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Easing the Journey: Homoeopathy's role in compassionate end-of-life care

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Abstract

Cancer remains one of the most challenging diseases in modern medicine, often associated with irreversible pathological changes and limited curative options in advanced stages. While surgery, chemotherapy, and radiotherapy are the mainstays of conventional oncology, the role of complementary approaches such as homeopathy in palliative care has attracted increasing attention. This article explores the principles, historical perspectives, and clinical applications of homeopathy as a palliative modality in cancer, aiming to improve patient's quality of life without claiming to cure the disease.

Keywords: Homeopathy, cancer, palliative care, quality of life, symptom management, integrative oncology

Introduction

Cancer is a complex and heterogeneous group of diseases characterized by uncontrolled cell growth and the potential for metastasis. Cancer is not one disease but many disorders with widely different pathogeneses, natural histories, and responses to treatments. Some cancers, such as Hodgkin lymphoma, are curable, whereas others, such as pancreatic adenocarcinoma, are virtually always fatal. Malignant tumors are collectively referred to as cancers, derived from the Latin word for crab, because they tend to adhere to any part that they seize on in an obstinate manner ^[1]. In advanced stages, it is often irreversible and generally considered incurable.

Epidemiology of cancer

The occurrence of cancer is influenced by factors such as geography, age, and heredity. It is seen more often in people above 55 years, but it can also develop at any age, including in children and infants. The differences seen in cancer rates across different regions of the world are mainly linked to variations in environmental exposures.

Several environmental factors play a role in cancer development. These include infections, smoking, alcohol use, diet, obesity, reproductive history, and exposure to harmful environmental carcinogens.

The chances of developing cancer increase when there is long-term tissue damage, chronic inflammation, certain types of abnormal tissue growth (hyperplasia), or weak immunity.

Both environmental influences and genetic background interact with each other and together act as important determinants of cancer risk.

Psychological factors linked to cancer risk & progression

While psychology alone does not cause cancer, certain mental and emotional states may contribute to an internal environment that allows abnormal cells to grow more easily.

1. Chronic Stress

Long-term stress raises cortisol and adrenaline, which can suppress immune surveillance and increase inflammation making it harder for the body to destroy cancerous cells early.

- **Example:** People with prolonged work stress, financial strain, or unresolved emotional trauma may have weaker immune defense.

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2. Unresolved Emotional Trauma

Suppressed emotions like grief, anger, or resentment can keep the nervous system in a “fight-or-flight” state. This dysregulates repair mechanisms in the body. Some psychosomatic medicine studies link chronic emotional suppression to higher incidence of certain cancers.

3. Depression & Hopelessness

Depression affects immunity (reducing NK cells), disrupts sleep, increases oxidative stress, and can alter healthy lifestyle behaviors (poor diet, inactivity, smoking). Cancer patients with strong depressive symptoms often have poorer recovery outcomes.

4. Personality Traits (Type C Personality)

People who are overly agreeable, suppress anger, and avoid conflict may internalize stress.

This "Type C" coping style might be associated with weakened immune response.

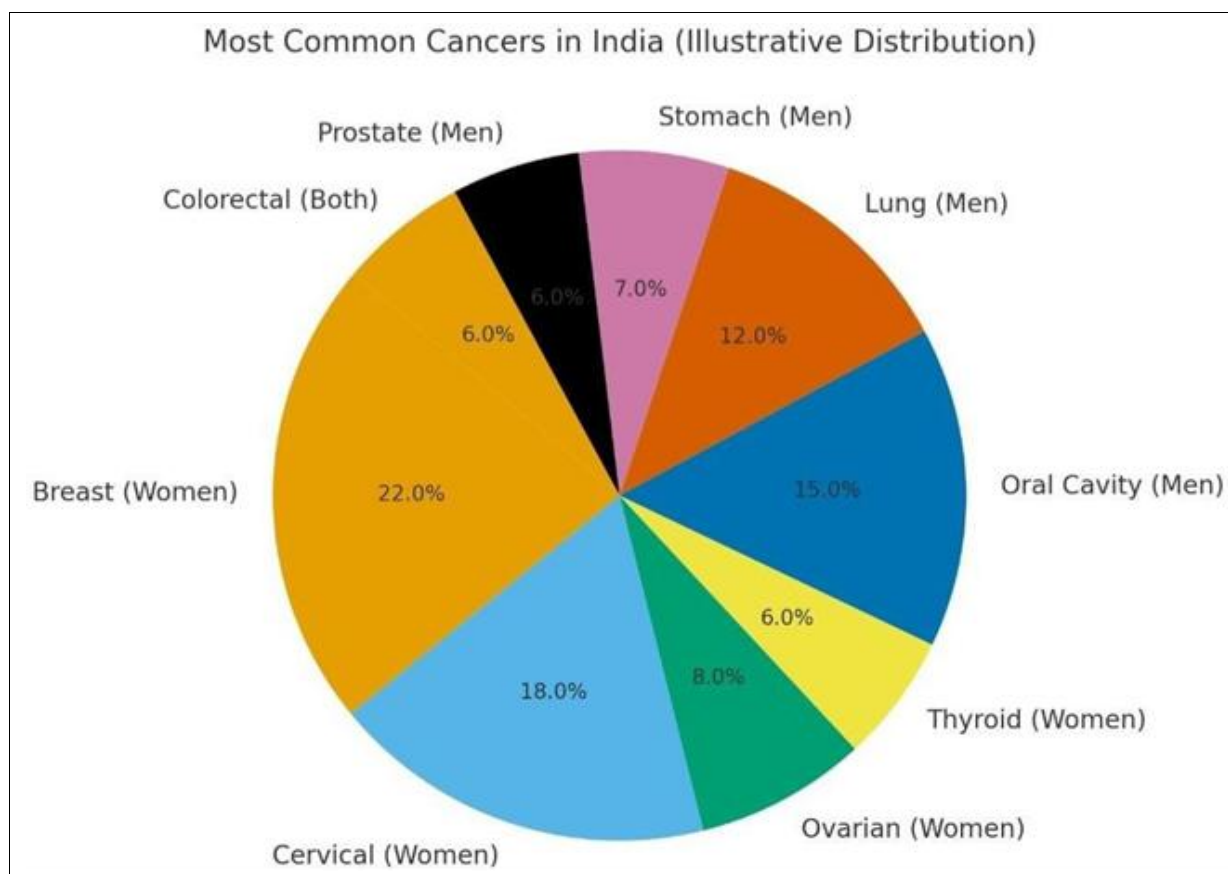
5. Social Isolation & Lack of Support

Loneliness increases stress hormones and inflammatory markers, which may contribute to tumor growth and poorer survival rates.

Most common types of cancer in India

According to ICMR and Globocan data, these cancers are among the top ones in India for both incidence (new cases) and mortality.

Cancer Type	Key facts
Breast cancer	Cancer among women. Accounts for about a quarter of cancers in women in Indian cities.
Cervical cancer	Very common among women. High death toll. Preventable with screening & HPV vaccination
Oral cavity/Mouth/Head & Neck cancers	Very common especially in men, largely related to tobacco (smoking & chewing forms) use
Lung cancer (respiratory cancers)	Among top cancers in men and women. High mortality.
Colorectal cancer	Increasing incidence in India.
Ovarian cancer	Significant among female reproductive system cancers.
Stomach / Gastric cancer	One of the more common cancers among men; also significant in some women.
Prostate cancer	Rising in men, especially older age groups.
Thyroid cancer	More common among women; increasing detection in several regions.



Principles of homoeopathic approach in palliative care for incurable disease: A gentler mode of healing

According to Dr. Samuel Hahnemann, as stated in the *Organon of Medicine*, in cases where cure is not possible, the physician's duty is to alleviate the patient's suffering through palliative treatment, enabling them to live with dignity and improved comfort. This aligns with the central tenet of medicine “to cure sometimes, to relieve often, to comfort always”. Homeopathy can serve as a supportive or palliative form of treatment. In this role, it helps in maintaining overall health, reducing pain, and easing the

suffering that often comes with conventional treatments like chemotherapy or radiotherapy. In advanced or incurable conditions such as carcinoma of the liver, pancreas, lungs, or esophagus where curative treatment is not possible, palliative homeopathic care becomes an important choice.

"As we know, carcinoma are irreversible pathological conditions and are generally considered incurable. However, despite this, palliative treatment can play a vital role in alleviating symptoms and improving the patient's quality of life".

Unfolding the tapestry of time: A historical perspective

In Organon of Medicine Aphorism §205, Hahnemann cautioned against suppressive local interventions for malignant ulcers, warning that they may worsen the internal disease process. Instead, he emphasized individualized, internal treatment aimed at the underlying Miasm. Later stalwarts such as Dr. James Compton Burnett, Dr. J.H. Clarke, have described protocols and case experiences using homeopathy either alone or as an adjunct to conventional oncology, particularly for symptom relief and improved quality of life.

According to Stuart Close, in his classical book "The Genius of Homoeopathy", discusses the scope of homoeopathy not only in curative treatment but also in palliative and terminal conditions. His view is very balanced and often quoted in discussions of palliative homoeopathic care.

The essence of what stuart close said regarding palliative treatment in homoeopathy: Curative vs. Palliative

Homoeopathy is primarily a curative system when the vital force and reactive power of the patient are strong enough. However, in advanced, incurable, or terminal diseases where cure is no longer possible, the role of homoeopathy becomes palliative.

True palliation through law of Similars

Unlike crude palliation by allopathy (which suppresses or masks symptoms), homoeopathy offers "palliation without suppression". Remedies given on the law of similars can relieve pain, suffering, and distress gently, without hastening death or producing harmful side effects.

Ethical duty of the physician

S Close emphasizes that the physician's duty does not end when cure is impossible. Even in the last stages of disease, it is the doctor's obligation to relieve suffering and make the patient's journey peaceful.

Difference from morphine-like palliation

He criticizes routine narcotic palliation, saying it stupefies the patient and interferes with the vital force. Homoeopathy, on the other hand, can soothe pain and mental anguish in a natural and harmonious way. In another words we can say that Stuart Close taught that when cure is impossible, homoeopathy must still serve humanity by providing gentle, non-suppressive palliation, staying true to Hahnemann's principle of "to cure if possible, to relieve where cure is not possible".

According to James Tyler Kent's Lectures on Homoeopathic Philosophy, the subject of palliation is mainly discussed in:

Lecture XXXVII-Difficult and incurable cases palliation

He explains that in incurable cases, palliation with the indicated remedy is the physician's duty, but crude palliation (opium, morphine, stimulants, etc.) is harmful.

According to Dr. James Tyler Kent's Lectures on Homoeopathic Philosophy, he makes very clear remarks about palliation. Kent strongly opposed the idea of palliation with crude drugs, because in his view it only suppresses symptoms, drives the disease inward, and ultimately makes the patient worse.

Kent gives some points regarding palliation: Palliative treatment is unscientific

He says palliation is only temporary relief of symptoms without addressing the underlying cause of disease.

In incurable cases, if palliation is attempted with crude or inappropriate medicines, it shortens life and increases suffering.

Difference between palliation and true relief

Palliation with allopathic or inappropriate medicines merely masks suffering.

True relief in homoeopathy, even in incurable diseases, comes from the similar remedy which brings comfort, peace, and longer life, even if cure is not possible.

On incurable diseases

Kent emphasizes that in cases where cure is impossible, the duty of the physician is not to suppress symptoms with narcotics, analgesics, or crude drugs, but to prescribe the most similar remedy. This remedy may not cure but will alleviate suffering in a natural way and prolong life with better quality.

Against narcotics and Pseudo-palliation

He severely criticizes the use of morphine, opium, and other narcotics for palliation, saying these only "benumb the vital force" and "rob the patient of comfort and rational existence".

Guiding Lights: Homoeopathic principles in palliative cancer care

- **Individualization of remedy:** Remedies are selected based on the totality of symptoms-physical, mental, and emotional- rather than on the cancer diagnosis alone.
- **Management of Symptoms:** Homeopathy may be used to address pain, nausea, vomiting, anorexia, constipation, breathlessness, fatigue, and anxiety commonly seen in cancer patients.
- **Supportive role in conventional oncology:** Remedies may be prescribed alongside chemotherapy or radiotherapy to help manage side effects such as mucositis, neuropathy, dermatitis, and post-treatment fatigue.
- **Holistic Approach:** Treatment aims not only at physical symptoms but also at improving mental well-being, sleep quality, and overall vitality.

Commonly used homeopathic remedies in palliative cancer care ^[2]

Symptom	Indicated Remedy
• Pain in hard tumors	<i>Conium maculatum, Phytolacca, Bellis perennis.</i>
• Ulcerative Lesions	Cundurango, Hydrastis, Arsenic album.
• Profound Weakness	Carbo veg, Phosphoric acid.
• Anxiety and Restlessness	<i>Arsenic album, Aconitum Napellus.</i>
• Side effects of radiotherapy	<i>Radium bromatum, Calendula officinalis.</i>
• It can be used to reduce the lancinating pains of cancer	Cedron
• Maintains the system under the stress of malignancy regardless of location.	<i>Arsenicum album.</i>
• Breast cancer with hard and stony lumps	Calcarea flour
• Scirrhus and uterus malignancies with burning where oozing of fluid is black and putrid	Lapis albus

• Can be used as adjuvant to reduce cancer pain and also sarcoma with yellow and offensive discharge	Silicea
• bone cancerous remedy	Hecla lava
• Scattered lipomas	Bryta carb
• Can cure ovarian cancer and mammae cancer with tuberculosis tinge	Bryta iodium
• In mastitis and induration of breast	<i>Plumbum iodium</i>
• Mammae cancer	Bromine
• Cancer with bleeding tendency	Phosphorus
• Uterus cancer	Iodium
• Epithelial cancer	<i>Cicuta virosa</i>
• Facial epithelial cancer	Kali Sulph

Navigating the ethics landscape

It is essential to communicate transparently with patients, clarifying that homeopathy in cancer care is not a substitute for evidence-based oncological treatments. Instead, it can be integrated as part of a multidisciplinary palliative care plan to maximize comfort and support the patient's holistic needs.

Management of cancer patient food management

Nutrition plays a vital role in cancer care. Adequate dietary management helps maintain strength, supports immune function, reduces side effects of treatment, and improves overall quality of life. Food management must be individualized according to the patient's type of cancer, stage, treatment plan, and overall health condition.

Role of Nutrition in cancer care

- Maintain healthy body weight and prevent malnutrition.
- Support immune system and tissue repair.
- Manage treatment side effects such as nausea, loss of appetite, and taste changes.
- Enhance tolerance to chemotherapy, radiotherapy, or surgery.
- Improve recovery rate and quality of life.

Holistic psychological support in cancer care

- **Counseling & Psychotherapy:** Helps process emotions and reduce stress. Mindfulness & Meditation: Lowers cortisol and improves immune health. Support Groups: Improve emotional resilience and social connectedness.
- **Positive Coping Strategies:** Optimism, spiritual well-being, and a sense of purpose can improve outcomes.

Conclusion

Homeopathy, when applied in accordance with its principles, can play a supportive role in the palliative care of cancer patients. While it does not claim to cure cancer, it may contribute to symptom relief, emotional support, and improved quality of life. Cancer is not caused solely by the mind, but the mind and body are deeply connected. A healthy psychological state supports immune defense, recovery, and resilience during treatment. Palliation with the indicated remedy is the only true relief. In incurable cases, homeopathy still has the mission of relieving the patient gently, naturally, and without injury.

Conflict of Interest

Not available

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