Homeopathy for infertility treatment: a case series


1Second Department of Obstetrics and Gynecology, "Aretaieion" Hospital, Athens
2International Academy of Classical Homeopathy, Alonissos
3Sixth Obstetrics and Gynecology Department, General-Regional Hospital "Elena Venizelou", Athens
4University of Aegean, Samos (Greece)

Summary
Homeopathy has been used in the past for treating a broad aspect of diseases. In gynecology, its use remains limited. Taking under consideration its clinical aspects, the authors attempted to use it for treating female sub fertility problems. With this study, the authors present five cases of female infertility treated successfully with the use of homeopathic treatment in a large obstetrics-gynecology Hospital in Athens.

Key words: Homeopathy; Infertility.

Introduction
Fertility issues are very common nowadays as almost one out of seven couples of reproductive age encounter infertility during their reproductive years [1]. Infertility is defined as the inability to achieve a pregnancy after one year of regular unprotected intercourse [2-5].

Many advances have been recorded in the last decades in assisted reproduction techniques (ART) resulting in much better results, not only in live birth rates but also in women's overall health. Despite great achievements and advances in ART techniques, still overall success rates need to be improved. Moreover, financial costs and emotional distress, for both couples and medical personnel, are related with treatment procedures [6-9].

For all these reasons couples tend, in addition to conventional ART therapies, to use methods of complementary or alternative medicine (CAM), in an attempt to achieve pregnancy [1].

Therefore, a number of treatments (such as acupuncture, traditional Chinese herbal use, etc.) [1, 10, 11] have been proposed for improving ART outcomes and some of them have already proven effective. One of the established CAM methods is homeopathy. Homeopathic use has been used in the past for treating several different diseases and, among them, infertility in both animals and human [12-14].

With the present study, the authors report a series of five cases of infertility of different etiology treated with the use of homeopathic medication.

Materials and Methods
All patients have been followed in the Sixth Obstetrics-Gynecologic Department of "Helena Venizelos" Hospital of Athens.

Patients presented in this study are part of a larger cohort of patients treated for either male, female (due to ovulation disorders or tubal factor infertility) or unexplained infertility.

Table 1 presents demographic characteristics and gynecological history of the patients as well as patients' previous treatments. Table 2 presents patients' homeopathic regimen used for treatment and clinical outcome. All patients were treated with individualized medical treatment diagnosed, as in every homeopathic case, on the global level.

Discussion
To the authors' knowledge, this is one of the first studies reporting homeopathic use for fertility treatment.

Based on homeopathic principles, infertility can be considered as a disruption of the complex systems of networks that ensures body's balance and good health. Such a loss, generates an abnormal pathological trend: infertility. [15] The reason for this, according to homeopathy, is the derangement of body's ability to self-regulate.

Homeopathy tends to re-establish the mind-body entity. This is achieved by individualized homeopathic therapy [16].

In the past, proven positive outcomes in fertility have been reported for acupuncture and herbal treatments [1, 10, 11].

These have prompted the authors' interest in the possible usefulness of homeopathy for treating female factor infertility.

The possible explanations for that are not clearly defined. Homeopathy may have a positive effect on implantation or on the general well-being of the patients which in turn may increase fertility. Some might say that homeopathy may exert its positive effect through the, previously reported, 'placebo-effect'.

The present results show the positive effect different homeopathic treatment exert in infertility treatment. The various homeopathic drugs used suggest different mechanisms of action, as well as a general well-being of the pa-
Table 1 – Patients’ demographic characteristics – gynecological history

<table>
<thead>
<tr>
<th>Names</th>
<th>Date</th>
<th>Age</th>
<th>Type of Infertility</th>
<th>Infertility Pathophysiology</th>
</tr>
</thead>
<tbody>
<tr>
<td>TK</td>
<td>1/2011</td>
<td>41</td>
<td>Secondary</td>
<td>Unexplained</td>
</tr>
<tr>
<td>NR</td>
<td>4/2010</td>
<td>29</td>
<td>Primary</td>
<td>Anovulation</td>
</tr>
<tr>
<td>KP</td>
<td>11/2010</td>
<td>38</td>
<td>Secondary</td>
<td>Elevated FSH - secondary  anovulation</td>
</tr>
<tr>
<td>GS</td>
<td>4/2010</td>
<td>32</td>
<td>Primary</td>
<td>PCOS</td>
</tr>
<tr>
<td>SP</td>
<td>1/2011</td>
<td>39</td>
<td>Primary</td>
<td>Endometriosis (Stage II - after laparoscopy)</td>
</tr>
</tbody>
</table>

Table 2 – Homeopathic treatments and clinical outcome

<table>
<thead>
<tr>
<th>Names</th>
<th>Homeopathic Treatment</th>
<th>Therapeutic Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>TK</td>
<td>SEPIA 1m+6x/60</td>
<td>Pregnancy, 4 months after treatment</td>
</tr>
<tr>
<td>NR</td>
<td>MEDORRHINUM 200+ KALI PHOSPHORICUM 6x/40</td>
<td>Pregnancy, 1 month after treatment</td>
</tr>
<tr>
<td>KP</td>
<td>CALCAREA CARBONICA 200+6x/60</td>
<td>Pregnancy, 1.5 month after treatment</td>
</tr>
<tr>
<td>GS</td>
<td>IGNATIA 10M+6x/60</td>
<td>Pregnancy, 10 months after treatment</td>
</tr>
<tr>
<td>SP</td>
<td>CACTUS 30ch+6x/100</td>
<td>Pregnancy, 4 months after treatment</td>
</tr>
</tbody>
</table>

patients achieved. That may be due to stress – relief or any other positive indirect action of the drugs used.

Moreover, the different time needed for achieving a positive therapeutic result, may show different therapeutic action of the different drugs and/or different reaction of women treated.

All these should be proved with large scale, randomized controlled trials examining homeopathy’s use for fertility. Stratification for each cause of infertility, patients’ age, previous treatment etc. will help determining with statistic significance homeopathy’s effect on fertility. Case series, as in the present study, may present a trend, but cannot definitely prove a relationship between a drug and a disease. Despite this, the present study is helpful in that it may lead to the conduction of randomized controlled trials. The beneficial effects presented in this study may be attributed to homeopathic drug use but its limitations (case series) are such that larger, higher quality studies are required in order to establish the causative relationship between infertility treatment and homeopathy.

References


Address reprint requests to:
T. KALAMPOKAS, M.D.
18 Estias Street, 11526 Athens (Greece)
e-mail: kalam@yahoocom