

# HOMEOPATHIC THERAPY FOR CHRONIC SINUSITIS

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**Abstract:** *The study aims to evaluate the outcome of homeopathic therapy in adult patients suffering from chronic sinusitis (at least three months). The research method was subgroup analysis including all patients with chronic sinusitis presented in the outpatient clinic for homeopathic therapy. The patients were registered in the study consecutively and the scales of complaints' severity, health-related quality of life and use of other therapies were regularly recorded, with a 2 years follow-up analyzed in this paper. The study included 34 adults (mean age 37.2, 75.2% women), with sinusitis symptoms for at least 3 months. The effect size (effect divided by standard deviation at baseline) was for sinusitis 1.55 at three months, 2.10 at one year and 2.39 at two years. The quality of life improved as well, with final SF-36 changes in physical component score 0.41 and final mental component score 0.62. The study showed relevant improvement of sinusitis, general physical and mental status of the patient. Further studies and a longer follow-up of the patients in this study are requested to establish if the improvement is due to life-style changes, placebo effect, other context effects or the homeopathic therapy.*

**Key words:** *chronic sinusitis, homeopathy.*

## 1. Introduction

Chronic sinusitis is an inflammation of the nasal and paranasal sinuses mucosa persisting for at least 12 weeks. This inflammation causes nasal obstruction, with congestion, mucous or muco-purulent discharge, facial pain or pressing sensation, with or without impaired smell. The main factors incriminated to lead to this condition are insufficient ciliar motility, allergic background, bacterial infection, morphological anomalies (nasal septum deviation, turbinate hypertrophy), and immune deficiencies.

Classic medical treatment uses corticosteroids [2], [6], [7], other

antiinflammatory agents, antibiotics [2], [8] and the treatment of the favouring factors. Surgical therapy is proved to be as effective as the medical therapy but it should be applied only if medical therapy does not succeed. Some complementary and alternative medical (CAM) therapies might be helpful as adjuvants [4].

Homeopathy is a holistic therapy, used especially in the well developed countries, where it is the most popular form of CAM treatment.[1,5,9] The main principle on which homeopathy is based is "like cures like", that leading to prescribing different remedies in different patients with the same main complaint, but other concomitant symptoms. Homeopathic

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remedies are under constant debate because of their production protocol: alternating steps of dilution and succussion (agitating) a starting substance, process named potentiation. After several repetitions dilutions beyond Avogadro's number are obtained, the probability that a single molecule of the starting substance to be in the remedy dose approaching zero. These high potencies, although the most active clinically, are subject of incessant scientific controversy. It seems that the inconsistent results seen in meta-analyses of placebo-controlled trials pooling a great variety of diseases, ailments and conditions are a result of trial selection. The rapidly increasing numbers of homeopathy patients in Europe and other continents come in statistical contradiction to mainstream studies that denied its benefits. While in 1970 just under 25% of the patients used homeopathy, today every second EU patient does. The number of physicians with homeopathic postgraduate training increased three times in Germany, up to 7000 doctors [3].

## 2. Objectives

The paper aims to evaluate the efficacy of homeopathic treatment in patients suffering from chronic sinusitis, focusing not only on their local symptoms, but also on the health-related quality of life as well as on their mental wellbeing.

## 3. Materials and Methods

In this observational study, 34 patients were included consecutively upon presentation for a homeopathic consultation, complaining of symptoms that led to the clinical diagnosis of chronic sinusitis (ICD-10: J32.9). Around 75% of the patients were women (N=25) and the average age of the group was 37.2. 70% (N=24) expected homeopathic treatment to solve their problem, 26% (N=9) hoped it might help and 3% (N=1) thought it will not help, but accepted to do this therapy to please his partner.

At the first consultation, as well as at the follow-ups, the local, general and mental development of the symptoms was monitored using standardised questionnaires. Written informed consent was obtained for every patient, for homeopathic therapy, as well as for inclusion in the study.

At the first consultation patients recorded the main complaints leading them to seek homeopathic consultation and therapy, rating the intensity on a numeric rating scale (NRS, 0 = no complaints, 10 = maximum severity). The health-related quality of life (QoL) was recorded with help of the MOS SF-36 questionnaire. The first questionnaire was filled out by the patients before the treatment, the next three were sent to the patients per post, in a sealed envelope, after 3, 12 and 24 months, to assure the best possible cooperation to the study. Besides the symptom scores the follow-up questionnaires included the use of any other therapies and all referrals to other consultations.

## 4. Results

The first consultation was the most extended one in all patients, the subsequent ones being made in the clinic only if there were doubts regarding certain symptoms, around half of the follow-ups were telephone calls and questionnaires sent per post. More than half (56 %) of the patients were still under homeopathic therapy at the 2 years follow-up.

The most frequently used remedies were *Sepia* (N=5, 15%), *Pulsatilla* (N=5, 15%), *Lycopodium* (N=4, 12%), *Phosphorus* (N=4, 12%), *Sulphur* (N=3, 9%), *Nux vomica* (N=2, 6%), *Silicea* (N=2, 6%), *Carcinosinum* (N=2, 6%) and *Natrium muriaticum* (N=2, 6%).

The most used potencies were: CH200 (N=13, 38%), CH 1000 (N=9, 26%), CH 30 (N=6, 18%), CH 15 (N=5, 15%), CH 10 000 (N=1, 3%).

The symptoms improved most in the first three months.

Table 1  
*Evolution of the symptoms of sinusitis during the study*

Sinusitis	severity [NRS]
Baseline	5.68
Month 3	3.10
Month 12	2.05
Month 24	1.65

The pattern of the evolution of the general and mental scores were similar, with the best improvement in the first three months (Table 2).

Table 2  
*Evolution of the QoL during the study*

QoL [SF-36 component score]	Physical	Mental
Baseline	45.5	36.8
Month 3	48.02	43.9
Month 12	49.05	44.3
Month 24	50.13	46.22

According to these values we could calculate the so-called effect size (effect divided by standard deviation at baseline), as shown in Table 3.

Table 3  
*Evolution of the effect size of sinusitis during the study*

Sinusitis	effect size
Month 3	1.55
Month 12	2.10
Month 24	2.39

Similarly we obtained the results of effect sizes for the physical and mental quality of life (Table 4)

Table 4  
*Evolution of the QoL during the study*

QoL [SF-36 component score]	Physical	Mental
Month 3	0.26	0.64
Month 12	0.34	0.70
Month 24	0.41	0.62

The objective assessment of the severity improvement made by rhinoscopy and endoscopic examination seemed to be even more significant than the subjective appreciation of the patient, but as not all patients were revisited by these means, statistically useful data are missing.

The response of sinusitis complaints to homeopathic therapy at the end of the study showed the following subjective results (Table 5).

Table 5  
*Subjective response rates regarding chronic sinusitis*

Response	[%]	N
Fully cured	30	10
More than 50% better	28	9
10-50% better	8	3
0-10% better	6	2
worse	3	1

## 5. Discussions

In the 24 months observation period of this study the aim was to have an overview of contemporary homeopathic health exemplified in 34 patients with chronic sinusitis. The evaluation of the sinusitis symptoms severity, as well as the health-related physical and mental quality of life showed significant improvements although it was a chronic disease and had previously been attempted to be cured by conventional methods. Besides the rhinosinusal complaints, general physical and mental conditions were also ameliorated, more obvious in the three months and slower, but still steady, up to 24 months.

As this study is predominantly based on subjective responses of the patients, an observation is adequate to be made here.

Patients coming for the first homeopathic consultation usually do not know and do not expect very much from such a simple therapy, with hardly any costs for those tiny sugar balls

(people often think expensive therapies must be the best). In consequence, the reaction after the first administrations of the remedy are the most spectacular for the patient and the scores they report are reflecting that. After a while, even if the remedies action is constantly ameliorating the symptoms, the psychological impact on the patient decreases, as they are getting used to the new, better status.

Due to the limited possibility to have a complete visit to the ENT outpatient clinic for every follow-up and every patient, this study has a weak point regarding objectivity and a score recorded by rhinoscopy at each follow-up, by the ENT physician, point that should be revised in a next phase of this research. A positive point would be the long follow-up and the holistic approach to the general quality of life.

Socio-demographic data collected in this study show that homeopathy patients tend to be younger than conventional medicine patients and that female patients visit more often homeopaths than men. These factors might indicate an augmentation in health-awareness in new generations. The holistic approach of homeopathy might attract patients who seek more than a quick relief for an acute, single problem.

## 6. Conclusions

Chronic sinusitis patients benefit from using “classical” homeopathic treatment, the improvement of their local, as of their general (physical and mental) symptoms being significant. Further, more accurate studies to evaluate objective local and general improvement are needed.

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