

# Homeopathy for Rheumatological Diseases: A Systematic Review

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## Abstract

Homeopathy has mainly been used to treat several diseases. On the other hand, it has been used in a few rheumatic disorders. The aim of this article is to review the use of homeopathy in rheumatic diseases (RDs). PubMed and Embase databases were examined for literature on homeopathy and RDs between 1966 and April 2023. There are 15 articles found with 811 patients. The diseases treated were osteoarthritis (n = 3), followed by rheumatoid arthritis (n = 3), ankylosing spondylitis (n = 1), hyperuricemia (n = 1), and tendinopathy (n = 1). Age varied from 31 to 87 years old, and male gender ranged from 56.7% to 100%. Homeopathy changed from a fixed medicine to an individualized homeopathy. Most studies (9/15) demonstrated improvements after homeopathy. Side effects were not seen or minimal and were comparable to placebo groups. In conclusion, this review shows homeopathy is a promising and safe therapy for RD treatment. However, the data needs to be reproduced in future more extensive studies, including other rheumatic conditions.

**Keywords:** Homeopathy, complementary and alternative medicine, rheumatic diseases, rheumatoid arthritis, osteoarthritis, tendinopathy, ankylosing spondylitis, hyperuricemia

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## Introduction

In the second part of the eighteenth century, the German physician Samuel Christian Hahnemann (1755-1843) invented homeopathy. Although homeopathy has experienced fluctuations in popularity over the past 2 centuries, its usage has increased in recent years because of the worldwide interest in alternative and complementary medicine.<sup>1</sup> Recent research highlights the prevalence of homeopathy usage during a 12-month period in 11 nations (Australia, UK, Japan, USA, Israel, Singapore, Switzerland, Canada, Norway, South Korea, and Germany). The authors noted that a tiny but significant percentage of these general populations utilize homeopathy annually, including the use of over-the-counter homeopathic medications and homeopathy consultations.<sup>2</sup>

The rheumatic diseases (RDs) field is also a reality. Studies demonstrated that many patients utilize complementary and alternative medicine (CAM), such as homeopathy. For example, a large study using a questionnaire with 800 RD patients used homeopathy for 15% of these patients.<sup>3</sup> It is, therefore, reasonable to evaluate the use of homeopathy in people with RD.

The aim of this investigation was to systematically review the articles that used homeopathy to treat RDs.

## Methods

**Literature review:** The following MeSH entry phrases were used to conduct a systematic search of papers published in Scielo, EMBASE, and PubMed/MEDLINE between 1966 and August 2022: "homeopathy" OR "homeopathic" AND "rheumatic" OR "rheumatologic" OR "systemic lupus erythematosus" OR "lupus" OR "fibromyalgia" OR "rheumatoid arthritis" OR "spondyloarthritis" OR "Sjögren's syndrome" OR "myositis" OR "systemic sclerosis" OR "vasculitis" OR "Takayasu disease" OR "Wegener's disease" OR "granulomatosis with polyangiitis" OR "Kawasaki's disease" OR "polyarteritis nodosa" OR "Livedoid vasculitis" OR "Churg-Strauss" OR "eosinophilic granulomatosis with polyangiitis" OR "osteoarthritis" OR "gout." The search collected only articles in the English language. To find further papers, the reference lists of the chosen papers were examined. Inclusion criteria were all articles with patients with RDs who received homeopathy as therapy. Exclusion criteria were in vitro and animal studies and review articles.

The initial literature search was carried out by the first and second authors, who both independently chose the research abstracts. The full-text publications chosen by abstracts were then independently reviewed by

the same reviewers in a second step. Again, the authors adhered to PRISMA standards.<sup>4</sup> Lastly, a standardized form was created to capture data from pertinent studies, including the year of publication, authors' names, the number of investigated patients, demographic information, the length of the illness, study follow-up, homeopathy description, outcomes, and side effects. See an AMSTAR results as appendix 1.

## Results

Figure 1 shows the PRISMA flowchart of the articles included in this manuscript.

Table 1 summarizes the search results on homeopathy treatment in RD.<sup>5-19</sup> There are 15 articles in this field, including 1459 patients. The countries that produced these articles were the UK (n=6), followed by Germany (n=2), India (n=2), Scotland (n=2), Brazil (n=1), Poland (n=1), Scotland (n=1), and the United States (n=1). Most studies had a

double-blinded randomized controlled design trial as the study design (n=7), followed by double-blinded (n=1), open prospective trial (n=3), randomized controlled trial (n=2), double-blinded (n=1) and randomized cross-over trial (n=1). The diseases treated were rheumatoid arthritis (n=5), followed by osteoarthritis (n=4), fibromyalgia (n=3), ankylosing spondylitis (n=1), hyperuricemia (n=1) and tendinopathy (n=1). Age varied from 18 to 87 years old, and female gender ranged from 0 to 95.7%. Disease duration ranged from weeks to 25 years. The study follow-up ranged from 4 to 48 weeks. Homeopathy varied from a fixed medicine such as Traumeel, composed of several substances, as an individualized homeopathy (see Table 1).

Most studies (9/15) demonstrated improvements after homeopathy,<sup>7-11,14,15,17,18</sup> 5/15 articles did not show any significant difference,<sup>6,12,13,16,19</sup> and one showed that the

homeopathic consultation was therapeutical and beneficial but not related to the homeopathic preparation.<sup>5</sup>

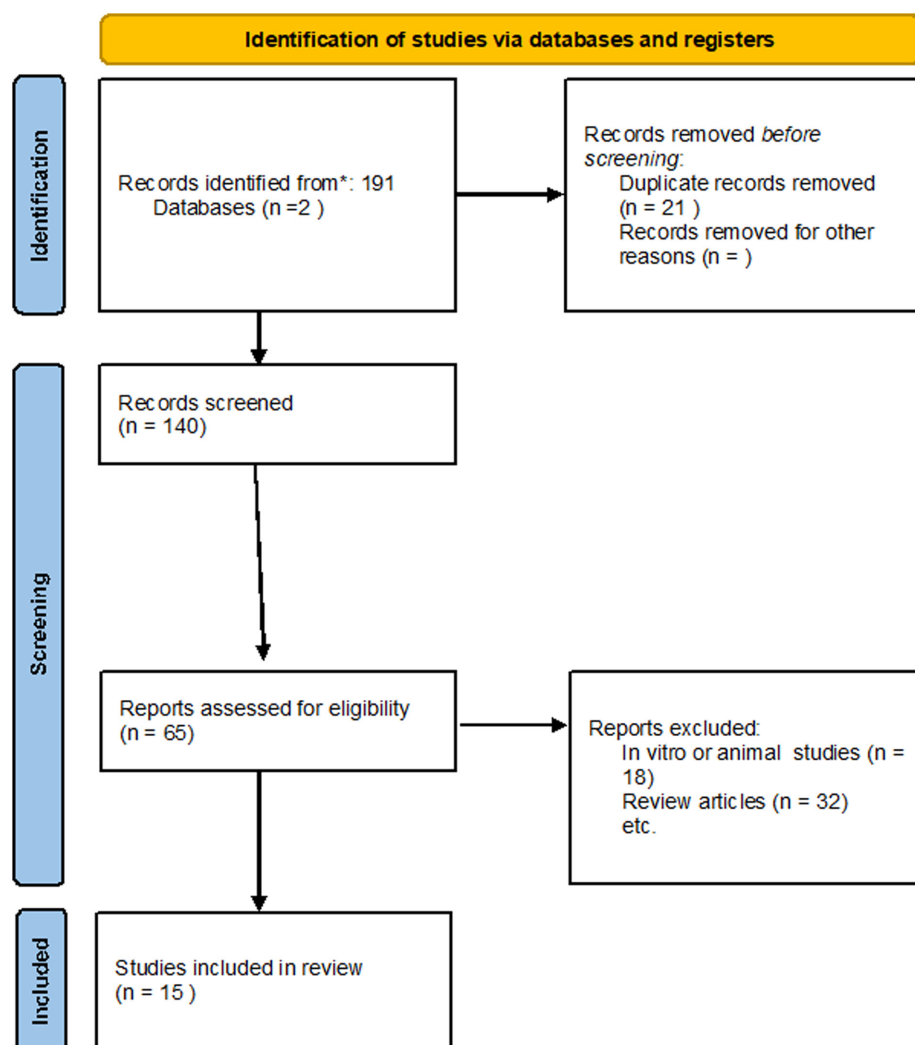
Side effects were not seen in 6/15 studies and not described in 6/15; they were mild and similar to the control group.

## Discussion

This is the first study to review the therapeutic effects of homeopathy in RDs systematically.

Homeopathy has 2 central tenets: the "similars" principle and the dilutions.<sup>1</sup> According to the similars principle, a medicine that causes the same symptoms and signs in a healthy person can be administered to a patient who has a certain pattern of symptoms in order to cure them. As a result of this idea, therapy in homeopathic medicine is individualized. Depending on the distinct pattern of sickness symptoms in each individual, various drugs may be administered to 2 or more people with the same clinical diagnosis. The second homeopathic principle is that if remedies are diluted, shaken or agitated, between successive dilutions, they maintain biological activity. These serially agitated dilutions are reported to generate effects even after being diluted beyond the number of Avogadro and leaving no original molecules of the beginning substance.<sup>1</sup> This principle has frequently caused scientists to dismiss homeopathy without considering the evidence for its effectiveness in clinical studies. Most physicians and patients, on the other hand, are more concerned with whether there is clinical proof supporting homeopathic therapy of specific ailments and are less interested in the processes. As a result, the authors decided to use systematic review methods to examine controlled clinical evidence on homeopathy in rheumatic illnesses.

Homotoxicology was developed by the German physician Hans Reckeweg and is strongly influenced by homeopathy.<sup>20,21</sup> In a recent review, the author reviewed the randomized trials in this field. They included 7 articles in their review and found that quality Jadad scores were regarding study methodologies, and the outcomes were positive in most studies.<sup>20,21</sup> Despite a rising interest in understanding the underlying mechanisms of RDs and arthritis, medical treatment for these conditions remains symptomatic. In addition, current medical therapies may not always stop the long-term development of these disorders, and surgery may still be required for restoring mechanical function in big joints. As a result, individuals suffering from RDs frequently look



**Figure 1.** The rheumatological diseases where homeopathy was helpful and its various beneficial effects. Those various conditions and their beneficial effects are summarized.

**Table 1.** Studies of Homeopathy in Rheumatic Diseases

Author, Reference	Study Design	Country	Disease	N	Age % F/M	Disease Duration	Follow-up	Homeopathy Regimen	
								Outcome	Side Effects
Brien et al., 2011 <sup>5</sup>	Double-blind, randomized, placebo-controlled trial	United Kingdom	RA	83	63.3 65% F	10.99 years	24 weeks	<b>Regimen:</b> <b>Outcome:</b> A homeopathic consultation significantly improved DAS-28, swollen joint count, current pain, weekly pain, weekly patient global assessment, and negative mood. But the homeopathic remedy is the same	<b>Side effects</b> No significant differences were identified between groups. Four serious adverse events were reported, all unrelated to the study medication.
Fisher et al., 2001 <sup>6</sup>	Double-blind randomized controlled	United Kingdom	RA	112	54 79% F	9 years	24 weeks	<b>Regimen:</b> NSAIDS + individualized prescription vs. NSAIDS+ placebo <b>Outcome:</b> No effect of homeopathy over the placebo	<b>Side effects</b> ND
Andrade et al., 1991 <sup>7</sup>	Randomized, double-blinded controlled trial	Brazil	RA	44	52.8 87% F	8.8 years	24 weeks	<b>Regimen:</b> <i>Rhus toxicodendron</i> , <i>Calcarea carbonica</i> , <i>Pulsatilla nigricans</i> , <i>Lycopodium clavatum</i> , <i>Causticum</i> <i>Lachesis trionocephalum</i> , <i>Arsenic album</i> , <i>Nux vomica</i> , <i>Hydrastis canadenses</i> , <i>Argentum nitricum</i> , <i>Ignatia amara</i> , <i>Thuja occidentalis</i> , <i>Apis mellifica</i> , <i>Sepia succus</i> , <i>Natrum muriaticum</i> , <i>Ledum palustre</i> , <i>Staphisagria</i> , <i>Calcarea phosphorica</i> , <i>Medorrhinum</i> , <i>Sulphur</i>	<b>Outcome:</b> Homeopathy improved in 59% vs. 44% placebo. It was unchanged in 23% vs. 31% in homeopathic vs. placebo, respectively.
Gibson et al., 1980 <sup>8</sup>	Double-blind trial	Scotland	RA	23	54 (32-76) 69.6% F	7.2 (1-25) years	12 weeks	<b>Regimen:</b> <i>Arnica</i> , <i>Nux vomica</i> , <i>A. album</i> , <i>Opium</i> , <i>B. alba</i> , <i>Pulsatilla</i> , <i>C. carbonica</i> , <i>Rhododendron</i> , <i>Causticum</i> , <i>R. toxicodendron</i> , <i>Ignatia</i> , <i>Ruta</i> , <i>Lachesis</i> , <i>Sepia</i> , <i>Lycopodium</i> , <i>Sulphu</i> , <i>Morgan</i> , <i>Sycotic co.</i> <i>N. muriaticum</i> , <i>Thuja</i>	<b>Side effects</b> were scarce and comparable in both groups: headache, heartburn, anorexia, and dizziness.
Gibson et al., 1978 <sup>8</sup>	Double-blind randomized controlled	Scotland	RA	195	49.7 + 11.6 79.6% F	8.8 years	48 weeks	<b>Regimen:</b> Individualized prescription vs. salicylate and placebo <b>Outcome:</b> Better relief in the homeopathic group compared to the allopathic and placebo. High incidence of drop-out.	<b>Side effects</b> None

(Continued)

Table 1. Studies of Homeopathy in Rheumatic Diseases (Continued)

Author, Reference	Study Design	Country	Disease	N	Age % F/M	Disease Duration	Follow-up	Homeopathy Regimen	
								Side Effects	Outcome
Janczewska et al., 2023 <sup>10</sup>	Prospective controlled trial	Poland	OA	90	31-87 70% F	ND	ND	<b>Regimen:</b> Traumeel* ointment compared to magnetic stimulation plus light radiation (LED) <b>Outcome:</b> Traumeel* ointment; compared to magnetic stimulation plus LED, was better. Side effects ND	
Koley et al., 2015 <sup>11</sup>	Prospective, placebo-controlled, randomized, double-blind, parallel-arm,	India	OA	60	56.4 ± 12.1 83% F	ND	12 weeks	<b>Regimen:</b> <i>Bryonia alba</i> , <i>Rhus toxicodendron</i> , <i>Calcearia carbonica</i> , <i>Arnica montana</i> and <i>Natrum muriaticum</i> <b>Outcome:</b> Over the course of two weeks, both groups saw statistically significant reductions in 3 visual analog scales (measuring pain, stiffness, and loss of function) and Osteoarthritis Research Society International ratings. However, there were no significant differences across groups. Side effects None	
Van Haselen et al., 2000 <sup>12</sup>	Randomized controlled trial	United Kingdom	OA	172	65.3 ± 8.8 77% F	5 (1.9-12.5) years	4 weeks	<b>Regimen:</b> Local application of a homeopathic gel vs. piroxicam gel <b>Outcome:</b> Equivalence of homeopathic and allopathic gel Side effects In 28 patients: 12 in homeopathy (5 withdrawn) and 16 in piroxicam (9 withdrawn).	
Shipley et al., 1983 <sup>13</sup>	Double-blind randomized controlled	United Kingdom	OA	36	18-85 ND	ND	6 weeks	<b>Regimen:</b> <i>Rhus Toxicodendron</i> 6x vs. placebo and fenoprofen <b>Outcome:</b> No effect of homeopathy vs. placebo; fenoprofen is better than homeopathy vs. placebo Side effects ND	
Relton et al., 2009 <sup>14</sup>	Non-blinded randomized (open) controlled;	United Kingdom	FM	47	43.9 ± 8.9 95.7% F	6.3 ± 5.1 years	22 weeks	<b>Regimen:</b> Individualized homeopathy vs. placebo <b>Outcome:</b> Better reduction of symptoms in patients treated with homeopathy vs. control; no adverse effects Side effects None	
Bell et al., 2004 <sup>15</sup>	Double-blind randomized controlled	United States	FM	62	49 ± 10 94% F	14.8 ± 14 years	16 weeks	<b>Regimen:</b> Individualized homeopathy vs. placebo <b>Outcome:</b> Significantly better outcomes of the homeopathy group vs. the placebo Side effects ND	
Fisher et al., 1989 <sup>16</sup>	Double-blind randomized controlled cross-over	United Kingdom	FM	24	ND	ND	ND	<b>Regimen:</b> <i>Arnica</i> , <i>Rhus tox</i> , <i>Bryonia 6c</i> vs. placebo <b>Outcome:</b> Trend to a better improvement in the homeopathic group, not statistically significant Side effects ND	

(Continued)

**Table 1.** Studies of Homeopathy in Rheumatic Diseases (Continued)

Author, Reference	Study Design	Country	Disease	N	Age % F/M	Disease Duration	Follow-up	Homeopathy Regimen	
								Outcome	Side Effects
Nayak et al., 2020 <sup>17</sup>	Open randomized trial	India	Hyperuricemia	50	45.7 y 43.3% F	15 months	24 weeks	<b>Regimen:</b> <i>Urtica urens</i> mother tincture (UUMT), Individualized homeopathy (IH), and combined (UUMT +IH), together with lifestyle changes	<b>Outcome:</b> At 3 months, reduction in serum uric acid was higher in UUMT, although at 6 months, it lost this statistical difference. No difference in Gout Assessment Questionnaire version 2 in the 3 groups. Few differences were seen in MYMOP scores at 3 months preferring IH (symptom 2, $P = .001$ and well-being score, $P = .002$ ), and also at 6 months preferring UUMT +IH over others (symptom 1, $P < .001$ ).
Schneider et al., 2005 <sup>18</sup>	Nonrandomized, controlled study	Germany	Tendinopathy	357	47.8 51.6% M	Weeks to months	4 weeks	<b>Regimen:</b> Traumeel S ointment* compared to gel diclofenac	<b>Side effects</b> None <b>Outcome:</b> Homeopathic therapy was non-inferior to diclofenac on all variables (all pain-related variables, motility-related variables, and summary scores for all clinical variables).
Schirmer et al., 2000 <sup>19</sup>	Prospective double-blind, randomized trial	Germany	AS	104	47.04 ± 8.94 100% M	17.5 years	24 weeks	<b>Regimen:</b> Formica rufa D6 and reinjection of the patient's blood	<b>Side effects</b> None <b>Outcome:</b> No significant differences were seen

AS, ankylosing spondylitis; MYMOP2, Measure Yourself Medical Outcome Profile version 2.; ND, not described; OA, osteoarthritis; RA, rheumatoid arthritis.

\*Traumeel composition: *Arnica montana* D3, *Calendula officinalis*, *Achillea millefolium*, *Chamomilla recutita*, *Symphytum officinale* D4, *Atropa belladonna* D1, *Aconitum napellus* D1, *Bellis perennis*, *Hypericum perforatum*, *Echinacea angustifolia*, *Echinacea purpurea*, *Hamamelis virginica*, *Mercurius solubilis* D6, and *Hepar sulfuris* D6.

for alternative therapy, with homeopathy, along with acupuncture, being among the most prominent. On the basis of self-reported efficacy, homeopathy scored higher for osteoarthritis, but satisfaction was lower for connective tissue diseases and rheumatoid arthritis. Case histories and retrospective studies indicate that homeopathic therapies for ankylosing spondylitis, rheumatoid arthritis, and osteoarthritis can result in clinical improvement or recovery, as shown in the present review.

This systematic review showed that most studies that evaluated homeopathy in RD showed at least 1 benefit, with mild or absent adverse effects. Those various conditions and their beneficial effects are summarized in Figure 2.

This study's strengths are (1) the inclusion of studies with patients with international criteria for RDs and (2) the inclusion of all kinds of study designs for using homeopathy in RDs, except reviews, animal studies, and in vitro studies. In this way, the authors believe all published homeopathy cases in rheumatic patients were collected.

Some limitations were observed in this study. For instance, the number of participants was low. Second, a few RDs were evaluated: osteoarthritis, rheumatoid arthritis, fibromyalgia, hyperuricemia, ankylosing spondylitis, and tendinopathy. Therefore, future investigations must involve bigger patient samples and other RDs, enabling a better understanding of the

course of homeopathy in rheumatic conditions. No assessment on bias risk and meta-analysis was performed since there are several different RDs included herein in this analysis.

A few articles in the literature evaluate the effects of homeopathy in rheumatological diseases, and 6 RD were assessed. Nevertheless, most reports analyzed studies demonstrated that homeopathy use is efficacious in treating signs and symptoms of RD with no or minimal adverse events. However, more studies are waiting to confirm the present data.

**Peer-review:** Externally peer-reviewed.

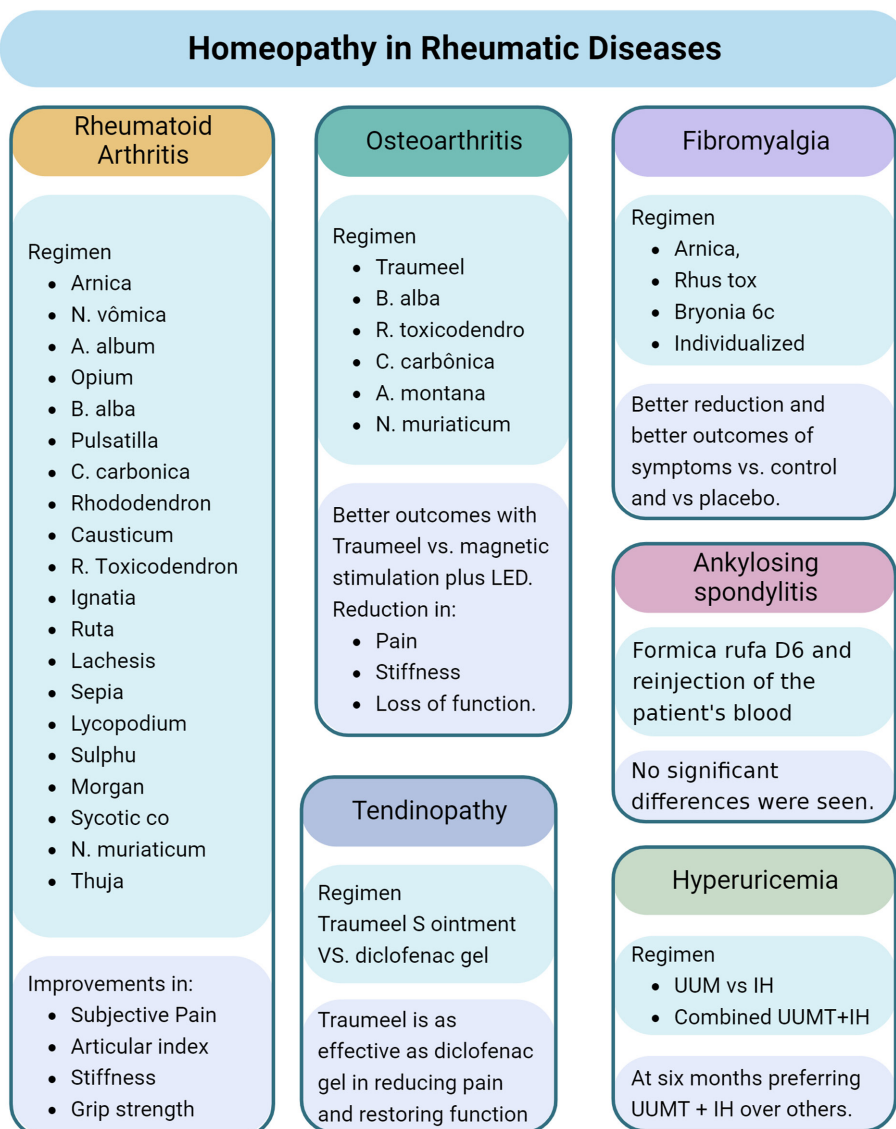
**Author Contributions:** Concept – J.F.C.; Design – J.F.C., A.L., C.B.; Supervision – J.F.C.; Resource – J.F.C., A.L., C.B.; Materials – J.F.C., A.L., C.B.; Data Collection and/or Processing – J.F.C., A.L., C.B.; Analysis and/or Interpretation – J.F.C., A.L., C.B.; Literature Search – J.F.C., A.L., A.L.; Writing – J.F.C., A.L., C.B., A.L., C.B.; Critical Review – C.B., A.L.A.L., C.B.

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**Figure 2.** Summary the positive impacts of homeopathy on various rheumatic diseases. A detailed insights into various homeopathic remedies and their positive impacts on different rheumatic conditions. It compiles evidence from numerous studies, most of which have reported at least 1 beneficial effect for each condition treated with homeopathy, typically with minimal or no side effects.

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RCT	0
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