

Improved quality of life and reduction of conventional drugs in allergic patients treated with homeopathy

Ferreri R, Bernardini S, Pulcri R, Cracolici F, Rinaldi M, Porciani C

Centre for Integrated Medicine - Pitigliano Hospital, ASL Toscana SudEst, Grosseto, Tuscany Region.

Correspondence: Dr Rosaria Ferreri; tyvvf@tin.it

The Centre for Integrated Medicine in Pitigliano, Tuscany, is an innovative hospital providing homeopathy and acupuncture alongside conventional medical care. This article reports the results of an integrated homeopathic protocol used to treat 430 out-patients with seasonal and perennial respiratory allergies (e.g. rhinitis, oculorhinitis and asthma) from 2011-2014. Effectiveness was evaluated through the Quality of Life SF12 questionnaire, the Edmonton symptom assessment scale, change in consumption of conventional drugs and drop-out rates. When taken together, the results demonstrate that patients with respiratory allergies improve clinically following treatment with this integrated homeopathic protocol.

Introduction

Complementary medicine is not officially recognised by conventional medicine in many Western countries, including Italy. Following an opportunity granted by the Italian Regional Government, the Centre for Integrated Medicine in Pitigliano (Tuscany) was established to provide both in-patients and out-patients with an integrated approach to their healthcare: homeopathy, acupuncture and traditional Chinese medicine are provided alongside conventional medical care for patients with either acute or chronic disorders¹.

During a 4-year period of monitoring service provision, it was noted that almost a third of the patients referred to the Centre presented with allergies as their primary complaint (e.g. asthma, rhinitis or oculorhinitis). In this article, we consider the clinical results of integrated treatments (with a focus on homeopathy) provided for these patients with respiratory allergic complaints.

Purpose of the study

- To assess any changes in the Quality of Life (QoL) of allergic patients treated with an integrated approach (homeopathy specific protocols)
- To evaluate the clinical response of allergic patients to the integrated treatment protocol in terms of improvement of symptoms and reduction of conventional drug usage.

Patients studied

Throughout the four-year observation period (2011-2014), 430 patients with allergies have been treated with homeopathy at the Pitigliano Centre. Patients are mainly referred to the Centre via 'word of mouth' and only 28% of them have some prior knowledge of homeopathy as a complementary medical discipline; only 8% are referred by their family doctor.

The age of patients with allergic complaints seen at the Centre ranged from 3 to 78 years with female patients being slightly more frequent; rhinitis was the most

common respiratory allergic complaint and co-morbidities were present in 41% of all allergic patients seen. Patient demographics are summarised in Table 1.

Table 1. Allergic Patient Demographics

Gender		
	Male	36%
	Female	64%
Age		
	0-12 years	35%
	12-30 years	26%
	30-50 years	17%
	50-70 years	17%
	>70 years	4%
Seasonal allergic syndromes (prevalence for patients 12-30 years)		
	Rhinitis	60%
	Oculorhinitis	40%
	Bronchitis/asthma	20%
Perennial allergic syndromes (prevalence for patients 30-70 years)		
	Rhinitis	35%
	Oculorhinitis	20%
	Bronchitis/Asthma	5%
Comorbidities (present in 41% of all allergic patients)		
	Chronic respiratory syndromes	33%
	Gastrointestinal syndromes	35%
	Dermatological syndromes	14%
	Immunological syndromes (rheumatoid arthritis, thyroiditis, lupus, etc.)	18%

Homeopathic treatment

In the vast majority of cases (95%) integrated homeopathic treatment involved the prescription of a 'magistral' homeopathic medicine (see Box). The treatment approach needed for the allergic patients seen in the Pitigliano Centre tended to involve the dual prescribing of 'therapeutic' remedies (based on the specific pathophysiological symptoms of the allergy) with an additional remedy designed to support the 'totality' of the patient (based on more general symptoms/patient characteristics).

The therapeutic remedies most frequently used in homeopathic magistral were: *Arsenicum album* 9 or 15c; *Poumone Histamine* 30c; *Allium cepa* 9c; *Euphrasia off.* 9c;

Nux vomica 9c; *Blatta orientalis* 9c; *Antimonium tartaricum* 9c; *Ipecac* 9c. The individualized remedies added according to the characteristics of the patient were most commonly *Lycopodium* 30c; *Arsenicum album* 30c; *Silicea* 30c; *Pulsatilla* 30c.

The adoption of an integrated homeopathic magistral prescription satisfied three main requirements of the treatment provided within the Pitigliano context: firstly, creating uniformity and reproducibility of the protocol across patients; secondly, facilitating patient compliance with treatment; and thirdly, reducing the cost of therapy. In fact, using the magistral approach had an average cost of 12-15 Euros per month of treatment, per patient.

Outcome Measures

In order to monitor and assess the effectiveness of the integrated homeopathic treatment approach for allergic patients seen in the Centre, the following data were collected:

1. compliance with treatment, assessed by the number of follow-up appointments within 2 years
2. evaluation of allergic symptoms using the Edmonton symptom assessment scale (ESAS)²
3. Quality of Life questionnaire (SF-12)
4. Changes in conventional drug usage for allergic symptoms.

Results

Clinical compliance with treatment was found to be very high: 89% of patients returned regularly (average of 3 visits per year) with a drop-out rate of 11% after 2 years. Patients who had dropped out of treatment during the observation period were contacted personally by telephone: half of them reported that they had not returned due to experiencing significant improvement, while the other half reported practical obstacles such as the geographical location of the Centre and the lack of public transportation. No patients had discontinued treatment due to adverse side effects.

At first follow-up, after 2 months of treatment, 75% of patients with seasonal respiratory allergies showed a high level of improvement in their symptoms as assessed by ESAS, compared to the beginning of treatment, with many patients experiencing complete resolution of their symptoms; improvements seen were maintained throughout the 2 year follow-up period. Forty five percent of patients with perennial respiratory allergies showed similar levels of sustained improvement in their symptoms.

Improvements in patient-reported QoL at first follow-up, after 2 months of treatment, were also seen. Specific questions within the SF12 questionnaire showed that patients' health perception improved, especially in patients with seasonal allergies: 42% of patients defined their health as 'good' (an increase from 26% at baseline); 30% defined it as 'very good' (19% at baseline); and 15% defined it as 'excellent' (4% at baseline). Moreover, 50% of patients (31% at baseline) felt that they never, or almost never, experienced limited daily activities due to their allergies. The improvements seen in QoL were maintained for 2 years during follow-up.

With respect to reduction of conventional drug usage, by the end of the 2 year follow-up period all patients with seasonal respiratory allergies had reduced their consumption of cortisone, bronchodilators or antihistaminic drugs to zero whilst patients with perennial allergic syndromes reduced their conventional drug usage by 85 to 100%.

Conclusion

The results reported in this article show the effectiveness of an integrated homeopathic treatment approach in patients with respiratory allergic conditions in Italy, with considerable reduction in allergic symptoms, reduced conventional drug use and improved QoL. Compliance with treatment was high and no adverse effects from treatment were reported. The important reduction in patients' allergic symptoms encouraged patients to continue their homeopathic treatment, despite having to pay for travel and medicines. These results, in a specific sub-group of out-patients, confirm our general experience gained from providing an integrated approach to healthcare – that patients benefit clinically from homeopathy and value their treatment.

Magistral: a pharmacological term for a treatment that is prescribed for a particular patient and prepared by adding single remedies one by one. In other words a personalised (or 'bespoke') combination remedy that matches symptoms as well as the patient's constitution and psychological profile as understood by the homeopath.

References

1. Bernardini S, Cracolici F, Ferreri R, Rinaldi M, Pulcri R. Integration between orthodox medicine, homeopathy and acupuncture for inpatients: Three years experience in the first hospital for Integrated Medicine in Italy. *J Tradit Complement Med.* 2015; **5**(4): 234-40
2. Bruera E, Kuehn N, Miller MJ, Selmsler P, Macmillan K. The Edmonton Symptom Assessment System (ESAS): a simple method for the assessment of palliative care patients. *J Palliat Care.* 1991; **7**(2): 6-9.



Find out more about HRI

HRI is an innovative international charity dedicated to promoting high quality scientific research in homeopathy.

To find out more about what we do and how you can help, or to sign up to our mailing list, visit us at www.HRI-research.org

 info@HRI-research.org

 +44 (0)333 344 1660

 Like us

 Follow us