



# The effect of adding homeopathic treatment to rehabilitation on muscle tone of children with spastic cerebral palsy

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## KEYWORDS

Spastic cerebral palsy;  
Muscle tone;  
Homeopathy;  
Rehabilitation

## Summary

**Objective:** To determine the effect of adding homeopathic treatment to routine rehabilitation techniques on muscle tone of children with spastic cerebral palsy (CP).

**Methods:** This study was a double-blind clinical trial. Twenty-four subjects were recruited from a developmental disorders clinic in Tehran in 2004. Subjects were divided into case and control groups. The routine rehabilitation techniques were carried out for 4 months on both the groups. The control group received placebo and the case group received homeopathy drugs. Both groups were evaluated and compared for muscle tone before and 4 months after treatment using the Modified Ashworth Scale.

**Results:** Showed no positive changes in the patients with homeopathy and occupational therapy at the end of treatment, and there were no statistically significant differences in tonicity of upper and lower limbs, trunk and neck in the case group in comparison with the control group.

**Conclusion:** Adding homeopathy to rehabilitation had no significant effect on spasm of CP children as measured by Ashworth test.

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## Introduction

Cerebral palsy (CP) is an almost common disorder with an estimated prevalence of 2/1000 population. Although the main causes of CP are birth trauma, asphyxia, and prematurity, during the last

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2–3 decades, in spite of considerable advances in obstetric and neonatal care, there has been virtually no change in the incidence of CP. In order to treat CP, a team containing several specialists and therapists as well as parents are cooperating together to do different medical and rehabilitation interventions. These interventions include occupational therapy, physical therapy, speech therapy, use of muscle relaxants, botox injection in spastic muscles, and different surgery techniques.<sup>1</sup> Besides the above interventions, complementary medicines like homeopathy, herbal medicine, aromatherapy, acupuncture, and manual treatments have been used in the treatment of pediatric neurodevelopmental disorders. A complementary medicine like homeopathy was used mainly because of word-of-mouth recommendation, dissatisfaction with conventional medicine, and fear of side effects of conventional treatments.<sup>2</sup>

The word homeopathy (or homoeopathy) is derived from the Greek words *homoios*, meaning like or similar, and *pathos*, meaning suffering from disease.<sup>3</sup> The theory of homeopathy was developed by the Saxon physician Samuel Hahnemann (1755–1843) and was first published in the year 1796.<sup>4</sup> Homeopathy is a system of medicine based on the principle that a disease with a given set of symptoms can be cured by a medicine (remedy) which is known to produce a similar set of symptoms in a healthy person. This principle where “like cures like” is called “The Law of Similars” and is the foundation of homeopathic medicine, meaning “*Let like be treated by like*”.<sup>5</sup> To give an example of the simile principle, the symptoms and signs of acute arsenic poisoning are very similar to the symptoms seen in certain cases of gastroenteritis. And true to the principle of simile, homeopathic potencies of *Arsenicum* (arsenic) are used to effectively treat gastroenteritis. Homeopathy is a kind of holistic medicine, so the totality of signs and symptoms is the indication and guide to the selection of a remedy. Every patient is considered as an individual case and, each time only one kind of remedy is prescribed.

Homeopathic medicine and the principle of simile were protected by law by the British Parliament, and later protected by the United States Congress as a practical and legitimate method of medical practice.

Today, unlike nutritional substances, homeopathic substances are considered medicines, recognized as powerful entities that allow specific medical claims to be made about them.<sup>3</sup>

Homeopathy combined with occupational therapy is not used in Iran. Therefore, this study was performed to determine the effect of this uncon-

ventional treatment on muscle tone of children with CP.

## Materials and methods

The study involved 24 spastic CP-affected children, aged 1–5 yr with mild to moderate spasm. We did not include those with severe mental retardation ( $IQ < 40$ ), genetic disorders like Down’s syndrome, convulsion, and sensory disorders like blindness and deafness. The subjects were recruited during 2004 from Saba clinic (Developmental Disorder Center) in Tehran, Iran that is affiliated to the University of Social Welfare and Rehabilitation Sciences (USWR). The study had the approval of the Ethic Committee, USWR. Parents of each patient gave informed consent.

In this study, the physician made the diagnosis of spastic cerebral palsy. The 24 subjects, by using minimization technique, were divided into two groups: case and control, with three losses in the control and five in the case group, because of transpiration problems and aspiration pneumonia caused by drinking water and other liquids at home, due to swallowing disorders in CP, so water and other liquids aspiration. The occupational therapist making the pre-and post-treatment assessments of muscles tonicities (severity of spasticity) of the patients was not the same occupational therapists who gave rehabilitation. The homeopath physician visited every patient case by case each month and prescribed the most specific drug for everyone properly, based on the totality of signs and symptoms, related or not related to CP. Homeopathic drugs were prescribed to the control group as well.

The drugs used in the study were silica, lycopodium-clavatum, phosphorus, that was given to most subjects, pulsatilla, natrum-muraticum, opium, gelsemium, causticum, calcarea phosphorica, and calcarea carbonica. In the first visit the homeopath physician determined the drug for individual patients.

The prescription method was as follows: 1 globule (0.05 g) of the homeopathic drug or placebo dissolved in 5 cm<sup>3</sup> of cold boiled water and added to 115 cm<sup>3</sup> of extra water, and then 5 cm<sup>3</sup> of this solution was given to the patient orally. The patient was also asked to take 15 cm<sup>3</sup> of the given solution, to be used per week orally until the next visit. This method was repeated for the next three visits in a month’s interval. Both groups were assessed before treatment, and 1, 2, and 3 months later, received placebo or homeopathic drugs blindly. The case and control groups received routine occupational therapy for 4 months (Figure 1).

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