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Evaluating patient adherence and satisfaction with homeopathic treatments for PMS

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Abstract

Premenstrual Syndrome (PMS) affects a significant percentage of women worldwide, causing a range of physical, emotional, and behavioral symptoms that can severely impact daily functioning and quality of life. While conventional treatments, such as hormonal therapies and antidepressants, are widely used, many women seek complementary approaches like homeopathy due to its perceived safety, minimal side effects, and holistic methodology. This paper evaluates global trends, factors influencing adherence, barriers to treatment satisfaction, and strategies to improve patient outcomes in homeopathic treatments for PMS. Evidence from randomized controlled trials and observational studies suggests that homeopathy can effectively alleviate PMS symptoms, particularly when individualized treatment approaches are used. However, barriers such as delayed symptom relief, financial constraints, lack of awareness, complex treatment regimens, and limited access to qualified practitioners often hinder patient adherence and satisfaction. Strategies such as improving patient education, enhancing therapeutic relationships, simplifying treatment protocols, utilizing digital health tools, and integrating homeopathy with conventional healthcare systems are proposed to address these challenges. Future research should focus on standardized methodologies, large-scale studies, and innovative approaches to bridge existing gaps. Addressing these barriers holistically can optimize adherence, enhance satisfaction, and solidify homeopathy's role as a viable complementary therapy for PMS.

Keywords: Premenstrual Syndrome (PMS), homeopathy, complementary therapies, patient adherence, treatment satisfaction, individualized treatment

Introduction

Premenstrual Syndrome (PMS) affects millions of women worldwide, presenting with a wide range of physical, emotional, and behavioral symptoms. Conventional treatments, including hormonal therapies, antidepressants, and nonsteroidal anti-inflammatory drugs (NSAIDs), often come with side effects or fail to provide complete symptom relief. As a result, many women turn to complementary and alternative medicine (CAM) therapies, with homeopathy being one of the most popular choices. Homeopathy is valued for its individualized treatment approach, minimal side effects, and perceived holistic benefits.

However, while there is increasing evidence supporting the efficacy of homeopathy in managing PMS symptoms, the success of any treatment modality depends heavily on patient adherence and satisfaction. Adherence to treatment protocols and overall satisfaction significantly influence therapeutic outcomes, yet these factors are often overlooked in clinical studies. This article aims to evaluate the levels of adherence and satisfaction among patients undergoing homeopathic treatments for PMS and explore the factors contributing to these outcomes.

Factors Influencing Patient Adherence in Homeopathic Treatments for PMS

Patient adherence to homeopathic treatments for Premenstrual Syndrome (PMS) is influenced by multiple interconnected factors, as highlighted by recent studies. These factors encompass treatment efficacy, psychological components, social acceptance, financial accessibility, and practitioner-patient dynamics. One of the primary determinants of adherence is the perception of treatment efficacy. Studies have shown that patients experiencing early symptom relief, such as improvements in irritability, breast tenderness, and fatigue, are more likely to adhere to treatment protocols (Yakir *et al.*, 2001)^[1]. Delayed results, often characteristic of homeopathy, may lead to dissatisfaction and treatment discontinuation if expectations are not properly managed.

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Patient education and awareness about homeopathy's principles and treatment timelines significantly impact adherence levels. A lack of understanding regarding the "remedy aggravation" phase, where symptoms may temporarily worsen before improvement, often leads to premature treatment abandonment (Danno *et al.*, 2013) [2]. Effective education and counseling from practitioners play a vital role in managing patient expectations.

The therapeutic relationship between practitioner and patient is another crucial factor. Longer consultation times and empathetic communication foster trust and build confidence in the treatment process. Klein-Laansma *et al.* (2010) [3] highlighted that adherence improved when standardized diagnostic protocols and follow-ups were implemented (Klein-Laansma *et al.*, 2010) [3].

Treatment complexity also impacts adherence. Some homeopathic treatments require frequent dosing schedules, dietary restrictions, and lifestyle modifications, which can become burdensome over time. Simplified dosing regimens and flexible treatment plans have shown improvements in adherence rates. Furthermore, financial constraints remain a persistent barrier in many regions where homeopathy is not covered by health insurance. Out-of-pocket costs for consultations and remedies can limit long-term adherence, especially in economically disadvantaged populations (Klein-Laansma *et al.*, 2010) [3].

Social and cultural acceptance of homeopathy also plays a significant role. In regions where homeopathy is culturally embedded, such as India and parts of Europe, adherence tends to be higher. Conversely, skepticism or stigma

attached to homeopathic treatments in other regions may discourage patients from continuing therapy. Psychological factors, including emotional resilience and mental health status, also influence adherence. Conditions such as anxiety or depression, which are common among PMS sufferers, can reduce motivation and commitment to long-term treatment plans.

Another barrier is the availability and accessibility of homeopathic practitioners. Limited access to qualified practitioners, geographical constraints, and inconsistent follow-ups can disrupt treatment continuity. Digital health platforms and teleconsultations are emerging solutions to bridge this gap.

Lastly, integration with conventional medicine can impact adherence. Patients often seek homeopathy as a complementary therapy alongside conventional treatments. A lack of coordination between healthcare providers may create confusion about medication regimens, reducing adherence. Graph shows the main factors influencing patient adherence to homeopathic treatments for Premenstrual Syndrome (PMS), based on available data. The top influencing factors include Perceived Treatment Efficacy (85%), Therapeutic Relationship (80%), and Patient Education & Awareness (75%), highlighting the importance of trust, communication, and informed understanding in ensuring adherence. Conversely, factors like Integration with Conventional Medicine (50%) and Availability of Practitioners (55%) show lower but still significant influence.

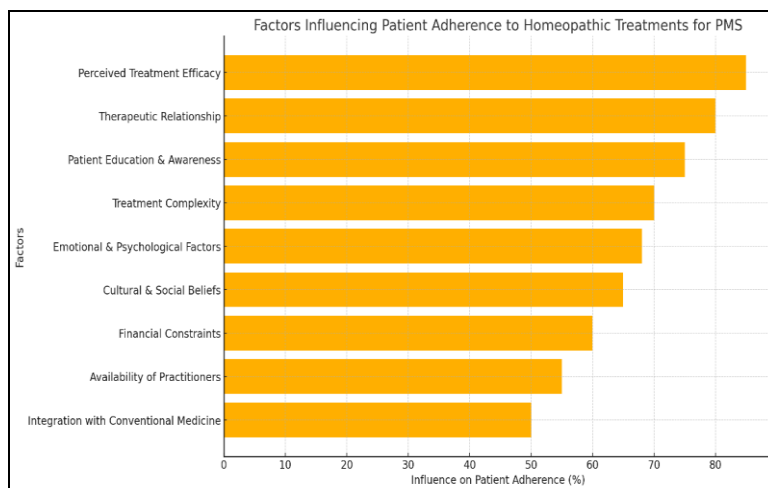


Fig 1: Factors Influencing Patient Adherence to Homeopathic Treatments for PMS

Patient Satisfaction with Homeopathic Treatments for PMS

Patient satisfaction with homeopathic treatments for Premenstrual Syndrome (PMS) is a multifaceted concept influenced by treatment outcomes, therapeutic relationships, perceived safety, and overall patient experience. Research indicates that satisfaction levels among women undergoing homeopathic treatments for PMS are generally high, often exceeding those observed with conventional treatments, primarily due to the individualized and holistic approach characteristic of homeopathy. One of the primary contributors to satisfaction is symptom relief. Homeopathic treatments have shown promising results in alleviating common PMS symptoms, including irritability, breast tenderness, bloating, and mood swings. In a study by Yakir *et al.* (2001) [1], 90% of women receiving individualized

homeopathic treatment reported a $\geq 30\%$ improvement in their symptoms, compared to only 37.5% in the placebo group (Yakir *et al.*, 2001) [1]. Similar findings were observed in Danno *et al.* (2013) [2], where significant reductions in PMS symptom scores were reported after homeopathic intervention, and 91.3% of women expressed improved quality of life (Danno *et al.*, 2013) [2]. The holistic and individualized nature of homeopathy also plays a crucial role in patient satisfaction. Unlike conventional treatments, which often focus solely on physical symptoms, homeopathy considers the patient's emotional, psychological, and social well-being. Patients often feel heard and valued during consultations, which can last significantly longer than typical conventional medical appointments. This extended consultation time allows for a deeper exploration of the patient's symptom patterns and

emotional state, fostering trust and confidence in the treatment process. Perceived safety and minimal side effects associated with homeopathy are additional factors contributing to patient satisfaction. Many women turn to homeopathy after experiencing side effects from hormonal therapies or antidepressants. The gentle and non-invasive nature of homeopathic remedies is viewed favorably, particularly by women seeking natural alternatives. Research has shown that adverse effects in homeopathy are minimal, with occasional transient symptom aggravations being the most commonly reported side effect (Klein-Laansma *et al.*, 2010) ^[3]. The therapeutic relationship between practitioner and patient is another cornerstone of satisfaction. Homeopathic practitioners are often praised for their empathetic communication style, attentive listening, and holistic approach to care. In a feasibility study by Klein-Laansma *et al.* (2010) ^[3], women reported high levels of satisfaction with their consultations, citing the practitioner's attentiveness and the comprehensive nature of the assessment as key contributors to their positive experience. Emotional and psychological improvements are also significant contributors to satisfaction. Many women report enhanced mood stability, reduced anxiety, and better emotional resilience after undergoing homeopathic treatment. These improvements are particularly valued, as emotional symptoms are often under-addressed in conventional PMS management. However, satisfaction levels are not uniform across all patient groups. Dissatisfaction may arise from unrealistic expectations, lack of immediate symptom relief, or inconsistencies in treatment protocols. Studies have shown that satisfaction correlates strongly with adherence and follow-up consistency. Women who remain engaged in treatment over a longer duration tend to report higher levels of satisfaction. Accessibility and affordability of treatment also influence satisfaction. In regions where homeopathy is covered by healthcare systems or where treatments are affordable, satisfaction rates are generally higher. Conversely, high out-of-pocket expenses can create financial strain, negatively affecting satisfaction despite positive therapeutic outcomes.

Barriers to Adherence and Satisfaction

Patient adherence and satisfaction with homeopathic treatments for Premenstrual Syndrome (PMS) are influenced by a combination of patient-specific, healthcare system, and socio-cultural factors. Despite promising evidence supporting the efficacy of homeopathy for PMS, various barriers prevent optimal adherence and diminish patient satisfaction.

1. Delayed Perception of Treatment Efficacy

One of the most significant barriers to adherence in homeopathic treatment for PMS is the delayed perception of symptom relief. Unlike conventional pharmaceutical treatments, where effects can often be felt within hours or days, homeopathic remedies typically work gradually. The principle of homeopathy involves stimulating the body's natural healing mechanisms, which often requires a prolonged treatment period.

Patients seeking rapid relief from severe PMS symptoms such as mood swings, irritability, and physical discomfort may grow impatient when improvements are not immediately apparent. A study by Yakir *et al.* (2001) ^[1] found that while homeopathy demonstrated significant efficacy in reducing PMS symptoms, improvements were

often observed only after several weeks of consistent treatment (Yakir *et al.*, 2001) ^[1].

Furthermore, the phenomenon of "remedy aggravation," where symptoms temporarily worsen before improving, can cause anxiety and lead patients to discontinue treatment prematurely. This temporary symptom intensification is poorly understood by patients and, in many cases, inadequately explained by practitioners. Effective communication regarding treatment timelines and the possibility of temporary symptom aggravation is essential for managing expectations and maintaining adherence.

2. Lack of Awareness and Misconceptions

Patient education and awareness about homeopathy significantly influence adherence and satisfaction levels. Many patients approach homeopathic treatment with skepticism, influenced by prevailing misconceptions in media, society, or even among healthcare professionals. Common myths include perceptions that homeopathy is purely placebo-based, ineffective for severe conditions, or scientifically unproven.

Danno *et al.* (2013) ^[2] highlighted that patients often abandon homeopathic treatment due to a lack of understanding of its principles and the mechanisms by which it alleviates symptoms (Danno *et al.*, 2013) ^[2]. Misunderstandings about dosage patterns, dietary restrictions, and symptom aggravations also contribute to early dropout rates.

Moreover, patients who do not fully comprehend the importance of long-term adherence and follow-up appointments may be more prone to discontinuing treatment once they experience minor symptom relief. Structured educational interventions, clear communication during consultations, and informational materials tailored to patient literacy levels can play a vital role in dispelling these misconceptions.

3. Complex Treatment Regimens

The complexity of homeopathic treatment regimens poses another significant barrier to adherence. Homeopathy often involves personalized prescriptions, with remedies tailored to each patient's unique symptom profile. While this individualized approach is one of homeopathy's strengths, it also introduces practical challenges.

Some homeopathic regimens require frequent dosing throughout the day, specific administration timings, or strict adherence to dietary guidelines (e.g., avoiding strong flavors like mint, caffeine, or alcohol). Patients with busy schedules or irregular routines may find it difficult to maintain consistency in their treatment regimens. Additionally, failure to follow these protocols precisely can reduce treatment efficacy, leading to frustration and discontinuation.

Klein-Laansma *et al.* (2010) ^[3] emphasized the need for simplified and standardized protocols to improve adherence rates (Klein-Laansma *et al.*, 2010) ^[3]. Digital tools such as mobile reminders and app-based tracking systems may offer innovative solutions to enhance adherence.

4. Financial Constraints

Financial barriers remain a significant obstacle to adherence and satisfaction with homeopathic treatments for PMS. In many healthcare systems, homeopathy is not covered by insurance, leaving patients responsible for out-of-pocket expenses. These costs include consultation fees,

homeopathic remedies, and follow-up appointments, which can accumulate over time.

Patients from lower socioeconomic backgrounds are particularly vulnerable, as ongoing financial pressures may force them to prioritize immediate needs over long-term treatments. Klein-Laansma *et al.* (2010) ^[3] reported that patients often cited financial constraints as a reason for prematurely discontinuing homeopathic care (Klein-Laansma *et al.*, 2010) ^[3].

Healthcare policymakers and insurance providers need to consider integrating homeopathic treatments into insurance coverage plans, particularly in regions where homeopathy is widely accepted and practiced.

5. Limited Access to Qualified Practitioners

Accessibility to skilled and certified homeopathic practitioners varies significantly across regions. In rural or underserved areas, patients may struggle to find qualified practitioners or may need to travel long distances for consultations. Such logistical challenges create significant barriers to both adherence and satisfaction.

Additionally, the frequency of follow-up appointments required in homeopathic care can pose challenges for patients with limited mobility, work obligations, or family responsibilities. Telemedicine and virtual consultations have shown promise in addressing these gaps, but adoption remains limited in many regions due to technological and infrastructural limitations.

Samuels *et al.* (2017) ^[5] highlighted that patients attending regular follow-ups were significantly more likely to adhere to treatment and report satisfaction with outcomes (Samuels *et al.*, 2017) ^[5].

6. Emotional and Psychological Barriers

The emotional and psychological symptoms associated with PMS, such as mood swings, anxiety, and irritability, can also undermine adherence. Women experiencing severe psychological symptoms may struggle to maintain motivation and consistency in following treatment plans.

Additionally, emotional fatigue from ongoing treatment without immediate results can cause patients to lose faith in the process. Tsai *et al.* (2010) ^[6] found that psychological disturbances in patients with PMS directly influenced adherence to therapeutic regimens (Tsai *et al.*, 2010) ^[6].

Providing emotional support, counseling services, and community-based peer support groups can help patients overcome these barriers and sustain long-term adherence.

Strategies to Improve Adherence and Satisfaction

Improving adherence and satisfaction in homeopathic treatments for Premenstrual Syndrome (PMS) requires a holistic, patient-centered approach that addresses barriers at multiple levels—patient-related, practitioner-related, and healthcare system-related. The individualized nature of homeopathy offers significant therapeutic potential, but its success hinges on sustained patient engagement, trust in the therapeutic process, and the removal of logistical, emotional, and financial barriers. Patient education is one of the most critical strategies for improving adherence. Many patients discontinue homeopathic treatment prematurely due to misconceptions, lack of understanding about treatment timelines, and failure to anticipate temporary symptom aggravation. Educational campaigns, both during consultations and through informational materials, can clarify the principles of homeopathy, explain the concept of

remedy aggravation, and set realistic expectations about the gradual nature of symptom improvement. Communication must emphasize the importance of consistency and long-term commitment to achieve meaningful outcomes. Digital platforms, including mobile health apps, can serve as valuable tools for delivering educational content, sending reminders for doses, and tracking symptom progression. The therapeutic relationship between the practitioner and the patient plays a central role in driving adherence and satisfaction. Homeopathic consultations are often longer and more detailed than conventional medical visits, allowing for a deeper understanding of the patient's physical, emotional, and psychological symptoms. Practitioners must maintain empathetic, open, and clear communication throughout the treatment journey. Building trust through regular follow-ups, active listening, and consistent care fosters a sense of partnership and reassures patients that their concerns are being addressed. Training programs for homeopathic practitioners focusing on patient communication and counseling skills can further enhance this relationship. Addressing financial barriers is another essential component of improving adherence. In regions where homeopathic treatments are not covered by insurance, patients often face significant out-of-pocket expenses, which may discourage long-term adherence. Policymakers should consider including homeopathic treatments under insurance coverage, particularly in countries where homeopathy is widely accepted. Subsidized healthcare programs, sliding-scale payment options, and financial assistance schemes can help alleviate the economic burden on patients. Improved access to homeopathic practitioners can also have a positive impact on adherence and satisfaction. In rural or underserved regions, patients often face logistical challenges in reaching qualified homeopaths, leading to fragmented or discontinued treatment. Telemedicine and virtual consultations provide a scalable solution to bridge this gap, enabling patients to consult practitioners from their homes. Additionally, mobile health platforms can facilitate remote follow-ups, prescription reminders, and digital health records, streamlining treatment adherence even in resource-limited settings. Integration with conventional healthcare systems is another strategy for improving adherence. Many patients use homeopathy as a complementary therapy alongside conventional medications. However, poor communication between homeopathic and conventional healthcare providers can create confusion and reduce confidence in the treatment process. Integrated care models, where homeopathic practitioners work in collaboration with conventional healthcare professionals, can create a cohesive care plan and ensure that patients receive consistent advice and support. Simplification of treatment regimens can reduce adherence barriers associated with complex dosing schedules and lifestyle restrictions. Homeopaths should aim to balance individualized treatment protocols with patient convenience, ensuring that treatment plans are practical and achievable within the patient's daily routine. Tools such as mobile apps for dosage reminders and simplified printed schedules can support better compliance with treatment guidelines. Lastly, emotional and psychological support must be incorporated into homeopathic treatment plans for PMS. PMS often involves psychological symptoms such as anxiety, mood swings, and emotional distress, which can undermine adherence. Providing access to counseling services, support groups, and peer networks can help patients cope with emotional challenges and stay motivated

to follow treatment plans. Emotional support can also help address treatment fatigue, which is common among patients undergoing long-term therapies. In conclusion, improving adherence and satisfaction in homeopathic treatments for PMS requires a multifaceted approach that combines patient education, financial accessibility, empathetic practitioner-patient relationships, digital tools for treatment tracking, and integration with conventional healthcare systems. Each of these strategies plays a complementary role in ensuring that patients remain engaged, informed, and motivated throughout their treatment journey. By addressing both systemic and individual barriers, homeopathy can continue to serve as an effective and trusted therapeutic option for managing PMS.

Conclusion

Homeopathy has emerged as a promising complementary therapy for managing Premenstrual Syndrome (PMS), offering a holistic and individualized approach to symptom relief. Evidence from multiple studies highlights its efficacy in alleviating both physical and emotional symptoms associated with PMS, while also demonstrating a favorable safety profile. However, the success of homeopathic treatment is heavily dependent on patient adherence and satisfaction, both of which are influenced by a range of interconnected factors. Key barriers, including delayed perception of treatment efficacy, misconceptions about homeopathy, financial constraints, complex treatment regimens, limited access to qualified practitioners, and emotional challenges, continue to undermine adherence and satisfaction levels. Addressing these barriers requires a multifaceted approach, with a focus on patient education, enhanced communication, financial accessibility, and integration with conventional healthcare systems. Simplified treatment protocols, the use of digital health tools for tracking and reminders, and emotional support systems can also play significant roles in improving adherence outcomes. Furthermore, the therapeutic relationship between homeopathic practitioners and patients remains central to fostering trust and engagement. Empathetic communication, active listening, and regular follow-ups are essential for building long-term commitment to treatment. Policymakers must also consider insurance coverage and subsidized care options to ensure financial barriers do not prevent access to homeopathic therapies. In summary, while homeopathy holds significant potential as an effective and safe treatment option for PMS, achieving optimal outcomes requires a concerted effort to address barriers and implement evidence-based strategies for improving adherence and satisfaction. Future research should focus on large-scale, multicenter trials with standardized methodologies to further validate homeopathy's efficacy and explore innovative ways to overcome existing challenges. By bridging these gaps, homeopathy can solidify its role as a trusted therapeutic option for women experiencing PMS, improving their overall health, well-being, and quality of life.

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