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Inter-rater reliability in homeopathic repertorisation and remedy selection

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Question: Whether different homeopaths performing a repertorisation and selecting a remedy for one and the same patient would come to analogous conclusions, and whether a respective research protocol can be standardized.

Methods: Homeopathic repertorisation, i.e. the technique of finding a suitable homeopathic remedy, starts with observing a patient's symptoms. These symptoms are then compared with existing databases which were compiled by testing a remedy for its effects on healthy subjects (remedy proving). By matching the symptoms of their patient with the symptoms reported to have been provoked in healthy subjects homeopaths are able to narrow down the number of candidate remedies (a) to a few or, in the ideal case, (b) to the one best fitting remedy (the similimum). The outcome is influenced by the therapist's experience and the quality of the databases used. The purpose of this study was to determine whether or to what degree different persons performing a repertorisation for one and the same patient come to analogous conclusions.

Homeopathy students were asked to study video-documented case-takings. As a rule 8 students each studied 5 case-takings. Each student independently (a) performed his or her own repertorisation to narrow down the number of candidate remedies and (b) finally selected one single remedy. A computer-assisted repertory (Radar) comprising 4497 possible remedies was used. Inter-rater reliability was expressed in terms of Cohen's kappa (0 = no agreement, 1 = full agreement).

Results:

(A) In each of the 5 cases a list of the 10 highest-ranking remedies was generated from the students' repertorisations. The first-ranking remedy was selected

on average by 70% of the students, the second by 57%, 3rd: 45%, 4th: 31%, 5th: 28%, 6th: 22%, 7th: 22%, 8th: 19%, 9th: 15%, 10th: 13% (selection of more than one remedy was permitted). Cohen's kappa for the students' inter-rater reliability was 0.33/0.24/0.43/0.33/0.22, giving an arithmetic mean of 0.309.

(B) When students were asked to select a single remedy for each of the 5 cases the first-ranking remedy was selected by 48%, 2nd: 35%, 3rd: 7%, 4th: 7%, 5th: 2%, 6thff: 0% (selection of only one remedy permitted). Inter-rater reliability was 0.21/0.24/0.43/0.38/0.31, giving a mean of 0.312.

Conclusion: The experimental design presented here should be further investigated by experienced homeopaths.

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