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Dr. Yamuna Tenka

Department of Pharmacy,
Guru Mishri Homoeopathic
Medical College, Maharashtra
University of Health Science,
Maharashtra, India

Dr. Likhitha Bendalam

Department of Paediatric,
Guru Mishri Homoeopathic
Medical College, Maharashtra
University of Health Science,
Maharashtra, India

Dr. Sujit Telagamsetty

Department of organon, Guru
Mishri Homoeopathic Medical
College, Maharashtra
University of Health Science,
Maharashtra, India

Corresponding Author

Dr. Yamuna Tenka

Department of Pharmacy,
Guru Mishri Homoeopathic
Medical College, Maharashtra
University of Health Science,
Maharashtra, India

Homoeopathic approach towards women's health

Dr. Yamuna Tenka, Dr. Likhitha and Dr. Sujit Telagamsetty

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Abstract

This article provides a brief introduction to homoeopathy, including its historical origins and theoretical principles. Also included may be a review of two meta-analyses that examined the efficacy of homoeopathy in clinical trials. The homoeopathic approach towards prolonged pregnancy is presented as an example of a possible application to women's health. Information on education and certification in homoeopathy is provided, along with resources on homoeopathy available to women's health care providers.

Keywords: homoeopathy, mastitis, post term pregnancy, women's health

Introduction

A 1997 survey revealed that 40% of USA citizens use a minimum of one sort of complementary therapy or medicine as a part of their health care (Eisenberg *et al.*, 1998)^[9]. Homoeopathy is one such therapy that has seen an increased use within the us within the last decade alongside the rise in consumer interest there has been an increased interest on the a part of health care professionals in obtaining training in homoeopathy many of us choose complementary therapies because they find them to be more congruent with holistic values, or because they're perceived as less likely to cause harmful side effects (Murphy, Kronenberg, & Wade, 1999)^[20]. This motivation may particularly draw people to homoeopathy because the substances utilized in treatment are very dilute and are less likely than many conventional pharmaceuticals to steer to undesirable side effects the aim of this text is to present an introduction to the idea of homoeopathic medicine, the present state of research on its effectiveness, and its application to women's health care.

The Historical Origins of Homeopathy

Homoeopathic medicine was developed by a German physician named Samuel Hahnemann. After earning a doctor of drugs degree in 1779 from Leipzig University, Hahnemann began to critically question the quality medical practices of the day, like bloodletting (McCabe, 1997). He became increasingly disillusioned with the traditional medicine of his contemporaries, and eventually he refused to practice it out of fear of doing more harm than good (Cummings & Ullman, 1984). Hahnemann was a scholar of the many languages, and in an attempt to financially support his family he turned to translating texts. These translations included variety of serious medical, agricultural, and chemical books, notably materia medicas from English, French, and Italian (Grossinger, 1993). This work broadened Hahnemann's exposure to the medicinal use of plants and chemical compounds and introduced him to the principle of similars, an idea that he would later expound because the Law of Similars. In 1789, Hahnemann was hired to translate a book titled A Treatise on pharmacology, written by a Scottish physiologist named William Cullen. This text included an account of the physician's observation of the drug Cinchona, known now as Quinine and derived from the bark of the Cinchona pubescens. Cinchona was wont to treat the disease then called intermittent fever and now referred to as malaria (McCabe, 1997)^[18]. Cullen had observed that the natives of Peru who routinely chewed the bark appeared to develop an immunity to the disease. Hahnemann was intrigued by Cullen's claim that the bitter and astringent properties of the bark accounted for its effectiveness in treating the illness (Cummings & Ullman, 1984). He acquired a number of the bark himself, and for several days he ingested high doses of it. The events that followed would convince be the catalyst for the next development of the principles of homeopathy.

Hahnemann named this treatment approach homeopathy, a word derived from the Greek words homoios, meaning "similar" and pathos for "suffering" or "disease."

The Law of Similars

Hahnemann discovered that Cinchona temporarily induced symptoms like facial flushing, heart palpitations, and a quickened pulse that are typically related to malaria (Cummings & Ullman, 1984)^[7]. He wrote, "Cinchona bark which is employed as a remedy for intermittent fever, acts because it can produce symptoms almost like those of intermittent fever in healthy people" (McCabe, 1997)^[18]. With this observation made and articulated, Hahnemann had begun to advance what he would call the Law of Similars. Hahnemann studied records of accidental poisonings with commonly used medicines of the time, like mercury and arsenic. He discovered that in large amounts these medicines caused symptoms almost like those of the illnesses that they were wont to cure (Cummings & Ullman, 1984)^[7]. These early observations formed the idea of the concept "let like be cured with likes" or what became referred to as the Law of Similars. In essence, Hahnemann asserted that substances given in small doses stimulated the organism to heal that which they cause in overdose. Hahnemann named this treatment approach homoeopathy, a word derived from the Greek words homoios meaning similar and pathos for suffering or disease. The law of similars wasn't an ingenious idea, and although it's not utilized in contemporary mainstream medicine, parallel practices exist. The concept had been recognized by figures like Hippocrates, who within the 4th century BC wrote, "Through the likes of, disease is produced, and thru the appliance of the likes of it's cured" (Cummings & Ullman, 1984)^[7] this idea has also been reflected in conventional practice. For instance, although radiation may be a widely accepted therapy wont to treat cancer, in high doses it can also cause cancer. Homoeopaths describe the method of immunization as being according to the law of similars, as small doses of agents that really cause the illness are given to patients on the principle that they're going to then develop immunity to them.

The Vital Force

To further test his hypothesis, Hahnemann administered a series of experiments. He demonstrated to his satisfaction that in healthy people a medicinal substance regularly elicits an array of signs and symptoms closely resembling people who it helps cure within the sick. Hahnemann interpreted the results of those experiments to mean that the outward manifestations of illness already represent the concerted efforts of the organism to heal itself which the similar remedy acts by reinforcing that attempt in how (Moskowitz, 1992)^[19]. He came to believe that an innate life force within each person's body stimulated the body to heal itself. the thought of an invisible force that carries and contains the life energy of the living being was another concept that Hahnemann couldn't take credit. This philosophy had been postulated by various thinkers at different times and in several cultures round the world. for instance, in traditional Chinese medicine it had been mentioned as chi, and therefore the French called it life force (Castro, 1999; McCabe, 1997)^[18, 4]. Vitalists past and present believe that because all creation is alive, all creation is therefore self-healing, and by making proper use of the life energy of other parts of creation, be they animals, vegetables, or minerals, we will use that spark to empower our own energies (McCabe, 1997)^[18]. Within this conceptual framework, disease is viewed as a

derangement of the life force that itself gives rise to susceptibility to symptoms or illness (Lockie & Geddes, 1995)^[17]. Homoeopathic practitioners maintain that homoeopathy can treat susceptibility by correcting the imbalance of health before the onset of illness. Homeopathic remedies are prepared to figure during a dynamic way on the life force, taking under consideration those symptoms or tendencies identified or exhibited by the patient. Hahnemann asserted that the traditional treatments of his time usually resulted simply during a short-term suppression of symptoms. He believed that symptoms often returned because the life force wasn't engaged effectively enough to stimulate healing. Hahnemann criticized his conventional medical contemporaries because, he maintained, they selected the character of the disease by relating the patient's state to a theoretical understanding of the overall causes of disease (Croce, 2001)^[5]. To the homoeopathic practitioner, symptoms are the outward expression of the inward disease, or the language that the life force uses to explain its disease. Hahnemann regarded appropriately chosen remedies as catalysts, able to stimulate the body's defenses in an organized and effective manner. With the law of similars, Hahnemann developed a highly systematic method to individualize the selection of the proper catalyst (Cummings & Ullman, 1984)^[7] an important law in homeopathy is that the principle of the minimum number of doses. Hahnemann believed that the physical body had inherent healing powers that only needed a little stimulus to start and maintain the healing process. Once the healing process was under way, it had been not necessary to stay repeating doses of drugs (Cummings & Ullman, 1984)^[7].

The Development of Homoeopathic Remedies

Having proposed the law of similars, Hahnemann recognized the need for human experimentation to delineate the curative indications and actions of varied therapeutic agents (Withoukas, 1980)^[25]. He enlisted the help of like-minded physicians, who agreed to start systematically testing substances by ingesting them themselves then documenting any symptoms they experienced, during a process referred to as provings. Contrary to standard practice, during which medicinal substances were tested using sick persons or animals, Hahnemann gave remedies to healthy persons then recorded their effects. This included not only noting physical symptoms but also noting any emotional changes the person experienced while taking the remedy. Inherent within the proving methodology is that the belief that each substance has the potential to make a spread of physical, emotional, and mental symptoms that are unique thereto particular substance (Cummings & Ullman, 1984)^[7] the first provings conducted by Hahnemann and his colleagues took 6 years, and detailed accounts of their experimentation with various remedies were compiled (Withoukas, 1971)^[24]. The results of those provings were compiled into Hahnemann's first pharmacology, the primary systematic written account of experimentation with medicinal drugs given to healthy citizenry (Cummings & Ullman, 1984)^[7]. As outlined earlier, Hahnemann began to explore the validity of his theories using human volunteers as provers for various substances and their effects. Since he recognized that a number of these substances were toxic or lethal in high doses, Hahnemann

administered them in highly dilute doses to make these highly dilute doses, he devised a process called potentization. Within the process of producing homeopathic medicines, the substances used are usually dissolved during a mixture of 90% pure alcohol and 10% water. The mixture is shaken occasionally and left to face for about 2-4 weeks. The mixture is then drained through an outsized press, and therefore the resulting liquid is understood because the mother tincture (Lockie & Geddes, 1995) ^[17]. One drop of this tincture is added to 99 drops of an alcohol and water mixture, and this is often vigorously shaken or succussed 40 times. The mixture is diluted and succussed repeatedly until the specified strength is achieved. Homeopathic medicines made within the us are manufactured from plant, animal, and mineral extracts consistent with standards published within the Homoeopathic Pharmacopoeia of the us. The Homoeopathic Pharmacopoeia of the us contains all of the knowledge necessary for correct identification of the raw materials wont to make homeopathic medicines, also as techniques for his or her manufacture and internal control. Approximately 60% of homeopathic medicines are taken from vegetable substances, and 20% each are made up of animal and mineral sources (Lockie & Geddes, 1995; McCabe, 1997) ^[17, 18] the bulk of homeopathic medicines (those of plant, animal, and mineral derivation) are available over the counter or without a prescription. Since 1938, homeopathic remedies are recognized as drugs and their manufacture and sale regulated by the Food and Drug Administration. Hahnemann believed that dilution of a substance increased its curative power while simultaneously decreasing its potential toxicity (Gray, 2000) ^[10]. In effect, the more dilute a remedy, the stronger it's and therefore the higher the amount or potency. Conversely, a less dilute remedy isn't as strong and thus features a lower number or potency (Lockie & Geddes, 1995) ^[17]. Most homeopathic medicines available today contains lactose-based tablets or pellets that are impregnated with a couple of drops of the potentized remedy (Lockie & Geddes, 1995) ^[17]. Varying potencies are an immediate results of the amount of times the first tincture is diluted. Two scales are used for describing the dilution of homeopathic remedies substances: the decimal (x) and therefore the centesimal (c). the primary dilution using the decimal scale is that the 1x. this is often achieved when one tenth of the mother tincture is added to nine tenths alcohol then shaken vigorously (Castro, 1999) ^[4]. The centesimal scale is diluted using one part during a hundred of the mother tincture and is denoted using the letter c after the dilution number. Most homeopaths consider medicines that are diluted 15 times or less to be of low potency, whereas high potency medications are people who are diluted to a greater degree (Cummings & Ullman, 1984) ^[7].

The idea of potentization is one among the best controversies of homeopathy. Most scientists maintain that it's unlikely that any molecules of an ingenious substance remain after a homeopathic remedy has been diluted beyond the 12c potency which any effect achieved using these potencies is essentially due to the consequence. Homeopaths assert that the homeopathic literature has recorded many successes within the treatments of both animals and infants, and that they argue that neither are vulnerable to the consequence (Castro, 1999) ^[4].

Clinical Research on Homeopathy

Although homeopathy is experiencing a renaissance within the us, there are few U.S. studies conducted to look at the efficacy of treatment or to further understand its mechanism of action. Much of the homeopathic literature consists of anecdotal, narrative testimonies by patients and practitioners who believe that homeopathic therapy has contributed to the resolution of their problems. This is not so surprising, as long as the first research approach in homeopathy was one among observation of people treated one by one with a specific remedy, and that homeopathic prescribing depends heavily on the concept of individualized treatment. Disease isn't treated on the diagnosis alone, but rather consistent with the entire clinical picture, including past history and therefore the general type or constitution of the patient (Cummings, 1995) ^[6]. Prescriptive practices of biomedicine are predominantly based upon the diagnosis of the disease alone, although some other patient characteristics are considered, such as allergies, additional diseases, and adherence to the treatment.

Conventional clinical test methodology is defined by the concept of administering one treatment to all or any patients who have an equivalent diagnosis. This method doesn't take into consideration other variables that homeopathic practitioners believe are critical to an accurate diagnosis and treatment regimen. The selection of any homeopathic medicine is made on the totality of the patient's symptoms. In theory, any remedy might be used for any condition if the symptoms generated by the remedy match the symptoms experienced by the patient. The homeopathic definition of a symbol is more comprehensive than the traditional medical interpretation. For the homeopath it means any change that is experienced or observed during the course of an illness (Cummings & Ullman, 1984) ^[7]. Factors such as physical and mental states and changes in response to environmental stimuli are all considered relevant.

The widespread use and acceptance of this modality in other countries have resulted in most of the clinical studies of homeopathy being conducted outside the United States. It was not until 1994 that a mainstream peer reviewed American medical journal published a randomized clinical trial of homeopathic medicine (Jacobs, Jimenez, Gloyd, Gale, & Crothers, 1994). Although most randomized trials conducted so far don't pertain to women's health care issues, current practitioners are publishing on homeopathic treatments for ladies and knowledge is out there that will help health care professionals to understand the range of homeopathic treatments used in women's health care.

Contemporary Examinations of the Efficacy of Homeopathy

In 1991, a search team of epidemiologists based at the University of Limburg published a meta-analysis of clinical trials of homeopathy. Their stated objective was to determine whether there's evidence of the efficacy of homeopathy from controlled trials using human subjects. They began by assessing the methodological quality of 107 controlled trials that had been conducted worldwide. The trials were scored employing a list of predefined criteria of excellent methodology, and therefore the outcome of the trials was interpreted in reference to their quality (Kleijnen, Knipschild, & Riet, 1991) ^[14]. The researchers noted that a lot of of the trials appeared to be of very inferiority. Of the 105 trials with interpretable results, 81 indicated positive

results and 24 showed that no positive effects of homeopathy were found compared with mostly placebo controls (Kleijnen *et al.*, 1991) ^[14]. The authors noted that publication bias must be taken into consideration. They asserted that alternative journals could also be more likely to simply accept studies with positive results which reports of trials with negative results might not be submitted for publication or were rejected. Conversely, regular journals may have more readily published the results of negative trials and rejected those with positive results. In 1998, Linde and Melchart published a meta-analysis of placebo-controlled clinical trials on all sorts of homeopathy. The results of this meta-analysis were that homeopathic treatment strategies were on the typical simpler than placebo, although consistent with the authors, there was a scarcity of independently replicated study sets (Linde & Melchart, 1998) ^[15]. The authors also reported evidence of publication bias and bias within the studies which will have led to an overestimation of the calculated effects size (Linde & Melchart, 1998) ^[15]. In 1998, Linde and Melchart conducted a review of randomized controlled trials of traditional homeopathy, with the goal of examining the clinical efficacy of this diagnostic process also because the remedies used. In individualized or classic homeopathy, the remedy choice isn't supported a standard diagnosis but rather is chosen by matching the patient's symptoms with the remedy picture as described earlier. The authors evaluated randomized or quasi-randomized controlled clinical trials, during which the bulk compared an individualized homeopathic remedy with a placebo (Linde & Melchart, 1998) ^[15]. Information concerning patient population demographics, methods, interventions, outcomes, and results was extracted during a standardized manner, and quality was assessed employing a checklist and two scoring systems. Those trials that provided sufficient data for evaluation and analysis were pooled during a quantitative meta-analysis (Linde & Melchart, 1998) ^[15]. Of the 32 trials evaluated, 28 were placebo controlled, 2 compared homeopathy with another treatment, and a couple of compared homeopathy with both placebo and another treatment consistent with the authors, the methodological quality of the trials varied widely. Linde and Melchart asserted that within the 19 placebo-controlled trials that provided sufficient data for meta-analysis, individualized homeopathy was significantly simpler than placebo. However, when the analysis was restricted to the methodologically best trials, no significant effect was seen (Linde & Melchart, 1998) ^[15]. Linde and Melchart stated that one fundamental problem is that homeopathic trials aren't often preceded by organized and well-planned pilot tests. They acknowledged that resources to fund studies are scarce which double-blind conditions and placebo controls often interfere with everyday conditions of usual homeopathic practice (Linde & Melchart 1998) ^[15]. Interpretation of studies are often complicated because in homeopathic practice the right remedy choice may change because the clinical picture changes with the patient. within the context of a double-blind trial, the homeopath might not make certain if the responses, changes, or lack of responses are thanks to a failure to seek out the right remedy, a symptoms shift, lack of efficacy, or just because the patient is within the control group (Linde & Melchart, 1998) ^[15]. The limited experience of homeopaths

in conducting clinical trials is another issue. The motivation to conduct research could also be for justification within the face of skepticism, instead of innovation or critical evaluation of practice. The authors concluded that although the results of obtainable randomized trials with individualized homeopathy suggested an impact over placebo, the evidence wasn't strongly supported, partly due to methodological shortcomings and inconsistencies. They went on to suggest that future randomized studies should be preceded by pilot studies, and future research should specialize in the replication of existing promising studies (Linde & Melchart, 1998) ^[15].

Applications to Obstetric Care

Homeopathy has been wont to treat a good sort of health concerns, including problems encountered in gynecologic care and through childbearing. for instance, homeopathy has been recommended for treatment of a good sort of discomforts and problems during pregnancy and therefore the postpartum, including anemia, nausea, pica, breech delivery, mastitis, and prolonged pregnancy, to call a couple of (Beal, 1998; Brennan, 1999; Castro 1999) ^[1, 27, 4] for instance how homeopathy is used in women's health care, a homeopathic approach to the matter of prolonged pregnancy are going to be outlined.

A frequently encountered clinical problem during the childbearing cycle may be a prolonged pregnancy without the spontaneous initiation of labor. consistent with the planet Health Organization, a protracted pregnancy is one that exceeds 42 completed weeks or 294 days or more (Cunningham *et al.*, 2001) ^[8] consistent with Williams Obstetrics, the incidence varies greatly, counting on the standards used, but it's estimated that approximately 8% of pregnancies are going to be prolonged.

Conventional health care providers usually manage prolonged pregnancy with the induction of labor, either by means of cervical ripening agents, the administration of oxytocin, or a mixture of the two. The first concern with a pregnancy that has exceeded a traditional duration is placental dysfunction. Generally, conventional health care providers assess the readiness of the cervix for induction then develop an appropriate plan of induction using the varied agents that are available.

The homeopathic management of the prolonged or post term pregnancy first takes into consideration that there could also be psychological issues impeding the spontaneous initiation of labor. The homeopathic practitioner will often begin the management of this problem with a frank discussion with the patient concerning any fears or emotions which will be preventing the initiation of labor. The practitioner also will encourage a dialogue between the patient and her significant other(s) to process any issues which will got to be addressed before the baby is born (Idarius, 1996) ^[12].

Many homeopaths consider this emotional clearing to be a primary initial step within the management of this problem. The homeopathic practitioner also will use homeopathic medicines to stimulate the patient's life force to naturally initiate the labor process (Brennan, 1999) ^[27]. Several homeopathic medicines typically are wont to manage this problem. Some practitioners employ the utilization of one remedy, whereas others have developed protocols that involve the utilization of several remedies over the course of three to six days. In accordance with the homeopathic prescribing method, an in depth history is taken, including emotional also as physical changes. The homeopathic

medicines *Caulophyllum* and *Cimicifuga* are perhaps the 2 most generally used.

It's interesting to notice that they're derived from the plants blueberry root and black snakeroot, which are employed by herbalists for induction and augmentation of labor. *Caulophyllum* may be a remedy used for uterine dysfunction, and consistent with homeopaths it's been successfully used to both induce and augment labors. This remedy could also be beneficial during a labor characterized by abnormal uterine contractions that are often extremely uncomfortable to the patient yet fail to dilate the cervix (Moskowitz, 1992)^[19] consistent with Moskowitz, the patient's psychological state is typically characterized by nervous excitement and a particular component of apprehension. *Cimicifuga* is another homeopathic medicine commonly used to stimulate the onset of labor, particularly with patients who have a history of frightening experiences of childbirth, miscarriage, or abortion (Moskowitz, 1992)^[19].

Several protocols using these remedies are developed by homeopathic practitioners. One developed by licensed midwife Betty Idarius involves alternating doses of *Caulophyllum* and *Cimicifuga* for a complete of six doses in 24 hours. No remedy is employed subsequent day, and therefore the remedy protocol is repeated on Day 3 if needed (Idarius, 1996)^[12].

Conclusion

There is little question that a lot of areas of gynecology are often overspecialized, with overuse of surgery that considerable amount of them are unnecessary.

Using the contraceptives and fertility pills are dangerous to the patient, especially hormonal treatments which are often carcinogenic and shows side effects as an example estrogen given for decent flashes and vaginal dryness, causes unwanted fat and water retention, and increase the danger of endometrial carcinoma and carcinoma. Disease usually originates within the body long before symptoms appear. Homeopathy focuses on understanding initial causes of disease, not waiting to treat later pathology. Homeopathy is an efficient and safe alternative to synthetic hormones.

It doesn't place the patient in danger supported treating "like with like," homeopathy uses the individualized remedy which produces similar symptoms during a proving testing the remedy's effects on healthy people and matches this similar remedy to those symptoms the patient is experiencing.

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