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# Homeopathy in the treatment of fibromyalgia—A comprehensive literature-review and meta-analysis



Katja Boehm<sup>a</sup>, Christa Raak<sup>a,\*</sup>, Holger Cramer<sup>b</sup>, Romy Lauche<sup>b</sup>, Thomas Ostermann<sup>a,\*</sup>

<sup>a</sup> Institute for Integrative Medicine, Witten/Herdecke University, Germany

<sup>b</sup> Department of Internal and Integrative Medicine, Kliniken-Essen-Mitte, Faculty of Medicine, University of Duisburg-Essen, Germany

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## KEYWORDS

Fibromyalgia;  
Homeopathy;  
Review;  
Meta-analysis

## Summary

**Background:** Coping with the complex nature of fibromyalgia symptoms (FMS) still remains a challenge for patients. Taking into account the possible adverse events of pharmacological treatments patients often seek additional treatments for the management of fibromyalgia and turn towards complementary and alternative medicine (CAM).

**Objective:** In this review, we aimed to investigate the current state of literature of homeopathy in the treatment of FMS.

**Methods:** We searched Medline, the Cochrane Register of Controlled Trials, Embase, AMED, PsycInfo and CAMbase for the terms “fibromyalgia AND homeopath\$” through February 2013. In addition we searched Google Scholar, the library of the Carstens Foundation and that of the Deutsche Homöopathische Union (DHU). Standardized mean differences (SMD) with 95% confidence intervals (CI) were calculated and meta-analyzed using the generic inverse variance method.

**Results:** We found 10 case-reports, 3 observational studies, 1 non-randomized and 4 randomized controlled trials (RCTs) on homeopathy for fibromyalgia. Both case reports and observational studies are naturally predominated by the use of qualitative and not validated outcome measures. Meta-analyses of CCTs revealed effects of homeopathy on tender point count (SMD = -0.42; 95%CI -0.78, -0.05;  $P=0.03$ ), pain intensity (SMD = -0.54; 95%CI -0.97, -0.10;  $P=0.02$ ), and fatigue (SMD = -0.47; 95%CI -0.90, -0.05;  $P=0.03$ ) compared to placebo.

**Conclusion:** The results of the studies as well as the case reports define a sufficient basis for discussing the possible benefits of homeopathy for patients suffering from fibromyalgia syndrome although any conclusions based on the results of this review have to be regarded as preliminary.

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\* Corresponding authors. Tel.: +49 2330623643.

E-mail addresses: [christa.raak@uni-wh.de](mailto:christa.raak@uni-wh.de) (C. Raak), [thomas.ostermann@uni-wh.de](mailto:thomas.ostermann@uni-wh.de) (T. Ostermann).

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## Introduction

The fibromyalgia syndrome (FMS) is a condition defined by chronic widespread pain, fatigue, cognitive disturbances and sleep disorders.<sup>1,2</sup> Patients with FMS also experience various somatic symptoms and psychological distress.<sup>1,2</sup> Fibromyalgia is a frequent comorbidity alongside other rheumatologic conditions. Thus patients experience substantial disabilities and often report a negative impact of fibromyalgia on their quality of life, mood, anxiety, depression and self-esteem.<sup>3</sup>

According to a recent epidemiological study of Branco et al.<sup>4</sup> fibromyalgia affects about 1.4–3.7% of adults in Europe depending on the country. Epidemiological studies estimated how many people in the general population meet the FM-criteria at the time and found that with a European point prevalence of 2.9% this leads to a total of about 15 million people in Europe suffering from fibromyalgia.<sup>4</sup> With respect to the costs a recent study of Berger et al.<sup>5</sup> reports three times higher healthcare costs over 12 months in fibromyalgia patients compared to a matched patient sample in the US. These results are comparable with finding of the same research group in German GPs: compared to other primary care patients, fibromyalgia patients counted for twice as many GP visits, referrals and sick notes.<sup>6</sup>

In conventional medical practice, fibromyalgia is treated by using a wide range of symptom specific pharmacological therapies, including antidepressants, opioids, non-steroidal anti-inflammatory drugs, sedatives, muscle relaxants, and anti-epileptics.<sup>3,33</sup> Non-pharmaceutical treatments include aerobic exercises, physical therapies, massage, and cognitive behavioural therapy. Evidence-based recommendations for the management of fibromyalgia syndrome identified

by a team of UK researchers in 2008 included antidepressants, analgesics, and “other pharmacological” and exercise, cognitive behavioural therapy, education, dietary interventions and “other non-pharmacological”.<sup>32</sup> Treatment by opioids (except Tramadol) was not recommended by recent evidence-based guidelines.

However, coping with the complex nature of fibromyalgia symptoms still remains a challenge for patients. Taking into account the possible adverse events of pharmacological treatments patients often seek additional treatments for the management of fibromyalgia and turn towards complementary and alternative medicine (CAM). According to a survey by Wahner-Roedler et al.<sup>7</sup> 89% of patients referred to a fibromyalgia treatment programme at a tertiary care centre had used at least some type of CAM therapy during the previous 6 months including exercise therapy (48%), spiritual healing and prayers (45%), massage therapy (44%), chiropractic treatments (37%), or vitamins and minerals (35–25%). Nevertheless the evidence base for many of those therapeutic options for fibromyalgia is quite sparse and the methodological quality of clinical studies often is low.

A recent overview of Terry et al.,<sup>8</sup> a meta-analysis of Langhorst et al.,<sup>9</sup> and a qualitative review of Baranowsky et al.<sup>10</sup> not only found positive results for hydrotherapy and spa therapy but also for homeopathy. According to Perry et al.<sup>8</sup> existing RCTs in homeopathy suggested results in favour of homeopathy which up to now have not been summarized by means of a meta-analysis. Moreover, results from observational studies or even case reports have not been collected to complement these findings.

Thus, in the following review we aimed to comprehensively investigate the current state of literature for homeopathic interventions in the treatment of patients

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