



Homoeopathic treatment of upper respiratory tract infections in children: Evaluation of thirty case series

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A B S T R A C T

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A pilot study of the homoeopathic treatment of recurrent Upper Respiratory Tract Infections (URTIs) in children below the age of 5 years was carried out using the data consisting of detailed case series with before and after comparison in respect of 30 patients collected during 2006. The study was carried out as part of a research project at a private Homoeopathic Medical College and Post-Graduate Institute. The number of attacks of the URTIs during the 6 months period preceding the date of commencement of the homoeopathic treatment (Control value) and 6 months period following the date of commencement of treatment (Treatment value) were compared. The results of the study indicated statistically significant differences ($p < 0.001\%$, t-test and Wilcoxon non-parametric test) in the two data sets in favour of homoeopathic treated cases. The results of the study indicate the utility of the homoeopathic remedies prescribed based on the concept of individualisation in the treatment of URTIs in children vis-à-vis improving the prescribing skills particularly with respect to the process of selection and types of medicines.

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1. Introduction

Infections of the upper respiratory system, by far the most common cause of illness in infancy and childhood accounting for approximately 50 per cent of all illness in children younger than five years of age.¹ Young children develop on the average six to ten viral upper respiratory tract infections (URTIs).² Changed lifestyle, food habits, which include a lot of preservatives, artificial colours, increasing pollution, compact living have all contributed to an increase in the rate of upper respiratory tract problems in children. Most often, viral respiratory tract infections spread when a child's hands come into contact with nasal secretions from an infected person.³ These secretions contain viruses. When the child touches his mouth, nose, or eyes, the viruses gain entry and produce a new infection. Less often, infections spread when a child breathes air containing droplets that were coughed or sneezed out by an infected person. For various reasons, nasal or respiratory secretions from children with viral respiratory tract infections contain more viruses than those from infected adults. This increased output of viruses, along with typically lesser attention to hygiene, makes children more likely to spread their infection to others. The possibility of transmission is further enhanced when many children are gathered together, such as in childcare centers and schools. Contrary to what

people may think, other factors, such as becoming chilled, wet, or tired, do not cause colds or increase a child's susceptibility to infection.

The initial clinical research suggests that homoeopathy treatment may be effective in reducing symptoms and duration of upper respiratory tract infection conditions in children. The homoeopathic treatment has a very good scope in the treatment of URTIs in children. The URTIs can be managed with homoeopathic medicines very effectively with long-term treatment and a suitable constitutional remedy.

Several homeopathic researchers have investigated the effect of homoeopathic treatment for common URTI which are frequent in the general population, with often positive results. The unnecessary use of antibiotics in the initial treatment of URTI is currently being questioned. Homeopathy has been used historically to treat this illness, and it is interesting to determine if there are methodologically rigorous trials to support its effectiveness.⁴

Walach⁵ in an overview of the published papers between 2000 and 2004 reported that URTI showed 67.3% improvement with homeopathy as compared to 56% with conventional treatment. It was concluded that homeopathy is at least as effective as conventional therapies, but costs are lower and the safety of homeopathy is greater.

Bornhöft et al.⁶ compiled The Health Technology Assessment report on effectiveness, cost effectiveness and appropriateness of

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homeopathy on behalf the Swiss Federal Office for Public Health (BAG) within the framework of the 'Program of Evaluation of Complementary Medicine (PEK)'. The evaluation of 29 studies in the domain of 'URTI' showed a positive overall result in favor of homeopathy. 6 out of 7 controlled studies were at least equivalent to conventional medical interventions. 8 out of 16 placebo controlled studies were significant in favour of homeopathy. Taking internal and external validity criteria into account, effectiveness of homeopathy can be supported by clinical evidence and professional and adequate application be regarded as safe.

Hill and Doyon⁷ reviewed 40 randomised trials of homeopathy for treatment of recurring URIs in children. The results of the study do not provide acceptable evidence that homeopathic treatments are effective.

Steinsbekk et al.⁸ investigated the effect of individualised treatment by homeopaths in preventing childhood URIs adopting the open, pragmatic, randomised parallel-group trial with waiting-list group as control. One hundred and sixty-nine children below the age of 10 years, previously diagnosed with URTI, were randomly assigned to receive either pragmatic homeopathic care from one of five homeopaths for 12 weeks or to a waiting-list control using self-selected, conventional health care. There was a significant difference in median total symptom score in favour of homeopathic care (24 points) compared to the control group (44 points) ($p = 0.026$). The difference in the median number of days with URTI symptoms was statistically significant with 8 days in the homeopathic group and 13 days in the control group ($p = 0.006$). There was no statistical difference in the use of conventional medication or care between the two groups. It was concluded that there was a clinically relevant effect of individualized homeopathic care in the prevention of URTI in children.

Haidvogel et al.,⁹ studied the effectiveness of homeopathy compared to conventional treatment in acute respiratory and ear complaints in Primary Care settings. This comparative cohort study, involving more than 1,500 patients in primary care practices of at least 6 different European countries, demonstrates that homeopathic treatment for acute respiratory and ear complaints was not inferior to conventional treatment.

2. Objectives

The present clinical research suggests that individualization and use of well chosen homeopathic remedies are essential for most effective treatment. At present there is little data on the effect of homeopathic treatment and prevention of Upper Respiratory Tract Infections (URTIs) in children in India. In order to advance the present knowledge in the field of clinical research the author has carried out a systematic study to investigate the utility of homeopathic medicines for the treatment and prevention of recurrent URIs in children below 5 years based on the concept of individualization vis-à-vis improving the prescribing skills particularly with respect to the process of selection and types of medicines.

3. Materials and methods

The study is based on the data relating to the homeopathic treatment carried out with detailed case studies and their follow up on children below the age of 5 years in the Pediatric Out Patient Department (OPD) of a Private Homeopathic Medical College and Post-Graduate Institute Hospital during the year 2006. The study was carried out as a part of a Post-Graduate Research Project and all the possible relevant details of the patients were collected and recorded in the case papers. The above observed data after a detailed assessment were analysed and appropriate statistical significance tests were applied and the results are presented in this paper.

3.1. Case definition

In homeopathy the patient is treated rather than the disease. The principle of individualization allows the physician to cater to the needs of an individual patient.

The cases in which case histories that were adequately and accurately taken were subjected to experimental work. The case was defined strictly in accordance with the Central Tenet of prescribing, that is, "Law of Similars", to which is interwoven the doctrine of individualization.

The homeopathic medicine was given only when the indications of it were present and the case analysed, evaluated and synthesized in logical and rational way. It was given as per indication of it in a particular case (for e.g., as intercurrent, neutral symptom similarity for initiating treatment etc).

3.1.1. Inclusion criteria

Subjects of age below 5 years and both sexes, who fulfilled the standard case definition were included in the study.

Patients were taken irrespective of socioeconomic status.

3.1.2. Exclusion criteria

All the cases that did not fulfill the standard case definition were excluded.

Patients who refused to give proper case history were excluded.

3.1.3. Clinical protocol

The data have been collected by purposive sampling method and processed in a standard format with the following steps:

- (i) Patients have been selected as per inclusion criteria
- (ii) Details of research work have been explained to the patients and their consent has been taken.
- (iii) Nosological diagnosis of a case has been done with adequate investigations.
- (iv) All cases have been taken in standardized case record.
- (v) Processing of the case has been done as per the principles of Homeopathy. The totality has been erected after analysis, evaluation and synthesis of the case.
- (vi) References from Materia Medica and Repertory have been availed for selection of the remedy.
- (vii) All the cases have been followed up for a period of 6 months to 1 year as per guidelines from Organon of Medicine and Homeopathic Philosophy.

3.1.4. Selection of the remedy

A detailed study of the cases was carried out and the medicines were given as per the indications, i. e., as intercurrent based on acute totality etc.

3.1.5. Selection of the potency

Potency selection was done according to the rules of Posology as per 6th Edition of Organon of Medicine and evolved logically afterwards.

3.1.6. Repetition schedule

The drugs were repeated depending upon the presentation of the individual cases and responses during follow-up.

3.1.7. Preparation of the remedy

The drugs were brought from the standard Pharmacies, which manufacture the drugs according to standard Homeopathic Pharmacopoeia.

3.1.8. Storage of drugs

Storage of drugs was as per rules of Pharmacy.

3.1.9. Route of administration

Medicines were administered orally.

3.1.10. Criteria of assessment

Assessment was based on general improvement of patient at mental and physical level and also at local level (inclusive of pathology).

New signs and symptoms developed after the medicine was administered were also assessed during the follow-up.

Whenever necessary, help of investigations was taken for assessment.

3.1.11. Investigations

As per the need of the case, necessary investigations were asked for and utilized.

3.1.12. Follow-up

The patients were asked to report depending on the clinical entity, general condition of the patient, severity of illness, nature of disease, nature of pathology and the organs affected etc.

3.1.13. General management

The following points have been taken into account:

3.1.13.1. Problem definition. Understanding precisely the exact problem of the patient from which the patient is suffering. This is worked out at three levels:

- Diagnostic: Arriving at the diagnosis of a disease through exclusion and inclusion method, with or without the aid of the investigations.
- Patient as a person: Understanding the patient as a whole, through the analysis of expressions in his various areas of functioning viz., family, work and society.
- Homoeopathic: Analyzing, evaluating and synthesizing the case from Homoeopathic philosophy and practice.

3.1.13.2. Problem resolution.

- Therapeutic/Homoeopathic aspect of resolution through a) Constitutional b) Acute c) Intercurrent d) Anti-Miasmatic e) Nosodes etc.
- Diet.
- Ancillary Measures: Steam inhalation, saline gargles, etc.

4. Results

The present study is based on 30 cases of recurrent URTIs in children below the age of 5 years. The important details of the 30 cases particularly relating to the Nosological diagnosis, homoeopathic medicines (remedies) prescribed and administered, the number of attacks of the recurrent URTIs during the 6 months period preceding the date of commencement of the homoeopathic treatment (C – Control Value) and 6 months period following the date of commencement of the treatment (T – Treatment Value) are presented in Table 1.

The distribution of male/female cases in different age groups is shown in Fig. 1: The maximum age incidence was seen in the age group 4–5 years (16 cases).

Table 1

Details of Nosological Diagnosis, homoeopathic medicines (remedies) prescribed and administered, the number of attacks of the recurrent Upper Respiratory Tract Infections (URTIs) during the 6 months period preceding the date of commencement of the homoeopathic treatment (C – Control Value) and 6 months period following the date of commencement of the treatment (T – Treatment Value).

No	Age (Year, Month)	Sex	Nosological Diagnosis	Remedies	C	T
1	4Y	F	Rhinitis, Pharyngitis	<i>Tuberculinum, Hepar sulphuris</i>	6	1
2	4Y	M	Tonsillitis	<i>Medorrhinum, Hepar sulphuris</i>	6	1
3	3Y 6M	M	Pharyngitis	<i>Sulphur, Spongia tosta</i>	6	2
4	1Y 3M	M	Rhinitis	<i>Medorrhinum, Sambucus nigra, Hepar sulphuris</i>	12	2
5	4Y 3M	F	Rhinitis, Pharyngitis	<i>Calcarea carbonica, Belladonna</i>	4	1
6	2Y 6M	M	Rhinitis, Pharyngitis	<i>Sulphur, Nux vomica</i>	6	1
7	1Y 4M	F	URTI	<i>Calcarea carbonica, Allium cepa</i>	6	2
8	2Y	M	Pharyngitis, Otitis Media	<i>Belladonna, Tuberculinum</i>	12	1
9	3Y	M	Rhinitis, Tonsillitis	<i>Medorrhinum, Antimonium tartaricum, Kali bichromium, Euphrasia</i>	6	2
10	3Y 6M	M	Rhinitis, Tubercular Miasm	<i>Silicea, Pulsatilla, Arsenicum album</i>	7	2
11	4Y 3M	F	Sinusitis	<i>Sanguinaria canadensis</i>	6	2
12	4Y 6M	M	Rhinitis	<i>Natrum muriaticum, Kali bichromicum</i>	12	2
13	3Y 6M	M	Rhinitis	<i>Ammonium carb</i>	6	2
14	4Y 6M	M	URTI	<i>Arsenicum iodatum, Tuberculinum, Arsenicum album</i>	6	2
15	4Y 6M	M	Tonsillitis	<i>Mercurius iodatus ruber, Sulphur</i>	4	2
16	4Y 3M	M	Tonsillitis	<i>Belladonna, Phosphorus</i>	4	1
17	3Y	F	Rhinitis	<i>Medorrhinum, Belladonna</i>	6	1
18	3Y 8M	F	Rhinitis	<i>Psorinum, Arsenicum album, Hepar sulphuris</i>	6	2
19	4Y 1M	F	Pharyngitis, Tonsillitis	<i>Tuberculinum, Belladonna</i>	6	3
20	4Y 3M	M	Rhinitis	<i>Nitric acid, Ammonium carb</i>	6	2
21	2Y 6M	F	Rhinitis	<i>Calcarea phosphorica, Arsenicum iodatum</i>	8	2
22	2Y 8M	M	Otitis Media	<i>Pulsatilla</i>	6	2
23	4Y	M	Tonsillitis	<i>Phosphorus, Lycopodium</i>	12	2
24	4Y	F	Pharyngitis	<i>Calcarea carb, Lycopodium</i>	6	2
25	4Y	F	Tonsillitis	<i>Silicea, Phytolacca, Pulsatilla</i>	4	2
26	11M	F	Rhinitis	<i>Pulsatilla</i>	12	3
27	4Y 2M	F	Sinusitis	<i>Kali bichromium, Thuja occidentalis</i>	4	1
28	4Y 4M	F	Tonsillitis	<i>Mercurius iodatus flavus, Calcarea carbonica, Psorinum</i>	3	1
29	4Y	F	Rhinitis, Tonsillitis	<i>Calcarea phosphorica, Hepar sulphuris, Dulcamara</i>	6	3
30	3Y 8M	F	Rhinitis	<i>Silicea, Nux vomica</i>	12	2
Mean(30)	3.47Y				6.87	1.77

t-test^{10–12} results: Mean C = 6.87, S.D. = 2.80, Mean T = 1.80, S.D. = 0.61, total S.D. = 2.03

No. degrees of freedom = 58, t-value = 9.7, significant at less than 0.001%

Wilcoxon signed rank test^{10–12}

Results: S.D. = 97.24, Z value = 4.78

Sum of the signed ranks W statistic = 465, significant at less than 0.001%

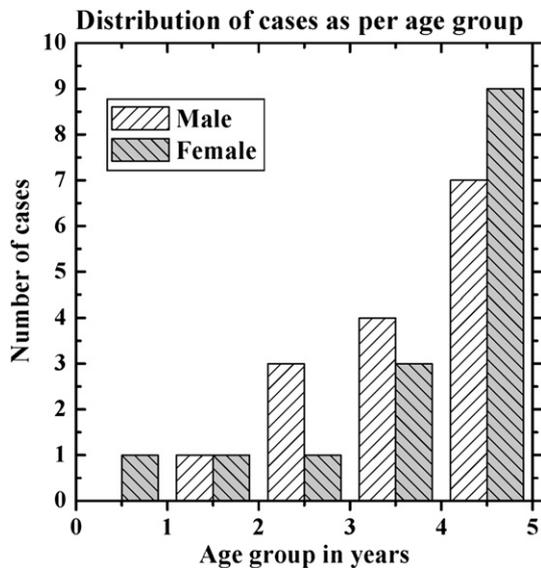


Fig. 1. Distribution of Male/Female Cases in different age groups. Total number of cases 30, Male 15, Female 15, Mean Age of 30 cases 3.47, Mean Age Male 3.46, Mean Age Female 3.48.

5. Discussion

A discussion of the 30 cases (Table 1) including the response of the patients to the homoeopathic medicines chosen and prescribed based on (i) Chronic Totality of Symptoms and (ii) Acute Totality of Symptoms, vis-à-vis the nosological diagnosis is presented in the following.

Case 1

Age: 4 years

Sex: F

The patient came with the complaints of irritation in the throat, dry cough followed by moderate fever, thick greenish nasal discharge. On the average she had such episodes every month for the past 6 months. Her Tonsils were enlarged and had cervical lymphadenopathy. She had nocturnal enuresis for the last 1 month. The child had recurrent Pharyngitis followed by Rhinitis. On Chronic Totality, the drug chosen was Tuberculinum and it worked very well with good results as regards intensity and frequency of attacks. Hepar Sulphuris was given as acute remedy. The general condition of the patient improved considerably.

Case 2

Age: 4 years

Sex: M

The patient came with the complaints of recurrent cough with vomiting, sticky white mucus and fever. On the average the frequency of such attacks was once every month during the last 12 months. The child had chronic Hypertrophic Tonsillitis, Adenoid enlargement, Sycosis. The patient had a family history of Frontal Sinusitis (Mother). On Chronic Totality the drug chosen was Medorrhinum and it worked well with good results as regards intensity and frequency. Hepar Sulphuris was given as acute remedy.

Case 3

Age: 3 years, 6 months

Sex: M

The patient came with the complaints of frequent episodes of dry cough on and off brought by the change of weather for the past 7 months. On the average he had such episodes once every month. The child had granular Pharyngitis with throat congestion of Pharyngeal Mucosa. On Chronic Totality, the drug chosen was Sulphur and it worked very well with good results. Spongia Tosta was given as acute remedy. The general condition of the patient improved considerably and started gaining weight.

Case 4

Age: 1 year, 3 months

Sex: M

The patient came with the complaint of recurrent coryza almost every 15 days for the past 6 months. It starts with thin watery coryza. He had Recurrent Rhinitis and Lymphadenopathy with palpable cervical nodes. On Chronic Totality the drug chosen was Medorrhinum and the patient responded very well with good results as regards intensity and frequency. Sambucus Nigra and Hepar Sulphuris were given as acute remedies. His general condition improved considerably, started breathing through the nose and he had no pallor.

Case 5

Age: 4 years, 3 months

Sex: F

The patient came with the complaints of recurrent colds, specially at change of weather and during rainy season. She got high fever with pain in throat, watery coryza, stoppage of nose. She had been suffering from such episodes for the past 3 years. She had Recurrent Rhinitis with Pharyngitis. She had 4 severe attacks during the past 6 months. She had past history of diarrhoea in infancy. On Chronic Totality the drug chosen was Calcarea Carbonica and the patient responded very well with good results as regards the intensity and frequency. Belladonna was given as acute remedy. The general condition of the patient improved considerably.

Case 6

Age: 2 years, 6 months

Sex: M

The patient came with the complaints of recurrent coryza. He got fever with coryza, cough with vomiting and such attacks were more during winter. On the average he was getting such episodes every month for the past 8 months. The child had cervical lymphadenopathy. He had Recurrent Rhinitis with Pharyngitis. On Chronic Totality the drug chosen was Sulphur and the patient responded very well with good results. Nux Vomica was given as acute remedy. The general condition of the patient improved rapidly.

Case 7

Age: 1 year, 4 months

Sex: F

The patient came with high fever followed by dry cough, watery coryza. She was given antibiotics each time. On the average she had 1 attack every month for the past 6 months. She had Recurrent URTI. The patient had a family history of Hyperthyroidism (Mother). On Chronic Totality the drug chosen was Calcarea Carbonica and it worked very well with good results as regards intensity and frequency. Allium Cepa was given as acute remedy. The general condition of the patient improved considerably.

Case 8

Age: 2 years

Sex: M

The patient came with the complaints of high fever, chills, coryza, mucoid, pain in the left ear during cough. On the average he had such attacks every 15 days for the last 6 months. The patient had Acute Pharyngitis, with middle ear inflammation. On Chronic Totality the drug chosen was Belladonna and it worked very well with good results. Tuberculinum was given as acute remedy. The patient responded very well and his general condition improved rapidly.

Case 9

Age: 3 years

Sex: M

The patient came with the complaints of chronic recurrent cold, cough. The frequency of attacks was once every month for the last 12 months. The patient had a family history of allergic Rhinitis and Myopia (Mother). His recurrent cold and cough were mainly related to weather. He had Recurrent Rhinitis and enlargement of Tonsils. On Chronic Totality the drug chosen was Medorrhinum and it worked well with good results as regards intensity and frequency. Antimonium Tartaricum and Kali Bichromicum were given as acute remedies. Euphrasia was given to treat Conjunctivitis.

Case 10

Age: 3 years, 6 months

Sex: M

The patient came with the complaints of high fever, watery coryza, usually dry, sometimes thick yellow mucopurulent sputum. He had 14 attacks during the past 12 months. The patient had indurated cervical lymph nodes. Investigations indicate that he had Recurrent Rhinitis with Tubercular Miasm. On Chronic Totality the drug chosen was Silicea and it worked well with good results as regards intensity and frequency. Pulsatilla and Arsenic Album were given as acute remedies.

Case 11

Age: 4 years, 3 months

Sex: F

The patient came with the complaints of acute recurrent nasal blockage on the right side for the past 7 months. She had acute coryza followed by fever, pain in the cheek area, dry cough persistent throughout the day. Her condition was diagnosed as acute maxillary sinusitis. On the average she had such episodes once in a month for the past 6 months. Thermally she was a chilly patient. Rhinoscopy revealed that she had Antrochonal polyp formation. On Chronic Totality the drug chosen was Sanguinaria Canadensis and it worked very well with good results as regards intensity and frequency. Higher dilution of Sanguinaria Canadensis was given as acute remedy. Her general condition improved rapidly.

Case 12

Age: 4 years, 6 months

Sex: M

The patient came with the complaints of recurrent colds for the last 2 years. The child had more attacks at the peak of the summer season. On the average he had been getting the attacks every 15 days for the last 6 months. Coryza is thick, stringy, tough, greenish yellow with obstruction and pain at the root of the nose. The child had Recurrent Rhinitis. On Chronic Totality the drug chosen was

Natrum Muriaticum and the patient responded very well with good results as regards the intensity and frequency. Kali Bichromicum was given as Acute Remedy and the patient responded very well and his general condition improved rapidly.

Case 13

Age: 3 years, 6 months

Sex: M

The patient came with the complaints of recurrent attacks of cold every month for the past 6 months. The cold starts as acrid watery coryza. He had Recurrent Rhinitis. He had nasal Mucosa Odematous, congested. On Chronic Totality the drug chosen was Ammonium Carb and it worked very well with good results as regards intensity and frequency. A higher dilution of Ammonium Carb was given as acute remedy. His general condition improved rapidly.

Case 14

Age: 4 years, 6 months

Sex: M

The patient came with the complaints of Recurrent URTI for the last 10 months. He had coryza, mucoid with blockage, with spasmodic cough. On the average he had such attacks once a month for the past 6 months. His chest X-ray showed marked vascular markings. He had family history of pleurisy. On Chronic Totality the drug chosen was Arsenicum Iodatum and the patient responded very well with good results as regards the intensity and frequency. Tuberculinum and Arsenicum Album were given as Acute Remedies and the patient responded very well and his general condition improved rapidly.

Case 15

Age: 4 years, 6 months

Sex: M

The patient came with the complaints of fever with intense shivering, pain in throat. He had such attacks 4 times during the past 6 months. His mother had skin infection for the past 7 – 8 years. The child was thermally hot. He had chronic Tonsillitis. On Chronic Totality the drug chosen was Mercurius Iodatus Ruber and it worked very well with good results as regards intensity and frequency. Sulphur was given as acute remedy. His general condition improved rapidly.

Case 16

Age: 4 years, 3 months

Sex: M

The patient came with the complaints of Recurrent Upper Respiratory Tract Infections for the past 1 year. He had high grade fever for the last 3 days with right temporal headache, bursting pain, thirst and restlessness. On the average he had 8 attacks during the past 1 year. He was suffering from acute Tonsillitis. On Chronic Totality the drug chosen was Belladonna and the patient responded very well with good results as regards intensity and frequency. Phosphorus was given as acute remedy. His general condition improved rapidly and started gaining weight.

Case 17

Age: 3 years

Sex: F

The patient came with the complaints of recurrent colds, coryza brought on with change of weather. She had high fever for the past 2–3 days with great restlessness and thirstlessness. On the average

she had such attacks every month for the past 1 year. The patient had Recurrent Rhinitis and thermally hot. On Chronic Totality the drug chosen was Medorrhinum and it worked very well with good results as regards intensity and frequency. Belladonna was given as Acute Remedy. The patient responded very well and her general condition improved rapidly.

Case 18

Age: 3 years, 8 months
Sex: F

The patient came with the complaints of recurrent colds for the past 10 months. The child had colds more on exposure to air, change in weather. On the average she had such attacks once a month. She had been suffering from chronic Rhinitis. The child was thin and chilly patient. On Chronic Totality the drug chosen was Psorinum and the patient responded very well with good results as regards intensity and frequency. Arsenicum Album and Hepar Sulphuris were given as acute remedies. Her general condition improved rapidly and started gaining weight.

Case 19

Age: 4 years, 1 month
Sex: F

The patient came with the complaints of recurrent throat infection for the past 10 months. The child had a history of Recurrent URTI, after exposure to cold air, gets pain in the throat, with high fever. On the average she was getting one attack every month during the past 10 months. She had chronic Pharyngo Tonsillitis. On Chronic Totality the drug chosen was Tuberculinum and the patient responded very well with good results as regards intensity and frequency. Belladonna was given as acute remedy. Her general condition improved rapidly and started gaining weight.

Case 20

Age: 4 years, 3 months
Sex: M

The patient came with the complaints of recurrent cold and cough for the past 1 year. He got cold, cough with fever. The above symptoms were more during winter. On the average he was getting such attacks every month during the past 1 year. He had Recurrent Rhinitis. He was ambithermal, perspired on the palms, hands. He is irritable. On Chronic Totality the drug chosen was Nitric Acid and the patient responded very well with good results as regards intensity and frequency. Ammonium Carb was given as acute remedy. His general condition improved rapidly and started gaining weight.

Case 21

Age: 2 years, 6 months
Sex: F

The patient came with the complaints of recurrent coryza for the past 6 months. She was getting cold on exposure to cold air. She had recurrent colds with thick, acrid, yellow-white discharge. She had 8 such episodes during the past 6 months. She had Recurrent Rhinitis. On Chronic Totality the drug chosen was Calcarea Phosphorica and it worked very well with good results as regards intensity and frequency. Arsenicum Iodatum was given as acute remedy. Her general condition improved rapidly.

Case 22

Age: 2 years, 8 months
Sex: M

The patient came with the complaints of fever with chills, pain in ears, coryza. He had fever with chilliness without thirst. He had been getting bursting pain in ears. Ear drum pinkish on right side, throat congested, thermally hot patient. On the average he had been getting such episodes every month for the past 8 months. He had Recurrent Otitis Media following Rhinitis. On Chronic Totality the drug chosen was Pulsatilla and it worked very well with good results as regards intensity and frequency. Higher dilutions of Pulsatilla were given as acute remedy. His general condition improved rapidly.

Case 23

Age: 4 years
Sex: M

The patient came with the complaints of burning pain in the throat, high fever with thirstlessness. Such episodes were recurring every 15 days for the past 6 months. His Tonsils were swollen, congested. He was irritable, cried all day, pale, was a hot patient. He had Recurrent Tonsillitis. On Chronic Totality the drug chosen was Phosphorus and it worked very well with good results as regards intensity and frequency. Lycopodium was given as acute remedy. His general condition improved rapidly.

Case 24

Age: 4 years
Sex: F

The patient came with the complaints of recurrent coughs for the past 1 year. She got cold and cough from exposure to cold air. On the average she had been getting such attacks every month during the past 1 year. She had recurrent Rhino-Pharyngitis. On Chronic Totality the drug chosen was Calcarea Carbonica and it worked very well with good results as regards intensity and frequency. Lycopodium was given as acute remedy. Her general condition improved rapidly.

Case 25

Age: 4 years
Sex: F

The patient came with the complaints of recurrent throat pain with fever for the past 6 months. She got the attacks on exposure to cold air. She had high fever with chilliness. She had 4 such attacks during the past 6 months. Her tonsils were enlarged. She had Acute Ulcerative Tonsillitis. She was a chilly patient. On Chronic Totality the drug chosen was Silicea and it worked very well with good results as regards intensity and frequency of attacks. Phytolacca and Pulsatilla were given as acute remedies. The general condition of the patient improved rapidly.

Case 26

Age: 11 months
Sex: F

The patient came with the complaints of fever followed by watery coryza, sneezing, nasal blockage. The frequency of attacks was once in 15 days for the past 6 months. She had fever with chills and without thirst, severe dry cough with vomiting, sweat on the right side of the face only. She was a hot patient. The child had Recurrent Rhinitis. On Chronic Totality the drug chosen was Pulsatilla and it worked very well with good results as regards intensity and frequency of attacks. The general condition of the patient improved rapidly.

Case 27

Age: 4 years, 2 months
Sex: F

The patient came with recurrent coryza for the last 1 year. On the average she had 8 such attacks during the past 1 year. She had moderate fever, thick greenish coryza, nose blockage. She had tenderness over left Maxillary Sinusitis, enlarged Adenoids with encroachment of nasopharyngeal space. On Chronic Totality the drug chosen was Kali Bichromicum and the patient responded very well with good results as regards the intensity and frequency. Thuja Occidentalis was given as Acute Remedy and the patient responded very well and her general condition improved rapidly.

Case 28

Age: 4 years, 4 months

Sex: F

The patient came with the complaints of recurrent throat infection for the past 3 years. The patient had moderate fever with chills, pain in throat, more on the right side and irritable. On the average she had 6 attacks during the past 1 year. She had a family history of Psoriasis and Lichen Planus. She had Recurrent Tonsillitis. On Chronic Totality the drug chosen was Mercurius Iodatus Flavus and the patient responded very well with good results as regards the intensity and frequency. Calcarea Carbonica and Psorinum were given as Acute Remedies and the patient responded very well and her general condition improved rapidly.

Case 29

Age: 4 years

Sex: F

The patient came with the complaints of recurrent colds for the past 3 years. The cold starts with high fever, with least exposure to cold winds. She had nose blockage, profuse watery coryza, with sore ulcerated nostrils. On the average she had such attacks every month for the past 1 year. She had Recurrent Rhinitis, with Tonsillar and Adenoid enlargement. On Chronic Totality the drug chosen was Calcarea Phosphorica and the patient responded very well with good results as regards the intensity and frequency. Hepar Sulphuris was given as Acute Remedy and the patient responded very well and her general condition improved rapidly.

Case 30

Age: 3 years, 8 months

Sex: F

The patient came with the complaints of recurrent colds for the past 8 months. She had a history of recurrence of colds averaging once in 15 days for the past 6 months. She had watery coryza with stuffing of nose, discharge and catches cold easily from exposure to dry cold air, cold things. She had Recurrent Rhinitis. On Chronic Totality the drug chosen was Silicea and the patient responded very well with good results as regards the intensity and frequency. Nux Vomica was given as Acute Remedy and the patient responded very well and her general condition improved rapidly.

The period of homoeopathic treatment in all the 30 cases lasted for about 6 months. By and large, the symptoms subsided during the first 3 months of the treatment and the later 3 months, the patients were given placebo (Sac Lac) so as to study the efficacy of different homoeopathic remedies used for the treatment of 30 children with different ailments. In almost all the cases, the intensity and frequency of the attacks reduced considerably with the homoeopathic remedies prescribed and the general condition of the patients improved considerably during the later 3 months. These results suggest that the medicines used in each of the 30 cases are the correct remedies (Simillimum).

Two standard statistical tests^{10–12} Student's t-test and Wilcoxon non-parametric test were applied to the data relating to the 30 cases presented in Table 1 for evaluating the statistical significance of the differences between the control and treatment values. The results of the above two tests have indicated that the two data sets, namely *Control Value* and *Treatment Value* are statistically different. The results are significant with $p < 0.001\%$ indicating the effectiveness of the homoeopathic remedies prescribed in the treatment of recurring URTIs in children below the age of 5 years based on the concept Homoeopathic Principles of *Individualisation*. These results are corroborated by the observations and analyses of data presented in Table 1

6. Conclusion

At present there is little data on the effect of individualised homoeopathic treatment and prevention of Upper Respiratory Tract Infections (URTIs) in children in India. The author has carried out a systematic study to investigate the utility of homoeopathic medicines for the treatment and prevention of recurrent URTIs in children below 5 years based on the concept of individualization vis-à-vis improving the prescribing skills particularly with respect to the process of selection and types of medicines.

In homoeopathy the patient is treated rather than the disease. In acute illness, the patient's changes from the normal are taken into account. Homoeopathic remedies are to be prescribed based on the whole case rather than on a part, i.e., symptoms of a part representative of the main complaint. In some cases the underlying constitutional medicine can clearly be perceived, even if all the acute totality of symptoms are not well covered by the medicine and it is more likely to be curative than a medicine chosen on the acute totality of the symptoms alone. This presupposes that constitutional medicine is clear and that the pattern of the local symptomatology does not reflect a clear and complete drug picture. If both the constitutional pattern and the symptomatology present clear images they will in the great majority of cases be complimentary medicines and the prognosis is excellent either way. In many cases, however, the acute symptomatology is so forceful that it overwhelms and obscures the underlying constitutional image and demands attention on its own terms. In the present study the homoeopathic medicines were prescribed on the concept of individualization considering the chronic (constitutional) totality of symptoms and the pattern of local symptomatology.

The results of the present study suggest that the homoeopathic remedies prescribed and administered for the treatment and prevention of the URTIs in children are effective. The results of the two statistical tests, namely Students t-test and Wilcoxon non-parametric test, applied to the data relating to the 30 Cases are significant ($p < 0.001\%$). The results are in agreement with those reported by other researchers.^{4,5,6,8,9} Large randomised controlled trials with adequate sample sizes are required to provide acceptable evidence that homoeopathic treatments are effective. However, the data presented in the paper are valuable for further studies in Clinical Research particularly in the context of the international, multicenter, comparative cohort studies (e.g., Haid-vogl et al.⁹).

References

- George P, Huges J. Respiratory System. In: Summit RL, editor. *Comprehensive pediatrics*. Toronto: Mosby; 1990. p. 413.
- Pless B. Morbidity and mortality among the young. In: Hoekelman, editor. *Primary pediatric care*. Mosby; 1982. p. 24.
- Ozkan, M. and Dweik, R.A., 2004: Upper respiratory infections. *eMedicine*. <http://www.emedicine.com>.

4. Bellavite P, Ortolani R, Pontarollo F, Piasere V, Benato G, Conforti A. Immunology and Homeopathy. 4. Clinical Studies—Part. 1. *Evid Based Complement Alternat Med* 2006;**3**(3):293–301.
5. Walach, H. Evidence profile for the efficacy of homeopathy – A new paradigm for medical sciences: "The Body Information Theory", European Committee for Homeopathy (ECH) GENERAL ASSEMBLY – XVIII Symposium of GIRI, 12 to 14th of November 2004, Scientific Report, page 9.
6. Bornhöft G, Wolf U, Ammon K, Righetti M, Maxion-Bergemann S, Baumgartner S, Thurneysen A, Matthiessen PF. Effectiveness, safety and cost-effectiveness of homeopathy in general practice – summarized health technology assessment. *Research in Complimentary Med* 2006;**13**(suppl. 2):19–29.
7. Hill C, Doyon F. Review of randomised trials of homeopathy. *Rev Epidemio Dante Publique* 1990;**38**(2):139–47.
8. Steinsbekk A, Fønnebo V, Lewith G, Bentzen N. A pragmatic, randomised control trial comparing individualized homeopathic care and waiting-list controls. *Complement Ther In Medicine* 2005;**13**(4):231–8.
9. Haidvogel M, Riley DS, Heger M, Brien S, Jong M, Fischer M, Lewith GT, Jansen G, Thurneysen AE. Homeopathic and conventional treatment for acute respiratory and ear complaints: a comparative study on outcome in the primary care setting. *BMC Complement Altern Med* 2007;**7**:7.
10. Siegel S. *Non-parametric statistics for the behavioural sciences*. New York: McGraw Hill; 1956.
11. Wilcoxon F. Individual comparisons by ranking methods. *Biometrics* 1945;**1**:80–3.
12. Microsoft IMSL Stat Library (TWOMV and SNRNK). Microsoft Developer Studio, Fortran PowerStation version 4.0, 1994–95.