

Individualized Homeopathy Reduces Symptoms of Chronic Chikungunya in Haiti: A Pilot Data-Collection Project

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Abstract: This study demonstrates the efficacy of individualized homeopathic treatment in chronic Chikungunya viral infection in patients over 25 years old in Haiti. Data gathered from the treatment and follow up from 67 patients was analyzed. Follow-up evaluations of each patient were based on a Visual Analog Scale (VAS) (0-10) for level of current pain and a Quality of Life (QOL) scale (0-3) for the effect of pain on daily activities and completed at baseline and at each follow up. Analysis demonstrated QOL scores changing from 2.27 (+/- 0.62) to 1.46 (+/- 0.77), $p < 0.001$. While this is significant, there are limitations of this study due to challenging conditions of conducting research in developing nations and possible data recording errors and language barrier issues. Nevertheless, we conclude that individualized homeopathic treatment appears to reduce the symptoms of chronic CHIK in this patient population.

Keywords: Chikungunya (CHIK), homeopathic treatment of; Chronic CHIK and homeopathy, *Bryonia*, *Calcarea carbonica*, *Calcarea phosphorica*, *Eupatorium perfoliatum*, *Lycopodium*, *Phosphorus*, homeopathic clinical research, Haiti, mosquito-borne disease in; Homeopaths Without Borders.

Introduction

Homeopaths Without Borders is a U.S.-based nonprofit organization working and teaching in Haiti. During a visit to provide clinical care since June 2014, and while working in mobile clinics in different regions of Haiti, patients frequently reported not feeling well, severe fatigue and/or severe joint pain since contracting presumed Chikungunya. Patients were often unable to work. Activities of daily living and quality of life were deeply impacted.

Objective: To demonstrate that treatment with an individualized homeopathic medication can reduce symptoms of chronic Chikungunya viral infection (CHIKV)

Background: Chikungunya (CHIK) is a mosquito-borne viral illness with only symptomatic conventional treatment and no vaccine. The name comes from a language in Tanzania meaning “to become contorted.” Acute symptoms include severe joint pain, myalgia, and fever, and may include rash, headaches, cervical adenopathy, and conjunctivitis. For some patients, joint pain may persist for several months and become chronic with substantial impact on individuals’ daily activities for years.¹ CHIK became epidemic in the Caribbean in May 2014. In the United States, it was reported in 48 states in 2014, primarily as a result of travel exposure, and in Florida it had become endemic; however, as of 2016 there were no further locally acquired cases.^{2,3} Homeopaths Without Borders (HWB), working in Haiti to train community health workers, began a data collection study after noting more rapid symptom resolution in patients treated with homeopathy.

Methods: Patients over 25 years of age with chronic CHIK symp-

toms for at least six months were recruited from four Haitian clinics that were run by a local internal medicine physician (Dr. Prosper), who became interested in homeopathy after a chance meeting with the HWB director. Recruitment began in March 2015 and follow up continued through September 2015. 171 patients enrolled and data was analyzed from 67 patients. Patients received information for informed consent in Creole and were treated with a single homeopathic medication in 12C potency daily for one week. Initial homeopathic prescriptions were based on a chart designed for CHIK treatment by HWB clinical staff (Figure 1), but prescribers were free to choose any medication. Consultations lasted 20-30 minutes. Two prescribers had to agree on initial medication choice. Homeopathic medications were dispensed from the clinic by a local pharmacist (graduate of HWB’s Fundamentals of Homeopathy Course) involved with the program. Other medications for concurrent conditions were allowed, but patients taking steroids or NSAIDS



Dr. J. Prosper interviewing patients



CHIKUNGUNYA

Chikungunya is a viral fever spread by mosquito bites. The symptoms of Chikungunya include fever which can reach 39°C, (102 °F), shivering, a purplish/red rash usually involving the limbs and trunk, and severe joint pain affecting multiple joints. There can also be headache, with red eyes and sensitivity to light. There seems to be no set pattern to these symptoms and relapse is common.

It may be necessary to use several different remedies during the course of this illness, depending on the symptom pattern.

Remedy	Etiology	Modalities	Sensation	Affinity	Concomitants	Characteristics
<i>Arnica montana</i>		< Touch < Night > Cool bath > Lying down	• Bruised	• Muscles	Spine feels bruised Aching all over	Cannot get comfortable May be needed at early onset .
<i>Baptista</i>		< Motion < Heat	• Heaviness • Prostration	• Muscles • Digestion	Severe headache Vomiting Diarrhea Foul smelling	Prostration Chills Very sore limbs Confusion
<i>Beladonna</i>		< 3 pm, 3 am, < Lying down < Touch, noise, or light	• Throbbing	• Head • Nervous system	Thirstless Confusion Throbbing headache	Sudden onset of fever will or without raised rash Hot to touch; No sweat
<i>Bryonia</i>		< Movement < Heat > Rest > Pressure > Cold	• Stitching pains	• Joints	Vertigo Nausea Dry mouth Irritable Splitting headache	Bone /joint pain No rash Thirsty for cold water Main remedy
<i>Eupatorium perfoliatum</i>		> Conversation > Bathing	• Aching • Soreness • Crushing	• Bones	Periodicity of fever Crushing headache Eye pain Restless	Severe aching in bones Great thirst before chill Main remedy
<i>Gelsemium sempervirens</i>		< Damp < Bad news > Rending forward > Profuse urination	• Weakness	• Spine • Limbs	Trembling Thirstless	Hot, dry fever with chills Weak Droopy eyelids Cannot sleep
<i>Nux vomica</i>		< Noise, light, odors or touch < Morning < Cold	• Cramping	• Spine • Limbs	Many gastric symptoms	Fever with chills Pressure headache Nervous Irritable
<i>Rhus toxicodendron</i>		< Initial motion < Cold, damp weather > Continued motion > Warmth	• Stiffness	• Joints, • Ligaments • Tendons	Very thirsty swollen glands	Restlessness with joint pain, itching rash Main remedy

Figure 1 Homeopaths Without Borders/North America prescribing chart for Chikungunya

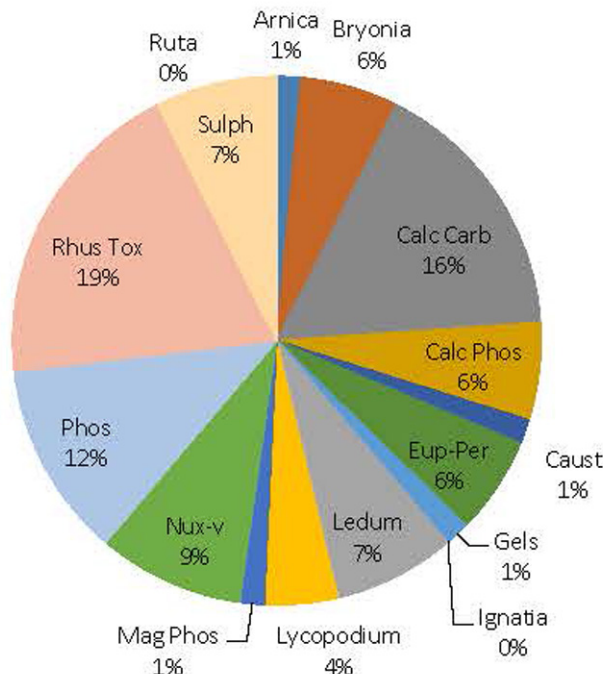


Figure 2. Initial prescriptions

were excluded from the study. Patients were given information on whom to call with any questions or problems.

A total of five follow-up sessions were conducted at two weeks, six weeks, four months, and five months, with a final phone call at seven months. Attempts to reach patients by phone were abandoned after three calls. Standardized questions at follow up resulted in instructions to wait, repeat, or change the medicine. A Visual Analog Scale (VAS) (0-10) for level of current pain and a Quality of Life (QOL) scale (0-3) for effect of pain on daily activities were completed at baseline and at each follow up. If the medication was changed, a new one was prescribed in a 12C potency daily for one week. Mean scores, from initial to the final recorded score, were compared with paired two-sample mean t-tests.

Results: Of 171 enrolled, complete data from 67 patients who had at least four interviews was analyzed (mean age 46; 47 Female, 20 Male). VAS scores changed from 6.87 (+/- 5.15) to 4.40 (+/- 8.51), p<0.001. QOL scores changed from 2.27 (+/- 0.62) to 1.46 (+/- 0.77), p<0.001. Pain was the most common complaint, followed by vision changes.

Discussion: Initial and follow-up prescriptions are shown in figures 2 and 3. Sixteen changes in homeopathic prescription

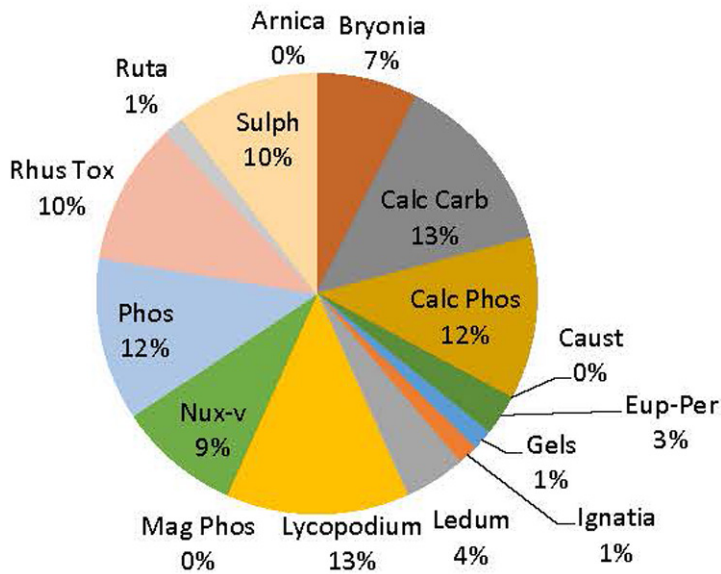


Figure 3. Revised prescriptions

were made from the first to the second prescriptions. Among the medications on the prescribing chart, *Baptisia* and *Belladonna* were not used, suggesting these may be more appropriate for acute rather than chronic cases. *Calcarea carbonica*, *Calcarea phosphorica*, *Lycopodium* and *Phosphorus* were frequently chosen medications, although they were not on the chart, suggesting that more “constitutional” medications may be needed in chronic cases.



M. Legerme attending patients

Limitations: Limitations include no laboratory confirmation of diagnosis, potential translation misunderstanding for the English-speaking instructors, and follow-up problems due to patient travel, loss of work, and cell phone access—all of which are common challenges to conducting research in developing nations. When patients do not return for follow-up consul-



Dr. Joyce Frye in clinic

tations, especially when doing so causes duress, there is no way to know whether they don’t feel a need to return because they are finally well and able to return to work or whether it is too much trouble to return when they feel no better, or indeed are worse.

A further concern lies in the statistical analysis. The actual p-values returned by the statistical program were 0.000000001 for both the pre and post tests. While there is no possibility that the statistical analysis is wrong, it is so implausible that the accuracy of data recording must be questioned. Potential misunderstanding regarding scoring by the patients, recording by the students, or transcription of handwriting on the research forms cannot be ruled out. Future projects will need to be informed by these challenges.

Conclusion: Individualized homeopathic treatment appears to reduce the symptoms of chronic CHIK. Further studies are needed for confirmation.

This project has contributed to a growing network of local partners, including the Haitian Medical Association and the Haitian Ministry of Health, with ongoing courses by Homeopaths Without Borders, specifically: Fundamentals of Homeopathy and Fundamentals of Homeopathy for the Childbearing Year.

No conflict of interest reported.

References

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