P: ISSN No. 2231-0045 RNI No. UPBIL/2012/55438 VOL.-7, ISSUE-2, November-2018
E: ISSN No. 2349-9435 Periodic Research

Evaluating The Outcome of Integrated Medicine Involving Homeopathy and Physiotherapy on Patients With Cervical Osteoarthritis

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Abstract

Among the commonest causes of neck pain is cervical osteoarthritis. Though a lot of work has been done on this disease, very few have focused on integrating homeopathic system of medicine which is one of the widely used alternative medical system and physiotherapy which is a complementary system of medicine. This paper is one of its kind in which the author is trying to address this gap.This is a prospective observational study with patients due consent over a period of one year by using patient reported outcome questionnaire as well as the physicians observation of the outcome. The results are most promising with the integrated medicine involving homeopathy and physiotherapy thus indicating a better way of management and treatment cervical osteoarthritis.

Keywords: Neck Pain, Physiotherapy, Cervical Osteoarthritis.

Introduction

Neck pain is the fourth leading cause of disability.[1]Cervical osteoarthritis is one of the most common causes of chronic neck pain. Also known as cervical spondylosis, this is a degenerative condition of the cervical spine, involving the vertebral bodies, facets, intervertebral discs and sometimes the spinal canal. Most of the research in this area has been focusing on the affect of conventional treatment in this condition, few on physiotherapy, integrated treatment involving contemporary medicine and physiotherapy. The effectiveness of different modes of alternative systems of medicine[2][3][4] and physiotherapy alone[5] was researched upon butthe scope of integrating homeopathy as an alternative system and physiotherapy as complementary medicine together for the benefit of the patient has not been workedon to full extent. This paper tries to address this gap, and focuses on the outcome of integrated medicine involving individualized homeopathic treatment and individualized physiotherapy in the management and treatment of cervical osteoarthritis.

Objectives of the Study

1. The purpose of this study is to throw focus on the benefits of alternative systems of medicine especially homeopathy in treating the patients suffering with cervical osteoarthritis or cervical spondylosis.
2. To illustrate the effect of adding physiotherapy which is a complementary system of medicine to the individualized homeopathic treatment.
3. To focus on a better and noninvasive approach in the treatment and management of the disease.

Review of Literature

Cervical osteoarthritis being a degenerative condition always throws challenges in its management and treatment. A review of the literature was undertaken and many research papers were considered out of which only the most relevant are quoted and they reveal that the researchers across the world have published their observations regarding the presentation of the disease,[1][7][8] other possible conditions which may have to be ruled out when treating a patient with neck pain like cervical radiculopathy, cervical myelopathy, cervical stenosis etc. some authors explained the possible addition of various types of alternative medicine[3] and complementary medicine[4] especially physiotherapy[5]for the management of cervical spondylosis. Few researchers have found that this disease is more prevalent in women [6] and the relationship between

the occupation [7][9][10] and the prevalence of the disease were analyzed which have been found to be true in this study as well. The effectiveness of different procedures like percutaneous neuromuscular electrical stimulation [2] multimodal physiotherapy etc.[11] were analyzed and compared by few authors whereas this study focuses on individualized physiotherapy for the patients in which all the complaints of the patient were considered and multimodal physiotherapy procedures were followed for different types of presentation of the disease also considering their age, gender and occupation. It has been observed that majority of the previous findings reveal thatalternative and complementary medical systems were effective in the management of the disease and improving patient's health related quality of life[1][2][3][4][5][11]. To the best of the author's knowledge no one has addressed the combined effect of alternative and complementary medicine especially homeopathy and physiotherapy on the patient's suffering from this disease.

Causes

The most common cause for cervical osteoarthritis is age. Age related changes in the bones and joints of the cervical spine are the major factors causing neck pain. Whereas postural problems, occupational issues.[6][7][9][10] also contribute to the development of cervical osteoarthritis over a period of time.[7]

Pathophysiology

The human neck is a complex structure that include bones, muscles, ligaments, facet joints, and intervertebral discs. Cervical spine comprises of 7 cervical vertebrae, out of which the first cervical vertebra provides a resting place for the skull and helps mainly in the rotation of the skull. The other cervical vertebra together help in the mobility of the neck joint.[8] As a part ageing degeneration is a common process that occurs in almost every joint of the human body which equally effects the intervertebral discs and the facet joints of the cervical vertebra also. When these changes occur in the cervical spine, asingle or multiple joints can be affected, either the intervertebral discs or the facet joints[8] or both can become the potential cause of neck pain either acute or chronic. These changes can sometimes become severe that mobility of the neck may also be affected which inturn has a huge impact on the normal routine human functioning..

Symptoms

The patient usually sees the doctor with either one or multiple complaints of the following type

1. Pain in the neck region mostly nape of neck, aggravated by movement[6]
2. Sometimes pain from neckis referred to upper back between the shoulder blades, either one or both the upper arms sometimes upto the fingers,[6]
3. Occasional or continuous numbness, tingling, or weakness in one or both upperlimbs which is vague.[6]
4. Poor balance
5. Dizziness or vertigo
6. Cervical stiffness—reversible or irreversible
7. Pain in occiput or the base of the head
8. If the first and second cervical vertebrae are involved it may project as temporal pain or retro orbital pain.

General Outcome

Though cervical osteoarthritis is a very common health condition, most of the cases do not appear in the clinics until considerable development of pathology sets in. this, along with ageing effect, makes the prognosis poor. The course of cervical spondylosis may be slow and prolonged, and patients may either remain asymptomatic or have mild cervical pain. Long periods of nonprogressive disability are typical, and in a few cases, the patient's condition progressively deteriorates**.**

Study

This is a prospective observational study with an observation period of 1year. The patients were duly informed about the study and their willingness to participate in the study is the primary inclusion criteria apart from the disease.

Total No of Subjects

300 equally distributed in both the groups

Group A

Also the control group, consists of patients who took individualized homeopathic treatment alone

Group B

Group B consists of patients who took individualized homeopathic treatment along with individualized physiotherapy techniques.

Inclusion

Patients who are diagnosed with cervical osteoarthritis and who were willing to participate in the study

Exclusion

Patients who were not interested to participate in the study and dropouts.

Age

30- 70

Gender

Any

Materials and Methodology

The patients were clearly explained about the disease and the necessity for regular follow up before including them in the study. A total of 458 patients were considered 202 in group A and 256 in group B. The number of patients included in group B were kept intentionally more than those in group A anticipating that there might be more number of dropouts owing to the long physiotherapy regime which is supposed to be continued till the end. PROM patient reported outcome questionnaires and physician reported outcome questionnaires have been used as tools to draw the conclusions. The total period of 1year is divided into four quarters of 3months each for better evaluation. At the end of the study period the consolidated results are considered for the outcome calculation which are presented in the table 1.

The understanding of mild, moderate and severe in our study is based on severity of pain, disability in normal routine functioning, need for increasing the medical intervention on a scale of three. Also the severity of the patient's condition

assessed at the starting of the study is taken as the base line to determine the degree of suffering either mild, or moderate. If the patient has progressing severity i.e. more than his initial severity will fall in the severe category. Also the age of the patient, the stage of the disease at which the patient was enrolled in the study and the natural progression of the disease were thoroughly considered during the outcome evaluation.

Table 1

	Group A Patients Only On Individualized Homeopathy	**Group B Patients On Integrated Medicine**
Total No.of Patients Considered	202	256
Total No of Dropouts	52	106
Total No of Patients Included In The Study	150	150
No Continued Symptoms But Occasional Mild Symptoms Which Did Not Require Intervention	23	47
Occassional Continued Symptoms 1-3 Times In The Past 6months	54	41
Mild To Moderate Symptoms Less Than Once A Month	35	37
Mild To Moderate Symptoms More Than Once A Month	17	13
Mild To Moderate Symptoms More Than Twice A Month	13	8
Continued Symptoms For More Than 2 Weeks	3	1
Continued Symptoms For Less Than 2 Weeks	5	2
No Relief	0	0
Increased Disease Severity	0	1

Discussion

Cervical osteoarthritis or cervical spondylosis is one of the most common causes for neck pain and pain in the upperlimbs. The most commonly used contemporary medicines for the condition are to control vertigo, nerve tonics and pain killers. The prognosis is usually poor. The prognosis also depends on many other factors such as the patient's occupation, exiting factors like weight lifting, driving, sudden jerks to the neck in day to day conversation etc. All the patients were duly educated about these factors and to avoid them at their best. The outcome has also been calculated considering all these factors.

Observations

1. Female patients suffering from the disease are more than male patients[6]
2. Most patients are between 40 to 60 years of age[6]
3. Disease tolerance capacity has increased with integrated medicine
4. Frequency of illness reduced
5. Most patients using integrated medicine could cope up easily with their acute exacerbations of the disease without needing increased medical intervention
6. Vertigo and lack of balance which are the most bothering symptoms in day to day life have decreased to a great extent
7. Better health related quality of life in patients who used integrated medicine
8. Referral pain reduced
9. Patient education regarding the do's and don'ts helped them to copeup with their condition
10. Continuity in treatment with respect to homeopathy as well as physiotherapy was an important part in obtaining relief
11. More number of patients were benefitted by integrated medicine
12. One female patient undergoing integrated treatment had a road traffic accident due to which her disease severity increased to a great extent which required both increased medical attention and physiotherapy.

Conclusion

Though cervical osteoarthritis comes with a poor prognosis, by following regular homeopathic as well as physiotherapy treatment will definitely help the patients to improve their quality of life and disease tolerance. Females are more prone to the disease. Patients between 40 to 60 years of age are at high risk for this disease. The patient's occupation is also a major contributor to the disease. Patient education about the do's and don'ts also helps the patient in coping up with the disease. Thus it is clear that integrated medicine is a better approach in the treatment of cervical osteoarthritis or cervical spondylosis.

Endnotes

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