

Homeopathy service in a National Health Service community menopause clinic: audit of clinical outcomes

Clare Relton and Elaine Weatherley-Jones

School of Health and Related Research, University of Sheffield, Sheffield, UK

Abstract

Sheffield's National Health Service community menopause clinic has run a homeopathy service since 1998. The service provides an alternative treatment option for those women who cannot take hormone replacement therapy, do not want it, have found it ineffective, or have been advised to stop it. Patients receive homeopathic treatment (monthly consultations plus individualized homeopathic medicines) for up to six sessions. An audit was undertaken of all patients referred to this service between 2001 and 2003, in which patients completed the Measure Yourself Medical Outcome Profile. Patients reported significant benefit from the service. The greatest response was seen in those reporting headaches, vasomotor symptoms, emotional/psychological symptoms and tiredness/fatigue as their primary symptoms.

Keywords: Homeopathy, hot flushes, menopause, primary care, women's health

Introduction

Sheffield's National Health Service community menopause clinic has provided a homeopathy service since 1998. The service is provided for women with distressing menopausal symptoms who are not taking hormone replacement therapy (HRT) because they cannot take it, do not want it or have found it ineffective, or because it produced intolerable side-effects and the women were advised to stop it.

Patients are offered up to six consultations with one of the two homeopaths. The initial consultation lasts 50–60 minutes and subsequent consultations 15–30 minutes. Patients receive monthly consultations and individualized homeopathic medicines. Individualized homeopathy uses low-dose/ultra-molecular doses of specially prepared

substances. These doses (usually in tablet form) are individually prescribed according to the principle of 'like cures like'.¹

In 2004 an audit was undertaken of the homeopathy service. The audit cycle includes the following steps: observing current practice, setting standards of care, comparing practice with standards, and implementing change.

Methods

Since the inception of the homeopathy service, all patients referred have been asked to complete the Measure Yourself Medical Outcome Profile (MYMOP).² Using these routinely collected data, a clinical audit was undertaken of all patients referred from 1 January 2001 to 31 December 2003 ($n = 124$). The MYMOP is a patient-generated outcome measure. Each patient is asked to name the two symptoms that bother her the most and score them on a seven-point Likert scale (from 0, 'as good as it could be', to 6, 'as bad as it could be'). Patients are also asked to score their 'general wellbeing' on a scale of 0–6. Scores are documented before, during and at the end of homeopathic treatment.

Results

One hundred and twenty-four women were referred to the homeopathy service; their median age was 53 years. Initial and final MYMOP data were obtained for 102 women (81.4%) (5 women had none and 17 women had initial but no final data). Regularly listed symptoms were hot flushes, tiredness, anxiety, mood swings, crying, sleeping difficulties, mood swings, headaches, and joint and muscle pains.

Fifteen women reported that their primary symptom stayed the same and four documented a worse score; however, the remaining 83 reported an improvement at the end of homeopathic treatment. The mean decrease (improvement) in the score for their primary symptom was

Correspondence: **Clare Relton**, Research Fellow and Homeopath, Medical Care Research Unit, SchHARR, Regent Court, 30 Regent Street, University of Sheffield, Sheffield S1 4DA, UK. Email: c.relton@sheffield.ac.uk

2.0 (95% confidence interval 1.64–2.43, $P < 0.005$) (an improvement of 0.8 on the MYMOP scale has been suggested to indicate clinically significant improvement).³

Further analysis showed an average MYMOP score change of 1.5 for wellbeing and 2.0 for vasomotor symptoms ($n = 45$).

Discussion

The results of this audit are comparable to those of a previous outcome study and service evaluation of this homeopathy service in 1999–2000, which found that 88% of patients ($n = 37$) reported clinically significant improvement in their primary symptom, with a mean improvement of –2.0 in the scores for primary symptoms.⁴ Greatest clinical benefit was reported by women for headaches, tiredness, vasomotor symptoms, locomotor symptoms and sleeping difficulties.

Other observational studies of homeopathic treatment of menopausal symptoms have used different outcome measures, but do report high levels of benefit in menopausal symptoms as well as improved mood and quality of life.^{5,6}

Acknowledgements: This audit was supported by the Department of Health National Coordinating Centre for Research Capacity Development (NCCRCDC).

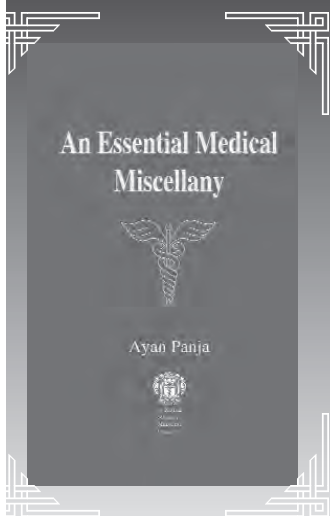
Competing interests: None declared.

References

- 1 Thompson EA. Homeopathy and the menopause. *J Br Menopause Soc* 2002;**8**:151–4
- 2 Paterson C, Britten N. In pursuit of patient-centred outcomes: a qualitative evaluation of MYMOP, Measure Yourself Medical Outcome Profile. *J Health Serv Res Policy* 2000;**5**:27–36
- 3 Guyatt GH, Juniper EF, Walter S, Griffith L, Goldstein RS. Interpreting treatment effects in randomised trials. *Br Med J* 1998;**316**:690–3
- 4 Thomas KJ, Luff D, Strong P. *Complementary Medicine Service in a Community Clinic for Patients with Symptoms Associated with the Menopause: Outcome Study and Service Evaluation*. SCHARR, University of Sheffield, 2001
- 5 Clover A, Ratsey D. Homeopathic treatment of hot flushes: a pilot study. *Homeopathy* 2002;**91**:75–9
- 6 Thompson EA, Reilly D. The homeopathic approach to the treatment of symptoms of oestrogen withdrawal in breast cancer patients. A prospective observational study. *Homeopathy* 2003;**92**:131–4

New from RSM Press An Essential Medical Miscellany

Written by Ayan Panja
MBBS DRCOG DFFP MRCP



The perfect gift for anyone who is interested in medicine, this pocket sized miscellany contains everything you ever wanted to know about medicine and much more. Have you ever wanted to know where the phrase ‘going doolally’ comes from? Or how Viagra works? Or what the health giving properties of whisky are? If so, look no further because *An Essential Medical Miscellany* contains it all.

Designed as a mixture of quirky entertainment and information, as well as an occasional aide memoire for readers who work in healthcare, this essential miscellany would be ideal for your hypochondriac friends, your bookcase, your mother-in-law, your loo bookshelf, your bedside table, and for anyone who is into all things medical.

To order your copy of *An Essential Medical Miscellany* contact: Marston Book Services; Tel +44 (0)1235 465 500; Fax +44 (0)1235 465 555. Or order securely online at

www.rsmppress.co.uk/bkpanja.htm



2 Misc Jours 05

ISBN: 1-85315-631-0; 160pp;
Hardback; £12.95; June 2005