Non-communicable diseases: How can Homoeopathy contribute?

Non-communicable diseases (NCDs) kill 41 million people each year, which are equivalent to 71% of all deaths globally. Of all NCD deaths, 77% are in low- and middle-income countries. Cardiovascular diseases account for most NCD deaths, or 17.9 million people annually, followed by cancers (9.3 million), respiratory diseases (4.1 million) and diabetes (1.5 million). These four groups of diseases account for over 80% of all premature NCD deaths.^[1]

India is also a significant player in this growing burden of NCDs. The five leading individual causes of DALYs in India, in 2016, were ischaemic heart disease, chronic obstructive pulmonary disease, diarrhoeal diseases, lower respiratory infections and cerebrovascular diseases.^[2]

A report based on India's largest primary health-care survey, covering 233,672 people and 673 public health offices in 21 states, analysed the rising cases of NCDs in the country and the social profile of suffering households and observed that India's NCD burden is growing at an alarming rate with the average age for onset falling sharply. Some of their findings include the revelations like the prevalence of NCDs in India which is 116/1000 population, which shows a quantum jump among individuals above 35 years of age. Environmental factors are the most significant cause of NCDs, followed by inactive lifestyle, imbalanced diet, intoxication (alcohol and tobacco consumption) and leisure lifestyle.^[3] NCDs affect both rural and urban populations, although the factors influencing these NCDs are different in these populations.^[4]

The battle against NCDs is a tough one, but not insurmountable if the symptoms are detected early. It is imperative to prevent and control risk factors in an integrated manner by developing strategies and policies to inhibit the NCD burden on the country. To prevent and control major NCDs, the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) was launched by the Government of India in 2010 with a focus on strengthening infrastructure, human resource development, health promotion, early diagnosis, management and referral.^[5] Under this programme, a pilot project on 'Integration of AYUSH with NPCDCS' was initiated in 2015 in six districts in the country, whereby AYUSH facilities and methodologies were integrated with NPCDCS services for the prevention and management of common NCDs. The practice of Yoga was an integral part of the intervention, along with any one of the Ayurveda, Unani, Siddha or Homoeopathy intervention. ^[6] The pilot project ended in 2021. In the homoeopathy adopted districts, approximately 200,000 populations were screened. Of these, 55% reported one of the NCDs targeted in the NPCDCS program. Prehypertension or high normal blood pressure, hypertension, pre-diabetes and diabetes accounted for a significant portion, that is, 78%, while multimorbidity, that is, suffering from more than two chronic conditions, covered 22% of the disease burden. Integration of homoeopathy along with Yoga leads to behavioural changes towards a healthy lifestyle, improvement in outcomes related to daily living and reduction in the severity of day-to-day health-related complaints.

There are limited studies which support the role of Homoeopathy in NCDs, such as hypertriglyceridemia, diabetes mellitus, hypertension, cancers, stroke and related problems.^[7-12] Systematic well-designed pragmatic controlled trials are the next step to generate more evidence in a real-world practice maximizing external validity by studying interventions in the context of routine clinical practice conditions for establishing effectiveness in these multifaced NCDs.^[13]

Moreover, a conscious effort needs to be made to reduce sedentary lifestyle, break unhealthy habits like low physical activity and unhealthy food habits that have become integral aspects of modern-day lifestyle and have been found to have the most significant role in causing NCDs.

In this issue, a narrative review explores the strengths of homoeopathy in the management of chronic kidney disease through pre-clinical, clinical and anecdotal evidence throwing light on the need for well-designed studies.^[14] A drug standardisation study compares the in-house homoeopathic mother tincture and market samples of *Hydrocotyle asiatica* by evaluating their antioxidant activity and high-performance thin-layer chromatography study.^[15] Another *in vitro* study reported in this issue, which analyses the anti-cholesterol activity of homoeopathic medicine *Colchicum autumnale* on cholesterol level of blood.^[16] Two evidence-based case reports of homoeopathic management of nephrotic syndrome, and multimorbid gynaecological complaints are also reported.^[17,18] A case series demonstrates the homoeopathic management of polycystic ovarian syndrome that is also presented in this issue.^[19]

The homoeopathic fraternity is deeply saddened by the demise of Dr. Girendra Pal who would be remembered for his valued contributions to homoeopathy.^[20]

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