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The scope of homoeopathy in the management of geriatric health problems as a last hope of miracle

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Abstract

Geriatric health problems are diverse and complex, involving multiple chronic conditions, functional decline, sensory loss, cognitive impairments, and psychosocial challenges. Homeopathy offers a complementary and holistic approach that addresses the totality of symptoms, promoting self-healing, improving quality of life, and potentially reducing reliance on multiple conventional drugs. Its individualized, gentle nature makes it an attractive option for elderly patients seeking safer and more comprehensive care.

Keywords: Geriatric, health problems, geriatric diseases, homeopathy, complementary medicine, homoeopathic medicine in geriatric, homoeopathic medicine in geriatric diseases

Introduction

Geriatric Health Problems

The elderly population faces a variety of complex health challenges collectively known as geriatric health problems. These problems often involve multiple organ systems and differ significantly from those in younger adults due to the physiological changes that accompany aging.

Common Geriatric Health Issues

1. Chronic Diseases

Males

- Males have a higher prevalence of life-threatening chronic diseases such as cardiovascular diseases, chronic obstructive pulmonary disease (COPD), chronic renal disease, and some cancers.
- Males tend to show higher rates of smoking, alcohol consumption, and tobacco chewing, which increase risks of respiratory diseases, liver diseases, and cancers.
- For example, chronic conditions like hypertension, diabetes, chronic renal disease, and coronary heart disease are more common in males, partly linked to lifestyle factors and behavioral risk exposures.

Females

- Females generally display higher prevalence of auto-immune diseases like rheumatoid arthritis (RA), asthma, obesity, thyroid disorders, and osteoporosis.
- Hormonal factors including estrogen fluctuations, reproductive health events (e.g., early hysterectomy), and menopause significantly influence the onset and progression of many chronic diseases.
- Females tend to have higher rates of obesity and metabolic syndromes post-menopause, which exacerbate diabetes, hypertension, and cardiovascular risks.

Family History and Genetic Factors

- A family history of chronic diseases such as diabetes mellitus (DM), hypertension (HT), asthma, rheumatoid arthritis (RA), gout, and cancer markedly increases risk for these conditions in both sexes.
- Genetic predisposition plays a role in susceptibility and disease severity involving immune, metabolic, and oncologic pathways.

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- For example, diabetes and hypertension show strong hereditary patterns that may manifest differently in men and women, influenced by genetic and hormonal interactions.
- Autoimmune diseases like RA are more common in females, possibly linked to stronger female immune responses.

Female-Specific Factors

- **Hormonal Issues:** Fluctuating estrogen and progesterone levels affect cardiovascular, metabolic, bone, and cognitive health. Hormonal imbalances like polycystic ovary syndrome (PCOS) contribute to metabolic syndrome.
- **Early Hysterectomy:** Removal of uterus and sometimes ovaries before natural menopause results in abrupt hormonal changes increasing risk of cardiovascular disease, osteoporosis, and cognitive decline.
- **Obesity:** Post-menopausal weight gain and central obesity elevate risk factors for diabetes, hypertension, and joint diseases.
- **Thyroid Disorders:** Hypothyroidism and hyperthyroidism rates are higher in women, affecting metabolism, cardiac function, and mood.

Lifestyle and Habits Impacting Chronic Disease

- **Tobacco Chewing, Smoking, and Alcohol:** These habits disproportionately affect males but are rising among females as well. They contribute to increased prevalence of respiratory diseases (COPD), cardiovascular diseases, cancers, liver diseases, and metabolic disorders.
- Smoking is a key risk factor for COPD, lung and oral cancers, and cardiovascular diseases; tobacco chewing is strongly linked to oral cancers.
- Alcohol abuse is associated with liver cirrhosis, hypertension, and neurological disorders.

2. Functional Decline and Frailty:

Functional decline and frailty in the elderly are multifactorial conditions marked by diminished physiological reserves, leading to vulnerability to stressors and increased dependency. Various chronic diseases and medical conditions significantly contribute to and exacerbate this decline.

Parkinson Disease

Parkinson's disease causes progressive motor dysfunction, including tremors, rigidity, and bradykinesia, severely impairing gait, balance, and daily activities. This motor decline contributes directly to physical frailty, increased falls, and dependency. Cognitive and psychological symptoms (depression, anxiety) further worsen functional status.

Psychological Disorders

Depression, anxiety, and cognitive impairments common in the elderly reduce motivation, physical activity, and social interaction, accelerating muscle loss and frailty. Moreover, these disorders impair self-care abilities, worsening management of coexisting conditions and leading to functional deterioration.

Major Operations (Cancer, Transplant Surgeries)

Extensive surgeries like cancer resections or organ transplants cause acute physiological stress and prolonged recovery periods, leading to muscle wasting (sarcopenia), fatigue, and functional decline. Immunosuppressive therapies after transplant increase vulnerability to infections and delayed tissue repair, amplifying frailty risk.

Complications of Uncontrolled Diabetes Mellitus (DM), Hypertension (HT), Liver Disorders

Uncontrolled DM and HT cause microvascular and macrovascular damage affecting multiple organs, leading to neuropathy, retinopathy, nephropathy, and cardiovascular complications, which reduce physical function and independence. Chronic liver disorders induce muscle wasting, coagulopathies, and cognitive impairments (hepatic encephalopathy), all aggravating frailty and functional decline.

Thyroid Disorders

Both hypothyroidism and hyperthyroidism disturb metabolic homeostasis. Hypothyroidism leads to fatigue, muscle weakness, weight gain, and cognitive slowing, contributing to frailty. Hyperthyroidism increases catabolism leading to muscle loss, arrhythmias, and osteoporosis, which heighten vulnerability and functional impairment.

Autoimmune Diseases

Chronic inflammation in autoimmune diseases like rheumatoid arthritis leads to joint deformities, pain, and reduced mobility, accelerating muscle loss and frailty. Systemic effects such as fatigue and an increased metabolic demand further exacerbate physical decline.

3. **Sensory Impairments:** Vision problems like cataracts and glaucoma, hearing loss, and dental issues are prevalent, negatively affecting quality of life.
4. **Cognitive Decline and Mental Health:** Dementia, depression, delirium, and other cognitive impairments are common and contribute significantly to disability and decreased quality of life.
5. **Geriatric Syndromes:** Syndromes such as urinary incontinence, malnutrition, delirium, and mobility issues are multifactorial conditions highly prevalent in the elderly and associated with poor health outcomes.
6. **Polypharmacy and Medication Side Effects:** Older adults frequently use multiple medications, which increases the risk of adverse drug reactions and complicates clinical care.
7. **Psychosocial Issues:** Social isolation, fear of falling, reduced social support, and economic challenges also factor into geriatric health problems.

How Homeopathy Can Help Geriatric Health Problems:

Homeopathy is a holistic and individualized system of medicine which uses highly diluted natural substances aimed at stimulating the body's self-healing mechanisms. It can provide supportive care for the elderly by addressing the root causes and symptoms of their health challenges with minimal side effects.

Benefits of Homeopathy in Geriatrics Health Problems

1. **Chronic Disease Management:** Homeopathic remedies may help improve symptoms of chronic diseases like arthritis, hypertension, asthma, and

- neuropathic pain by modulating immune response and reducing inflammation ^[1, 2].
- Pain Relief:** Many elderly suffer from chronic pain (joint, back, neuropathic). Homeopathic treatments focus on individualized, gentle pain relief without the risk of side effects common with conventional analgesics ^[3].
 - Improved Vitality and Function:** Homeopathy aims at enhancing overall vitality and functional capacity, potentially helping reduce frailty and improve mobility and energy levels ^[4].
 - Mental and Emotional Well-being:** Homeopathy addresses psychological symptoms such as anxiety, depression, insomnia, and cognitive issues which are prevalent among the aged population, thus improving quality of life ^[5, 6].
 - Minimal Side Effects and Drug Interactions:** Elderly patients are vulnerable to adverse drug reactions due to polypharmacy; homeopathy's gentle remedies have minimal side effects and can often be safely used

alongside conventional treatments ^[7].

- Individualized Care:** Homeopathy treats the person as a whole, considering physical, mental, and emotional aspects, which is particularly relevant in addressing the multifaceted health problems in geriatrics ^[8, 7].

Integrating Homeopathy in Geriatric Care

Successful integration of homeopathy into geriatric health management requires an individualized approach:

- Comprehensive assessment of the patient's physical, mental, and emotional health status ^[9].
- Identification of specific homeopathic remedies tailored to the patient's unique symptom profile ^[10].
- Continuous monitoring to adjust remedies as health conditions evolve ^[11].
- Collaboration with conventional healthcare providers to ensure safe, complementary use of homeopathy ^[12].
- Focus on preventive care to improve vitality and delay the progression of chronic conditions ^[13].

Table 1: Homeopathic Medicines for geriatric health problems and Related Factors

Medicine	Indications
Phosphorus	Useful in chronic lung conditions like asthma especially with family history of respiratory diseases; supports cardiac weakness in hypertension; also indicated in patients with bleeding tendencies and chronic fatigue.
Arsenicum Album	Chronic respiratory diseases, asthma with anxiety and restlessness, and digestive issues; beneficial in patients with family history of diabetes or autoimmune disorders with burning pains and weakness.
Natrum Muriaticum	Indicated in chronic hypertension, headaches from high blood pressure; useful in emotional disturbances common in chronic disease; also used in autoimmune conditions like rheumatoid arthritis.
Bryonia Alba	For joint pains, rheumatic complaints, and gout with sharp, stitching pains worsened by movement; indicated in patients with family history of arthritis or gout.
Kali Carbonicum	Rheumatoid arthritis and gout with stiffness and worse in early morning; chronic respiratory complaints; also in thyroid disorders with digestive upset.
Lachesis	Female hormonal imbalances, especially premenstrual syndrome, early hysterectomy symptoms; helps with circulatory problems and menopausal symptoms.
Sepia	Hormonal issues in females including menopausal symptoms, thyroid disorders, obesity with lack of energy; emotional irritability and fatigue.
Calcarea Carbonica	Obesity, hypothyroidism, sluggish metabolism, chronic fatigue, and bone weakness; often indicated in individuals with family history of metabolic disorders.
Silicea	Chronic infections, poor healing, autoimmune disorders; helpful for people with toxic habit history impacting immune system.
Thuja Occidentalis	Chronic skin and glandular issues; used in patients with history of tobacco chewing and exposure to toxins; also indicated for chronic prostatitis in males.
Nux Vomica	For chronic effects of alcohol and tobacco abuse causing liver issues, digestive problems and irritability; hypertension related to lifestyle factors.
Phosphoric Acid	Chronic debility, mental and physical exhaustion, often seen in cancer patients and after major operations; supports recovery from serious illness.
Lycopodium	Digestive and liver disorders, early satiety, obesity; commonly used in males with family history of metabolic and hepatic diseases.
Calcarea Fluorica	Used in chronic bone and joint diseases like arthritis and gout, helping brittle bones and deformities.
Baryta Carb	Useful in elderly with memory loss, cardiovascular issues; helps with frailty from chronic illness or surgeries.
Calcarea Iod	Indicated in thyroid enlargement and disorders with metabolic disturbances.

Indications Related to Key Factors

- Family History of Chronic Diseases (DM, HT, Asthma, RA, Gout, Cancer):** Natrum Muriaticum, Phosphorus, Arsenicum Album, Bryonia Alba, Kali Carbonicum are selected based on symptomatic presentation plus family history.
- Female Hormonal Issues and Early Hysterectomy:** Sepia, Lachesis, Natrum Muriaticum address menopausal, thyroid, and hormonal imbalances with emotional and physical symptoms.
- Obesity and Thyroid Disorders:** Calcarea Carbonica, Lycopodium, Sepia, and Calcarea Iod help regulate metabolism, weight, and thyroid function.

- Tobacco Chewing, Smoking, Alcohol:** Nux Vomica, Thuja Occidentalis support detoxification, improve digestive and respiratory issues, and assist in lifestyle-related chronic conditions.

Conflict of Interest

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References

- <https://medcraveonline.com/IJFCM/pattern-of-geriatric->

- health-problems-and-health-care-seeking-behavior-among-rural-people-in-bangladesh.html
2. <https://indianjournals.com/article/ijphrd-7-3-045>
 3. <https://pmc.ncbi.nlm.nih.gov/articles/PMC3552607/>
 4. <https://www.semanticscholar.org/paper/3f3892952ffdfde9d4a3139314adc4365e47680>
 5. <https://pmc.ncbi.nlm.nih.gov/articles/PMC11512125/>
 6. <http://kjfm.or.kr/journal/view.php?doi=10.4082/kjfm.2018.39.1.10>
 7. <https://pmc.ncbi.nlm.nih.gov/articles/PMC9221786/>
 8. <https://pmc.ncbi.nlm.nih.gov/articles/PMC2409147/>
 9. <https://pmc.ncbi.nlm.nih.gov/articles/PMC1298309/>
 10. <https://pmc.ncbi.nlm.nih.gov/articles/PMC10559431/>
 11. <https://pmc.ncbi.nlm.nih.gov/articles/PMC4326322/>
 12. <https://www.highdilution.org/index.php/ijhdr/article/view/1489>
 13. https://www.irjmeds.com/wp-content/uploads/2024/08/Manuscript_IRJMedS_013_WS.pdf

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