

A Comparative Study on the Effectiveness of Fifty Millesimal Potency and Centesimal Potency of Homoeopathic Medicines in the Management of Chronic Diseases

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Abstract

Homoeopathy is a system of medicine that considers the sick in a holistic way during the course of treatment. Unlike the classification of diseases based on the particular time duration, Hahnemann had his own way of classification of diseases as acute and chronic. As per his observation, he found that few diseases could not find cure even after application of a suitable homoeopathic remedy and also were repeatedly having a tendency to relapse in future. This made him realise about miasms and also later about bringing modifications in the posology keeping in view the need to prevent unwanted aggravation after administering Homoeopathic medicines and also to cut short the time period required to bring about cure. This led to the discovery of a new method of dynamization and this study is an attempt to have a comparative study on the efficacy of fifty millesimal potency and centesimal potency of Homoeopathic in the management of chronic diseases.

Keywords: Comparative study, fifty millesimal, LM potency, Homoeopathic medicines, Centesimal potency, chronic diseases

1. Introduction

Homoeopathy is a system that has survived through the ages due to its unshakable laws on which it is based upon and which has been verified at every step by the most proficient person, Dr. Samuel Hahnemann, who out of sheer dissatisfaction from the brutal practices and mere materialistic view, had turned to a holistic and dynamic approach for treating the suffering mankind with a humane touch. He discovered this system with immense patience and knowledge and with a burning desire to end the mediocre practices and to attain the most ultimate of healing, the cure. His aim was to motivate people, to stop believing in the end products of disease and think, in a deeper aspect to prevent health from deranging by those things that seem to derange the life force invisibly and makes the man sick. Through the literary work, the Organon of Medicine, he laid down the principles of practicing Homoeopathy and this work had undergone various changes through its different editions up to our master came up to his last edition – the sixth edition of Organon of Medicine. In Homoeopathy, the diseases are treated based on the law of similar and the medicines are administered in single, simple and minimum doses. Hahnemann was the one who introduced the Centesimal scale of potency, which he used throughout his practice and but had its own aggravations at times and limitation in repetition of dose, took long time for the process of cure.

By the passage of time, through his medical practice in Homoeopathy, Dr. Hahnemann found that there was a need to reduce the intensity of aggravation as well as to cut short the time required to effect the cure while treating diseases for which he experimented on Potentisation, which gave rise to a method which he mentioned as “the most perfect method”. The method is said to be the most perfect because the drug prepared is most powerful as the drug substance is reduced to infinitesimal but even with highest and enhanced quality, it is mildest in action. But before Hahnemann could reveal this new concept of dynamization and treatment of diseases to the world, he passed away and this treasure remained hidden nearly for 80 years and was also twice under the threat of being lost due to World War and thus remained unknown until the publication of the VIth edition of Organon in 1921. This new method was introduced in the 6th edition of Organon of Medicine which is the Posthumous edition and was further named as 50 millesimal potencies by Pierre Schmidt. Since the ancient time there has been attempts to make the patient get relieved in a fastest and safest manner which is evident from the second aphorism of Organon of medicine. Here, this study is taken up to illustrate and compare the effectiveness of 50 millesimal potency and centesimal potency of homeopathic medicines in the management of chronic diseases.

2. Materials and Methods

This study is undertaken to compare the effectiveness of 50 millesimal potency and centesimal potency of Homoeopathic medicines in the management of chronic diseases.

Research design

This is a hospital based prospective study.

Sample size:

- A total of 40 patients were taken i.e, 20 LM (Group A) and 20 CM (Group B), for the study by Random Sampling Method.
- All cases were selected according to inclusion criteria and exclusion criteria.

Source of the data:

This study is conducted on the patients who attended the Out-patient Department and in-patient departments of Dr. Allu Ramalingaiah Government Homoeopathic Medical College and Hospital, Rajamahendravaram, during the period of 2020-2022.

Inclusion criteria

1. Patients belonging to the age group 15 – 65 years of both sexes, with symptoms persisting for more than 3 weeks.

Exclusion criteria

1. Patients presenting with complications.
2. Patients with congenital disorders.

Assessment criteria

The outcomes of the study are assessed by the self-made measurement tool based on the

1. Intensity of symptoms
2. Frequency of recurrence of symptoms.
3. Change in generals Total score before treatment and after treatment is compared and the outcome is calculated.

SELF ASSESSMENT SCORE CHART

Intensity of symptoms of the Chief complaint	Score	Before treatment	After treatment
No symptoms	0		
Very mild symptoms	1		
Mild/ slight symptoms	2		
Moderate symptoms	3		
Severe symptoms	4		
Symptoms as bad as it could be	5		
Recurrence of symptoms	Score		
No Recurrence	0		
Recurred once	1		
Recurred twice	2		
Recurred thrice	3		
Recurred 4 times	4		
Recurred more than 4 times	5		
Generals	Score		
No change in generals	0		
Slight change in generals	1		
Improved generals	2		

Total Score	Before Treatment	After Treatment

Follow up's

- All of the patients were reviewed, on a fortnightly/monthly basis to assess the subjective and objective changes.
- All the cases were reviewed as per the necessity of the case.
- During the follow up each case was evaluated according to the follow up criteria.

Results

The study was conducted on 40 patients who attended the Out department/ In patient department of Dr. Allu Ramalingaiah Government Homoeopathic Medical College and hospital, Rajamahendravaram, Andhra Pradesh. The cases were selected on basis of random sampling method. The data collected from these patients were subjected to statistical analysis. Interpretation of the study, objections and result of this analysis were presented in the form of tables and diagrams. Based on the data collected from the cases included in the study, results are represented as diagrams, graphs and tables. The statistical analysis is done using Paired-t test for analysing the outcomes before and after treatment. Yet another test named Student-t test is used to compare the results of the treatment done with Homoeopathic medicines belonging 50 millesimal potencies in one group against the treatment done with Centesimal

potency in another group, both with an equal sample size. The groups are named as Group A and Group B respectively.

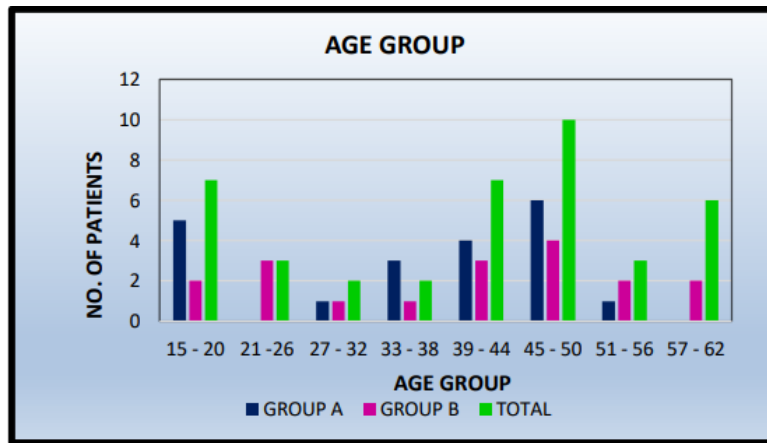
The data obtained can be group into two different sections.

1. Demographic data

- Age
- Gender
- Occupation

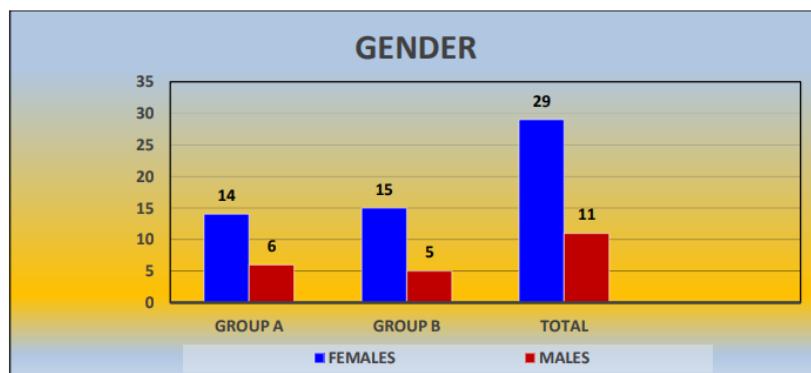
2. Clinical data

- Miasm
- Potency
- Remedy used
- Disease diagnosis



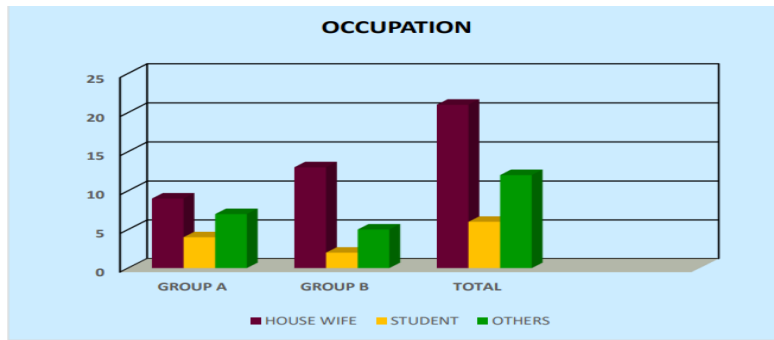
Graph 1: Distribution of patients according to age

Out of 40 cases studied, 7 patients (17.5%) belong to the age group 15-20 years, 3 patients (7.5%) belongs to the age group 21-26 years, 2 patients (5%) belongs to the age group 27-32 years, 4 patients (10%) belong to the age group 33-38 years, 7 patients (17.5%) belongs to the age group 39-44 years, 10 patients (25%) belongs to the age group 45-50 years, 4 patients (10%) belongs to the age group 51-56 years, 3 patients (7.5%) belongs to the age group 57-62.



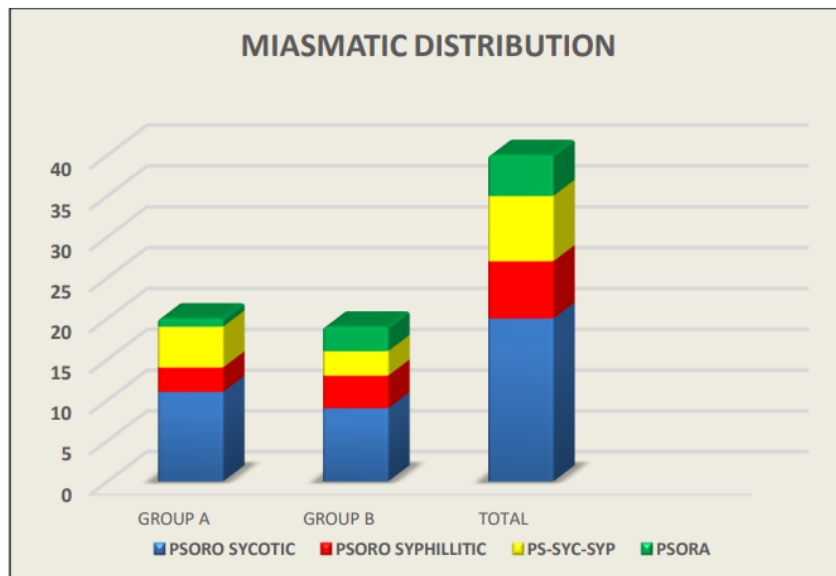
Graph 2: Graphical representation of patients according to gender

Out of 40 cases, 29 patients (72.5%) were females and 11 patients (27.5%) were males.



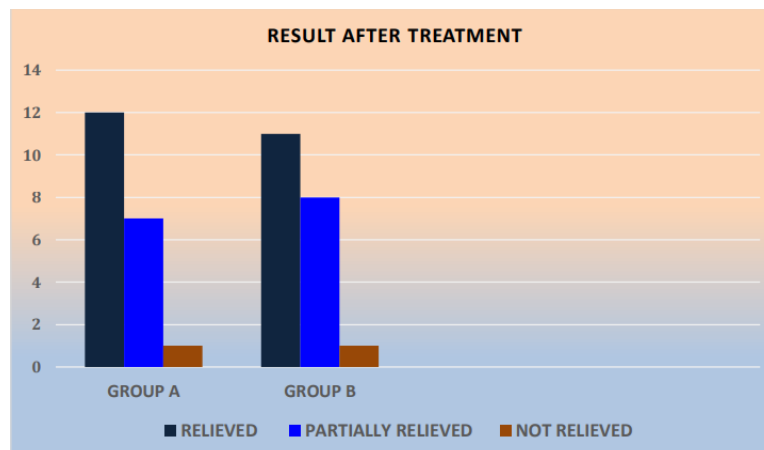
Graph 3: Distribution of patients according to occupation

Out of 40 cases studied, 22 patients (55%) are house makers, 6 patients (15%) are students, 12 patients (30%) are from other occupation.



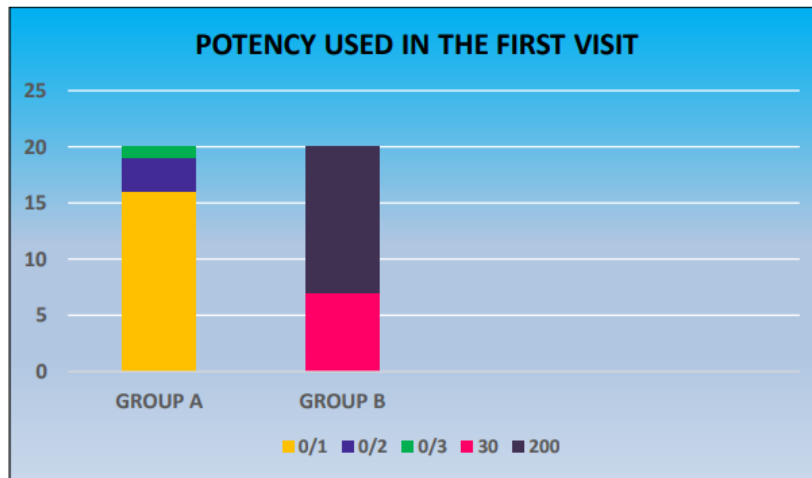
Graph 4: Distribution of patients according to miasm

Out of 40 patients, 20 patients (50%) belonged to psoro sycotic miasm, 7 patients (17.5%) belonged to psoro syphilitic miasm, 8 patients (20%) belonged to psoro syphilitic miasm, 5 patients (12.5%) belonged to psoric miasm



Graph 5: Distribution of patients according to result after treatment

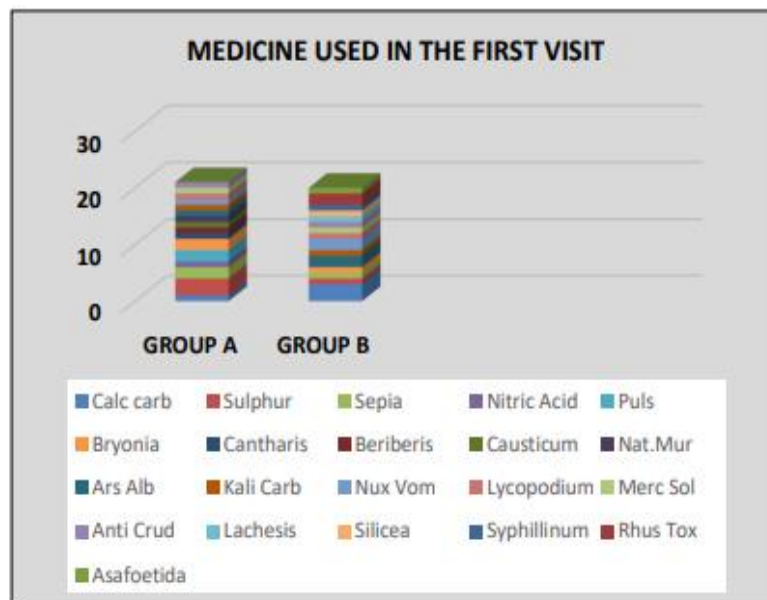
Out of 40 patients, 23(57.5%) were relieved, 15 patients (37.5) were partially relieved and 2 patients (5%) were not relieved.



Graph 6 - Distribution of patients according to Potency used in the first visit

GROUP A – Out of 20 patients, 0/1 potency was used for 16 patients (80%) were 0/2 was given to 3 patients (15%) and 0/3 potency was used for 1 patient (5%).

GROUP B – Out of 20 patients, 30th potency was used for 7 patients (35%), and 200 potency was used for 13 patients (65%).

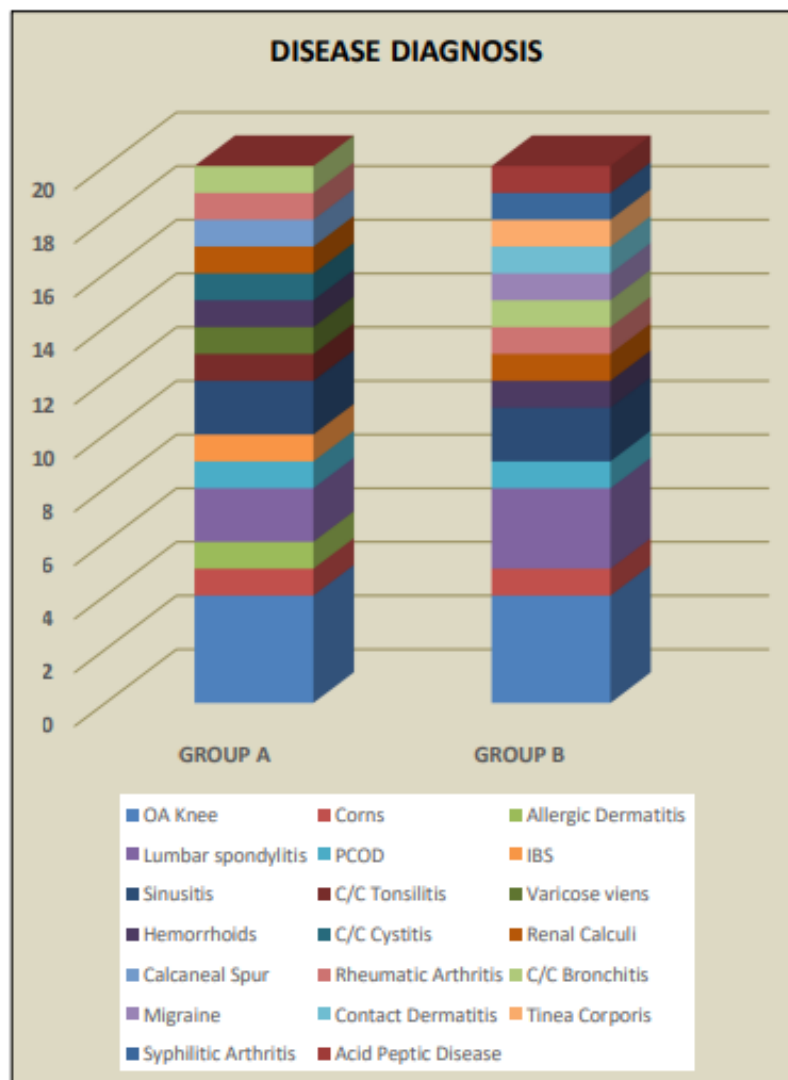


Graph 7 - Distribution of patients according to Medicine used in the first visit

GROUP A - Out of 20 patients, Calc Carb was given to 1 patient, Sulphur was given to 3 patients, Sepia was given to 2 patients was given to Nitric acid , Pulsatilla was given to 2 patients, Bryonia was given to 2 patients, Cantharis was given to 1 patient, Berberis was given to 1 patient, Causticum was given to 1 patient, Nat. Mur was given to 1 patient, Ars Alb was given to 1 patient, Kali Carb was given to 1

patient, NuxVom was given to 1 patient, Lycopodium was given to 1 patient, Merc Sol was given to 1 patient, Anti-Crud was given to 1 patient.

GROUP B - Out of 20 patients, Calc Carb was given to 3 patients, Sulphur was given to 1 patient, Sepia was given to 1 patient., Bryonia was given to 1 patient, , Ars Alb was given to 2 patients, Kali Carb was given to 1 patient, Nux Vom was given to 2 patients, Lycopodium was given to 1 patient, Merc Sol was given to 1 patient, Anti-Crud was given to 1 patient, Lachesis was given to 1patient, Silicea was given to 1 patient, Syphillinum was given to 1 patient, Rhus Tox to 2 patients, Asafoetida was given to one patient.



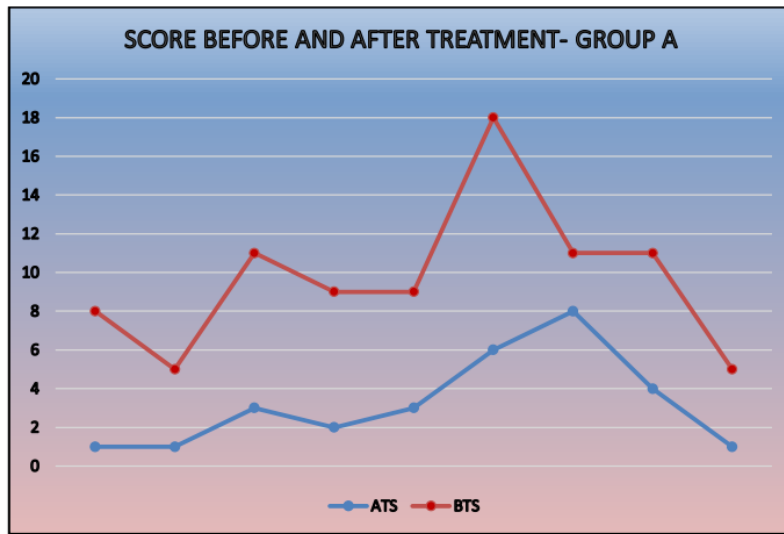
Graph 8 Distribution according to disease diagnosis

GROUP A – Out of 20 cases, 4 patients had OA Knee, 1 patient had Corns, 1 patient had Allergic dermatitis, 2 patients had Lumbar spondylosis, 1 patient had PCOD,1 patient had IBS,2 patients had Sinusitis, 1 patient had C/C Tonsilitis, 1 patient had Varicose vein, 1 patient had Haemorrhoids , 1 patient had C/C Cystitis, 1 patient had Renal calculi, 1 patient had Calcaneal spur, 1 patient had , 1 patient had Rheumatic arthritis, 1 patient had C/C Bronchitis.

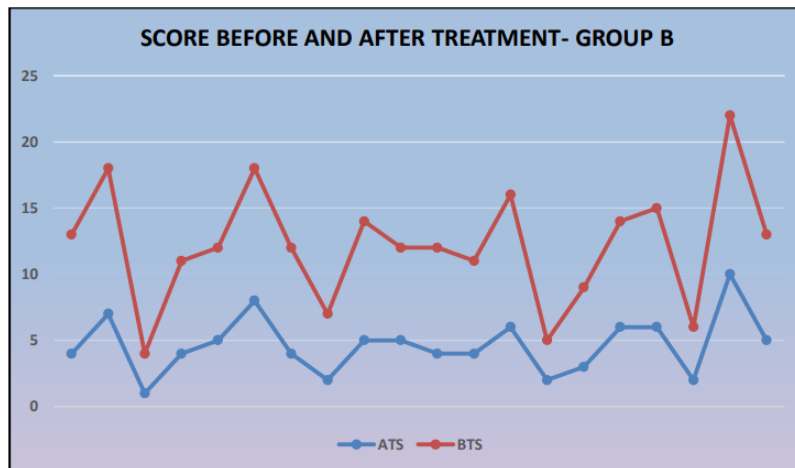
GROUP B - Out of 20 cases, 4 patients had OA Knee, 1 patient had Corns, 3 patients had Lumbar spondylosis, 1 patient had PCOD, 1 patient had IBS, 2 patients had Sinusitis, , 1 patient had Haemorrhoids , 1 patient had C/C Cystitis, 1 patient had Renal calculi, 1 patient had Rheumatic arthritis, 1 patient had C/C Bronchitis, 1 patient had Migraine, 1 patient had Contact dermatitis, 1 patient had Tinea corporis, 1 patient had Syphilitic arthritis and 1 patient had Acid peptic disease.

Statistical analysis

This study has two groups, Group A and Group B, each with a sample size of 20 patients. Data of the patient before treatment and after treatment is collected. Hence Paired ‘t’ test and Student ‘t’ test is used for statistically analysing the data.



Graph 9: Graphical representation of scores before and after treatment in Group A



Graph 10: Graphical representation of scores before and after treatment in Group B

Since Paired t value $|t_{19}| > 2.093$, the test is statistically significant at 5% level. In addition, Paired t value is even more than 1% level. That means the test is highly significant even at 1% level. Hence null hypothesis is rejected and alternate hypothesis is accepted i.e., there is significant improvement in signs and symptoms as measured by total score before and after treatment in chronic diseases with Homoeopathic medicines under CM Potency.

Since the student 't' test value $|t_{38}| > 2.021$, this test statistically significant at 5% level. In addition, the 't' value is even more than 1% level. That means the test is highly significant even at 1% level. Hence null hypothesis is rejected and alternate hypothesis is accepted i.e., there is significant improvement in signs and symptoms as measured by total score before and after treatment in chronic diseases with Homoeopathic medicines of LM Potency compared to the Homoeopathic medicines of CM potency.

Discussion

Out of 40 patients, 20 patients (50%) belonged to psoro sycotic miasm, 7 patients (17.5%) belonged to psoro syphilitic miasm, 8 patients (20%) belonged to psoro syphilitic miasm, 5 patients (12.5%) belonged to psoric miasm.

In Group A, 12 cases were relieved, 7 cases were partially relieved and 1 case was not relieved. In Group B, 11 cases were relieved, 9 cases were partially relieved and 1 case was not relieved.

According to the potency given to patient in first visit, in Group A, out of 20 patients, 0/1 potency was used for 16 patients (80%) were 0/2 was given to 3 patients (15%) and 0/3 potency was used in 1 patient (5%) In Group B, out of 20 patients, 30th potency was used for 7 patients (35%), and for 200th potency was used for 13 patients (65%).

According to the medicine given in first visit to the patient, in Group A, out of 20 patients, Calc Carb was given to 1 patient, Sulphur was given to 3 patients, Sepia was given to 2 patients was given to Nitric acid, Pulsatilla was given to 2 patients, Bryonia was given to 2 patients, Cantharis was given to 1 patient, Berberis was given to 1 patient, Causticum was given to 1 patient, Nat. Mur was given to 1 patient, Ars Alb was given to 1 patient, Kali Carb was given to 1 patient, NuxVom was given to 1 patient, Lycopodium was given to 1 patient, Merc Sol was given to 1 patient, Anti-Crud was given to 1 patient.

In Group B, out of 20 patients, Calc Carb was given to 3 patients, Sulphur was given to 1 patient, Sepia was given to 1 patient., Bryonia was given to 1 patient, , Ars Alb was given to 2 patients, Kali Carb was given to 1 patient, Nux Vom was given to 2 patients, Lycopodium was given to 1 patient, Merc Sol was given to 1 patient, Anti-Crud was given to 1 patient, Lachesis was given to 1 patient, Silicea was given to 1 patient, Syphillinum was given to 1 patient, Rhus Tox to 2 patients, Asafoetida was given to one patient.

According to the disease diagnosis, in Group A, of 20 cases, 4 patients had Osteoarthritis Knee, 1 patient had Corns, 1 patient had Allergic dermatitis, 2 patients had Lumbar spondylosis, 1 patient had PCOD, 1 patient had IBS, 2 patients had Sinusitis, 1 patient had C/C Tonsilitis, 1 patient had Varicose vein, 1 patient had Haemorrhoids, 1 patient had C/C Cystitis, 1 patient had Renal calculi, 1 patient had Calcaneal spur, 1 patient had, 1 patient had Rheumatic arthritis, 1 patient had C/C Bronchitis.

In Group B, out of 20 cases, 4 patients had OA Knee, 1 patient had Corns, 3 patients had Lumbar spondylosis, 1 patient had PCOD, 1 patient had IBS, 2 patients had Sinusitis, 1 patient had Haemorrhoids, 1 patient had C/C Cystitis, 1 patient had Renal calculi, 1 patient had Rheumatic arthritis, 1 patient had

C/C Bronchitis, 1 patient had Migraine, 1 patient had Contact dermatitis, 1 patient had Tinea corporis, 1 patient had Syphilitic arthritis and 1 patient had Acid peptic disease.

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