Another pandemic year: What it means for homoeopathy

Yet another year comes to an end. 2021 was no different from 2020 in terms of the pandemic in some ways and yet very different from it in other. COVID-19 continued to be the prime reporting subject in most health journals, as the virus showed its newer and more virulent strain in Delta.[1] Nevertheless, it was a year of achievements so far as the prevention and treatment of the illness is concerned. Be it COVID-appropriate behaviour, vaccination drive or immunity building efforts, people committed themselves to enable prevention from COVID-19, contributing thus to overall inhibition of spread, directly or indirectly. Traditional and Complementary Medicine contributed in its own pivotal ways in attaining immunity and prevention goals.[2-4] India saw a surge in use of AYUSH systems of medicine for prevention,[5] with homoeopathic medicine Arsenic album 30 becoming a household name for many.

Many evidence-based cohorts, case series and randomised trials in homoeopathy were initiated or analysed this year, and the vast data pool generated out of these trials is a treasure in itself. The outcomes are being published, [6-9] and with every fine publication on COVID-19, homoeopathy is moving a step closer to scientific validation. It is noteworthy that not only did we succeed in conducting these studies in our homoeopathycentric health set-ups or clinics, but the pandemic also opened up the doors of tertiary care hospitals to homoeopathy. There were possibilities to provide homoeopathy care not only to the home quarantined or asymptomatic patients but also to the hospitalised patients of COVID-19 suffering from mild to severe disease, in addition to the standard care. This opportunity of being able to provide homoeopathic treatment even to those who cannot walk up to the homoeopathy clinics is something that homoeopathy fraternity had been waiting for long. If homoeopathy can prove its worth as an effective adjuvant modality for the management of difficult cases in the hospitals, there would be little to stop its eventual acceptance in the healthcare system.

Integrative management of diseases is eventually going to become the new normal in healthcare centres, just as it already exists in day-to-day practice. People often take therapeutic interventions of two systems of medicine together, especially homoeopathy and conventional medicine, as there is negligible chance of drug-to-drug interactions in such integration, under the care of qualified physicians. The road that leads to such integration may be a long one, but the journey seems to have begun, with mutual respect that the practitioners of the two systems have developed for each other's systems, thus opening avenues for collaborative endeavours. The joint studies resulting from such collaborations have paved way for critical evidence in this respect.

In this issue, we are presenting thought-provoking research works by our homoeopathy colleagues. A pilot study has been published in this issue that demonstrates the usefulness of homoeopathic treatment in the management of intellectual disability cases, showing improvement in adaptive functioning, cognition, hyperactivity, behavioural dysfunction, communication and learning difficulty.^[10]

Another study is reported that compared the effectiveness of homoeopathic tinctures with allopathic ketoconazole in growth inhibition and fungicidal properties against *in vitro* cultures of *Candida albicans* demonstrating that homoeopathic alternatives can be effective in preventing fungal infections but may be less effective in the treatment of a fully developed *C. albicans* infection.^[11]

A case series of phobic anxiety disorders provide a preliminary evidence for the utility of homoeopathy in such disorders and would stimulate the researchers for further research in this clinical area. [12] Another case series of stasis dermatitis and venous ulcers of varying severity is reported, in which individualised classical homoeopathy showed positive response as recorded with the comprehensive classification system for chronic venous disorders (clinical aetiology anatomical pathophysiology) score and venous clinical severity score. [13]

Evidence-based case reports of successfully treated postherpetic neuralgia and renal stone with individualised homoeopathy are also presented.^[14,15]

As we close this year's last issue, here's wishing our readers great beginnings for the next year!

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