

## ORIGINAL PAPER

# Hay fever & homeopathy: a case series evaluation

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**Background:** Seasonal allergic rhinitis (hay fever) is common and can considerably reduce the quality of life of sufferers. Despite the wide everyday application and promising results with homeopathy, scientific evidence of its effectiveness for most ailments is scarce.

**Aim:** The assessment of the clinical effectiveness of homeopathic remedies in the alleviation of hay fever symptoms in a typical clinical setting.

**Methods:** We performed a clinical observational study of eight patients in the treatment of hay fever symptoms over a two-year period (2012 and 2013) using Measure Yourself Medical Outcome Profile (MYMOP) self-evaluation questionnaires at baseline and again after two weeks and four weeks of homeopathic treatment. The individualized prescription – either a single remedy or multiple remedies – was based on the totality of each patient's symptoms.

**Results:** The average MYMOP scores for the eyes, nose, activity and wellbeing had improved significantly after two and four weeks of homeopathic treatment. The overall average MYMOP profile score at baseline was 3.83 (standard deviation, SD, 0.78). After 14 and 28 days of treatment the average score had fallen to 1.14 (SD, 0.36;  $P < 0.001$ ) and 1.06 (SD, 0.25;  $P < 0.001$ ) respectively.

**Conclusions:** Individualized homeopathic treatment was associated with significant alleviation of hay fever symptoms, enabling the reduction in use of conventional treatment. The results presented in this study can be considered as a step towards a pilot pragmatic study that would use more robust outcome measures and include a larger number of patients prescribed a single or a multiple homeopathic prescription on an individualized basis. *Homeopathy* (2016) ■, 1–7.

**Keywords:** Hay fever; Homeopathy; MYMOP questionnaires

## Introduction

Seasonal allergic rhinitis (hay fever) is common and is known to affect up to 30% of adults and 40% of children at some time in their lives.<sup>1</sup> This causes significant health burden to the individuals as well as the impairment of quality of life.<sup>1</sup> It is reported that the economic burden posed by allergic rhinitis has almost doubled since 2000.<sup>1</sup> For most sufferers, the hay fever season starts in the early spring

with the arrival of grass and tree pollen and finishes with moulds in October.<sup>2</sup>

The symptoms range from sneezing, rhinorrhoea, obstruction of the nasal passages to conjunctival and pharyngeal itching, and lachrymation.<sup>1</sup> These symptoms may lead to loss of sleep and reduced ability to concentrate. The use of antihistamines and steroidal nasal spray in giving symptomatic relief is useful; unfortunately long term use has potential side effects and may not be beneficial to everyone.<sup>3</sup> The use of antihistamines may reduce rhinorrhoea and sneezing but may cause sedation and drowsiness.<sup>3</sup> Common side effects of steroidal nasal spray include nose/throat dryness, crusting and bleeding of the nose, increased thirst/urination.<sup>4</sup> Prolonged use of this medication in higher doses may cause further side effects such as extreme tiredness, headaches, vision problems.<sup>4</sup>

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Furthermore, in a general practice setting these measures were reported to be only partially effective in more than 40% of patients.<sup>5</sup>

Considering the side effects associated with conventional treatment and for the patients who fail to respond to these measures, there is a demand for an alternative therapy that would alleviate hay fever symptoms, with fewer side effects.<sup>6</sup>

Homeopathy is a form of holistic medicine based on the principle of 'like cures like', in which a substance given in small doses will cure the same symptoms of illness they are known to cause in high doses.<sup>7</sup> In the context of hay-fever, homeopathic treatment can be divided into at least five types, depending on the way of prescribing.<sup>8</sup>

**Isopathic prescription** uses a known allergen in homeopathic dilution to treat the symptoms of allergy.<sup>9</sup>

**Clinical prescription** aims at treating the disorder using symptoms of the ailment.<sup>10</sup> For example, local symptoms of allergy are looked at and a remedy is prescribed.<sup>6</sup>

**Constitutional prescription** aims to bolster the entire constitution of the patient. A detailed description of the patient's physical, mental and emotional symptoms are taken into account and a specific single remedy is prescribed. As a result different people receive different prescriptions for the same ailment, as their constitution is different.<sup>8</sup>

**Miasmatic prescription** targets the inherited or acquired weakness which in turn causes a predisposition towards a pattern of illness.<sup>7</sup> This method involves prescribing a nosode (remedies from the product of diseases or diseased tissue) or a specific remedy that is known for its affinity towards a particular miasm (for example, mercury and nitric acid are well known anti-syphilitic remedies).<sup>7</sup> The treatment is hence directed towards the underlying miasm in order to cure a chronic disease.<sup>11</sup>

**Complex prescription** uses two or more remedies simultaneously, either in alteration or as a combined formula. This method may encompass the use of isopathic, therapeutic, constitutional and miasmatic remedies simultaneously in one prescription as one remedy may not cover all the symptoms of the disorder in a patient.<sup>7</sup> The more the prescription was tailored to suit the individual patient, better results were obtained, as reported by Ellis Barker and J.H. Clarke.<sup>7</sup> While constitutional prescription uses a single remedy, complex prescription involves using two or more remedies.<sup>10</sup>

Reilly *et al.* reported evidence showing improvement with homeopathy over placebo in patients with hay fever, asthma and perennial rhinitis, using principal inhalant allergen (isopathy).<sup>9</sup> Taylor *et al.* conducted an overview and pooled analysis of the four trials and showed clear benefit with the homeopathic intervention as compared to the placebo.<sup>12</sup> The study was carried out for a month, and each day the recruited patients measured their nasal air flow and recorded symptoms such as blocked, runny or itchy nose, sneezing or eye irritation.<sup>12</sup> On average, over the last two weeks after randomization, patients who received homeopathy had a 28% improvement in nasal inspiratory peak flow as compared with 3% among those in the placebo group. Although isopathy has the advantage

of being easily prescribed and trialled clinically, it is unclear whether a more traditional, individualized approach might achieve better results.

Another group, Lüdtke & Wiesenauer 1997, assessed the efficacy of a single remedy *Galphimia glauca* in the treatment of pollinosis.<sup>13</sup> This meta-analysis reviewed seven randomized double-blind placebo controlled trials and four non-placebo-controlled trials. They found that the overall rate of improved eye symptoms was about 1.25 times higher in the verum group than in the placebo group.<sup>13</sup> Similar results for soothing of nasal symptoms were reported in most trials.<sup>13</sup>

Another approach to treat pollinosis using a homeopathic combination remedy was tested by Wiesenauer and Heidl 1999.<sup>14</sup> This study group found that during an average treatment of 61 days, 23 of 35 patients experienced improvement in the severity of symptoms. The combination remedy used in this study was *Apis mellifica* D6 + *Acidum formicicum* D6 + *Thryallis glauca* D6 + *Cardiospermum halicacabum* D4.<sup>14</sup>

A non-comparative pilot study was carried out by Goosens *et al.*, 2009 to evaluate the effect of individualized homeopathic prescription in the treatment of hay fever.<sup>8</sup> In this study, the patients completed the Rhinoconjunctivitis Quality of Life Questionnaire (RQLQ) in the treatment of hay fever. The mean RQLQ score at baseline was 3.40 (SD, 0.98). After three and four weeks of homeopathic treatment the scores had fallen significantly to 1.97 (SD, 1.32) and 1.6 (SD, 1.28) respectively.<sup>8</sup>

We performed a clinical observational study of all eight patients, presenting with hay fever symptoms, who visited Health Zone Clinic, Wimbledon, London over a two-year period (2012 and 2013) using Measure Yourself Medical Outcome Profile (MYMOP) self-evaluation questionnaires. The prescription was tailored to the totality of each patient's symptoms and either a single remedy or a multiple prescription was prepared on an individualized basis.

## Materials and methods

### Participants

In all, eight consecutive patients visited Health Zone Clinic, Wimbledon (2012, 2013) with hay fever symptoms. The same patients visited the clinic in 2013 as well. These patients came to the clinic because their symptoms were highly bothersome and not completely relieved by the use of antihistamines and the steroidal nasal sprays. The symptoms of hay fever affected their level of concentration and wellbeing. These patients were looking for an alternative treatment to bring some relief to their suffering.

The study was carried out from the first week of May and the hay fever clinic was run one day of every week. At the start of study each patient's history and hay fever symptoms were recorded (baseline assessment).

### Evaluation and outcomes

All patients who visited the hay fever clinic were asked to complete the MYMOP. The MYMOP is a patient

generated outcome measure. MYMOP has been used in a large number of smaller evaluation studies involving both orthodox and complementary practitioners for a range of ailments.<sup>15</sup> A reduction in MYMOP score is an indication of improvement of the patient's condition.<sup>15</sup>

Using a 7 point score (0–6), where 0 indicated no symptoms and 6 indicated maximum symptom, patients scored their two most troublesome symptoms, activity of daily living that is limited/prevented by this ailment and their overall feeling of wellbeing.<sup>16</sup> MYMOP scores were documented at baseline (1st appointment), 14 days (2nd appointment) and 28 days (3rd appointment) during the treatment period with homeopathy.

All patients reported Symptom 1 as the individual symptoms of the eyes (ranging from itching, redness, tears and swelling). Symptom 2 was reported consistently as the individual symptoms of nose (sneezing, blockage, rhinorrhoea). Each patient scored these symptoms for severity over the past week. Individual participants reported the following day-to-day activities were affected: doing homework, reading, playing sports, driving, going for a walk, going to the gym, doing home maintenance, office work. Wellbeing was rated as the general feeling of wellbeing during the past week.

An improvement of 1 on the MYMOP scale is considered to be a meaningful change.<sup>17</sup> Paired t-tests were performed between baseline and 14 days of treatment, and between baseline and 28 days of treatment.

### Homeopathic medication and prescription

Remedies were given in the form of round sucrose pills (diameter 3.5 mm) that had been impregnated with a medicated potency of a specific remedy. All the medicated potencies were purchased from Helios, London.

The prescription was tailored according to the totality of symptoms of each patient. If all the symptoms were covered by a single remedy, a single remedy only was used. In most cases two or more remedies were prescribed to cover the entire symptoms picture.

### Conventional medication

All the patients who visited the Health Zone Clinic were taking conventional medicines to control their symptoms and had felt only modest improvement with this treatment. They all reported continuing suffering with hay fever symptoms despite taking conventional medicines and were looking for an alternative solution to alleviate their misery. The conventional medication and the dosage were noted for each patient in each consultation (i.e. baseline, after 14 days and 28 days respectively).

### Conventional clinic data

Five conventional clinics in London were approached: one clinic provided us with their data. A conventional clinic was approached for total number of anti-allergic prescriptions which they issued from 1st March to 30th of September in the years 2012 and 2013 on a monthly basis. This was done in order to ascertain whether the data could

be explained by a general decline in the anti-allergic prescriptions in the months of June and July compared to May over the two-year period of 2012 and 2013. Most patients visited our clinic in the month of May 2012 and 2013. Anti-allergic medications prescribed were the oral antihistamines and steroidal nasal spray. The antihistamines prescribed in the years 2012 and 2013 were: Desloratadine, Neoclarityn, Cetirizine, Levocetirizine, Mizolastine, Fexofenadine. The nasal sprays prescribed in the conventional clinic for the same period were: Rhinolast, Azelastine, Beclometasone, Budesonide, Flixonase, Dymista, Nasonex, Mometasone, Sodium Cromoglycate.

### Study timeline

The study took place over the hay-fever seasons of 2012–2013.

In 2012, the 1st appointments took place from 3rd of May until the 7th of June. The second and third appointments followed after 14 days and 28 days respectively.

In 2013, the 1st appointments took place from 2nd of May until the 23rd of May. The second and third appointments followed after 14 days and 28 days respectively.

Final follow-ups were made over the phone in late August or September to enquire whether the patients suffered from any relapses in the interim period. No questionnaire was used in the telephonic consultation and only hay fever symptoms were noted if present.

Each appointment consisted of an assessment and a consultation. All appointment dates are shown in [Figure 1](#).

## Results

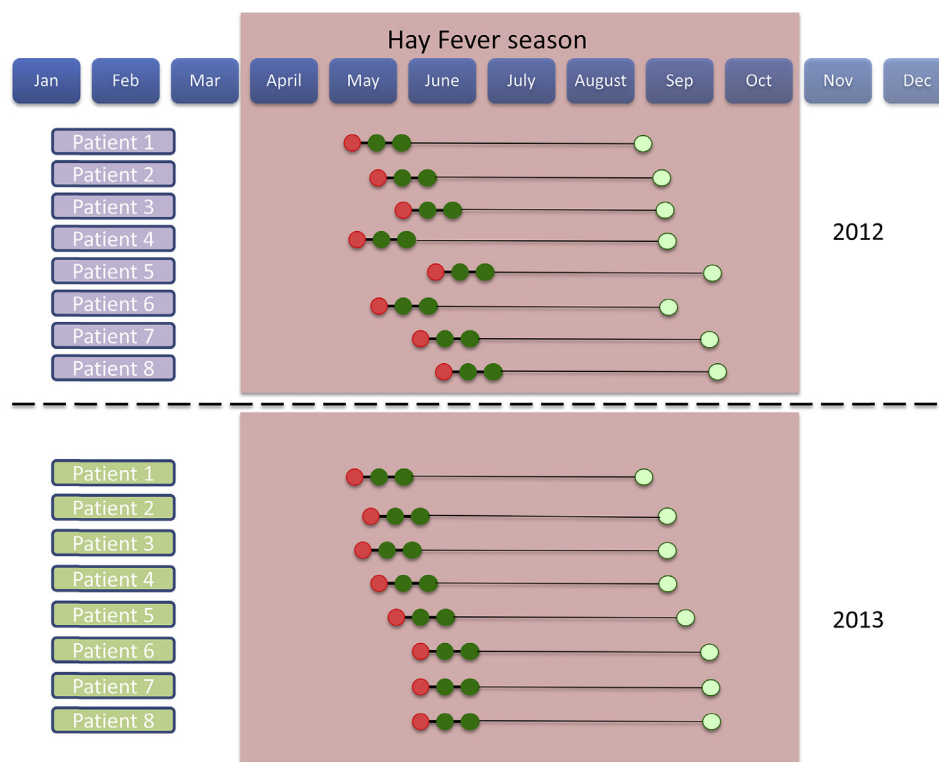
### Sample

In all, eight consecutive patients visited Health Zone Clinic to receive treatment for hay fever symptoms in the months of April to July 2012, and followed-up again in 2013. These were mainly children and middle-aged women. Patients were between 9 and 50 years of age. The mean age of patients was 34.2 years (SD, 15.9) and 5 out of 8 were females.

### MYMOP scores

At the baseline assessment all the patients reported high MYMOP scores which improved within one month of homeopathic treatment (see also [Figure 1](#)). All the patients at baseline assessment reported suffering with hay fever symptoms all the way until September/October in the past. Telephonic consultation in late August/September confirmed these patients did not have any relapse in the interim period ([Figure 1](#)).

The mean MYMOP scores for the eyes, nose, activity and wellbeing had improved significantly after 14 and 28 days of homeopathic treatment. The overall average MYMOP profile score at baseline was 3.83 (SD, 0.78). After 14 and 28 days of treatment the overall average score had fallen to 1.14 (SD, 0.36) ( $P < 0.001$ ) and 1.06 (SD, 0.25) ( $P < 0.001$ ) respectively.



**Figure 1 Timings of the assessments:** Hay fever season every year lasts from April to October in the UK. The patients visited Health Zone Clinic in year 2012 are represented by Patient 1 while the same patients in 2013 are represented by Patient 1. 1st appointment (baseline assessment) is represented by red dot ● while 2nd and 3rd appointments are represented by dark green dots ●. Telephonic consultation for each patient in late August/September is represented by light green dots ○. (For interpretation of the references to colour in this figure legend, the reader is referred to the web version of this article).

Results are shown in detail for the mean MYMOP scores for the eyes, nose, activity and wellbeing in Table 1 and presented graphically in Figure 2. Hay fever symptoms and history of individual patients are listed in Table 4.

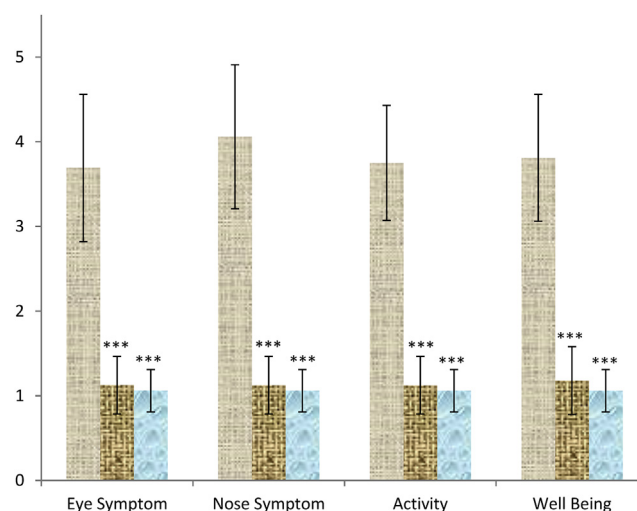
### Homeopathic medication

In the past we tried using single remedies only; however we then experienced relapses or only temporary improvement in patients. We saw in many cases that a single remedy was not able to cover all the symptoms presented. Thus over the years we have used multiple remedies to yield clinical results as suggested by anecdotal evidence.<sup>7</sup>

**Table 1** MYMOP profile, showing mean scores (standard deviation, SD) for the Eyes, Nose, Activity and Wellbeing of all consecutive eight patients who visited the Hay Fever Clinic.  $P < 0.001$  at 14 days (2nd appointment) and 28 days (3rd appointment) vs baseline (1st appointment). \*\*\* indicates a statistically significant difference ( $P < 0.001$ )

	1st Appointment mean (SD)	2nd Appointment mean (SD)	3rd Appointment mean (SD)
Eye symptoms	3.69 (0.87)	1.12 (0.34)***	1.06 (0.25)***
Nose symptoms	4.06 (0.85)	1.12 (0.34)***	1.06 (0.25)***
Activity	3.75 (0.68)	1.12 (0.34)***	1.06 (0.25)***
Wellbeing	3.81 (0.75)	1.18 (0.4)***	1.06 (0.25)***
Average MYMOP profile score	3.83 (0.78)	1.14 (0.36)***	1.06 (0.25)***

For our eight hay fever patients' symptoms, the following types of homeopathic prescriptions were used: constitutional (25% of cases); clinical + constitutional (12.5%); clinical + miasmatic (50%); constitutional + miasmatic (12.5%). Thus in 75% of cases we used a



**Figure 2** Average MYMOP scores ( $\pm$ SD) for the Eyes, Nose, Activity and Wellbeing Symptoms at baseline (1st appointment □), 14 days (2nd appointment ▒) and 28 days (3rd appointment ▒). \*\*\* indicates a statistically significant difference ( $P < 0.001$ ) at 14 and 28 days vs baseline.



**Table 2** Remedies prescribed to individual patients

Patient	1st Prescription	2nd Prescription
1	Euphrasia 200c Silica 1M	Silica 1M
2	Allium cepa 30c Psorinum 30c	Psorinum 30c
3	Allium cepa 30c Psorinum 30c Tuberculinum 30c	Psorinum 30c Tuberculinum 30c
4	Sulphur 30c Tuberculinum 30c	Sulphur 30c Tuberculinum 30c
5	Allium cepa 30c + Euphrasia 30c + Sabadilla 30c Carcinosin 30c	Allium cepa 30c + Euphrasia 30c + Sabadilla 30c Carcinosin 30c
6	Gelsemium 30c Carcinosin 30c	Carcinosin 30c
7	Natrium muriaticum 30c	Nat mur 30c
8	Kali phosphoricum 30c	Kali phos 30c

multiple-remedy prescription. The remedies used are listed in [Table 2](#).

### Conventional medication

All the patients reported using conventional medication to control their hay fever symptoms at baseline assessment. The name and dosage of the medication was noted down. The patients reported high MYMOP scores and their well-being was poor at baseline assessment. All the patients at 2nd and 3rd appointment reported either reducing or stopping conventional medication as they felt relief associated with homeopathic treatment ([Table 3](#)). The patients were not actively encouraged by the homeopath to change their use of conventional medicines and were told that the responsibility to control the conventional medicines lay with the GP.

### Conventional clinic data

As can be seen from [Figure 3](#), there is no historical evidence that the total number of prescriptions declined in the months of June and July 2012 and 2013 as compared to May 2012 and 2013. Most patients visited Health Zone

Clinic in the month of May. After 14 days of treatment with homeopathic remedies patients reported improvement and reported either reducing or stopping their conventional medication. Meanwhile, the total number of anti-allergic medications prescribed by the conventional clinic increased over the same period both in 2012 and 2013.

## Discussion

We found that homeopathy treatment was associated with statistically significant improvement in hay fever symptoms in patients assessed by MYMOP scores. All these patients felt meaningful improvement in their hay fever symptoms within one month of homeopathic treatment, whereas in the past years they had all reported to be suffering through to September/October. One limitation of this study is that we do not know the severity of pollen seasons in previous years. However, we do have a conventional clinic's data as a comparator to check whether their anti-allergic prescriptions also declined in the corresponding period to that of our study: there is no historical evidence from that clinic that fewer anti-allergic prescriptions were issued in June and July 2012 and 2013 as compared to May 2012 and 2013. Most patients visited Health Zone Clinic in the month of May and felt improvement in their hay fever symptoms within two weeks of treatment with homeopathic remedies.

In the UK pollen season separates into three main sections: Tree Pollen – late March to mid-May; Grass Pollen – mid May to July; and Weed Pollen – end of June to September.<sup>18</sup> It is possible that in this study symptoms showed alleviation because the natural 'peak' symptom period had passed. However, the fact that all the patients had reported suffering with hay fever symptoms throughout previous summers indicates they were all allergic to more than one type of pollen. Due to limited resources, the patients did not have their allergen/s identified, which further confounds the interpretation of our study.

This study is about homeopathy practice in a 'real-world' clinical setting using a simple tool (MYMOP

**Table 3** Conventional medicines used by individual patient at baseline (1st appointment), 14 days (2nd appointment), 28 days (3rd appointment). Each patient reported either stopping or reducing conventional medication as they felt alleviation of their hay fever symptoms with homeopathy

Patient	Baseline 1st Appointment	14 days 2nd Appointment	28 days 3rd Appointment
1	5 ml Cetirizine twice daily Beclometasone 100 µg, two puffs via aerochamber twice a day	5 ml Cetirizine once/twice a week	None
2	Cetirizine 10 mg once daily	Cetirizine 10 mg once/twice a week	None
3	Cetirizine 10 mg once daily Salbutamol inhaler twice daily	Cetirizine 10 mg once/twice a week. Salbutamol reduced, as and when needed	Cetirizine 10 mg once/twice a week Salbutamol reduced, as and when needed
4	5 ml Cetirizine twice daily	5 ml Cetirizine once/twice a week	None
5	Cetirizine 10 mg once daily Beconase nasal spray, three times daily	Cetirizine 10 mg once daily Beconase nasal spray, two times daily	Cetirizine 10 mg 3–4 times in a week Discontinued nasal spray
6	Cetirizine 10 mg once daily Beconase nasal spray, three times daily	Cetirizine 10 mg once/twice a week Beconase nasal spray reduced, as and when needed	None
7	Cetirizine 10 mg once daily	None	None
8	Cetirizine 10 mg once daily	Cetirizine 10 mg once/twice a week.	None

**Table 4** History and Hay Fever Symptoms of individual patients

Patient	History	Hay Fever Symptoms
1	Sickly child, lack of will power, timid, chilly; in colds and coughs <i>Pulsatilla</i> helps.	<b>Symptom 1:</b> Blood red eyes, watery eyes, swelling of the eyes, right eye worse. <b>Symptom 2:</b> Runny nose, violent sneezing worse at night, obstruction of the nose at night. <b>Activities affected:</b> Doing homework, reading, playing.
2	Recurring colds, suffers from hay fever every year, chilly person, offensive sweat, has suffered from migraine since the age of 16 years.	<b>Symptom 1:</b> Itchy eyes, watery eyes. <b>Symptom 2:</b> Runny nose, violent sneezing, stuffy nose at night. <b>Activities affected:</b> Office work, household work, reading.
3	Every year comes down with hay fever, asthmatic complaints, weak chest; colds go into the chest.	<b>Symptom 1:</b> Itchy eyes, watery eyes. <b>Symptom 2:</b> Runny nose, violent sneezing, stuffy nose at nights. <b>Activities affected:</b> Office work, driving, reading.
4	Child with recurring colds and coughs; does not like taking baths; weak chest, colds go into chest, night coughs.	<b>Symptom 1:</b> Burning in eyes, itchy, watery eyes. <b>Symptom 2:</b> Frequent sneezing, blocked nose. <b>Activities affected:</b> Doing homework, reading, playing.
5	Fastidious person, various allergies, chronic fatigue.	<b>Symptom 1:</b> Very itchy eyes, watery eyes. <b>Symptom 2:</b> Frequent sneezing, runny nose, stuffy nose at night, unable to sleep. <b>Activities affected:</b> Household work, going for a walk.
6	Fastidious, caring; every year comes down with hay fever; suffers from flu a few times every year, fatigue.	<b>Symptom 1:</b> Itchy eyes, red and watery eyes, heavy eyelids; eyes red, sore, aching. <b>Symptom 2:</b> Frequent violent sneezing, stuffy nose at nights, runny nose with thin discharge. <b>Activities affected:</b> Household work, going for a walk, reading, going to gym.
7	Dry skin; symptoms worse in the sun; grief, lost husband (Never Been Well Since).	<b>Symptom 1:</b> Eyes itch and burn. Watery eyes. <b>Symptom 2:</b> Violent sneezing, profuse nasal discharge like egg white; symptoms worse in the morning. <b>Activities affected:</b> Doing household work, reading, going for walks.
8	Nervous, anxious patient, suffers from migraines.	<b>Symptom 1:</b> Itchy eyes, watery eyes, eyes burn sometimes. <b>Symptom 2:</b> Itchy nose, violent sneezing, worse at 2:00 am. <b>Activities affected:</b> Doing household work, socialising, going for walks.

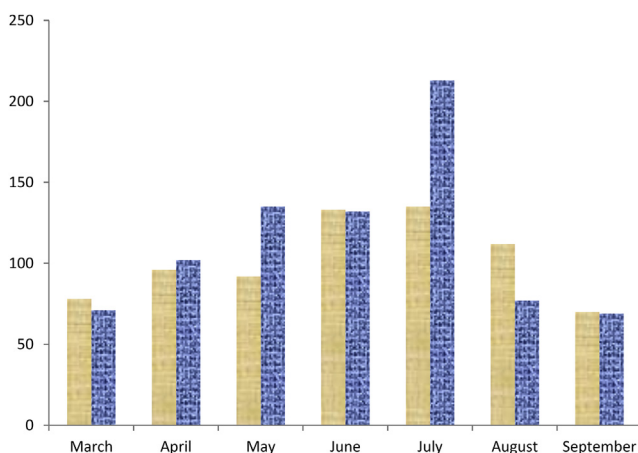
questionnaire) for evaluating the effects of individualized homeopathic remedies in the control of hay fever symptoms. The patients reported no aggravation during the homeopathy treatment. All the patients who were on medication before starting homeopathy reported reducing or being able to stop their conventional medication since it seemed to be no longer required in association with homeopathic treatment. The homeopathic prescription was

tailored to the totality of symptoms and either a single remedy or a multiple prescription was prepared on an individualized basis. It is not possible to derive any meaningful extrapolations regarding the types of homeopathy used from this one small study. As regards efficacy, due to the observational study design we cannot exclude other interpretations such as the placebo effect and regression to the mean.<sup>19</sup>

Taking into account the above findings and caveats, this study does suggest that individualized homeopathic treatment has the potential of alleviating hay fever symptoms in patients. A future clinical trial should include allergen/s identification of all the patients while procuring contemporary pollen count data. Robust outcome measures such as nasal peak-flow analysis<sup>9</sup> and rhinoconjunctivitis scores, as measured by a well validated disease-specific RQLQ,<sup>8</sup> should be used in both the intervention group and the control group of a pilot pragmatic study.

## Conclusion and the way forward

The evaluation suggests that individualized homeopathic treatment may alleviate hay fever symptoms. This was a small non-controlled study involving only eight patients over a two-year period. The results should therefore be interpreted with caution. A pilot pragmatic trial of this individualized therapeutic approach, including a larger number of patients and using more robust outcome measures, is indicated.



**Figure 3 Conventional Clinic's Data (Shown by permission of Dulwich Medical Centre):** Total number of anti-allergic medicines prescribed from March to September for the years 2012 and 2013. Total number of anti-allergic medicines prescribed in Year 2012 is represented by □ while year 2013 is represented by ■.

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