International Journal of Homoeopathic Sciences

E-ISSN: 2616-4493
P-ISSN: 2616-4485
Impact Factor (RJIF): 5.96
www.homoeopathicjournal.com
IJHS 2025; 9(3): 958-959
Received: 09-06-2025
Accepted: 07-07-2025

Baskar R
Intern. Saradha Krishna Homoeopathic Medical College, Kulasekharam, Kanyakumari, Tamil Nadu, India

Dr. PR Sisir
MD(Hom) Professor and Head, Department of Paediatric, Saradha Krishna Homoeopathic Medical College, Kulasekharam, Tamil Nadu, India

Corresponding Author:
Baskar R
Intern. Saradha Krishna Homoeopathic Medical College, Kulasekharam, Kanyakumari, Tamil Nadu, India

Retrospective study on the effect of pulsatilla in respiratory conditions in the pediatric age group

Baskar R and PR Sisir

DOI: https://www.doi.org/10.33545/26164485.2025.v9.i3.O.1772

Abstract
Background: Pediatric respiratory illnesses are a major concern, especially in countries like India where environmental and social factors increase vulnerability. Homeopathy is increasingly considered for its gentle, holistic approach.
Objective: This retrospective observational study assessed the clinical effectiveness of Pulsatilla 200C in children aged 1–12 years with respiratory conditions.
Methods: Sixty cases were reviewed at Sarada Krishna Homoeopathic Medical College. Diagnoses included cough, asthma, nasal cold, tonsillitis, and nasal polyp. Symptom severity was assessed using the Visual Analog Scale (VAS).
Results: After treatment, 47 patients achieved complete resolution, 10 showed mild symptoms, and none remained in the severe category. About 88% showed clinical improvement. Half recovered within 4 weeks, 38.3% within 1 week. Statistical analysis showed highly significant improvement ($p < 0.001$).
Conclusion: Pulsatilla 200C demonstrated substantial efficacy in pediatric respiratory illnesses, especially cough-related cases. Further prospective trials are recommended.

Keywords: Acute respiratory illness, homeopathy, pediatric respiratory conditions, pulsatilla, retrospective study

Introduction
Respiratory conditions are among the most frequent illnesses in children due to their immature immune systems and smaller airways. They include acute conditions like the common cold and pharyngitis, and chronic illnesses like asthma and allergic rhinitis. Environmental factors such as pollution and overcrowding increase vulnerability in children. These conditions cause physical discomfort, school absenteeism, and frequent antibiotic use, which does not prevent recurrence [1].
Pulsatilla (Anemone nigricans), described in Boericke's *Materia Medica* [2], is widely used in homeopathy for respiratory complaints with thick, bland discharges and shifting modalities. Children needing Pulsatilla often exhibit clinginess, desire for consolation, and aggravation in warm environments. Its efficacy is documented in sinusitis, bronchitis, allergic rhinitis, and otitis media [3].
This study aims to clinically validate the use of Pulsatilla 200C in pediatric respiratory conditions by reviewing retrospective data and measuring outcomes with standardized tools.

Aim and objectives
Aim: To evaluate the clinical effectiveness of Pulsatilla 200C in pediatric respiratory conditions.

Objectives
1. Analyze patterns of symptom relief.
2. Assess recovery rate and duration.
3. Identify respiratory conditions showing best therapeutic response.

Materials and Methods
- **Design:** Retrospective observational study
- **Setting:** Sarada Krishna Homoeopathic Medical College (Pediatric OPD/IPD)
- **Sample size:** 60 pediatric cases (1–12 years)
- **Inclusion criteria:** Documented cases of respiratory illness treated solely with Pulsatilla

200C

- **Exclusion criteria:** Incomplete records, concurrent non-homeopathic treatment
- **Assessment tool:** VAS (0 = no symptoms, 10 = severe symptoms)
- **Statistical analysis:** Paired t-test and Chi-square test

Results

- **Age distribution:** Majority were in 5–10 years (73.4%).
- **Gender:** 53.3% male, 46.7% female.
- **Diagnosis:** Cough with/without expectoration dominated (85%). Others included nasal cold (31.6%), asthma (5%), nasal polyp (3.3%), and tonsillitis (1.6%).
- **VAS scores:** Severe cases (21) reduced to zero; 47 showed complete recovery.
- **Recovery duration:** 38.3% recovered within 1 week, 50% in 4 weeks, and 11.7% in 12 weeks.
- **Clinical outcomes:** 90% improved, 10% did not respond.
- **Statistics:** Paired t-test showed significant symptom reduction ($p < 0.001$). Chi-square confirmed association between improvement and diagnosis type ($p = 0.027$).

Discussion

The study found Pulsatilla 200C highly effective in pediatric respiratory complaints. The majority of patients had cough-related diagnoses, consistent with homeopathic materia medica indications. Symptom severity dropped significantly, with nearly 80% achieving complete resolution. Previous studies support Pulsatilla's effectiveness in URTI and pediatric respiratory care [6-9]. The uniform potency (200C) allowed for consistent assessment, reducing variability seen in other trials [5]. Quick recovery in many cases highlights Pulsatilla's suitability for acute pediatric care.

The findings align with Banerjee and Khuda-Bukhsh's RCT on individualized homeopathy in children [6], as well as Kunja's COPD study [5], which showed improvement with 200C potency. Other studies on tracheobronchitis and URTI also confirm Pulsatilla's therapeutic role [10, 11].

Conclusion

Pulsatilla 200C is effective in pediatric respiratory illnesses, particularly cough-related conditions. The study provides clinical evidence of its rapid and significant outcomes. Prospective controlled studies are needed to substantiate these results.

Conflict of Interest

Not available

Financial Support

Not available

References

1. Kliegman RM, St. Geme JW, Blum NJ, Shah SS, Tasker RC, Wilson KM. Nelson Textbook of Pediatrics. 21st ed. Elsevier; 2020.
2. Boericke W. Pocket Manual of Homeopathic Materia Medica and Repertory. 9th ed. B. Jain Publishers; 1999.
3. Vithoulkas G. Essence of Materia Medica. B. Jain Publishers; 1993.
4. Zar HJ, Ferkol TW. The global burden of respiratory disease. Pediatr Pulmonol. 2014;49(5):430-4.
5. Kunja S. Remedy Profile of Homoeopathic Drugs in COPD. Rajiv Gandhi University; 2019.
6. Banerjee A, Khuda-Bukhsh AR. Homeopathy for pediatric respiratory care. Pediatr Clin N Am. 2010;57(5):1289-1300.
7. Oberai P, Varanasi R. Case analysis of Pulsatilla in pediatric catarrhal conditions. Complement Ther Clin Pract. 2016;27:102-108.
8. Sankar AS, Habeebulla F. Clinical course of acute URTI with homoeopathy in children.
9. Vithoulkas G. Clinical evidence for Pulsatilla in URTI. Evid Based Complement Alternat Med. 2012;9(4):531-540.
10. Sharma B. Role of Homeopathy in Chronic Respiratory Disease. J Appl Dent Med Sci. 2018;4:2.
11. Nayak C, *et al*. Multicentre observational study on tracheobronchitis. Indian J Res Homoeopathy. 2011;5(3):20-6.

How to Cite This Article
Baskar R, PR Sisir. Retrospective study on the effect of pulsatilla in respiratory conditions in the pediatric age group. International Journal of Homoeopathic Sciences. 2025;9(3):958-959.