

## Is Homoeopathy a Placebo - A Review

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### Abstract

Integrative medicine (IM) refers to all those treatments that are not part of conventional healthcare. Homeopathy is a system of IM that was developed in Europe at the end of the eighteenth century employing medicines prepared according to a well-defined procedure starting from mineral, herbal or animal substances. Homeopathic remedies are substances prescribed in extremely low doses (or high dilutions/dynamizations, also known as “potencies”) to treat the same specific syndromes they are known to cause in overdose, by mimicking and augmenting the patient’s immune response and natural defences

Moreover, observational data from real-life homeopathic practice are becoming increasingly useful to evaluate the role of this type of IM in treating a wide range of chronic and acute diseases. These results should not be underestimated, also because any gain in health offered by homeopathic medicine, alone or in combination with standard medicine, could be considered of value to the healthcare system in managing the yearly seasonal epidemics that cause RTIs each winter. During the observation period, patients treated with the homeopathic medicine had a lower number of respiratory tract infection episodes than untreated patients.

Despite its controversial nature, clinical use of homeopathy has risen steadily in recent years, encouraged by the fact that some of its mechanisms of action have been elucidated and described in randomized controlled trials, meta-analyses or systematic reviews [1-2].

### Introduction

According to the 2012 National Health Interview Survey (NHIS) approximately 5 million adults and 1 million children in the United States used homeopathy in 2011[3]. According to the 2014 Italian National Institute of Statistics (ISTAT)

survey, homeopathic products have been used by approximately 2.5 million people in Italy in the years 2010–2013 and they have been prescribed by over 20,000 physicians [4]. Another debated point in homeopathy is its lack of prescribing standards, as a result of which treatments can be highly individualised for a broad variety of symptoms.

Amalgamation of studies found that untreated patients who had a mean of 4–5 episodes of exacerbation the year before the study maintained a mean of 2 or less episodes of exacerbation during a subsequent 10-year follow-up without any preventive treatment. It should be pointed out that the values of 4–5 episodes of exacerbation were observed when the patients did not attend the medical consulting while during the study the observed patients had various concomitant pathologies and concomitant pharmacological treatments which were adjusted by the practitioner - for each individual clinical case of both groups - as a function of the patient's short and long-term medical history. Thus the reduction in the number of infections also among patients in the control group can be accounted for by various factors such as the optimisation of the background therapy. The reduction in the mean number of RTI episodes during the observation period versus the mean number of RTI episodes in the year before inclusion in the study was statistically higher in the group of patients treated with the homeopathic medicine than in the untreated group. Both these observations indicate a possible preventive effect of the homeopathic medicine on the onset and development of RTIs. Importantly, the greater reduction in RTI episodes for the treated group during the overall treatment, compared to patients belonging to the untreated group, was evident irrespective of gender, smoking habits, or the profile of concomitant respiratory diseases. [5-10].