

Keywords: Homeopathy, High dilutions, Repetition, Review, Bibliometric

The clinical experience in the centre of integrated medicine, Pitigliano hospital using magistral homeopathic formulations: results in outpatients affected by chronic diseases and considerations on the chronic care model integrated with homeopathic approach

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This work aims to assess the rationale and the results of an integrated homeopathic protocol applied in the Ambulatory of a public Hospital for the treatment of chronic diseases among 1600 patients: we have classified them by age, sex, kind of chronic diseases and we have considered also the incidence of comorbidities; we have assigned an integrated protocol comprehensive of a magistral homeopathic formulation different for any conditions. Then we have collected the results after a fixed time of observation (different for any kind of disease) using Edmonton scale, SF12, family and work performance evaluations.

Results: Recurrent respiratory syndromes: 85% reduction of the use of conventional therapies (antibiotics, anti-asthmatics, cortisonics); 75% in symptom reduction (at the start and then after 2 months).

- Rheumatic syndromes : reduction of pain (from 55% to 85%); reduction in the use of conventional drugs (after two months 28% less; after 4 months 57% less)
- Tinnitus (reduction of 45% symptoms based upon visual analogic scale)
- Allergic syndromes (75%–100% reduction of symptoms; reduction in the use of conventional therapies: 75% in perennial allergies and 100% reduction in seasonal allergies);
- Chronic pain syndromes (such as headache, migraine, etc.): (reduction of pain from 45% to 84%, depending upon the different pain syndromes).

Our experience confirms the possible role of homeopathy in chronic diseases as longlasting therapy, useful to take into account the full complexity of this kind of patients and to try to discharge, when it is possible, the use of conventional drugs.

Homeopathy and public health: multimorbidity, polypharmacy, antimicrobial resistance, adverse drug reactions and homeopathy

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Multimorbidity and the linked problems of polypharmacy, adverse drug reactions and antimicrobial resistance are among the greatest challenges facing public health in the UK and all developed countries. I have given evidence to the House of Commons Health Committee and to the Commons Science and Technology Committee on these issues. In low income countries infectious diseases remain a major challenge, often linked to antimicrobial resistance. There is growing evidence, particularly from clinical effectiveness studies, that homeopathy has potential to alleviate this crisis.

I will overview the evidence around the incidence, nature, correlates and consequences of multimorbidity. Also the connected issues of antimicrobial resistance, polypharmacy, adverse drug reactions and drug interactions.

I will then review the clinical evidence for homeopathy, focussing on comparative effectiveness research into its potential to reduce consumption of antibiotics and other undesirable treatments. This includes evidence that integrating homeopathy into primary care reduces prescriptions of potentially harmful medication for upper respiratory infections and musculoskeletal conditions with equivalent or greater clinical benefit. Integrating homeopathy is also associated with healthier lifestyles and greater participation in self-care.

I will also review the emerging evidence for homeopathy as an adjunctive treatment in life threatening infectious diseases in developing countries, including malaria and multiple drug resistant TB.

If homeopathy is to realise these opportunities to contribute to public health, a clear and focused strategy is required. Networks and collaboration must be developed; irresponsible and speculative claims must be avoided. Instead we should concentrate on well-established treatment strategies and explore the potential of constitutional treatment in multimorbidity, treating people as individuals with complex health problems, not as multiple diseases each to be treated with different, and often multiple, drugs.

Proving ethics: at the coalface

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