

Treatment and Rehabilitation of Borderline Mental Disorders Using Homeopathic Medicines: Current State of the Art

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Treatment and rehabilitation of borderline mental disorders using homeopathic medicines: current situation

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RESUME

The analysis of the results of experimental and clinical researchers of homeopathic remedies conducted by both native and foreign authors is presented. Their efficiency at different syndromes of borderline psychic disorders at different stages of the treatment-andrehabilitation process is emphasized.

Keywords: borderline psychic disorders, rehabilitation, allopathy, homeopathy.

SUMMARY

The review presents an analysis of the results of experimental and clinical studies of homeopathic preparations by domestic and foreign authors. The emphasis is on the study of their effectiveness in various syndromes in the clinic of borderline mental disorders at various stages of the treatment and rehabilitation process.

Key words: borderline mental disorders, rehabilitation,allopathy, homeopathy.

The search for effective means and methods of treatment and rehabilitation of borderline mental disorders (BPD) is carried out in different directions, based on different conceptual ideas about the essence of pathology, mechanisms of patho- and sanogenesis [2]. These views sometimes diverge to such an extent that they are no longer perceived as competing, but as mutually exclusive (alternative) [16]. An example of this is the history of the relationship between allopathy and homeopathy. Unfortunately, such categoricity gives rise to bias of opinions and inadequacy of assessments of real experience [55, 56].

While the effectiveness of the method still needs strong evidence, as an officially recognized method, homeopathy has received its legal recognition in most European countries. Its success is evidenced by the fact that in Great Britain 40% of doctors prescribe homeopathic medicines, in France - 32%, in Germany - 30%, in Austria - 22%, in India - about 50% [17].

To date, enough convincing facts have been accumulated,

indicating that the biological and behavioral effects of homeopathy are different from placebo [30, 33, 34, 41]. This is confirmed by experimental studies on animals [58].

In experiments on rodents, the effect of the preparations *coffea cruda*, *nux vomica*, and histamine in the dilution of C30 on insomnia and sleep structure was proved [59–63]. The experiment also reliably established the effectiveness of the homeopathically prepared drug "glutamate", which protects brain cells from glutamate damage in ischemic stroke [46, 52, 53]. In clinical practice, the effectiveness of the method has been confirmed by recording changes on the EEG [28, 29].

Problem randomized research withcontrol (RICK) homeopathic preparations are that they are carried out in a standard way, without taking into account the specifics of the homeopathic method (long-term use, the possibility of drug exacerbation, changing the drug if necessary) [26, 39, 40, 47, 50, 63, 66, 67]. Nevertheless, the growing number of studies proving the effectiveness of homeopathic remedies, including in psychiatric practice [5, 14, 15, 20, 22, 36–38, 44], speaks of the promise of searches in this direction. According to randomized placebo-controlled studies of the effectiveness of homeopathy, in patients with specific neuropsychiatric and psychiatric diagnoses, it was found that homeopathic treatment is significantly more effective than placebo in the following disorders: attention deficit hyperactivity disorder [42, 51]; somatoform disorders [15]; with premenstrual dysphoric disorders [70]; disorders caused by traumatic brain damage [32], chronic fatigue syndrome [42, 68].

Among the syndromes of borderline psychiatry, the largest number of studies is devoted to the study of the effectiveness of the method in the treatment of anxiety and depression [49, 54, 56, 57]. While, according to some sources [27, 30], the effectiveness of homeopathy in anxiety disorders cannot be considered proven, other longitudinal and retrospective studies of the homeopathic method prove its high effectiveness in this type of disorder [34, 35, 48].

A UK study of 6544 people who suffered from chronic diseases and took homeopathy on an outpatient basis for 6 years found an improvement in general condition in 50.7% of patients. Of 201 depressed patients, 53% reported an improvement [64]. A Belgian cross-sectional retrospective study of 782 general practitioners treated with homeopathy found that 52% of patients reduced their allopathic drug use, including 21% of patients receiving psychotropic drugs for depression. The duration of homeopathy intake in this study was 9 years. 77.8% of patients noted an improvement in not only somatic, but also mental symptoms. Satisfaction with treatment was registered in 95% of patients [26].

Prospective cohort study of 3981 patients treated in 103 German and Swedish primary care centers with a period of

observation of patients for 24 months, revealed an improvement in mental and physical condition by 3, 12 and 24 months. The use of allopathic drugs decreased by 20% [69].

The side effects of taking homeopathy in all studies studied ranged from 2% to 7% of cases. They included, among other things, medicinal exacerbations known to homeopaths. Fatal outcomes from taking homeopathic drugs have not been reported, which is fundamentally different from the data of clinical trials of allopathic drugs [31, 63].

Leaving aside the question of the origins and essence of ideological contradictions separating the two above-mentioned approaches (allopathy and homeopathy), it is necessary to express some preliminary considerations that follow from the cited literature data.

The effectiveness of various funds and methods alternative (complementary) medicine (including homeopathy) is not easy to assess objectively [43]. The effectiveness of most of them depends on the patient's psychological attitude [3], his ideas and interpretations, therefore, it is very difficult to evaluate it using generally accepted existing medical-biological and statistical methods [31, 45]. Nevertheless, in borderline psychiatry, this problem is solved by using psychometric tests and rating scales, the possibilities of which are widely covered in special guidelines, including our previous works [7–10].

The homeopathic approach to the treatment of painful conditions is a constitutional approach based on ideas about the individual-typological properties of the organism and personality, therefore, it is addressed to these integral fundamental structures [13]. Homeopathic therapy, tailored to the individual constitution, relies on the mobilization of the patient's own resources [6, 23].

The “targets” of homeopathic therapy are not individual clinical signs (symptoms) or syndromes, but that “central disorder” [25], which in the field of border psychiatry of interest to us can be attributed to the maladaptive position of the individual in this specific situation.

Finally, the therapeutic result of homeopathy is achieved with a minimal risk of side effects, “behavioral toxicity”, without addiction, dependence and other negative consequences that reduce the assessment of the quality of life of patients [21], and also allows to reduce the amount of allopathic drugs taken [24].

The assumptions made are quite consistent with restorative therapy [19], which is probably one of the reasons for the ever deeper study of the capabilities of the method [12, 18] and its widespread use at various stages of rehabilitation [1, 11, 17].

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