

Original Research

Effectiveness of homoeopathic treatment in the management of menopausal symptoms- A prospective, interventional, and single arm study

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ABSTRACT:

Background: Menopause is a naturally occurring age-related phenomenon in women between 45 and 52 years of age with declining levels of estrogen in the blood and loss of ovarian activity resulting in everlasting amenorrhea. This phase of transition in women brings out many changes. Many women are afraid of these changes because they imply a decrease in urinary control fertility and sexuality, as well as the start of ageing. During menopause; hot flashes and palpitations, decreasing bone strength, depression, lack of libido and weakness in becomes very common, causing discomfort to females. In conventional system of medicine menopausal hormone therapy is the choice of treatment but in view of its associated health risks and contraindications, many women hesitate to take or are not suitable candidates for its use. Homoeopathy is safe and gentle and efficacious in alleviating the troublesome symptoms and enhancing the quality of life. **Objectives:** The primary objective of this study was to ascertain the effectiveness of individualized homeopathic medicines in the reduction of the number and intensity of menopausal symptoms in patients and observe their impact on quality of life. **Materials and Methods: Type of Research:** A Prospective, Interventional, Single-arm Pilot study. **Sample Size:** 100. **Results:** Out of 100 patients enrolled in the study, 90 patients completed the total study duration. 10 patients did not complete the follow-up. The intensity of symptoms along with overall improvement in the patients was assessed and compared from the baseline through the Menopause Rating Scale which showed a decline in the overall score of the MRS as well as in the intensity of every symptom. At baseline 75 patients with moderate complaints were decreased to 15 patients after 2 months, whereas patients with severe complaints were decreased from 15 at baseline to 08 patients at 2 months and patients with mild complaints were increased from 10 at baseline to 77 at the end of 2 months of treatment. These results suggest that Individualized Homoeopathic Medicines are effective in the treatment of Menopausal Symptoms. Medicines prescribed to the patients were selected based on repertorization of the totality of symptoms constructed after thorough case-taking. The most prescribed remedies were Sulphur (n=20), Ignatia (n=15), Pulsatilla (n=15), Arsenicum Album (n=15), and Natrium Mur (n = 07).

Keywords: Homoeopathy, Menopause

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INTRODUCTION

Menopause is defined as the cessation of menstrual periods for at least 12 consecutive months.

Menopausal Transition, or 'Perimenopause', is a defined period of time beginning with the onset of irregular menstrual cycles until the last menstrual period, and is marked by fluctuations in the reproductive hormones. This period is characterized by menstrual irregularities; prolonged and heavy menstruation intermixed with the episodes of amenorrhea, decreased fertility, vasomotor symptoms and insomnia. Some of these symptoms may emerge 4

years before the menses ceases. During this menopausal transition, estrogen levels begin to decline along with increasing levels of FSH and LH. This menopausal transition beginning with alteration in the length of menstrual cycle and increasing FSH levels finally terminates into the menopause.

Menopause is defined retrospectively as the time of the final menstrual period, followed by 12 months of amenorrhea. During this time due to the estrogen deficiency and ageing, a woman faces various health issues such as vasomotor symptoms, urogenital

atrophy, osteoporosis, cardiovascular disease, sexual problem, etc.

Menopause results in infertility secondary to oocyte depletion.

Post-menopause is the phase after the menopause has established.

Natural Menopause: Natural decline of estrogen as per the biological clock of the female.

Premature (early) menopause is when periods stop before the age of 40 years. This can be due to the medical conditions such as diabetes or underactive thyroid gland (hypothyroidism), genetic factors and smoking.

Artificial (surgical) menopause is a consequence of surgical removal of both the ovaries or destruction of the ovaries due to some cancer treatments. With artificial menopause there is a sudden drop in hormone levels and menopausal symptoms begin abruptly.

Many females may pass through this phase without any problem but some may experience one or other symptoms in variable intensity for which they require treatment and management. Menopause related mild symptoms which do not interfere with daily activities don't require any medicinal treatment; some lifestyle modifications along with behavioral therapy will be sufficient whereas symptoms of moderate to severe intensity affecting daily routine of the patient will require intervention.

MATERIALS AND METHODS

Study Design

This was a prospective clinical study on 100 female patients above 40 years of age presenting in perimenopause or diagnosed with menopause will be selected for the study. Standardized case record will be prepared and will be maintained of individual patient and also standardized follow-up sheet will be prepared and maintained regularly. Cases will be selected by random sampling method from O.P.D of Cure Homoeopathic Clinic, New Delhi. were selected after fulfilling the criteria of case definition, inclusion and exclusion criteria. Detailed case taking along with clinical examination was done in every participant.

Standardized case records and follow-up sheet were prepared and maintained of all patients .

Follow-Up was done at once in 2 weeks or monthly as per the need of the case.

Criteria for assessment

1. Marked/Good: When there is more than 75% disappearance of the symptoms.
2. Moderate: When the patient has symptomatic relief with more than 50% of symptoms.
3. Mild: When the patient has symptomatic relief with less than 50% of symptoms

4. No improvement: No response after treatment for sufficient period

5. Worse: Aggravation of subjective and objective symptoms.

Selection of remedy

Homoeopathic medicine showing maximum similarity to the totality of the case constructed after detailed case taking as per the instructions given in 5th and 6th edition of Organon of Medicine will be considered for prescription after repertorization and referring to the indications given in Homoeopathic Materia Medica.

Drug administration

Medicines will be given orally in pills in centesimal potency.

Storage

Drugs were procured from standard GMP certified Homoeopathic Medicines Manufacturer and were stored as per the rules of Homoeopathic Pharmacopoeia of India (H.P.I.).

RESULTS

Out of 100 patients enrolled in the study, 90 patients completed the total study duration. 10 patients did not complete the follow up. The data of the patients were analysed and conclusions drawn. In this study 15 patients were in the age group of 40-45 years at menopause, whereas women of age 46 and above were 85 out of 100, which corroborates with the article of National Institute of Aging.

The most common reported symptoms in this study were found to be joint and muscular discomfort (70%) which showed multifactorial etiology such as advancing age and related wear and tear, sedentary lifestyle and lack of nutritional supplements in diet. Irritability (65%), hot flashes (54%), bladder problems were found in 15% and vaginal dryness in 10% respectively.

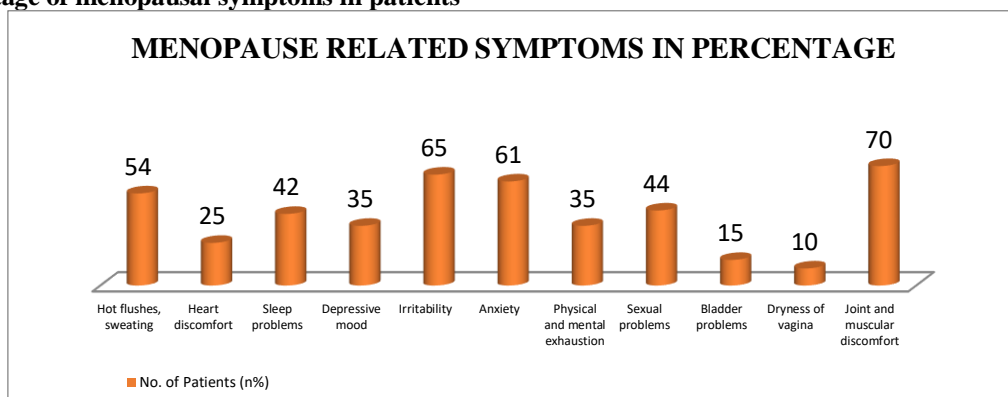
In this study, every patient presented with one or more symptoms related to menopause but the awareness regarding the same was found comparatively in very small percentage of patients owing to their good educational background and health related awareness.

Sedentary lifestyle was found in 65 patients whereas only 35 patients had an active lifestyle which had a significant effect on the overall health status of the female patients.

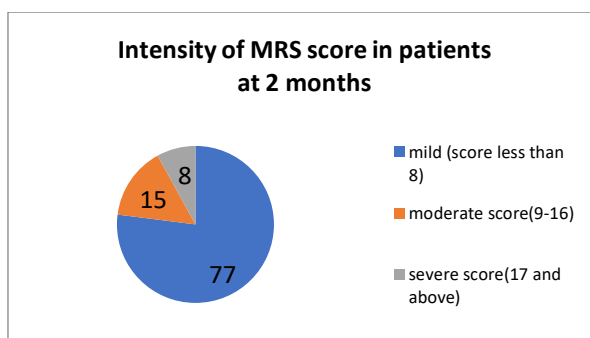
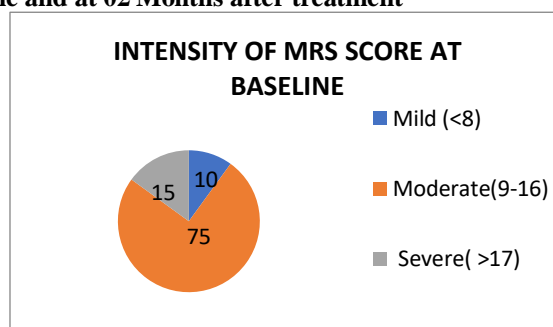
In our study, most commonly prescribed remedies were Sulphur, Ignatia, Pulsatilla, Arsenicum Album, and Natrium Mur.

Out of 100 patients, 77 patients showed marked improvement in overall health, 15 patients showed moderate improvement and 06 patients had only mild improvement, 02 patients were not improved.

Percentage of menopausal symptoms in patients



Intensity of MRS at base line and at 02 Months after treatment



Medicines prescribed in percentage of patients

Medicine prescribed	No. of patients
Sulphur	20
Ignatia	15
Pulsatilla	15
Arsenicum Album	15
Natrium Mur	07

Table percentage of improvement of Menopausal Symptoms in patients

S. No.	Symptom	Symptom in no. of patients at entry	No. of patients improved at end	Improvem ent %
1.	Joint and muscular discomfort	70	56	80
2.	Irritability	65	51	78.46
3.	Anxiety	61	51	83.60
4.	Hot Flushes	54	38	70.37
5.	Sleep problems	42	35	83.33
6.	Sexual problems	44	20	45.45
7.	Physical and mental exhaustion	35	25	71.42
8.	Depressive mood	35	22	62.85
9.	Heart discomfort	25	11	44

10	Bladder problems	15	08	53.33
11	Dryness of vagina	10	09	90

DISCUSSION

In this study the intensity of menopausal related symptoms were assessed using the Menopause Rating Scale. In maximum patients under this study intensity of symptoms was moderate followed by severe and mild. This study included the women from different socio-economic strata maximum of which majority were from the middle class income group, majority of them were homemakers followed by working female, most of them having sedentary lifestyle. This all-together had an impact on overall nutritional health and accessibility of health care facility. As maintaining an ideal body weight by incorporating physical exercise in daily routine along with good nutritional status achieved through proper diet and dietary supplements is necessary to prevent osteoporosis which is accentuated after the menopause. In this study 15 patients were of the age of 40-45 years at menopause, whereas women of age 46 and above were 85 out of 100, which corroborates with the article of National Institute of Aging

The presentation of symptoms and their intensity varied among the different age groups in the study. The most common reported symptoms in this study were found to be joint and muscular discomfort (70%) which showed multifactorial etiology such as advancing age and related wear and tear, sedentary lifestyle and lack of nutritional supplements in diet and irritability (65%), hot flashes (54%). Bladder problems were found in 15% and vaginal dryness in 10% respectively.

Out of all 100 patients every patient presented with one or more symptoms related to menopause but the awareness regarding the same was found comparatively in very small percentage of patients owing to their good educational background and health related awareness.

Sedentary lifestyle was found in 65 patients whereas only 35 patients had an active lifestyle which had a significant effect on the overall health status of the female patients.

In our study, most commonly prescribed remedies were Sulphur, Ignatia, Pulsatilla, Arsenicum Album, and Natrium Mur. Out of 100 patients, 77 patients showed marked improvement in overall health, 15 patients showed moderate improvement and 06 patients had only mild improvement, 02 patients were not improved.

As this study is done in one metro city, so as to generalize the results, the study should be taken in multiple geographical areas of the country targeting females of different economical strata. Awareness regarding menopause and its management and importance of nutritional supplementation is very important to promote the overall health and improving quality of life.

CONCLUSION

This study helps to show that Homoeopathic intervention is useful in relieving the symptoms of menopause. The Homoeopathic medicines are prescribed on the basis of constitution of the patient which not only relieve the particular symptoms but also proves beneficial in improving the overall health of the patient.

Menopausal symptoms affects the quality of life of a female to a very great extent along with it puts the patient in need of medicines, tests and health care provider guidance and assurance. The prevalence of these symptoms among the middle aged female population who are in the transition phase to menopause or who have attained it is not so uncommon. But still to a maximum extent they are neglected by the patient themselves due to their gradual onset and slow progression, lack of awareness and self-care.

But now in the recent changing scenario stress upon menopause and its related health complications are being given importance by health care providers for their early detection and appropriate management in view of reducing the burden of morbidity.

The most bothered symptoms of menopause are joint and muscle ache, hot flashes, lack of bladder control, mood changes and sleep disturbances. The changing demographic status of the world where the middle aged population will occupy a prominent part, more stress needs to be given to ensure their awareness about changing physical, mental health and alertness to the warning signs of health so as to get managed on time.

In the present study Homoeopathic intervention was able to manage patients with Menopause related symptoms. The therapy was able to ease the symptoms and improve quality of life. In our study, most commonly prescribed remedies were Sulphur, Ignatia, Pulsatilla, Arsenicum Album, and Natrium Mur.

There were few limitations in our study. Along with the treatment, patients were motivated for yoga, exercises, meditation, nutritional supplements to correct the deficiencies etc., which may have affected the results; however, adherence to these advices is not recorded. Inclusion of a control group could have been an additional strength to compare the efficacy of homoeopathic treatment over the standard care. Post treatment, the proportion of patients returning for follow-up was not constant, which is a very common issue in Outpatient Department (OPD) settings, therefore, the relapse rate, compliance rate, need for taking of other medicines, post treatment complications, etc., could not be reported fully. A placebo controlled study in future will be helpful in conforming the results.

REFERENCES

1. Johnson A, Roberts L, Elkins G. Complementary and Alternative Medicine for Menopause. *J Evid Based Integr Med.* 2019 Jan-Dec;24:2515690X19829380. doi: 10.1177/2515690X19829380. PMID: 30868921; PMCID: PMC6419242
2. Jadhavrao N, Oberai KG, Mukherjee A (2021), The Efficacy of Homoeopathic Medicines in Management of Menopause. *J womens Health, Issues Care*, 10:7.
3. Gousta B. The role of homeopathy as a complementary and alternative medicine and its application. *Int J Med Rev.* 2017;4(2):62-63. doi: 10.29252/ijmr-040207.
4. Whiteley J, DiBonaventuraMd, Wagner JS, Alvir J, Shah S. The impact of menopausal symptoms on quality of life, productivity, and economic outcomes. *J Womens Health (Larchmt).* 2013 Nov;22(11):983-90. doi: 10.1089/jwh.2012.3719. Epub 2013 Oct 1. PMID: 24083674; PMCID: PMC3820128.
5. Thompson EA. Alternative and complementary therapies for the menopause: a homeopathic approach. *Maturitas.* 2010 Aug; 66(4):350-4. Doi: 10.1016/j.maturitas.2010.02.003. Epub 2010 Mar 6. PMID: 20207087.
6. <https://www.nutrition.org.uk/lifestages/women/menopause/#:~:text=eating%20a%20healthy%2C%20varied%20diet.more%20days%20of%20the%20week>
7. <https://www.nia.nih.gov/health/whatmenopause#:~:text=The%20menopausal%20transition%20most%20often,begins%2C%20and%20race%20and%20ethnicity>.