5. Homeopathy and Chronic fatigue syndrome

5.1. A randomised, controlled, triple-blind trial of the efficacy of homeopathic treatment for chronic fatigue syndrome - Medical Care Research Unit, School of Health and Related Research, University of Sheffield, UK

Links:

Weatherley-Jones E, Nicholl JP, Thomas KJ, Parry GJ, McKendrick MW, Green ST, Stanley PJ, Lynch SP, "A randomised, controlled, triple-blind trial of the efficacy of homeopathic treatment for chronic fatigue syndrome", *J Psychosom Res*. 2004 Feb;56(2):189-97.

http://www.ncbi.nlm.nih.gov/pubmed/15016577

Aim & Method:

"There is no management regime for chronic fatigue syndrome (CFS) that has been found to be universally beneficial and no treatment can be considered a "cure". Patients with CFS may use complementary and alternative medicine (CAM). Our aim was to evaluate homeopathic treatment in reducing subjective symptoms of CFS. 103 patients meeting the Oxford criteria for CFS were recruited from two specialist hospital out patient departments. Patients had monthly consultations with a professional homeopath for 6 months"

Results:

"...more people in the <u>homeopathic medicine group showed clinically significant improvement.</u> More people in the homeopathic medicine group showed clinical improvement on all primary outcomes"

5.2. Healthcare provided by a homeopath as an adjunct to usual care for Fibromyalgia (FMS): results of a pilot Randomised Controlled Trial - School of Health and Related Research, University of Sheffield, Sheffield, UK; School of Healthcare, University of Leeds, Leeds, UK

<u>Link:</u>

Relton C, Smith C, Raw J, Walters C, Adebajo AO, Thomas KJ, Young TA, "Healthcare provided by a homeopath as an adjunct to usual care for Fibromyalgia (FMS): results of a pilot Randomised Controlled Trial", *Homeopathy*, 2009 Apr;98(2):77-82.

http://www.ncbi.nlm.nih.gov/pubmed/19358959

Aim & Method:

"To assess the feasibility of a Randomised Controlled Trial (RCT) design of usual care compared with usual care plus adjunctive care by a homeopath for patients with Fibromyalgia syndrome (FMS). In a pragmatic parallel group RCT design, adults with a diagnosis of FMS (ACR criteria) were randomly allocated to usual care or usual care plus adjunctive care by a homeopath. Adjunctive care consisted of five in depth interviews and individualised homeopathic medicines. The primary outcome measure was the difference in Fibromyalgia Impact Questionnaire (FIQ) total score at 22 weeks."

<u>Results</u>: *"* There were significantly greater reductions in the homeopath care group in the McGill pain score..."