2

Fig 5: Repertorial sheet for case 2



Fig 6a & 6b: Showing palmar hand & dorsal aspect of feet respectively (after treatment).

Case 3

A 37-years-old female visited the OPD of NIH on 25/04/2023 with complaining of itching with swelling and

blackening of right side of fingers since 6 months. Surface of right hand was dry, scaly and fissured. Occasional itching various parts of body when undressing. Complaints gets

aggravate from warmth and wetting. Patient complaints started gradually in the past 6 months likely due to wet work involving various soap and detergents. Allopathic ointment used once in the beginning of complain 6 months back,

without much relief. Past history – she had Chicken pox in childhood and also suffered from Typhoid in 2011. Family history – her mother suffered from DM. Her occupation was housewife and interpersonal relation was good.



Fig 7a & 7b: Lateral & dorsal view respectively showing affected right hand (before treatment).

Patient was irritable, easily angry, sensitive nature and comprehension difficult

His appetite was good, difficult in hunger tolerance and taking water while eating. He had desires for sweet and no particular aversion for any food. His thirst was moderate, more at night. His thermal reaction was Hot. His stool was watery or semisolid and going early morning after waking. His perspiration was moderate and sleep was sound. Her menses was regular, offensive, cycle of 4 days.

His built was normal and nutrition was good. Blood Pressure – 118/70 mm Hg, pulse – Regular with 72 bpm, respiratory rate – 18/min and Temperature – 98°F.

No other systemic abnormality was found on clinical examination.

The case was diagnosed as ICD based on history and clinical presentation. The diagnosis comes under specific code, EK02.00 in ICD-11, which depicts of Irritant contact dermatitis due to wet work ^[5].

Case Analysis

Analysis and evaluation were done after detailed case taking and a case totality was constructed. [Table 1]

Table 3: Analysis and evaluation

Characteristic Mental Generals	<ul style="list-style-type: none"> • Irritable • Oversensitive • Dullness
Characteristic Physical Generals	<ul style="list-style-type: none"> • Desire- sweet • Stool watery in morning
Characteristic particulars	<ul style="list-style-type: none"> • Itching with swelling and blackening of right side of fingers • Complaints gets aggravate from warmth, undressing and wetting

In this case, repertorisation was carried out by the Zomeo computer software, using Kent Repertory ^[10]. After repertorisation, the top ranked medicines were Sulphur (28/11), Lycopodium (22/9) and Rhus tox (20/10). Repertorial result shown in Figure 8.

Therapeutic Intervention and Follow-Up

Considering the repertorial totality and consultation with Materia Medica, *Natrum Sulph* was selected as individualised homoeopathic remedy for this case. Advised for avoid exposure, maintain regular and healthy diet.

He received initially *Natrum Sulph* Q1 in AD for 32 days and Improvement of her presenting complaints was observed. Itching and swelling was completely recovered and no further discharge was notice from the eruption.

Burning sensation and dryness of right hand also improved. Hence NATRUM SULPH Q2 in AD was prescribed in second visit (23/05/2023). Patient was better and her presenting complaints did not recur further.

Case 4

A 46-years-old female visited the OPD of NIH on 04/04/2022 with complaining of Itching with scaling on both upper limbs since 1 year (Figure 10). No discharge with burning sensation in affected parts. Itching and burning sensation was aggravated at night, from water and ameliorated from scratching. She started working in households of many houses 1.5 years back, then gradually with time her complaints have started. She used allopathic ointment twice 3-4 months back without any relief.

Remedy	Sulph	Nat-s	Lyc	Graph	Phos	Nux-v	Lach	Nat-c	Nat-m	Sep
Totality	20	19	17	16	15	14	14	14	14	13
Symptoms Covered	9	9	7	8	8	9	7	7	7	7
Kingdom	Minerals	Minerals	Plants	Minerals	Minerals	Plants	Animals, Sarcodes	Minerals	Minerals	Animals, Sarcodes
[Kent] [Mind]DULLNESS, SLUGGISHNESS, DIFFICULTY OF THINKING AND COMPREHENDING: (178)	3	2	3	3	3	2	3	3	3	3
[Kent] [Mind]IRRITABILITY (SEE ANGER):Morning: (57)	1	2		1	1	1	2		2	1
[Kent] [Mind]SENSITIVE, OVERSENSITIVE (SEE OFFENDED):Music, to: (27)		2	2	2	2	3		3	2	3
[Kent] [Stomach]DESIRES:Sweets: (36)	3		3			1		2	1	2
[Kent] [Stomach]APPETITE:Increased (hunger in general): (171)	3	2	3	3	3	3	2	2	3	2
[Kent] [Stool]WATERY:Morning: (28)	3	3			1	1			1	
[Kent] [Generalities]WARM :Agg: (80)	2	2	2	2	2		2	1	2	
[Kent] [Generalities]COLD :Wet weather agg: (90)	2	3	2	2	1	1	2	2		1
[Kent] [Extremities]SWELLING:Fingers: (53)	2	1	2	2	2	1	1	1		
[Kent] [Extremities]ERUPTION:Fingers: (27)	1			1			2			1
[Kent] [Skin]ITCHING:Undressing agg: (25)		2				1				

Fig 8: Repertorial sheet for case 3**Fig 9a & 9b:** Lateral & dorsal view respectively showing right hand improvement (after treatment).**Fig 10:** showing back of hand up to forearm (before treatment).

Past history – she had ringworm 4 years back and suffered from measles in 2010.

Family history – her father was suffered from HTN and piles.

Mentally patient was mild and desires company.

Her appetite was good. She had desires for sweet, fat meat and warm food. She cannot digest milk. Her thirst was moderate. His thermal reaction was Hot. Her stool was hard, going early morning after waking and occasionally bleeding per rectum notice. She was having burning urination. Her perspiration was moderate and sleep was sound. Her menses was regular, non-offensive, cycle of 5-6 days.

His built was normal and nutrition was good. Blood Pressure – 120/70 mm Hg, pulse – Regular with 74 bpm,

respiratory rate – 18/min and Temperature – 98°F.

No other systemic abnormality was found on clinical examination.

The case was diagnosed as ICD based on history and clinical presentation. The diagnosis comes under specific code, EK02.00 in ICD-11, which depicts of Irritant contact

dermatitis due to wet work [5].

Case Analysis

Analysis and evaluation were done after detailed case taking and a case totality was constructed. [Table 1]

Table 4: Analysis and evaluation

Characteristic Mental Generals	<ul style="list-style-type: none"> Desires company
Characteristic Physical Generals	<ul style="list-style-type: none"> Desire- sweet, fat meat and warm food She cannot digest milk Stool was hard and occasionally bleeding per rectum
Characteristic particulars	<ul style="list-style-type: none"> Intense itching with scaling on both upper limbs Aggravation from water, at night and Amelioration with scratching.

In this case, repertorisation was carried out by the Zomeo computer software, using Kent Repertory [10]. After repertorisation, the top ranked medicines were Sulphur

(20/10), Arsenic (17/10) and Lycopodium (14/6). Repertorial result shown in Figure 11.

Remedy	Sulph	Ars	Lyc	Calc	Phos	Sep	Bry	Kali-c	Nux-v	Nit-ac
Totality	20	17	14	13	13	13	11	11	11	11
Symptoms Covered	10	10	6	6	6	6	6	6	6	5
Kingdom	Minerals	Minerals	Plants	Minerals	Minerals	Animals, Sarcodes	Plants	Minerals	Plants	Minerals
[Kent] [Stomach]DESIRES:Sweets: (36)	3	1	3	2		2	2	2	1	
[Kent] [Skin]ITCHING:Scratching :Amel: (94)	2	1		3	3	2	2	2	1	1
[Kent] [Skin]ERUPTIONS:Itching:Washing :Agg: (2)	1									
[Kent] [Stomach]DESIRES:Warm :Food: (11)		3	2							
[Kent] [Mind]COMPANY:Desire for: (58)		3	3	2	3	2	1	3	2	
[Kent] [Stomach]DESIRES:Fat: (5)	2	1							2	3
[Kent] [Stomach]DESIRES:Meat: (20)	1									
[Kent] [Stomach]DISORDERED:Milk,after: (16)	2	1	2	2		2	2	1		3
[Kent] [Stool]HARD: (164)	3	2	3	3	3	3	3	2	3	3
[Kent] [Extremities]ITCHING:Upper limbs: (162)	3	1	1	1	1	2	1	1	2	1
[Kent] [Extremities]ERUPTION:Upper limbs:Scales: (17)	2	3			2					
[Kent] [Extremities]ITCHING:Upper limbs:Night: (19)	1	1			1					

Fig 11: Repertorial sheet for case 4

Therapeutic Intervention and Follow-Up

Considering the repertorial totality and consultation with Materia Medica, *Sulphur* was selected as individualised homoeopathic remedy for this case. Advised for avoid exposure, maintain regular and healthy diet.

He received initially *Sulphur* Q1 & Q2 in OD for 32 days and Improvement of her presenting complaints was

observed. Itching with scaling on both upper limbs was completely recovered and no further burning sensation was felt by the patient. Dryness of both upper limbs also improved. Hence *Sulphur* Q3 in AD was prescribed in second visit (23/05/2022). Patient was better and her presenting complaints did not recur further (Figure 12).



Fig 12: Showing back of hand up to forearm (after treatment).

Discussion

Four case studies of ICD with positive outcomes are shown here. In reporting these cases, the HOM CASE CARE guidelines^[7] were followed. Case histories and clinical presentations were used to make diagnoses. When prescribing the medicines, reportorial totality was taken into account, as well as consultation with homeopathic materia medica. The improvement was evident within 1-2 months following the initial prescription, which was prescribed according to case totality.

There hasn't been a lot of research done on homeopathic treatment of ICD. Only a few case studies have been found that suggest encouraging results with homeopathic treatment in ICD situations^[8-10].

We treated these four cases on the basis of totality of symptoms. Out of four cases, two were treated with *Sulphur*, while the other two were treated with *Arsenic Album* and *Natrum Sulph* correspondingly.

The cases mentioned here had a variety of symptoms and were treated according to homeopathic principles. These were corroborated by photographic evidence from pre- and post-treatment physical findings. Other comorbid disorders involving both the mental and bodily planes, such as irritation, hunger, flatulence, frequent urges, and burning micturition, were treated with the same individualised medications.

Conclusion

This case series demonstrated that homeopathic medications had a good therapeutic influence in ICD. A case series with only four individuals, however, is insufficient to show the efficacy of homeopathy in ICD, and further controlled trials are required.

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Conflict of Interest

Not available

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Not available

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