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Homeopathic Medical College Consultant at Shree Mumbadevi Homeopathic Hospital and Homeopathic c) Psychiatric Consultant. Mumbai, Maharashtra, India Understanding the effectiveness of homoeopathic medicine (anti-miasmatic remedy, organ remedy, anti-miasmatic + organ remedy) in cases of type 2 diabetes mellitus

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Abstract

Background: Studies show that both Antimiasmatic remedies, as well as Organ remedies, are useful in controlling the blood sugar levels. In clinical practice, it is seen that at times both are given together. This study attempts to understand the effectiveness of homoeopathic medicine (anti-miasmatic remedy, organ remedy, anti-miasmatic + organ remedy) in cases of type 2 diabetes mellitus.

Material and method: Four groups meeting the inclusion and exclusion criteria were made and observed for 12 months:

- Anitmasmatic group
- Anitmasmatic + Organ remedies group
- Organ remedies group and
- Not on homoeopathic medicine group

A standard gradation and outcome assessment criteria were formed for assessment of the response. **Results:** Analysis of the result shows the beneficial role of homoeopathic medicines either in single or in combination with organ remedies in the management of type 2 diabetes mellitus. Organ remedies had also shown its effectiveness in managing the blood sugar levels in patients with low susceptibility. **Conclusion:** Antimiasmatic remedies, Organ remedies and Anti-miasmatic remedies + Organ remedies have been found statistically significant in the management of type 2 diabetes mellitus.

Keywords: Antimiasmatic remedy, organ remedy, antimiasmatic + organ remedy

Introduction

Diabetes Mellitus Type 2 is a very common disorder found in the Asian Indians. According to the World Health Organization, approximately 180 million people worldwide currently have type 2 DM (formerly called adult-onset diabetes); over 95% of people with diabetes have this form. The number of people with type 2 DM is estimated to double by 2030 [1]. Diabetes Mellitus type 2 is a metabolic disorder resulting from defects in insulin secretion,

Diabetes Mellitus type 2 is a metabolic disorder resulting from defects in insulin secretion, insulin action or both, which occurs as the pancreas do not produce enough insulin or when the body cannot effectively use the insulin. It is seen that physical or mental stress causes an increase in blood glucose levels. The diagnosis itself can cause anxiety and depressive symptoms as it is a life-threatening condition with potentially devastating consequences for health. Owing to the changes in the microcirculation caused by type 2 diabetes mellitus it affects all the parts of the body and causes serious complications viz. diabetic retinopathy, diabetic neuropathy, and diabetic nephropathy. Hence are at higher risk macrovascular changes promoting accelerated atherosclerosis which ultimately culminates in cerebrovascular and cardiovascular events and premature death. The expression of type 2 diabetes mellitus varies from case to case, thus an individualised integrated holistic approach of homoeopathy would prove its effectiveness in treating this condition.

Studies show that both Antimiasmatic remedies, as well as Organ remedies, are useful in controlling the blood sugar levels [2-4]. In clinical practice, it is seen that at times both are given together. Which of the above three groups proves effective in treating type 2 diabetes mellitus? This study focuses on this central issue.

Aim

To understand the effectiveness of homoeopathic medicine in cases of type 2 diabetes mellitus

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Objectives

- 1. Understanding the effectiveness of Antimiasmatic remedies in cases of type 2 diabetes mellitus
- 2. Understanding the effectiveness of Organ remedies in cases of type 2 diabetes mellitus
- 3. Understanding the effectiveness of Antimiasmatic + Organ remedies in cases of type 2 diabetes mellitus

Material and methods

- 1. Study Setting: Cases of type 2 diabetes mellitus from clinical practice, Mumbai, Maharashtra, India.
- Sample Size & Selection of samples: 40 cases meeting inclusion criteria were selected by Simple random sampling Technique.
- 3. Criteria

Inclusion criteria

- 3.1 Cases diagnosed with Type 2 Diabetes mellitus, with BSL and HBA1c done at three monthly intervals, without sign/symptoms of microvascular complications.
- 3.2 Cases above the age group of 21 yrs 60yrs.
- 3.3 Cases of both sexes.
- 4 Study design (Type of Study): Retrospective case series.
- 5 Study duration: June 2017- November 2018
- 6 Brief procedures:
- 6.1 Four groups' viz. Anitmasmatic group, Anitmasmatic + Organ remedies group, Organ remedies group and not on homoeopathic medicine group meeting the inclusion

- and exclusion criteria were observed for 12 months. (Note: Patient who were on Oral Hypoglycemic agent, continue it and periodical observation was done, any adjustment in the doses thereafter were noted.)
- 6.2 Detailed case definition beginning from LSMC (Location, Sensation, Modalities, and Concomitant) including the Onset, Duration and Progress of the presenting manifestations. Investigation of Life events of each patient through detailed case receiving was studied.
- 6.3 Case processing- Analysis, evaluation, the totality of symptoms, repertorial syndrome, repertorisation, potential differential field, remedy differentiation, selection and administration of remedies based on the totality and susceptibility was studied. Further response was observed and noted.

7 Outcome Assessment Criteria:

- 7.1 Identifying the effectiveness of Antimiasmatic remedies in cases of type 2 diabetes mellitus
- 7.2 Identifying the effectiveness of Organ remedies in cases of type 2 diabetes mellitus
- 7.3 Identifying the effectiveness of Antimiasmatic + Organ remedies in cases of type 2 diabetes mellitus
- 8 Statistical techniques: This is a qualitative study. The qualitative data was analysed by summarization technique.
- **9** A tabular representation of gradation of Symptoms and Blood sugar levels

Grades	Polydipsia	Polyphagia	Polyuria	Weakness	Blood Sugar Levels	HBA1c	Associated complaints
0	Normal	Normal	Normal	No weakness	FBS - <126 PPBS-<140	6-<7	Normal
1	Increased Daily+ 0-1 at night	Increased daily + 0-1 at night	Increased Daily 4-5 hourly	Weakness on exertion but not daily	FBS -127 – 140 PPBS - 141 – 180	7-<8	Better 70% in intensity and frequency
2	Increased daily 3-4 hourly + 1-2 at night	Increased daily 3-4 hourly + 1-2 at night	Increased daily 3-4 hourly+ twice at night	Weakness while doing daily work		8-<9	Better 40% in intensity and frequency
3	Increased Daily 1-2 hourly + 2-3 at night	Increased Daily 1-2 hourly, feels hungry even after lunch or dinner + 2-3 at night	Increased Daily 2 hourly+ >2 times at night	Persistent weakness	FBS - > 180 PPBS - >220	9-<10	Better 10% in intensity and frequency

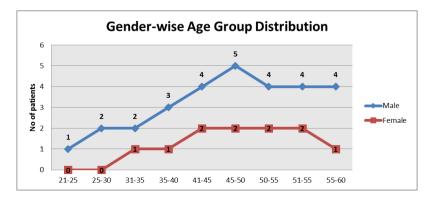
10 Outcome assessment criterion

Improvement	Marked	Moderate	No improvement
Symptoms	Achieved Grade 0	Reduction in grade but not achieved grade 0	No change or increase in grade
Associated complaints	Achieved Grade 0	Reduction in grade but not achieved grade 0	No change or increase in grade
BSL	Achieved Grade 0	Reduction in grade but not achieved grade 0	No change or increase in grade
HBA1c	Achieved Grade 0	Reduction in grade but not achieved grade 0	No change or increase in grade

Observations and Results

1. Demographic study

1.1 Gender wise age group distribution of patient with Type 2 Diabetes Mellitus



2. Miasmatic study

2.1 Dominant Miasm

Dominant miasm	Antimiasmatic remedies	Organ remedies	Antimiasmatic + Organ remedies	Total
Psora	0	0	0	0
Sycotic	3	4	4	11
Tubercular	7	6	6	19
Syphilitic	0	0	0	0

3. The response observed to the treatment across the group as per the outcome assessment

3.1 The response observed of Antimiasmatic remedies

Time	The response observed of Antimiasmatic remedies							
Time	Improvement	Symptoms	Associated complaints	BSL	HBA1c			
	Marked	5	6	2	1			
At the end of 6 months	Moderate	3	3	2	2			
	Nil	2	1	6	7			
	Marked	6	6	2	2			
At the end of 9 months	Moderate	2	4	3	2			
	Nil	2	0	5	6			
	Marked	7	8	3	4			
At the end of 12 months	Moderate	3	2	3	3			
	Nil	0	0	4	3			

3.2 Response observed of Organ remedies

Time	Response observed of Organ remedies							
Time	Improvement	Symptoms	Associated complaints	BSL	HBA1c			
	Marked	2	1	3	2			
At the end of 6 months	Moderate	2	2	2	2			
	Nil	6	7	5	6			
	Marked	3	2	3	2			
At the end of 9 months	Moderate	2	2	3	3			
	Nil	5	6	4	5			
	Marked	3	2	4	3			
At the end of 12 months	Moderate	3	3	4	4			
	Nil	4	5	2	3			

3.3 Response observed of Antimiasmatic remedies + Organ remedies

Time	Response observed of Antimiasmatic remedies + Organ remedies							
Time	Improvement	Symptoms	Associated complaints	BSL	HBA1c			
	Marked	4	4	1	1			
At the end of 6 months	Moderate	2	3	2	2			
	Nil	4	3	7	7			
	Marked	4	5	2	2			
At the end of 9 months	Moderate	3	3	2	2			
	Nil	3	2	6	6			
	Marked	5	7	3	4			
At the end of 12 months	Moderate	4	2	3	3			
	Nil	1	1	4	3			

3.4 The response observed of patients who are not on homoeopathic medicines

Time	Response observed of Not on homoeopathic medicines							
Time	Improvement	Symptoms	Associated complaints	BSL	HBA1c			
	Marked	1	0	1	1			
At the end of 6 months	Moderate	2	1	2	2			
	Nil	7	9	7	7			
	Marked	2	0	2	2			
At the end of 9 months	Moderate	2	1	3	3			
	Nil	6	9	5	5			
	Marked	3	0	3	3			
At the end of 12 months	Moderate	3	2	4	4			
	Nil	4	8	3	3			

3.5 Overall improvement in all the four groups as per the changes graded

Result	Antimiasmat	ic remedies %	Organ re	emedies %	Antimiasmatic +	Organ remedies %	Not on homoeop	oathic remedies %
Kesuit	6 months	12 months	6 months	12 months	6 months	12 months	6 months	12 months
Improved	60	82.5	40	65	47.5	77.5	25	55
Not improved	40	17.5	60	35	52.5	22.5	75	45

Chi-square test applied

- Antimiasmatic vs Organ remedies: p-value is 0.03417 and Significant if $p \le 0.01$
- Antimiasmatic + Organ remedies vs Organ remedies: p-value is 0.050644 and Significant if $p \le 0.1$
- Antimiasmatic vs Antimiasmatic + Organ remedies: p-value is 0.348202 and Significant if $p \le 0.50$

3.6 Status of OHA consumed by patients before and after remedial treatment

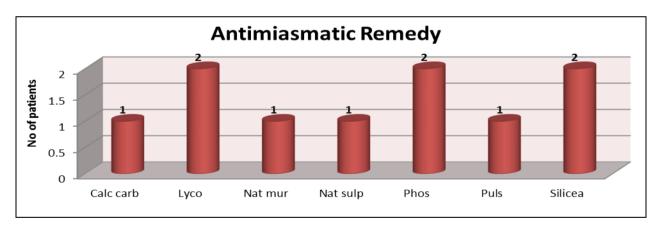
Status of OHA consumed by patients	Antimiasmatic remedies	Organ remedies	Antimiasmatic + Organ remedies	Not on homoeopathic remedies
Before giving remedies	8	10	8	10
Reduction after giving remedies	1	2	2	0
No Reduction after giving remedies	7	8	6	7
Increased after giving remedies	0	0	0	3
Stopped after giving remedies	0	0	0	0

4. Susceptibility assessment

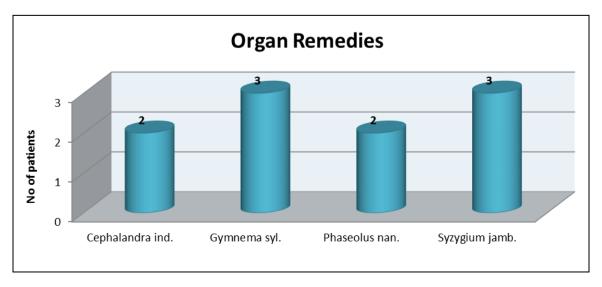
Susceptibility Antimiasmatic remedies		Organ remedies	Antimiasmatic + Organ remedies	Not on homoeopathic remedies	
Low	2	6	5	3	
Moderate	3	2	1	2	
High	5	2	4	5	

5. Remedies

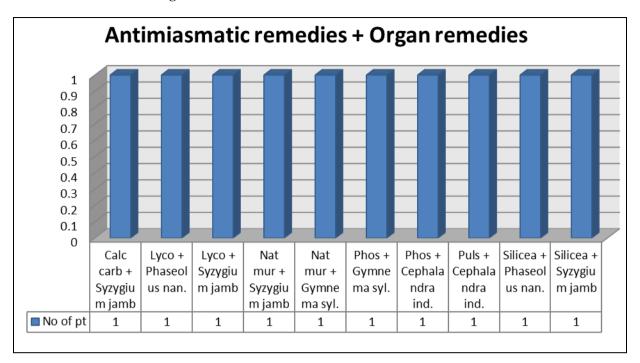
5.1 Antimiasmatic remedies



5.2 Organ remedies



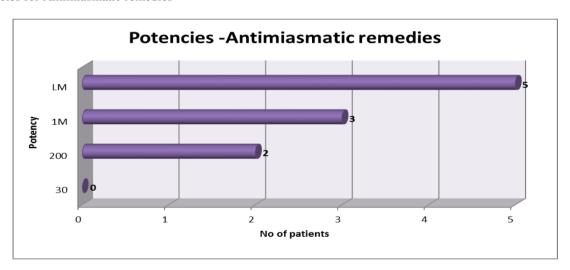
5.3 Antimasmatic remedies + Organ remedies



6. Potencies

Note: Organ remedies were given in Mother Tincture, dosage 10 drops in one ounce of water, once/twice per day.

6.1 Potencies for Antimiasmatic remedies



Discussion

1. Demographic study

1.1 Male –Female Ratio, gender-wise age group distribution of type 2 diabetes mellitus.

As per the study reported by Quoc Manh Nguyen *et al* [May 2012] ^[5], type 2 diabetes mellitus was significantly higher in individuals more than 35 years than those less than 35 years. The current study follows a similar pattern where 83% of the individuals after the age of 35 yrs have type 2 diabetes mellitus. Type 2 diabetes mellitus is seen in a young age group of 21-30 yrs-10%, As reported in the study by Connie Luo [May 2016] ^[6].

II- Miasmatic study

1. Dominant Miasm

In 47 % of patients, dominant miasm was seen to be Tubercular miasm, as also stated by Abbeymondalmi [Jan 2017] [7].

III- Response of the treatment across the group as per the outcome assessment

A standard gradation and outcome assessment criteria were formed for quantitative analysis assessment of the response. Analysis of the result shows the beneficial role of homoeopathic medicines either in single or in combination with organopathic remedies in the management of type 2 diabetes mellitus. The remedies showed its effectiveness in not just giving symptomatic relief but also improving the blood glucose levels with no increase in the oral hypoglycaemic agent. However, in the case of the Organ remedies group and the Non-Homoeopathic medicine group the twelve-month responses showed the blood glucose levels better than the state of the symptoms. In cases, of the Antimiasmatic remedies group and Antimiasmatic remedies + Organ remedies, the twelve-month responses showed an overall improvement in the blood glucose levels and the state of the symptoms.

Interpretation of Chi-square test

Antimaisamtic remedies have high statistical significance in cases of type 2 diabetes mellitus.

IV- Susceptibility assessment

In the study conducted by Dr N. L. Tiwari *et al* [2008] ^[8], shows the relationship between the response of the remedies and the corresponding state of susceptibility. Those cases which responded to the Organ remedies were exhibiting a low susceptibility level. This was observed consistently at six months and at the end of the treatment. In contrast, the Antimiasmatic group responders had moderate or high susceptibility. The current study also shows this pattern.

V. Remedies

- a. Antimiasmatic remedies: Lycopodium, Phosphorous and Silicea are the most frequently indicated antimiasmatic remedies. As also seen in the study by Dr N. L. Tiwari *et al* [2008] [8] and Dr Manchanda [2013] [9]
- b. Organ remedies: Syzygium jambolanum, Gymnema sylvestre, Phaseolus nanus and Cephalandra indica are the most frequently indicated organ remedies. As also seen in the study by Dr N. L. Tiwari *et al* [2008] ^[8] and by Sampath S [2013] ^[10]
- c. Antimiasmatic remedies + Organ remedies: Calc carb + Syzygium jamb., Lyco + Phaseolus nan., Lyco + Syzygium jamb., Nat mur + Syzygium jamb, Nat mur + Gymnema syl, Phos + Gymnema syl., Phos + Cephalandra ind., Puls + Cephalandra ind., Silicea + Phaseolus nan., Silicea + Syzygium jamb were the antimiasmatic + organ remedies used.

VI. Potency

The study conducted by S Abarna et.al [2015] [11] had concluded the usefulness of LM potencies in the treatment of chronic disease. Likewise in this study LM potencies were more frequently indicated in the management of type 2 diabetes mellitus.

Conclusion

- Antimiasmatic remedies, Organ remedies and Antimiasmatic remedies + Organ remedies have been found statistically significant in the management of type 2 diabetes mellitus.
- 2. Anitmiasmatic remedies have a high statistical significance in cases of type 2 diabetes mellitus.
- Organ remedies showed its effectiveness in the management of blood sugar levels in patients with low susceptibility. Antimiasmatic remedies, Anti-miasmatic remedies + Organ remedies showed an overall improvement in the blood glucose levels and the state of the symptoms.
- 4. Lycopodium, Phosphorous and Silicea are the most frequently indicated anti-miasmatic remedies.
- Syzygium jambolanum, Gymnema sylvestre, Phaseolus nanus and Cephalandra indica are the most frequently indicated organ remedies.
- 6. LM potencies were more frequently indicated in the management of type 2 diabetes mellitus.

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