Homoeopathy in iatrogenic disorders

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Emergency is potentially life threatening. Massive increase in their number is posing serious threat to the patients' safety, resulting in mortality outcome.

Homoeopathy can play an important role in the treatment of acute and urgent aspects of illness resulting from mechanical, psychological injuries or other reasons.

Modern experts and common man says, "Homoeopathic medicine in emergency???"

Not at all possible with homoeopathy!!!

It shows their inadequate knowledge in the field of homoeopathic system of medicine.

A scientific clinical research work was done on 2100 cases during a span of 1993–2013, with great success and enthusiastic result on Neurological—Cerebrovascular accident-Hydrocephalus, Status epilepticus (25%), Cardiovascular-Angina pectoris, Myocardial infarction, Congestive heart failure (20%), Respiratory—Status Asthmaticus (10%), Gastrointestinal-Gastro intestinal bleeding (20%), Renal-Acute renal failure, uraemic coma (25%) emergencies when intensive, surgical and transplantation methods were indispensable.

Pathological, radiological, ultra sonological and endoscopic investigations were conducted to identify the internal status of the disease. Script, law of similar remains the same. Application changes, similimum selected after inspection, observation and etiology of disease and administered with correct potency, brings instant relief in majority of cases. Medicines acted like a rescue officer were *Aconite Nap* (1%), *Arnica M* (n = 8%), *Ars Alb* (n = 18%) *Apis Mel* (n = 18%), *Cactus G* (n = 16%), *Helleborus N* (n = 5%), *Opium* (n = 10%), *Phosphorus* (n = 16%), *Plumbum met* (n = 2%), *Spigelia* (n = 6%).

Results were outstanding with ninety percent success in majority of cases whereas uraemic coma and cerebrovascular accident patients were saved with a success rate of sixty percent.

Therefore, accept challenges of emergencies. Nourish the brain with knowledge of disease, materia medica, Organon and apply it intelligently. Minute observation, quick decision, striking at the correct symptom, results will be outstanding.

Keywords: Homoeopathy, Surgery, Clinical research, Emergency

How safe is homeopathy? An analysis of the Posadzki et al. 2012 safety paper and fresh review of the same literature

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Background: When considering the relative value of any medical intervention, safety is of paramount importance, yet until recently there has been limited exploration of the safety of homeopathy. Homeopathic medicines are commonly considered to carry a low risk of causing serious side-effects — a view supported by two systematic reviews (Dantas & Rampes, 2000; Bornhöft & Matthiessen, 2011).

However, in 2012, a systematic review of case reports and case series by Posadzki et al. claimed to have identified 1159 patients who experienced mild-to-severe adverse effects (AEs), caused either directly or indirectly by homeopathic treatment, including four fatalities. This paper attracted criticism not because of its findings that homeopathy could cause harm — this is to be expected of any medical intervention — but because of the poor quality of the paper itself. Multiple flaws including misreporting, inaccuracies and the inclusion of cases which did not involve homeopathy, were discovered.

Methods: In this review we re-analysed all 37 primary articles identified by Posadzki et al. (35 case reports/case series and 2 reports from toxicological call centres) to establish the safety of treatment by a homeopath and use of over-the-counter homeopathic medicines. A precise definition of 'homeopathic medicine' ensured that non-homeopathic cases were excluded. The degree to which a causal link could be established between homeopathic treatment and occurrence of an AE was assessed using the WHO-UMC causality assessment system to allocate cases to one of six clearly defined causality categories: Certain, Probable/Likely, Possible, Unlikely, Conditional/ unclassified, Unassessable/unclassifiable. Cases of direct AEs from homeopathic treatment were considered separately from cases involving indirect AEs due to failure to use appropriate conventional medical care. Whether the homeopathic treatment given/used was consistent with, or deviated from, 'standard homeopathic care' was also considered.

Results: Use of a precise and appropriate methodology resulted in divergent results from those obtained by Posadzki et al. These results will be presented, providing insight into the safety of homeopathic practice and homeopathic medicines.

Keywords: Safety, Adverse effects, Homeopathy