Homeopathy and children

3.1. Homeopathy for childhood diarrhea - Department of Epidemiology, University of Washington School of Public Health and Community Medicine, Seattle, WA, USA

Citation Link:

Jacobs J, Jonas WB, Jiménez-Pérez M, Crothers D, "Homeopathy for childhood diarrhea: combined results and metaanalysis from three randomized, controlled clinical trials", *Pediatr Infect Dis J*. 2003 Mar;22(3):229-34.

http://www.ncbi.nlm.nih.gov/pubmed/12634583

Method:

"Three double blind clinical trials of diarrhea in 242 children ages 6 months to 5 years were analyzed as 1 group. Children were randomized to receive either an individualized homeopathic medicine or placebo to be taken as a single dose after each unformed stool for 5 days. Parents recorded daily stools on diary cards, and health workers made home visits daily to monitor children. The duration of diarrhea was defined as the time until there were less than 3 unformed stools per day for 2 consecutive days. A metaanalysis of the effect-size difference of the three studies was also conducted".

Results:

"These studies confirm that individualized homeopathic treatment decreases the duration of acute childhood diarrhea. Homeopathy should be considered for use as an adjunct to oral rehydration for this illness".

3.2. The homoeopathic treatment of otitis media in children--comparisons with conventional therapy - Haunersches Kinderspital, München, Germany

Citation and Link:

Friese KH, Kruse S, Lüdtke R, Moeller H., "The homoeopathic treatment of otitis media in children--comparisons with conventional therapy", *Int J Clin Pharmacol Ther*, 1997 Jul;35(7):296-301.

http://www.ncbi.nlm.nih.gov/pubmed/9247843

Aim & Method:

"In a prospective observational study carried out by 1 homoeopathic and 4 conventional ENT practitioners, the 2 methods of treating acute pediatric otitis media were compared. Group A received treatment with homoeopathic single remedies. whereas group B received nasal drops, antibiotics, secretolytics and/or antipyretics. The main outcome measures were duration of pain, duration of fever, and the number of recurrences after 1 year."

Results:

"Of the children treated, *70.7% were free of recurrence within a year in group A (homeopathic medicines)* and 29.3% were found to have a maximum of 3 recurrences. In group B (conventional therapy), 56.5% were free of recurrence, and ..."

3.3. Prospective multicentric observational study to evolve the usefulness of 13 predefined homoeopathic medicines in the management of acute rhinitis in children - Central Council for Research in Homoeopathy, New Delhi, India

Link:

Chaturbhuja Nayak et al., "Prospective multicentric observational study to evolve the usefulness of 13 predefined homoeopathic medicines in the management of acute rhinitis in children", *International Journal of High Dilution Research*, Vol 9, No 30 (2010)

http://www.feg.unesp.br/~ojs/index.php/ijhdr/article/view/369

Aim:

"The study aimed to evaluate the effect of a group of homeopathic medicines in children with acute rhinitis. Materials and methods: In this multi-centric open clinical trial, a total of 784 children (408 males; 384 females) aged 6 months to 15 years, presenting symptoms of acute rhinitis."

Results:

"Out of 784 children enrolled, 638 children were followed up and analyzed. *A significant change in the score from the baseline ($p<0.05$) was observed. Twelve medicines were found to be useful in 638 children suffering from acute rhinitis* and among them Nux-v (n=109), Merc (n=106) and Bell (n=88) were the most useful. No complications were observed during the treatment. Adverse events in the form of hyperpyrexia were observed in 2 children only. Conclusion: This study indicates the usefulness of homeopathic medicines in the management of acute rhinitis of children."

3.4. A meta-analysis of homeopathic treatment of pollinosis with homeopathic Galphimia glauca - Institut für Medizinische Informationsverarbeitung, Tübingen, Deutschland

Link:

Lüdtke R, Wiesenauer M., "A meta-analysis of homeopathic treatment of pollinosis with Galphimia glauca", Wien Med Wochenschr. 1997;147(14):323-7.

http://www.ncbi.nlm.nih.gov/pubmed/9381725

Aim & Method:

"To assess the efficacy of homeopathic prepared Galphimia glauca compared to placebo in the treatment of pollinosis. 2) To estimate the corresponding overall success rate of Galphimia glauca. Meta-analysis of clinical trials. STUDY SELECTION: 7 randomized double-blind placebo-controlled trials and 4 not placebo-controlled trials (1 randomized and controlled, 1 prospective uncontrolled, 2 retrospective uncontrolled) performed by our study group between 1980 and 1989".

Results:

"*A significant superiority of Galphimia glauca over placebo is demonstrated*. Estimates of verum success rates are comparable with those of conventional antihistaminics, but no side effects occurred. Meta-analysis of clinical trials *A significant superiority of Galphimia glauca over placebo is demonstrated...*"

3.5. Randomised controlled trials of homeopathy in hyperactive children: treatment procedure leads to an unconventional study design. Experience with open-label homeopathic treatment preceding the Swiss ADHD placebo controlled, randomised, double-blind, cross-over trial - Swiss Association of Homeopathic Physicians, Lucerne, Switzerland

Citation and Link:

Frei H, Everts R, von Ammon K, Kaufmann F, Walther D, Schmitz SF, Collenberg M, Steinlin M, Lim C, Thurneysen A, "Randomised controlled trials of homeopathy in hyperactive children: treatment procedure leads to an unconventional study design. Experience with open-label homeopathic treatment preceding the Swiss ADHD placebo controlled, randomised, double-blind, cross-over trial", *Homeopathy* 2007 Jan; 96(1):35-41.

http://www.unboundmedicine.com/medline/ebm/record/17227746/full_citation/Randomised_controlled_trials_of_homeopathy_in_hyperactive_children:_treatment_procedure_leads_to_an_unconventional_study_design__Experience_with_open_label_homeopathic_treatment_preceding_the_Swiss_ADHD_placebo_controlled_randomised_double_blind_cross_over_trial_

Aim & Method:

"Treatment of patients with attention deficit hyperactivity disorder (ADHD) with homeopathy is difficult. The Swiss randomised, placebo controlled, cross-over trial in ADHD patients (Swiss ADHD trial) was designed with an open-label screening phase prior to the randomised controlled phase. During the screening phase, the response of each child to successive homeopathic medications was observed until the optimal medication was identified. Only children who reached a predefined level of improvement participated in the randomised, cross-over phase. Although the randomised phase revealed a significant beneficial effect of homeopathy, the cross-over caused a strong carryover effect diminishing the apparent difference between placebo and verum treatment. METHODS: This retrospective analysis explores the screening phase data with respect to the risk of failure to demonstrate a specific effect of a randomised controlled trial (RCT) with randomisation at the start of the treatment."

Results:

"During the screening phase, 84% (70/83) of the children responded to treatment and reached eligibility for the randomised trial after a median time of 5 months (range 1-18), with a median of 3 different medications (range 1-9). Thirteen children (16%) did not reach eligibility. Five months after treatment start, the difference in Conners Global Index (CGI) rating between responders and non-responders became highly significant ($p = 0.0006$). Improvement in CGI was much greater following the identification of the optimal medication than in the preceding suboptimal treatment period ($p < 0.0001$)".