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Comparative retrospective clinical study on effectiveness of homeopathic medicines of different sources in treatment of acute gastritis

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Background: Acute gastritis represents one of the most frequently encountered gastrointestinal tract infection and often results in altered physiological function.

Aim: To evaluate and compare the effectiveness of homeopathic medicines derived from different sources plant, mineral, and animal in the management of acute gastritis.

Methodology: A total of 50 cases, documented from the outpatient, inpatient, and rural centers of Sarada Krishna Homoeopathic Medical College and Hospital based on inclusion and exclusion criteria between 2021 and 2023, were analyzed.

Results: Demographic distribution revealed that females (58%) were more frequently affected than males (42%), and the pediatric population, especially children aged 5-12 years, represented the most commonly affected group. Among the remedies prescribed, Nux vomica emerged as the most frequently used, primarily from the plant kingdom, followed by Magnesia phosphorica and Sulphur. Remedies from the mineral kingdom were the most widely prescribed overall, while animal-based medicines had limited application. The 200C potency was most commonly administered, reflecting practitioner preference for medium-to-high potency in acute conditions.

The duration of treatment varied; most patients (34%) reported improvement within one week, while others required up to one month. A chi-square statistical analysis demonstrated a significant association between the kingdom of the remedy and the duration of treatment, suggesting that the source of the medicine influenced the speed of recovery. Additionally, a paired-samples t-test conducted on Visual Analogue Scale (VAS) scores showed a statistically significant reduction in symptom severity (p < 0.001), confirming the therapeutic value of individualized homeopathic prescriptions.

Conclusion: The findings of this study underscore the potential of homeopathic intervention as a safe and effective alternative for managing acute gastritis. The results highlight the importance of remedy source, potency selection, and individualized prescribing in achieving favorable outcomes. While plant remedies were often associated with rapid improvement, mineral remedies demonstrated broader applicability across cases. Despite these encouraging results, the limitations of retrospective design and small sample size necessitate further prospective and randomized controlled studies to strengthen the evidence base and validate the observed clinical patterns.

Keywords: Acute gastritis, homeopathic remedies, Kingdom comparison

Introduction

Acute gastritis is a prevalent and clinically significant condition of the upper gastrointestinal tract, marked by the sudden onset of inflammation in the gastric mucosa. Despite the tremendous physiological resilience and intricate protective measures of the stomach lining, acute gastritis occurs when these defences are abruptly breached leading to a constellation of symptoms that range from mild epigastric discomfort to severe complications like hematemesis and gastric perforation. The global burden of this disease reflects not only its frequency but also the widespread and evolving nature of its etiological factors [1]. Understanding acute gastritis requires a perspective that integrates biological mechanisms, patient lifestyle, pharmacological exposures, and evolving trends in complementary medicine. This section offers a detailed overview of its clinical nature, epidemiology, underlying causes, conventional treatments, and the emerging yet still controversial role of homeopathy.

Clinical definition and pathogenesis

Acute gastritis is characterized as an acute, short-lived inflammatory response affecting the stomach's mucosal surface1. This distinguishes it from chronic gastritis, which involves

persistent inflammation and typically follows a more insidious, protracted course ^[2]. The clinical import of this distinction is profound: acute gastritis tends to resolve rapidly with timely intervention, while chronic gastritis portends long-term mucosal damage and greater complications.

The mucosal lining of the stomach is safeguarded by several vital mechanisms. These include the secretion of a thick, alkaline mucus-bicarbonate layer, robust mucosal blood flow, rapid cell turnover, tight epithelial junctions, and the actions of prostaglandins that promote healing and limit acid-induced injury [2]. Acute gastritis arises when these defences are suddenly compromised. Aggressive agents be they chemical, infectious, or physical can damage the epithelium either by overwhelming protective mechanisms or by impairing their regenerative capacity.

Pathologically, acute gastritis may present as erosive or nonerosive. Erosive gastritis, the more severe variant, involves visible breaks in the mucosal barrier, sometimes with hemorrhages. Non-erosive gastritis is more subtle and commonly linked with infectious or systemic immune responses. Both forms represent, at their core, a failure of the equilibrium between injurious forces (acid, pepsin, toxins) and mucosal repair systems [1, 2, 3].

Epidemiology

The true global prevalence of acute gastritis is difficult to ascertain, owing both to under-recognition and to symptom overlap with other forms of gastritis and dyspepsia [4]. However, epidemiological studies, especially those in urbanized and medically advanced societies, consistently report high incidence rates among patients presenting with upper abdominal pain, indigestion, and nausea [4]. It is estimated that a significant fraction of work absenteeism, emergency visits, and upper gastrointestinal endoscopies are directly attributable to acute gastritis [1].

Clinical presentation and diagnosis

Patients with acute gastritis present with a spectrum of symptoms:

Epigastric pain or burning

Nausea and vomiting

Loss of appetite

Bloating and early satiety

Upper gastrointestinal bleeding, manifesting as hematemesis or melena in severe cases [4]

 Most episodes are self-limited, but, if treatment is delayed or the inciting factor persists, there is potential for serious complications gastrointestinal hemorrhage, perforation, or transition to chronic gastritis [1].

Diagnostic confirmation often combines clinical acumen with targeted laboratory and instrumental studies. A full history and examination may guide initial management, but laboratory tests (to rule out anemia, infection, or metabolic derangement) and upper endoscopy remain crucial for patients with severe, recurrent, or unexplained symptoms ^[5]. Endoscopy can directly visualize erosions and hemorrhages, provide targeted biopsies, and rule out other pathologies.

Aim

 To evaluate and compare the effectiveness of homeopathic medicines of different sources in treatment of acute gastritis.

Objectives

• To know about the action of remedies of different sources in treating acute gastritis.

Procedure

50 selected cases diagnosed with acute gastritis based on inclusion and exclusion criteria already treated with homeopathic medicines of different sources are selected from Sarada Krishna Homeopathic Medical college and hospital records. Cases are then analysed and compared based on the different sources of Homeopathic medicines. Assessment is based on the general improvement of the patient marked through inference. This study will help us better understand the role of homeopathy in treating acute gastritis and guide future research, all while maintaining patient privacy and following ethical standards.

Inclusion criteria

- All age group are included
- Both sexes are included.

Cases of acute gastritis treated with homeopathic medicines

Exclusion criteria

- Patient with other systemic diseases.
- Patient undergone with other modes of treatment.

Scale

The severity of symptoms was measured using a Visual Analogue Scale (VAS) with a range from 0 to 5. The scale was defined as follows:

- **0:** Denotes no symptoms.
- 5: Represents the worst possible symptom severity.

Review of Literature

A study on importance of modalities in homeopathic case taking of gastritis-neuroquantology

- This study investigates the critical role of modalities conditions that worsen or improve symptoms in the homeopathic management of gastritis. Through randomized clinical observation of 30 patients, predominantly with acute gastritis, remedies were prescribed based on comprehensive case taking emphasizing modalities. Findings showed marked improvement in 90% of patients, highlighting that careful attention to symptom modifiers significantly in selecting the appropriate homeopathic similimum, thereby reducing symptom severity and enhancing patients' quality of life. The study underscores that modalities are essential individualized treatment and better clinical outcomes in gastritis care under homeopathy [8].
- An open-label pilot study to explore usefulness of Homoeopathic treatment in nonerosive gastroesophageal reflux disease- Indian Journal of Research in Homoeopathy. A pilot study was undertaken to explore usefulness of homoeopathic medicines in treatment of NERD. Methodology: In this study, 78 patients were screened and 34 were enrolled, having symptoms of heartburn and/or regurgitation at least twice a week, having a Gastroesophageal Reflux Disease (GERD) symptom score of more than 4. Homoeopathic medicine was prescribed on the basis of presenting symptoms. Response to treatment was

- assessed on GERD symptom score, Visual Analog Scale (VAS) for heartburn, and World Health Organization quality of life-BREF (WHO-QOL) questionnaire evaluated at baseline and at end of 8 weeks of treatment. Results: Significant difference was found in pre- and post-treatment GERD symptom score (8.79 \pm 2.7 vs. 0.76 \pm 1.8; P = 0.001) and VAS for heartburn (47.47 \pm 19.6 vs. 5.06 \pm 11.8; P = 0.001). Statistically significant improvement was seen in three domains of WHO-QOL score, i.e. psychological health, social relationship, and environmental domain $^{[9]}$.
- Exploring the Role of Homeopathic Intervention in Post-COVID Functional Gastrointestinal Disorders: A Case Series of 12 Patient Profiles- Homeopathy: the journal of the Faculty of Homeopathy. A retrospective analysis of the clinical data of individuals who had suffered from PC-FGIDs that were diagnosed based on clinical symptoms using the Gastrointestinal Symptoms Rating Scale (GSRS) and treated exclusively with individualized homeopathic medicines. Cases that had undergone regular monthly assessment using the GSRS and had a Post-COVID-19 Functional Status (PCFS) score for up to 3 months were considered. Thirty cases were screened and twelve were included according to the study criteria. The mean age of seven women and five men was 36 years. GSRS and PCFS scores showed marked improvement in each of 10 cases within the 3month treatment period [10].
- A one-year prospective clinical study compared two groups-International Journal treatment Multidisciplinary Research 20 patients each using homoeopathic mineral remedies (e.g. carbonica, Silicea) versus other homoeopathic remedies (e.g. Pulsatilla, Nux vomica) in chronic recurrent sinusitis, assessed via SNOT-22 scores. Treatment outcomes showed that 22.5% of patients experienced marked improvement, 75% moderate improvement, and only 2.5% minimal improvement in symptoms overall. Statistical analysis (Paired-t and Student's t-tests) demonstrated significant superiority of mineral remedies over other homoeopathic treatments, with results significant at both p<0.05 and p<0.01. The study also highlighted the potential benefit of lesser-used mineral remedies (Fluoricum acidum, Phosphoricum acidum, Calcarea sulphurica) in managing chronic recurrent sinusitis [11].
- Efficacy of Homoeopathic Medicine in Treating Gastritis: A Retrospective Case Series Study- IJMR. Out of 44 patients, 23 were females and 17 were males. Majority comes between 48 and 58 years. 10 patients comes between 37 and 47 years,7 between 59 and 69 years. 5 each is seen between 15 to 25 years and 26 to 36 years and 2 patients are there between 70 and 80 years. 9 patients were treated with Lycopodium, 6 patients with Nux vomica, pulsatilla and sulphur has been used in 5 patients.3 patients were treated with silicea and 2 patients with cundurango., the other medicines used were Ignatia, Anacardium, Argentum nitricum, Calcarea Carbonicum, Sepia, Thuja, Arsenicum album, Bryonia, Ferrum Metallicum, Chelidonium. Most commonly used potencies is 200 by

- 23 patients. 8 patients were treated with LM potency. 7 patients has taken 30 potency. 1M potency was used in 2 patients [12].
- Retrospective Analytical Case Series Study on the Acid Disorders treated with Homoeopathic Medications- Research Journal of Pharmacology and Pharmacodynamics. Randomly selected Case Records of 30 Acid Peptic Disorder Patients treated with Homoeopathic Medications at Vinayaka Mission's Homoeopathic Medical College Hospital, Salem, Tamil Nadu were retrospectively analyzed for effectiveness. This Study results showed that the Homoeoapthic medicines Robinia. Natrum sulphuricum, Arsenicum album, Hepar sulphuricum, Bryonia, Eupetorium and Hydrastis Canadensis were found to be effective in treating Acid Peptic Disorders. The Retrospective Case Series analysis has shown that 56.67% of cases showed marked improvement, 33.33% of cases showed moderate improvement and 10% of cases showed mild improvement [13].
- Homoeopathic management of duodenal ulcer: A case report-International Journal of Homoeopathic Sciences 2022; 6(4): 227-231, presenting a case of 56year old male complaining of burning pain in epigastrium with nausea, vomiting and dyspeptic troubles for 6months. The endoscopic report confirmed it to be a case of Duodenal Ulcer. After thorough clinical evaluation, the patient was treated with different potencies of Nux vomica and Sulphur at different point of time as suggested by patient's symptom-complex. Marked improvement in symptomatology was noted with Individualised Homoeopathic treatment for 16 months. The outcome was also recorded with endoscopy report following the treatment. Conclusion: The case shows excellent response of a patient suffering from duodenal ulcer to Individualised Homoeopathic medication [14].

Observation and results

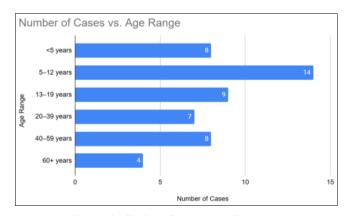


Fig 1: Distribution of cases according to age

The age distribution is wide and categorized into 6 range sets. Chart illustrates the number of acute gastritis cases across different age groups, ranging from infants to elderly patients.

The highest number of cases was seen in children aged 5-12 years (12 cases), followed by those under 5 years (8 cases), indicating pediatric predominance.

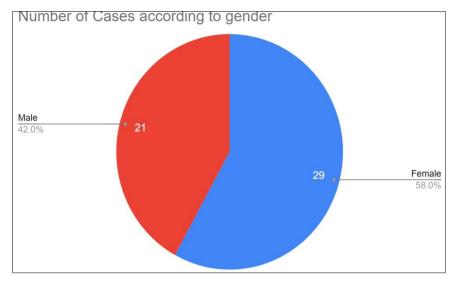


Fig 2: Distribution of cases according to gender

Both male and female pediatric patients were included to ensure balanced representation and analyze gender-based response. Females accounted for 58% (29 cases),

outnumbering males (42%, 21 cases), showing a female predominance in the study group.

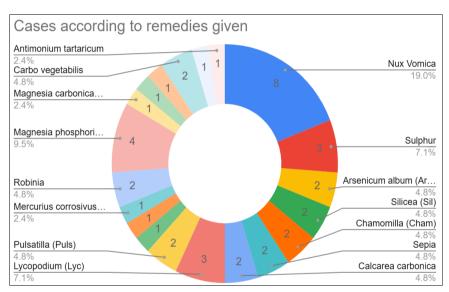


Fig 3: Distribution of cases according to remedies given

Nux vomica was the most frequently prescribed remedy (8 cases), followed by Magnesia phosphorica (4 cases) and

Sulphur (3 cases), reflecting remedy choice based on presenting symptom patterns.

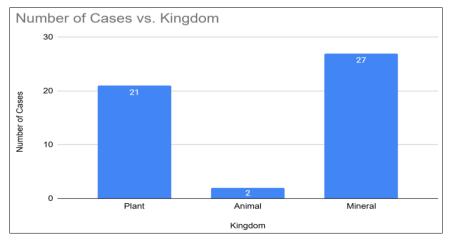


Fig 4: Distribution of cases according to Kingdom of remedy given

Mineral kingdom remedies were most commonly used (24 cases), followed by plant remedies (21 cases), with very limited use of animal-based remedies (2 cases).

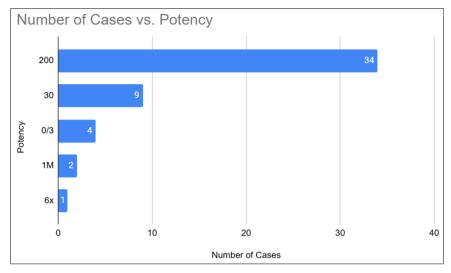


Fig 5: Distribution of cases according to potency given

200C potency was most frequently prescribed (34 out of 50 cases), indicating practitioner preference for medium-to-high potency in acute conditions.

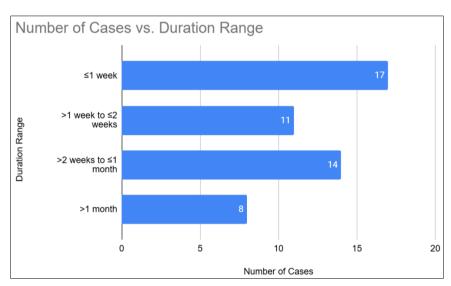


Fig 6: Distribution of cases according to duration of treatment

This chart shows how long patients took to recover following homeopathic treatment, grouped by time intervals. Most cases (17 out of 50) improved within one week, demonstrating the rapid action of appropriately selected remedies in acute conditions.

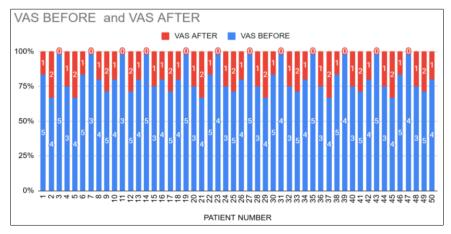


Fig 7: Distribution of cases according to before and after VAS scores

Cases are being classified according to VAS before and after treatment scores.

Based on the retrospective clinical study of 50 acute gastritis cases, the descriptive analysis reveals key findings in demographics, treatment, and outcomes. The study showed a higher prevalence in females (58%) than males (42%), with children aged 5–12 years representing the largest age group of patients. Nux vomica was the most frequently prescribed remedy (8 cases), followed by Magnesia phosphorica (4 cases) and Sulphur (3 cases). The majority of remedies were derived from the mineral kingdom (24 cases), with the 200C potency being the most common choice, used in 34 cases. The study concluded that the treatment was effective, with 17 cases showing improvement within one week and 11 cases within two weeks.

Discussion

The present study titled "Comparative Retrospective Clinical Study on Effectiveness of Homeopathic Medicines of Different Sources in Treatment of Acute Gastritis" aimed to evaluate the differential effectiveness of plant-, mineral-, and animal-derived homeopathic remedies. The data from 50 cases provides meaningful insights into demographic patterns, remedy source trends, potency preference, and treatment timelines.

Demographics & prevalence

Children aged 5–12 years were the most affected, followed by those under 5 years, highlighting a pediatric predominance in this study. This contrasts with findings from the Efficacy of Homoeopathic Medicine in Treating Gastritis: A Retrospective Case Series Study, where most patients were in the 48–58 age group [12]. Gender distribution in our study showed a female predominance (58%), consistent with previous reports suggesting higher gastritis incidence in females due to hormonal fluctuations, dietary choices, and psychosocial stress¹².

Remedy source and effectiveness

Mineral kingdom remedies were used in more than half the cases (27 out of 50), followed by plant-based (21) and animal-derived remedies (2). This dominance of mineral remedies parallels findings in A Comparative Clinical Study on the Usefulness of Homoeopathic Medicines from Mineral Kingdom and Other Homoeopathic Medicines in the Management of Chronic Recurrent Sinusitis, where mineral remedies showed significantly better outcomes with statistical relevance (p<0.05 and p<0.01) [11]. This supports the hypothesis that mineral remedies, often deep-acting and constitutional in nature, may be effective not just in chronic but also in acute inflammatory conditions like gastritis.

Remedy choice and potency trends

Nux vomica (plant-based) was the most frequently prescribed remedy, followed by Magnesia phosphorica and Sulphur. The diversity of prescriptions reflects the individualized approach of homeopathy. Interestingly, although Nux vomica topped the list, the greater frequency of mineral kingdom remedies indicates an overall trend toward their preference in acute gastritis cases. The use of 200C potency in 68% of cases aligns with observations from both gastritis and sinusitis studies, suggesting that this medium-to-high potency is effective in achieving rapid symptomatic relief in acute settings [12].

Treatment duration & response

Rapid clinical response was noted, with 34% of patients improving within one week and 22% within two weeks. These results are consistent with the Retrospective Analytical Case Series Study on the Acid Peptic Disorders Treated with Homoeopathic Medications, where 56.67% of cases showed marked improvement within a short duration [13]. This supports the efficiency of timely administered, well-selected homeopathic remedies in acute gastric conditions.

The results of the paired-samples t-test provide compelling evidence that the homeopathic treatment had a significant effect on reducing acute gastritis symptoms. The mean VAS score before treatment was significantly higher than the mean VAS score after treatment, with a mean difference of 3.12. The large t-statistic of 21.999 indicates a strong and consistent change in symptom scores across the cases. This significant reduction in symptoms supports the clinical efficacy of the homeopathic remedies used in the study.

The statistical analysis revealed a significant association between the kingdom of the homeopathic remedy and the duration of treatment, a finding with important clinical implications. This result suggests that the source of the remedy may influence the speed of recovery from acute gastritis. Based on the number of cases, the plant kingdom remedies were most frequently associated with the shortest treatment duration (≤ 1 week, with 10 cases), suggesting a potentially higher efficiency for rapid symptom resolution compared to the mineral kingdom, which was most often associated with a longer treatment duration (≥ 2 weeks to ≤ 1 month, with 8 cases).

Observations from other studies

The Exploring the Role of Homeopathic Intervention in Post-COVID Functional Gastrointestinal Disorders study also documented significant symptomatic improvement in functional GI cases within 3 months [10]. Though not focused on acute gastritis, the findings reinforce the adaptability and potential of homeopathic individualized prescriptions across different GI conditions. Likewise, the Study on Importance of Modalities in Homeopathic Case Taking of Gastritis emphasized the role of symptom modifiers in remedy selection, resonating with our method of case assessment and individualized remedy selection [8]. The underutilization of animal-derived remedies (only 2 cases) could be due to their typical indications in deeper, more emotionally intense, or destructive pathology, which may not be frequently encountered in straightforward acute gastritis presentations. However, future research could investigate their potential role further.

Conclusion

This retrospective comparative study demonstrates that homeopathic medicines derived from different sources mineral, plant, and animal can be effective in the treatment of acute gastritis. Remedies from the plant kingdom were given a shorter duration of treatment and showed promising results. The most used remedy was Nux vomica, and 200C potency was the preferred choice among practitioners. More than half of the patients experienced improvement within two weeks, indicating the prompt action of well-indicated homeopathic remedies. The statistical analysis, supported by a highly significant p-value of less than 0.001, confirms that the homeopathic treatment led to a significant improvement

in patient symptoms. The paired-samples t-test conclusively shows a positive and statistically significant therapeutic effect. These findings reinforce the value of individualized prescribing and suggest that remedy source may influence therapeutic outcomes. However, limitations of retrospective data and small sample size warrant further controlled research to confirm and expand upon these observations.

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