

## ORIGINAL PAPER

# An exploratory retrospective study of people suffering from hypersensitivity illnesses who attend medical or classical homeopathic treatment

L Launsø<sup>1,\*</sup>, CK Kimby<sup>2</sup>, Inge Henningsen<sup>3</sup> and Vinjar Fønnebo<sup>1</sup>

<sup>1</sup>*The National Research Center in Complementary and Alternative Medicine (NAFKAM) University of Tromsø, 9037 Tromsø, Norway*

<sup>2</sup>*Institute of Political Science, University of Copenhagen, ØsterFarimagsgade 5, 1014 Copenhagen K, Denmark*

<sup>3</sup>*Department of Applied Mathematics and Statistics, Institute of Mathematics, University of Copenhagen, Universitetsparken 5, 2100 Copenhagen Ø, Denmark*

**The objective of this study is to describe patients who had treatment for hypersensitivity illnesses by general practitioners (GPs) or classical homeopaths (CHs) and the patients' self-reported effectiveness of the treatment received. The data stems from an exploratory retrospective study amongst 88 Danish patients (response rate 58%) suffering from hypersensitivity illnesses, who chose treatment from one of six GPs or one of 10 CHs who participated in the project. The patients themselves selected their treatment. The GPs or the CHs considered that the patient's treatment was complete or that the patient was in a situation of current 'maintenance treatment'. The patients' primary reason for consulting the GP or the CH was that they were suffering from hypersensitivity illnesses.**

**No significant difference was found between the two groups of patients in relation to age, education and duration of hypersensitivity symptoms. The CH patients were more likely to be employed in teaching, research, health care or the social sector compared to GP patients. The two groups of patients were similar in respect of their health at the start of the treatment, 57% of the patients who consulted a CH experienced an improvement of their state of health compared to 24% of the GP patients. Both groups of patients experienced an improvement of their psychological health after treatment. Logistic regression analysis showed that the GP or CH was the only significant effect variable. The results are based on the patients' retrospective, self-reported effectiveness of the treatments. *Homeopathy* (2006) 95, 73–80.**

**Keywords:** retrospective study; user-evaluation study; outcome assessment; health care

## Introduction

There is an increase in the prevalence of hypersensitivity illnesses (a collective term for asthma, allergic rhinoconjunctivitis, atopic eczema, contact dermatitis and food allergy) both in relation to self-reported symptoms and objectively measurable signs.<sup>1–11</sup> The consumption of asthma medication is increasing.<sup>12</sup> A European survey of patients suffering from allergy, including 502 Danish patients, shows that for 70% of

\*Correspondence: Laila Launsø, The National Research Center in Complementary and Alternative Medicine (NAFKAM), University of Tromsø, 9037 Tromsø, Norway.

E-mail: [Launsoe@post7.tele.dk](mailto:Launsoe@post7.tele.dk)

Received 25 October 2005; revised 16 December 2005; accepted 23 January 2006

these patients allergy caused physical limitations in their every-day life.<sup>13</sup>

Most patients with asthma are treated by general practitioners (GPs). Homeopathy is frequently used in the treatment of hypersensitivity illnesses.<sup>14–20</sup> In Denmark homeopathic medicines are used in alternative forms of treatment other than classic homeopathy such as biopathy, nutritional therapy, kinesiology and reflexology.

The work of the GPs and the classical homeopaths (CHs) who participated in the study described here is based on different treatment models including different understandings of illness, different ways of diagnosing and treating illness and different comprehension of how the treatment works.<sup>21</sup> The main difference between the GPs and the CHs was found in relation to their comprehension of how the treatment should work. For GPs the comprehension of how medical treatment should work was to neutralize or curb the *symptoms* directly. For CHs the apprehension of how the homeopathic treatment should work was to set a recovery process into motion by stimulating the *person's* self-healing powers or vital force.<sup>21</sup> The differences in treatment models make it important to know more about what GP patients and CH patients report regarding the effectiveness of the two forms of care. Research-based knowledge about patients' self-reported effectiveness of treatment by GPs compared to treatment by CHs is still limited. The GPs and the CHs participating in this study emphasized the need for the subjective dimension in assessing improvement or cure. GPs and the CHs agreed that objective improvement was not sufficient to say whether or not a treatment is effective for a patient.<sup>21</sup>

The research question of the present study is: What characterizes patients who attended treatment for hypersensitivity illnesses by GPs and CHs and what are the patients' self-reported effectiveness of the treatment received? The study is based on the patients' experience with the treatments. We assume that these primary experiences will be decisive in the patients' future choice of treatment. Compared to randomized controlled trials of homeopathy medicines or of conventional medicines the approach used in this study focuses on the GPs' and CHs' everyday clinical practice.

## Material and method

An explorative retrospective study was conducted, between May and October 2001 in Denmark. The Committee for Research Ethics considered the project outside their area of competence.

### GPs and CHs

One hundred and four GPs were contacted by mail and asked to participate in the project, six agreed. The GPs were aged between 40 and 50, three men and three

women. At first we made contact with GPs in two Danish municipalities in one county, but none of these GPs wished to take part in the project. After realizing how difficult it would be to recruit medical doctors to the project, we wrote to all GPs on Zealand. The project was mentioned in the medical journal 'Practicus', circulated to all GPs.

We contacted the GPs in the two Danish municipalities asking for their reasons for not wanting to participate. The reasons mentioned were lack of time and an understanding that it would overstep certain limits or be too much of a transboundary move to get involved in a dialogue with CHs.

The 11 CHs who were asked to participate all agreed to do so. They were recruited through The School of Classic Homeopathy in Denmark. The CHs who participated fulfilled the following inclusion criteria: completed training in classic homeopathy; a minimum of 2 years clinical practice; experience with treating people with hypersensitivity illnesses. One of the CHs subsequently withdrew because of maternity leave before recruiting any patient. The CHs were aged between 35 and 64; five men and six women.

### Patients

The researchers delivered 194 questionnaires to the GPs and CHs (Figure 1). The number of questionnaires was based on what the GPs and the CHs considered to be realistic in terms of numbers of patients suffering from hypersensitivity illnesses. The GPs and the CHs were responsible for sending or handing out questionnaires to all their patients whose primary reason for consultation was hypersensitivity illnesses; had been treated within the last 3 years; treatment finished or current 'maintenance treatment'. The exclusion criteria were: not Danish-speaking; diagnosis of cancer; 17 years old or younger. The questionnaires were returned to the researchers.

The patients were recruited consecutively: the GPs and the CHs started from 'today' and were instructed to go back in time without excluding any patient, until they had distributed all the questionnaires they had received from the researchers. To ensure the anonymity of the patients, we chose not to enable ourselves to send a reminder to patients who did not return the questionnaire. As shown in Figure 1 the response rate was similar among the GP patients and the CH patients. Figure 1 also illustrates that the CHs distributed 89% of the questionnaires they asked for while the GPs distributed 67%.

### Questionnaire

The questionnaire contained the following social and health-related variables: age, education and occupation at the time of completion of the questionnaire, self-reported hypersensitivity illnesses, other illnesses, duration of symptoms/course of hypersensitivity illnesses before consulting the GPs or the CHs, point in

Download English Version:

<https://daneshyari.com/en/article/2629880>

Download Persian Version:

<https://daneshyari.com/article/2629880>

[Daneshyari.com](https://daneshyari.com)