

A Clinical Study on The Role of Homoeopathic Medicines in The Management of Hypothyroidism

Abstract-

Background-Hypothyroidism is one of the most common endocrine disorders characterized by inadequate secretion of thyroid hormones, leading to reduced metabolic activity and multi-system involvement. It is particularly prevalent among middle-aged and older adults, with a higher incidence in females. Common manifestations include fatigue, weight gain, constipation, cold intolerance, dry skin, hair loss, depression, and cognitive impairment. Conventional management primarily involves lifelong thyroid hormone replacement therapy. Homoeopathy, based on the principle of individualization, aims to stimulate the body's self-regulatory mechanisms and improve the patient's overall health.

Aim-To evaluate the role of homoeopathic medicines in the management of hypothyroidism.

Methodology-A Randomized Controlled Trial will be conducted on patients diagnosed

with hypothyroidism fulfilling the inclusion criteria. Participants [total 30, each group has 15]Group A will receive Homoeopathic Biochemic medicines Group B will receive Homoeopathic Miasmatic medicines selected according to the totality of symptoms, constitutional characteristics, and homoeopathic principles. Clinical improvement will be assessed through subjective symptom scoring, while objective evaluation will include thyroid function tests (TSH, T3, and T4) before and after treatment.

Results-Preliminary results indicated a significant improvement in clinical symptoms, general well-being, and thyroid function parameters following Miasmatic homoeopathic treatment.

Conclusion-Homoeopathic Miasmatic medicines showed promising results in the management of Hypothyroidism, suggesting their utility as a safe, non-invasive adjunct to mental health

care.

Keywords-Hypothyroidism, Biochemic Homoeopathic Medicine, Thyroid Function Test, Miasmatic Homoeopathic Medicine, Constitutional Treatment, Clinical Study.

Introduction-Hypothyroidism is one of the most common endocrine disorders resulting from deficient production of thyroid hormones by the thyroid gland. The prevalence of hypothyroidism has increased globally over the past few decades and is more common among women and older adults. The condition may be classified as primary, secondary, or tertiary hypothyroidism, with primary hypothyroidism accounting for nearly 95% of all cases. Autoimmune thyroiditis (Hashimoto's thyroiditis), iodine deficiency, thyroid surgery, radioactive iodine therapy, and certain medications are among the common causes of primary hypothyroidism.

Aim-To study the role of homoeopathic medicines in the management of hypothyroidism.

Objectives-

Primary Objective-To evaluate the role of Miasmatic and Biochemic homoeopathic medicines in improving thyroid function parameters (TSH, T3, and T4) in patients with hypothyroidism.

Secondary Objectives-

- To assess the improvement in clinical symptoms such as fatigue, lethargy, constipation, dry skin, cold intolerance, weight gain, hair loss, sleep disturbances, and mood changes.

- To evaluate the overall improvement in the quality of life of patients receiving homoeopathic treatment.

- To assess the safety and clinical response of homoeopathic medicines during the study period.

Methodology

- Study Design: Randomized control trial

- Study Duration: 18 months

- Study Setting: The study will be conducted at

a) Patients from college OPD and IPD

b) Health check up

c) Screening camps

Sample Size: A total of 30 participants will be enrolled based on statistical sample size calculation.

Population with inclusion criteria (n = 30) after Randomization - Intervention Group (n = 15) Control Group (n = 15)

(Miasmatic Hom. Medicine)
(Biochemic Hom. Medicine)
Baseline Assessment
(Objective and Subjective Parameters)

Follow-Up at Regular Intervals

Final Assessment

Interpretation of Results

Conclusion-

- Study Population:** Older adults aged Between 50 to 60 years diagnosed

- with primary hypothyroidism (based on clinical signs and elevated TSH

- with or without low T3/T4 levels).

- Methods Of Selection of Study Subjects

Inclusion Criteria:

- Age between 50 to 60 years.

• Newly diagnosed or existing cases of primary hypothyroidism.

• Willingness to participate and provide informed consent.

• Patients not currently on thyroid hormone replacement therapy or willing to discontinue it under medical supervision

• Both male and female included

Exclusion Criteria:

• Secondary or subclinical hypothyroidism.

• Patients on other chronic medications affecting thyroid Function.

• Patient with irregular follow ups.

• Patients on long-term corticosteroids or hormone therapy.

• Age below 50 years and above 60 years.

Withdrawal Criteria

• If the patient will not ready for ongoing research study.

• If the patient not fulfill the inclusion criteria.

Randomization: • Participants will be randomly assigned into two groups:

• Group A (Intervention Group): Will receive Homoeopathic Miasmatic medicine.

• Group B (Control Group): Will receive Homoeopathic Biochemic

• The selection of potency and repetition of doses will be based on homoeopathic principles and individual susceptibility. Regular follow-up will be carried out throughout the study period.

Outcome Measures

• Objective Parameters - During each follow up T3, T4, TSH values to note

B Subjective Parameters

• Subjective Parameters Scales {0 (Null), 1 (Mild), 2 (Moderate), 3 (Severe), 4 (Very Severe)}

• Fatigue and Lethargy 0 1 2 3 4

• Cold Intolerance 0 1 2 3 4

• Weight Gain 0 1 2 3 4

• Dry Skin 0 1 2 3 4

• Change in Voice 0 1 2 3 4

• Hair Loss 0 1 2 3 4

• Menstrual Irregularities 0 1 2 3 4

• Muscle Cramps 0 1 2 3 4

• Sleep Disturbances 0 1 2 3 4

• Depression and Anxiety 0 1 2 3 4

• Constipation 0 1 2 3 4

Expected Results- The present study is expected to evaluate the effectiveness of homoeopathic medicines in the management of hypothyroidism. It is anticipated that patients receiving Miasmatic homoeopathic

treatment will show improvement in both subjective clinical symptoms and objective thyroid function parameters.

Improvement is expected in common symptoms such as fatigue, lethargy, cold intolerance, constipation, dry skin, hair loss, weight gain, sleep disturbances, depression, anxiety, and general well-being. Objective assessment through thyroid function tests (TSH, T3, and T4) is expected to demonstrate improvement following the treatment period.

Discussion- Homoeopathy follows the principle of treating the patient as a whole rather than the disease alone. Remedy selection is based on individualization, considering the patient's mental, physical, and constitutional characteristics. This holistic approach aims to improve the patient's overall health and quality of life. The present study is designed to evaluate the role of homoeopathic medicines using both objective parameters (TSH, T3, and T4) and subjective symptom assessment. The study is expected to contribute to the existing evidence regarding homoeopathic management of hypothyroidism and may provide a basis for future large-

scale clinical research.

Conclusion- Hypothyroidism is a common endocrine disorder requiring timely diagnosis and appropriate management. Individualized homoeopathic treatment, based on the totality of symptoms and constitutional characteristics, may play a supportive role in improving clinical symptoms and thyroid function. The present clinical study is expected to provide valuable evidence regarding the role of individualized homoeopathic medicines in the management of hypothyroidism and may encourage further well-designed clinical research in this field.

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