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Review Article

Study of Efficacy of Homoeopathic Medicine in Cases of Hyperthyroidism

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ABSTRACT
Hyperthyroidism is a set of disorders that involve excess synthesis and secretion of thyroid hormones by the thyroid gland, which leads to the hyper metabolic condition of thyrotoxicosis. The most common forms of hyperthyroidism include diffuse toxic goiter (Graves' disease), toxic multinodular goiter (Plummer disease), and toxic adenoma. The primary objective of the study was to study the efficacy of Homoeopathic Medicine in cases of Hyperthyroidism.
Methods: The present study consisted of thirty patients suffering from Hyperthyroidism. Patients were randomly divided in 2 groups. One group (Medicinal Group) comprising 15 cases received appropriate Homoeopathic medicine prescribed on symptoms similarity, while other group (Control group) comprising 15 cases received Placebo along with Dietary advice.
Conclusion: The study shows that Homoeopathic medicines are significantly effective in the management of cases of hyperthyroidism.
Keywords: Hyperthyroidism, Homoeopathy, Placebo, Diet, Totality

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INTRODUCTION

The thyroid gland is a bilobed structure located in the anterior aspect of the trachea between the cricoid cartilage and the suprasternal notch. Each lobe of the thyroid connects via a thyroid isthmus. It is supplied via the superior thyroid artery which stems from the external carotid artery and the inferior thyroid artery, which is a branch of the thyrocervical trunk.

The term "hyperthyroidism" defines a syndrome associated with excess thyroid hormone production. It is a common misconception that the terms thyrotoxicosis and hyperthyroidism are synonyms of one another. The term "thyrotoxicosis" refers to a state of excess thyroid hormone exposure to tissues. Although hyperthyroidism can lead to thyrotoxicosis and can be used interchangeably, it is important to note the difference between the two.

Homoeopathy considers a disease to be the result of emotional distress and frustration, which blocks the life force energy into various organs or glands. Homoeopathy considers thyroid problem as one such autoimmune glandular dysfunction. Homoeopathy offers better chances of a cure since the treatment is based on the person's individual constitution. Homoeopathic treatment may be useful as a supportive therapy for regulating both "hyper" and "hypo" conditions of the thyroid.

Conventional treatment of thyroid dysfunction relies mainly on drugs and surgery whereas Homeopathic treatment improves the function of the thyroid gland through natural means.

Homoeopathic remedies work by stimulating the body's own healing power. Homoeopathic remedies stimulate the body to reactivate the hormone secretions, replenish and restore the thyroid tissue through the pituitary and other glands allowing the body to heal itself.

OBJECTIVES

To study the Efficacy of Homoeopathic Medicine in cases of Hyperthyroidism

To study of hyperthyroidism in detail.

To assess the role of homoeopathic management of hyperthyroidism.

To assess the role of Diet and placebo in cases of hyperthyroidism

MATERIAL AND METHODS

METHODOLOGY

Study design: A Randomized Control Single Blind Clinical Trial was conducted at SKH Medical College, Beed over the period of 18 months. The subjects for the study were selected from the college and OPD & IPD department as well as private Clinics of the researchers.

Inclusive and exclusive criteria:

A. Inclusion Criteria:

All cases of hyperthyroidism at varying age groups & of both the genders.

Many cases previously under different modes of treatment are also included into this study.

All the cases were included after clinical examination, pathological investigations wherever necessary.

B. Exclusion Criteria:

Cases with other fatal & systemic complications were excluded.

Similarly, patients with known immuno-compromised disease are also excluded.

Method of Selection: Total 30 cases were selected by simple random sampling technique. Selected 30 cases were divided in two groups i.e. Group A and Group B respectively. Group A (Treatment Group, n=15) received Homoeopathic remedies. While Group B (Control Group, n=15) received placebo and dietary advice.

Specification of instruments & related scale: The diagnosis was made based on ICD 10 Criteria and Thyroid Function Test.

RESEARCH METHODOLOGY

Data collection method: A Uniform Performa of case taking was maintained for each of the patient by one standardize case recording format. This Performa incorporate all specific information about the patient, his past and family history, detailed information about his sufferings, record of physical examination & findings etc. The format also records the details of treatment given with the medicine, potency, repetition schedule, details of follow-up till the end of treatment.

Selection and Administration of Medicine: Homoeopathic medicines were prescribed to the patient as indicated after repertorization, as a single blind clinical trial with placebo control study along with dietary advice.

Dietetic & Hygienic Measures: Proper dietetic and hygienic measures were taken before administration of medicines, which are used as specific stimuli to rouse the vital force to react against the morbific agent and overcome their noxious influences.

Follow-Up and Monitoring: All the patients were advised to report at regular intervals varied according to the severity of symptoms presented by the patient and the potency of medicine used. Each case was followed up to 6 months or up to recovery of the patient, whichever occurs earlier to be included in the study. On reporting, the cases were analyzed properly and results were assessed through the clinical assessment of improvement.

Plan for statistical analysis: The data analysis was done by applying appropriate tests of significance. Paired T test of proportions was applied at 5% and 1% level of significance.

Ethical Clearance: Ethical clearance has been obtained from the institution.

STATISTICAL ANALYSIS:

Total 30 patients suffering from Hyperthyroidism were participated in this study. All the 30 patients were randomly divided in to 2 groups, - Medicinal Group – total 15 patients; who received appropriate Homoeopathic medicine & Control Group- total 15 patients; who received Placebo along

with dietary advice.

For the statistical analysis paired t-test at 5% and 1% level of significance was applied. The formula used for the test is, -

$$t = \frac{\bar{d}\sqrt{n}}{s}$$

Medicinal Group (Homoeopathic Medicine)-

Hypothesis:

H_0 (null hypothesis) – The Homoeopathic medicines does not show significant improvement in cases of hyperthyroidism.

H_1 (alternative hypothesis) – The Homoeopathic medicines show significant improvement in cases of hyperthyroidism.

Array 1 (Pre test score)– 380, 280, 376, 356, 294, 346, 332, 342, 384, 368, 322, 274, 322, 334, 364

Array 2 (Post test score) – 88, 138, 94, 82, 122, 86, 146, 84, 380, 80, 102, 124, 320, 82, 90

Tails – 2 (Two-tailed distribution)

Type– 1 (Paired t-test)

Calculated value of t = 8.25

Control Group (Placebo + Dietary Advice)-

Hypothesis:

H_0 (null hypothesis) – the Placebo with diet does not show improvement in cases of Hyperthyroidism.

H_1 (alternative hypothesis) – the Placebo with diet show significant improvement in cases of Hyperthyroidism.

Array 1 (Pre test score)– 264, 240, 268, 244, 280, 246, 254, 266, 352, 308, 238, 284, 288, 314, 304

Array 2 (Post test score)– 268, 240, 268, 102, 278, 104, 242, 122, 88, 308, 206, 280, 116, 310, 302

Tails – 2 (Two-tailed distribution)

Type– 1 (Paired t-test)

Calculated value of t = 2.72

Group	Calculated t value	Table t value	
		5%	1%
Medicinal Group (Homoeopathic Medicine)	8.25	2.15	2.98
Control Group (Placebo + Diet)	2.72	2.15	2.98

From these statistical observations following conclusions can be drawn

Medicinal Group (Homoeopathic Medicine)

After above statistical analysis we reject the null hypothesis at 5% l.o.s. since the calculated value of t (8.25) is greater than table value of t (2.15). It is also rejected at 1% l.o.s., therefore we can say that it is highly significant. Hence, alternative hypothesis is accepted i.e. the homoeopathic medicines show significant improvement in cases of Hyperthyroidism.

Control Group (Placebo + Diet)

After above statistical analysis we reject the null hypothesis at 5% l.o.s. since the calculated value of t (2.72) is greater than table value of t (2.15). But we accept the null hypothesis at 1% l.o.s., as calculated value of t (2.72) is less than table value (2.98) therefore we can say that results are significant at 5% l.o.s. the results may be due to active role of diet in management of Hyperthyroidism.

DISCUSSION AND CONCLUSION

The present study comprised to study the efficacy of Homoeopathic medicines in the cases of Hyperthyroidism. Though Hyperthyroidism is commonly presented as chronic disease, it is one of the most common diseases encountered in daily practice.

To understand this Hyperthyroidism entirety and to assess the efficacy of Homoeopathic medicine has been the prime object of this study. In this study total 30 cases suffering from Hyperthyroidism were included. Those 30 cases were allocated randomly in 2 groups; Medicinal group (which comprises 15 cases) received appropriate Homoeopathic medicine & Control group (which comprises 15 cases) received Placebo along with proper dietary advises. The various observations made during this study among the both groups are briefly discussed below.

There were a total number of 30 cases suffering from Hyperthyroidism taken up of randomly for the study. Those cases were divided randomly in to 2 groups, Medicinal & Control group comprising 15 cases each.

Patients of medicinal group received appropriate indicated Homoeopathic medicine while the cases from control group received Placebo along with Dietary advice. At the end Conclusions were drawn after a statistical analysis of patients with Hyperthyroidism. The following conclusions were drawn from the study.

The highest incidence of Hyperthyroidism was seen in the age group of 21-30 years of age (total 15 cases accounting 50.00%), followed by in the age group 31- 40 years (8 cases accounting 26.67%).

The prevalence of Hyperthyroidism is more in females (total 18 cases accounting 60.00%) than in males (12 cases accounting 40.00%).

Psora is found to be most common Fundamental miasm in the cases of Hyperthyroidism (15 cases, accounting 50.00%), followed by Sycosis (10 cases, accounting 33.33%).

Sycosis is found to be most common Dominating miasm in the cases of Hyperthyroidism (13 cases, accounting 43.33%), followed by Psora (10 cases, accounting 33.33%).

Natrum Mur is found to be most commonly Indicated remedy in the cases of Hyperthyroidism (out of 15 cases in 5 cases it was prescribed accounting 43.33%), followed by Phosphorus and Iodum (each in 3 cases, accounting 20.00% respectively).

Potency used in the study shows 200th potency used in maximum cases of Hyperthyroidism (out of 15 cases in 8 cases, accounting 53.33%), followed by 30 (7 cases, accounting 46.67%).

End results were assessed by T3 (Thyroid Hormone) scores used for assessment of effect of treatment showed significant reduction after the treatment amongst the medicinal group. Out of 15 cases from medicinal group 8 cases (53.33%) cases shows marked improvement, 5 cases show improvement (33.33%) while 2 cases didn't show any improvement (13.33%). This proves the efficacy of homoeopathic medicines in the management of Hyperthyroidism.

Results of Control group shows marked improvement in 1 case (6.67%), 4 cases show improvement (26.67%) while 10 cases didn't show any improvement (66.67%).

The results of control group observed may be due to advice of proper dietary advice along with placebo.

Overall result of the study shows out of 30 cases Hyperthyroidism 9 cases (30.00%) cases shows marked improvement, 9 cases show improvement (30.33%) while 12 cases did not show any improvement (40.00%).

Medicines prescribed

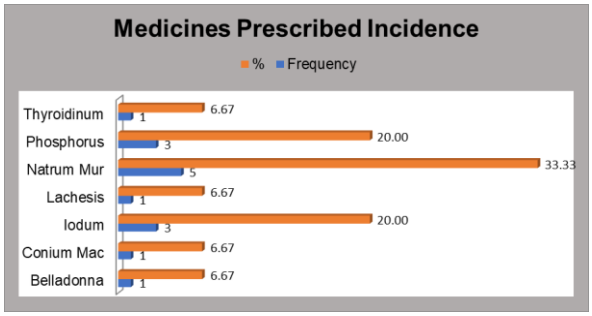

Figure 1: Graph showing Medicines Prescribed in the Study

Scores before and after the treatment

Case No	T3 Pre Score (X)	T3 Post Score (Y)	Difference (X-Y = Z)	Improvement %
1	380	88	292	76.84
2	280	138	142	50.71
3	376	94	282	75.00
4	356	82	274	76.97
5	294	122	172	58.50
6	346	86	260	75.14
7	332	146	186	56.02
8	342	84	258	75.44
9	384	380	4	1.04
10	368	80	288	78.26
11	322	102	220	68.32
12	274	124	150	54.74
13	322	320	2	0.62
14	334	82	252	75.45
15	364	90	274	75.27

Table 1: Table showing T3 Scores before and after

the treatment in Medicinal Group

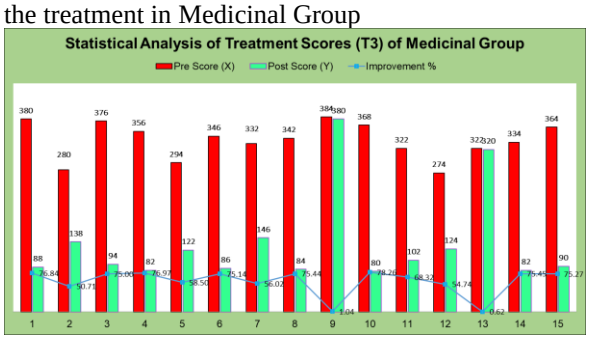

Figure 2: Graph showing the T3 Scores before and after the treatment in Medicinal Group

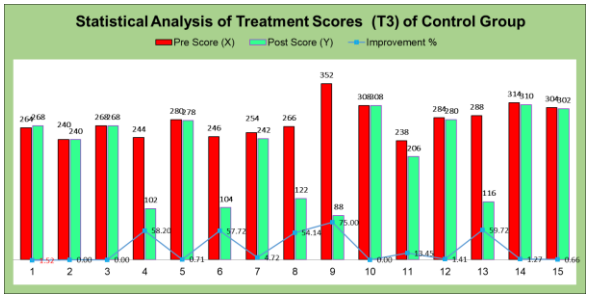

Figure 3: Graph showing the T3 scores before and after the treatment in Control Group

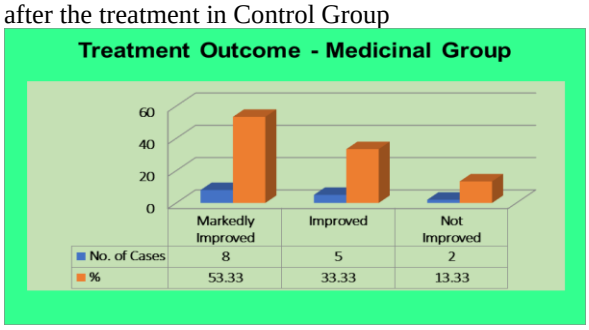

Figure 4: Graph showing Treatment Outcome of Medicinal Group

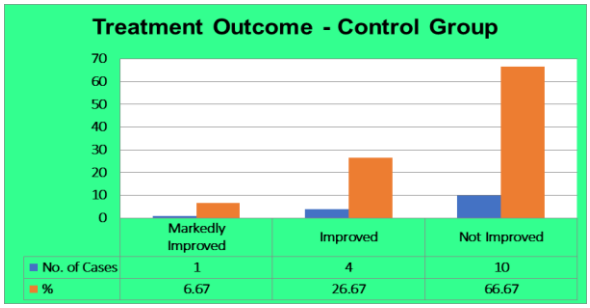

Figure 5: Graph showing Treatment Outcome of Control Group

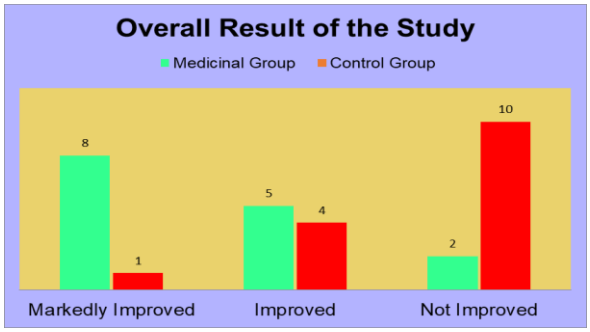

Figure 6: Graph showing Overall Result of the Study

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