Subjective pain relief experienced in Musculoskeletal System (MSS) Disorders by elderly patients on homeopathic medicines: An observational study

Dr. Anoop M Nigwekar and Dr. Nikunj J Jani

DOI: https://doi.org/10.33545/26164485.2021.v5.i1c.309

Abstract

Objectives: To investigate the role of individualized homeopathic medicines in treatment of the Musculo Skeletal Disorders (MSS) of the elderly.

Materials and Methods: An Observational cohort study was done by the secondary data analysis of 278 patients (age group of 60-65 years) visiting the Homeopathic hospital from a period of 10 years (2000-2010) to observe the subjective relief with homeopathic medicines in the Musculo Skeletal System Disorders (MSS).

Result: In the study after using homeopathic medicines, 7.32% of patients reported 25% relief, 35% of patients had 50% relief, 17% patients were better by 75%, 14% patients were free of pain and ease in mobility, while 16% patients reported no relief. Homoeopathic medicines like Kali Carb (27.3%), Silicea (21.2%), and Calcarea Flour (13.7%) were the most indicated remedies in the elderly patients with MSS complaints and centesimal scale (30C - 38% of patients & 200C - 59% of the patients) was the most common potency scale used.

Conclusion: Homoeopathy is effective in offering subjective sense of relief in elderly patients from their MSS complaints.

Keywords: Homoeopathy, elderly, geriatrics, musculoskeletal system (MSS) disorders, pain relief

Introduction

There is a serious compromise in the lifestyles of the elderly patients due to pain in joints and they necessarily seek pain relief to maintain their mobility and independence. The goal of pain management is relief in pain, enhanced comfort in conducting activities of daily living, though pain may not be totally eradicated. The elderly adopt multiple strategies that can range from prescribed medicines, home remedies, massage, heat and cold packs, alternative therapies to resolve this problem [1]. Typically, pain arises from either degenerative change of Musculo-skeletal system or poly morbidity or cancer. In a study of literature related to pain management in elderly, it was found that there were inconsistencies as to whether pain increases or decreases within the age groups and whether gender influences pain. The study had focused on a community population sample, residential care populations and mixed residential and non-residential care populations as well across the seven continents. The findings suggested the evidence of the prevalence of pain being higher within residential care settings. They also found that the most common sites of pain are the back, leg/knee, and hip [2].

There is evidence of co-existence of Clinical Depression in patients who suffer from arthritis associated with pain in elderly above 60 years of age [3]. A study done in Turkey, reported the effectiveness of acupuncture therapy in reduction of pain in low back pain and knee and also reduces the side effect of polypharmacy in elderly [4].

There is a need for research and education to enhance our understanding of pain and its management amongst the elderly. Existing pain management strategies must be tailored for the special needs of the elderly population [5]. Homoeopathy has a lot to offer to the healthcare needs of the elderly. A study understanding the health seeking pattern of the elderly patients visiting a homoeopathic hospital for over a period of 10 years demonstrated that 39.9% patients of the total sample of 2034 having sought the Homoeopathic OPD service for MSS pain, out of the entire population 54% were in the age group of 60 – 65 years [7].

Homoeopathic medicines help in reducing the pain and stiffness in joints, they help in limiting progress of the disease and they help in improving the activities of daily living in
patients with joint disorders [8]. In an observational study conducted in India, it was noted that individualized homoeopathic medicines helped in improving the pain and disability index in chronic low back, pain regardless of sex and occupation [9]. Efficacy of homoeopathy has been seen in elderly patients with knee joint pains [10, 11, 12], heel pains [13] and degenerative joint complaints of the elderly [14, 15].

In a study conducted in France, it was observed that elderly patients who consulted conventional-medicine physicians were 3.7 times more likely to be prescribed Nonsteroidal anti-inflammatory drugs (NSAIDs), than those who sought consultation from a homeopathic physician. The study also reported that, use of homeopathic medicines for MSS complaints was associated with the decreased use of NSAIDs and noted that the NSAID use was significantly high in elderly patients consulting a conventional physician than in those consulting a homeopathic physician [16].

Material and Methods

Study design and setting
An Observational cohort study was done by the Secondary data analysis of the Homoeopathic Case records of patients complaining of MSS disorder visiting the institute for a period of 10 years from 2000-2010. The findings were observed on a simple matrix of Subjective pain relief obtained as recorded by physicians who attended to patients from time to time.

Eligibility criteria
1. Inclusion Criteria
   a. Patients having MSS complaints and in the age group of 60-65 years.
   b. Patients who reported relief or no change in pain in terms of intensity and frequency and ease of movement of painful joint or musculature involved.

2. Exclusion criteria
   a. Patients taking conventional medicine for their MSS pain.

Results
1. Original case records of 278 patients were studied.  
2. It was found that 58% of these patients were females. The subjects variously reported symptoms suggestive of Arthralgia, Myalgia, Osteoarthritis, etc.
3. Out of the 278 patients it was noted that - 17.32% of patients reported 25% relief, 35% of patients had 50% relief, 17% patients were better by 75%, 14% patients were free of pain and ease in mobility, while 16% patients reported no relief. (Fig 1)

4. The Homoeopathic remedies were chosen based on individualised indications. The graphs below represent the relief status age and sex wise; it demonstrates that the Males show more relief than the females across the age band. (Figures 2 and 3)

5. In the study a wide range of homoeopathic medicines were used, but the most used Chronic individualized Homoeopathic medicines for Chronic Musculo-Skeletal Disorders (MSS) in the elderly patients were-Kali Carb (76 cases), Silicea. (59 cases), Calcarea Flour (38 cases), Natrum Mur (29 cases), Lycopodium (10 cases), Calcarea Carb (9 cases) and Ferrum Metallicum (9 cases). (Figure 5)

6. In the study, the use of different potencies of homoeopathic medicines was observed. The commonest potency used were 30C (106 patients), 200C (164 patients). The other potencies used were 6X, 1M and 0/1 (8 patients). (Figure 6)

7. In the study it was observed that patients also sought help of Homoeopathic medicines in Acute Pain, following Homoeopathic remedies were more commonly used to manage the acute complaints of Musculo-Skeletal Disorders (MSS) in the elderly- Rhus Tox, Bryonia, Kalmbia, Pulsatilla &Ruta.

Fig 1: Relief Obtained With Homoeopathy

Fig 2: Association of Age with rate of improvement in male patients
Discussion
The subjective inputs received from patients were considered. It was observed that a significant number of elderly patients experienced subjective relief in their MSS complaints after taking Homoeopathy. It was observed that 17.32% of patients reported 25% relief, 35% of patients had 50% relief, 17% patients were better by 75%, 14% patients were free of pain and ease in mobility, while 16% patients reported no relief. This demonstrates that homoeopathy as a treatment modality helps in reducing the subjective distress of the MSS pain in the elderly. The male reporting more relief than females could be attributed to the age-related hormonal changes that affect calcium metabolism in females. The study indicates that recording and evaluation if done in a standardized manner will help derive better conclusions. This study does not specify the relief obtained in any specific clinical condition of MSS. The scope of study was observational. Hence, some inherent limitations do exist in this study that can be overcome by further refined studies using prospective studies with appropriate pain scale and statistical tools to ensure that the relief is not by chance but due to intervention and will also establish the effectiveness of homoeopathic medicines more effectively.
Conclusions
This study shows that Homoeopathy fits the bill perfectly in managing patients for chronic geriatric care having MSS complaints. A significant number of elderly (60-65 years of age) experienced subjective relief in their MSS complaints. Homoeopathic medicines were readily accepted and consumed by the geriatric population.

Financial Support and Sponsorship: Nil.

Conflicts of Interest: None.

References