



EICCAM Research Facts 1

European Information Centre for
Complementary & Alternative Medicine

Better health at little extra cost

Patients with chronic diseases benefit more from homeopathy than from conventional medicine at approximately the same costs. This has been shown by German researchers who studied 315 adults and 178 children over a period of 12 months. Half of the patients received homeopathic, the other half conventional medical care. In both groups, patients' health status improved substantially, but improvement was greater in patients on homeopathic treatment. Overall costs, including those for doctor visits, medication, and hospital stays, were nearly identical for adults, but average costs were higher in homeopathically treated children.

(Summary of the original paper, for strengths and weaknesses of the study see the following pages)

This paper summarises and comments on the results of the following research article:

C. Witt et al: Outcome and costs of homoeopathic and conventional treatment strategies: A comparative cohort study in patients with chronic disorders. *Complementary Therapies in Medicine* (2005) 13, 79-86.

It was selected for the following reason: This study researches homeopathy as given in routine care and reflects effectiveness and costs.

This paper has been produced on behalf of the European Information Centre on Complementary and Alternative Medicine (EICCAM) and approved by the EICCAM Scientific Board prior to circulation. The aim of EICCAM is to promote the provision and dissemination of understandable, objective and high-quality information on the safety, effectiveness and efficiency of Complementary and Alternative Medicine (CAM) to decision makers and the media in Europe for the benefit of European citizens.

Each issue of EICCAM Research Facts provides a summary and commentary on an individual research study. Further details of the EICCAM foundation's work and full details of the process for selecting research articles for summary can be found on www.eiccam.eu.

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EICCAM has provided this material for information only. While reasonable efforts have been made to ensure that the information is factually correct, we cannot guarantee its correctness or completeness. EICCAM Research Facts may be of interest to members of the public, but we strongly recommend that the fact sheets are not used as the sole basis for decisions on treatment and advise that a health professional is consulted. For further information on this topic, including a comprehensive and up-dated list of relevant studies, additional sources should be consulted (for suggestions see www.eiccam.eu).

Synopsis

Aim of the study	To compare outcomes and costs in patients seeking homeopathic or conventional medical care for chronic health problems
Treatment	No restrictions: homeopathic and conventional doctors were completely free to choose the treatment
Patients	315 adults with headache, low back pain, depression, sleeping disorders, or sinusitis 178 children with atopic dermatitis, allergic rhinitis, or asthma
Length of follow-up	12 months after first physician contact
Severity of complaints	Homeopathic group: improvement from 57 to 32 points (scale 0 – 100) Conventional group: improvement from 59 to 44 points
Quality of life	Homeopathic group: moderate improvements in physical, large improvements in psychological scores Conventional group: small improvements in physical, moderate improvements in psychological scores
Overall costs	Homeopathic group: overall costs of € 2,155 in adults and € 1,471 in children Conventional group: overall costs of € 2,013 in adults and € 786 in children
Authors' conclusions	Patients seeking homeopathic treatment had a better outcome, whereas total costs in both groups were similar

The study in detail

This study, conducted by Dr. Claudia Witt from the Charité University Medical Center in Berlin, Germany compared chronically ill patients seeing homeopathic doctors with similar patients seeing conventional physicians. The study was designed to reflect everyday treatment: all patients were free to consult a physician of their own choice, and the physicians were allowed to treat patients as they saw fit. In particular, homeopathically treated patients were allowed to use additional conventional treatments, and conventionally treated patients were allowed to take homeopathic medicines.

In total, 493 patients were studied, including 265 (174 adults and 91 children) who received homeopathic care and 228 (141 adults and 87 children) who received conventional treatment. Patients suffered from chronic complaints, adults from headache, low back pain, depression, sleeping disorders, or sinusitis, and children had atopic dermatitis, allergic rhinitis, or asthma. All patients underwent a basic physical examination and were followed up for a total of 12 months. Half

of the patients in the homeopathy group received additional conventional treatments. Adults reported a 40% severity reduction in typical complaints after 6 months of homeopathic treatment, compared to a 25% reduction after conventional treatment. In both groups, the effects were maintained for another 6 months. Simultaneously, a substantially greater improvement in quality of life was seen in patients on homeopathic treatment. Children in both groups reported that their complaints improved by more than 50% after 6 months of treatment. After 12 months, these effects were maintained in homeopathically treated children, but had diminished somewhat in the conventional group.

Overall costs included doctor visits, pharmaceutical and non-pharmaceutical treatment, hospital stay, and sick days as covered by the German system of social insurance. Costs were comparable for homeopathic and conventional treatment. It was estimated that an average adult in this study incurred € 2,155 in costs if treated

homeopathically and € 2,013 if treated conventionally. In children the estimated overall costs for an episode of homeopathic treatment (€ 1,471) were nearly twice those for an episode of conventional treatment (€ 786). However, as Dr. Witt pointed out, this difference is difficult to interpret, because a few children in the homeopathic group were hospitalised, thus contributing to the exceptionally high average costs in this group.

Commentary

Dr. Witt's study systematically compares health outcomes and costs for chronically ill patients seeking homeopathic or conventional treatment. Its main advantage over previous studies is that all patients were followed prospectively for an entire year after their first contact with the treating physician. This allowed the researchers to measure patients' health status using established questionnaires at predefined points in time and to calculate the associated costs directly. Thus, the findings can be regarded as particularly sound.

Regrettably, the paper mixes up various diseases simultaneously in one single analysis. This may seem reasonable from a homeopathic point of view, since homeopaths claim to treat the individual as a whole, rather than individual diseases. However, it is somewhat problematic from a conventional or economic perspective. Because economic data may vary considerably between the diseases, it would have been interesting to investigate whether the overall results also apply to each disease-specific subgroup.

This study should not be interpreted as proof that homeopathic medicines work. This was not a research paper on highly diluted substances - others have found that these effects (if any) are small when compared to placebo (see e.g. EICCAM Research Facts 5). This study rather researched a complete treatment strategy consisting of approaches and procedures which go far beyond simply prescribing remedies. It was precisely for this reason that conventional treatments were permitted within the homeopathy group. As a result, Dr. Witt's study provides a realistic picture of what can be expected if a chronically ill patient receives treatment primarily from a

Indeed, the vast majority of homeopathically treated children did not incur greater costs than those observed in conventionally treated children.

These results essentially show that homeopathy, as administered in everyday practice, is not cost-saving, but cost-effective in the treatment of chronically ill patients.

homeopathic rather than a conventional doctor. This is not a weakness of the study, but a strength.

The results of this study are of great importance to medical decision makers. This is especially true as diseases were included which consume substantial medical and economic resources in European countries. For example, low back pain is the leading cause of disability and the most common reason for medical consultation in Germany, and costs the German health care system more than 3 billion euros each year. Similarly, childhood asthma is the most common cause of school absenteeism resulting from chronic disease.

Nevertheless, it would be wrong to conclude that all patients with these chronic diseases should primarily receive homeopathic treatment. An essential feature of this study was that patients were free to choose their physician. Thus, it is impossible to predict whether patients who opt for conventional treatment will also benefit from homeopathic treatment.

At the moment, it is unclear whether the findings of this study can be extrapolated from Germany to other European countries. All cost calculations in this study were based on German prices, including those for the cost of remedies, an hour of physician time, and *per diem* hospital costs - all of which vary considerably across Europe, as do hospital admission criteria. Moreover, the disease-management strategies of German homeopaths differ from those of French homeopaths, for example. As a result, homeopathy may be cheaper than conventional medicine in some countries, but more expensive in others when compared to conventional medicine.

The following individuals have been involved in the production of this summary:

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The following sources were additionally used to prepare this summary:

Shang A, Huwiler-Muntener K, Nartey L, Juni P, Dorig S, Sterne JA, Pewsner D, Egger M: Are the clinical effects of homoeopathy placebo effects? Comparative study of placebo-controlled trials of homoeopathy and allopathy. Lancet 2005;366(9487):726-732.

Gesundheitsberichterstattung des Bundes: www.gbe-bund.de

Akinbami LJ. The State of Childhood Asthma. Advance Data from Vital and Health Statistics: no 381. Hyattsville, MD: National Center for Health Statistics 2006.

Overview of the process for producing EICCAM summary papers

Selection of articles

The initial assessment which articles are to be summarised is carried out by the relevant member(s) of the Scientific Board i.e. with expertise in the particular therapy or research type. The Scientific Board also receives advice from the EICCAM Management Board on topical key questions (of particular importance/relevance to decision-makers in Europe at the time).

Articles are selected according to an initial assessment of quality and relevance and either deal with a relevant health condition in terms of prevalence or costs and one of the following key therapies, or an aspect of particular interest such as the mechanism of action of a therapy. Because of limited funds each therapy will be dealt with in turn.

- Phytotherapy (Herbal medicine), including Traditional Chinese Herbal Medicine
- Anthroposophic medicine
- Homeopathy
- Acupuncture
- Osteopathy and Chiropractic.

Priority is given to:

- systematic reviews and meta-analyses on the effectiveness of CAM therapies
- large-scale trials
- large-scale outcome studies
- cost.

Priority is also given to studies published in peer-reviewed journals. Relevant studies published in other formats, e.g. reports produced by specific organisations, may also be selected (*if, in the view of the Scientific Board, the findings are likely to have significant implications on practice or healthcare*).

Selection of articles is not on the basis of whether positive or negative findings are reported. The list of papers considered is provided at www.eiccarn.eu.

Preparation of the summary, commentary and critical appraisal.

A draft of the summary is prepared by an external author who is an academic with expertise in CAM, research methods, statistics and communication of research according to a pre-defined template.

The draft is reviewed by the relevant members of the Scientific Board for accuracy and clarity.

Members of the board may choose to send the summary for external review.

A final version is prepared and sent to the Scientific Board for approval.

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For our policy on conflicts of interest see www.eiccarn.eu.

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