

Predictability of responses over time to administration of a homeopathic remedy

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Objective

To examine the *predictability* of initial aggravation to administration of a homeopathic remedy.

Introduction

Predictability of response is an important criterion in assessing the merits of a therapeutic method. In homeopathy this issue has mostly been addressed in single-case studies. The present study is based on a systematisation introduced by Candegabe and Carrara (1999) with the intent of determining the patient's response disposition in advance in order to optimise the process of finding a remedy.

Methods

This observational application study from the current practice of a homeopath (C.W.) comprised 12 patients recruited on the basis of inclusion and exclusion criteria. The procedure was as follows: case-taking, repertorisation, cross-review with a materia medica, remedy administration and then: a) a prognosis by the therapist of the most probable initial response and three days later b) an in-depth interview with the patient in the course of which any aggravation or amelioration and occurrence of any new symptoms were documented. The outcome analysed was the degree of concurrence between the prognosis (a) and the patient's actual response (b). A detailed record of patients' responses is provided in Müller-Traut et al., ECIM 2013.

Results

In regard to an initial aggravation the prognosis was that there would be a *short* (1-3 days) initial aggravation in 5 cases and one of *longer* duration (3-5 days) in 7 cases. In 3 of 5 cases the prognosis of a short initial aggravation was matched by the response, while the other two showed prolonged or no aggravation, respectively. The prognosis of prolonged initial aggravation was matched in 4 of 7 cases, the remainder being one short, one indeterminate and no initial aggravation, respectively. The prognosis was thus matched in 7 out of 12 cases (58.3%).

Conclusion

The concurrence found between the therapist's prognosis and the patient's actual response is of scientific interest in that it can contribute to explaining the phenomenon of initial aggravation. On the other hand, it is of interest for the therapist to assess patient response, a condition for the administration of homeopathic medicine re mode of preparation, potency and sequence. This pilot study is of interest in both respects, and its results deserve validation on the basis of larger patient numbers. A further promising line of inquiry would be to determine correlations between prognosticated and actual responses when treatment is given according to other schools of homeopathy.