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Clinical evaluation of homoeopathic therapeutics in pediatric asthma: An observational study

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Abstract
Pediatric asthma is one of the most prevalent chronic respiratory conditions worldwide, posing a major clinical and public health challenge. It not only affects the physical health of children but also hampers their emotional, social, and educational development. Children with asthma often experience recurrent episodes of wheezing, breathlessness, coughing, and chest tightness, which lead to frequent school absenteeism, limited participation in activities, and a considerable economic burden on families due to ongoing treatment and healthcare visits. Environmental factors such as exposure to allergens (house dust mites, animal dander, cockroach antigens, and pollens) and pollutants (SO_2, NO_2, and ozone) play a crucial role in the onset and aggravation of asthma symptoms. While conventional medicine focuses primarily on Broncho dilation and anti-inflammatory management, homoeopathy aims to treat the underlying susceptibility and individual response patterns, thereby providing long-term relief and improving quality of life.
In this clinical study, thirty pediatric cases of asthma were selected according to defined inclusion and exclusion criteria, and each child was assessed through a detailed case-taking procedure. Individualized homoeopathic medicines were prescribed based on totality of symptoms and miasmatic background. Evaluation of symptoms, including dyspnea, cough, and expectoration, was done before and after treatment. Statistical analysis revealed that the p-value was significantly less than 0.05, demonstrating a highly significant difference between pre- and post-treatment symptom scores. The results showed marked improvement in the intensity, frequency, and duration of asthma episodes.
The study concludes that homoeopathic medicines can play an effective role in managing childhood asthma by addressing the root cause, improving resistance, and minimizing relapses. This integrative approach not only provides symptomatic relief but also contributes to the overall well-being of the child.

Keywords: Pediatric asthma, homoeopathy, dyspnea, cough, respiratory inflammation, individualized treatment, holistic management

Introduction
Asthma is one of the most common chronic diseases among children, affecting millions worldwide. It not only causes recurrent episodes of breathlessness, wheezing, chest tightness, and cough, but also has far-reaching effects on the physical, emotional, and social well-being of affected children. Asthma contributes to absenteeism from school, limited physical activity, and reduced social participation.
The burden extends to families and society due to the emotional distress of caregiving, economic strain from treatment costs, and the frequent need for medical consultations and hospital visits. Environmental triggers—such as dust mites, pet dander, cockroaches, fungi, pollen, and pollution—play a crucial role in disease manifestation and exacerbation.
Recent studies highlight that airway inflammation is central to the pathophysiology of asthma. This inflammation leads to airway hyper activity and obstruction, often worsened by allergens or pollutants. While modern medicine provides symptomatic relief, long-term dependence on bronchodilators and corticosteroids raises concerns about side effects and recurrence.
Homoeopathy, founded on the principle of “Similia Similibus Curentur” (like cures like), offers an individualized and holistic approach to disease. Instead of suppressing symptoms, homoeopathic remedies stimulate the body’s natural defense mechanisms, aiming for long-term relief and improved vitality.

This study was undertaken to assess the effectiveness of homoeopathic medicines in the management of pediatric asthma, focusing on improvement in clinical symptoms and overall well-being.

Aim

To study the effectiveness of homeopathic medicines in the management of asthma in children

Objectives

1. To understand evolution of childhood asthma.
2. To study the utility of homeopathic medicines in treatment of childhood asthma

Materials and Methods

Study Design

Experimental study.

Study Setting

Conducted at the Outpatient Department (OPD) of Housabai Homoeopathic Medical College and Hospital, Nimshirgaon.

Sample Size

30 pediatric patients (N=30) diagnosed with bronchial asthma.

Sampling Method

Simple random sampling.

Inclusion Criteria

- Children aged between 6 and 14 years.
- Diagnosed cases of bronchial asthma presenting with recurrent wheezing, cough, or dyspnea.
- Patients not on long-term corticosteroid therapy.

Exclusion Criteria

- Children below 6 years or above 14 years.
- Cases with structural lung diseases or congenital heart conditions.
- Patients on continuous allopathic anti-asthmatic drugs.

Procedure

Each patient was examined in detail, and a comprehensive case record was prepared including medical history, family history, and environmental factors. The totality of symptoms was formed considering physical generals, mental state, modalities, and past medical history.

Remedies were prescribed on the basis of individualization according to the principles laid down by Dr. Samuel Hahnemann in the *Organon of Medicine*. Potency and repetition were decided according to the susceptibility and condition of each patient.

Commonly prescribed medicines included *Arsenicum album*, *Antimonium tartaricum*, *Natrum sulphuricum*, *Pulsatilla*, and *Ipecacuanha* depending upon the symptom picture.

Follow-ups were taken every 15 days for a period of 6 months. Improvement was assessed clinically using a grading scale for frequency and intensity of symptoms.

Parameters for Assessment

- Dyspnea
- Cough
- Expectoration
- Frequency of attacks
- Sleep and activity level

Statistical Analysis

Paired t-test was applied to compare mean scores before treatment (BT) and after treatment (AT). A p-value < 0.05 was considered statistically significant.

Result and Observation

Table 1: Shows Age wise distribution

Sr. No.	Age (yrs)	No. of Patients	%
1	1	4	13.33333
2	2	5	16.66667
3	3	8	26.66667
4	4	8	26.66667
5	5	5	16.66667
	Total	30	100.00

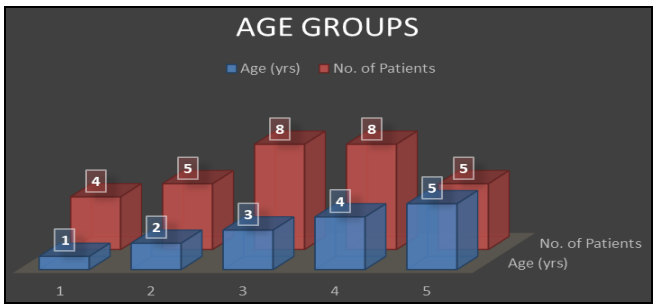

Fig 1: Shows Age wise distributions

Table 2: Shows Gender wise distribution

Sr. No.	Gender	No. of Patients	%
1	Male	18	60
2	Female	12	40
	Total	30	100

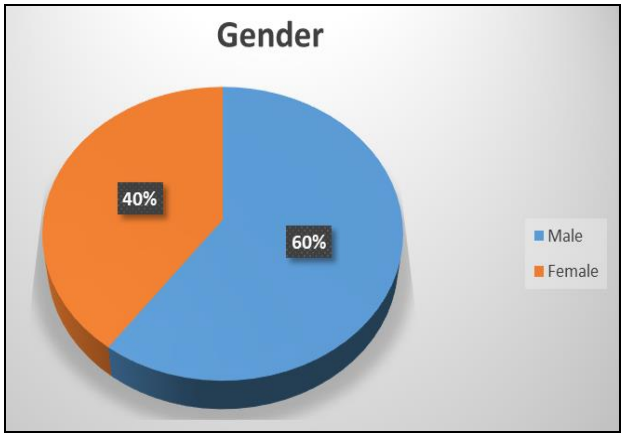

Fig 2: Shows Gender wise distributions

Result

Table 3: Shows Result wise distribution

Sr. No.	Result	No. of Pt.	%
1	Good	4	13.33333
2	Moderate	24	80
3	Poor	2	6.666667
	Total	30	100.00

Fig 3: Shows Result wise distributions

Discussion

The study aimed to assess the effectiveness of homoeopathic medicines in pediatric asthma and showed encouraging results. Out of 30 cases studied, a majority demonstrated moderate to marked improvement, confirming the therapeutic potential of individualized homoeopathic treatment.

Most patients belonged to the 3–4 year age group, indicating early childhood as a sensitive period for asthma manifestation. Male predominance (60%) corresponded with known global trends, possibly due to anatomical and physiological differences. The 30C potency was most frequently prescribed (66.66%), reflecting the mild yet chronic nature of most cases, while higher potencies were reserved for deeper or more intense presentations.

Socioeconomic distribution revealed a higher incidence among middle-income families, and miasmatic analysis showed a predominance of syco-syphilitic and syphilitic influences, suggesting deep-rooted chronic predispositions.

Clinical improvement was statistically significant ($p<0.05$), with 13.33% of patients showing complete recovery, 80% moderate improvement, and only 6.67% poor response. This demonstrates that individualized homoeopathic remedies can effectively reduce the frequency and severity of asthma attacks while improving overall well-being.

These findings highlight the value of holistic homoeopathic management in pediatric asthma and suggest that deeper miasmatic consideration enhances long-term outcomes. Larger controlled studies are recommended to substantiate these encouraging results.

Conclusion

The present study demonstrates that individualized homoeopathic medicines are effective in the management of pediatric asthma. Significant improvement was observed in most patients, with reduced frequency and intensity of symptoms such as dyspnea, cough, and wheezing. The results suggest that homoeopathic treatment, when prescribed on the totality of symptoms and miasmatic background, can provide gentle, long-lasting relief without adverse effects.

Homoeopathic management not only improves the clinical condition but also strengthens the child's immunity and overall well-being. The study highlights the importance of understanding individual susceptibility and causative factors in asthma cases. Although the results are promising, larger multicentric studies with longer follow-up periods are recommended to further validate the role of homoeopathy in pediatric asthma management.

Implications

This study suggests that individualized homoeopathic treatment can serve as an effective, safe, and holistic approach for managing pediatric asthma. It emphasizes the importance of considering miasmatic background and totality of symptoms in remedy selection. The findings encourage further large-scale studies to integrate homoeopathy as a complementary therapy in pediatric respiratory care.

Conflict of Interest

Not available

Financial Support

Not available

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