The translation of prover journals to standard homoeopathic formats: accountability and traceability of proving data

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The conduct of homoeopathic provings has enjoyed a recent resurgence within the homoeopathic community. In more recent years, the pressures to conduct methodologically consistent, scientifically accountable homoeopathic provings within the ICH-GCP framework, the dictates of a number of regulatory authorities and the imperatives of homoeopathic philosophy has lead to the development of a range of proving guidelines.

Notwithstanding these positive developments within homoeopathic proving methodology itself, the accountable and traceable translation of subjective prover journal data to materia medica and reportorial formats remains an area of weakness. The author draws on his experience as a proving supervisor and principal investigator in a large number of provings, and his role in the recent development of proving guideline development, to elaborate a unique method for systematically processing prover journal data through the phases of editing, determination of symptom validity, placebo-verum comparison, materia medica compilation, rubric allocation, reportorial classification and grading, and proving reporting and formatting.

The method is transparent, easy to implement and systematic. The most important characteristics of the method are consistency, traceability of all materia medica entries and rubrics to their prover journal source, and the transparency and relative objectivity of scientific decision-making.

Keywords: Homoeopathic provings; Accountability; Traceability; Materia medica; Repertory

Homeopathy and complementary medicine for cancer patients: results of a survey on integrative oncology centres in Europe

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Aims: The principal aim was to map centres across Europe prioritizing those that provide public health services and operating within the national health system in integrative oncology (IO).

Methods: A cross-sectional descriptive survey design was used to collect data. A questionnaire was elaborated concerning integrative oncology therapies to be administered to all the national health system oncology centres or hospitals in each European country. These institutes were identified by convenience sampling, searching on oncology websites and forums.

Results: Information was received from 123 (52.1%) out of the 236 centres contacted until 31, December 2013. Forty-seven out of 99 responding centres meeting inclusion criteria (47.5%) provided integrative oncology treatments, 24 from Italy and 23 from other European countries. The number of patients seen per year was on average 301.2 ± 337 . Among the centres providing these kinds of therapies, 33 (70.2%) use fixed protocols and 35 (74.5%) use systems for the evaluation of results. Thirty-two centres (68.1%) had research in progress or carried out until the deadline of the survey. The CAMs more frequently provided to cancer patients were acupuncture: 26 (55.3%), homeopathy 19 (40.4%), herbal medicine 18 (38.3%), traditional Chinese medicine 17 (36.2%); anthroposophy10 (21.3%); homotoxicology 6 (12.8%); other therapies 30 (63.8%). Treatments are mainly directed to reduce adverse reactions to chemo-radiotherapy (23.9%), in particular nausea and vomiting (13.4%), and leukopenia (5%). The CAMs were also used to reduce pain and fatigue (10.9%), to reduce side effects of iatrogenic menopause (8.8%), to improve anxiety and depression (5.9%), gastrointestinal disorders (5%), sleep disturbances and neuropathy (3.8%).

Conclusions: Mapping of the centres across Europe is an essential step in the process of creating a European network of centres, experts and professionals constantly engaged in the field of integrative oncology, in order to increase the knowledge in this field and provide evidence-based healthcare.

Keywords: Integrative oncology centres, European survey, Homeopathy

Improving cough treatment with a mixed methods approach

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Homeopathic prescriptions are based on a large amount of clinical experience and proving symptoms. The analysis of these data was hitherto mostly qualitative; we know that some symptoms are a good indication for a specific homeopathic medicine, but we don't know how good. Statistical variance is neglected. Some medicines

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