

# Observational Study: Cancer Cases Treated with Homeopathy in the Basque Country/Navarre between 2013 and 2015



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## Abstract

The Study included 50 women and 15 men aged between 11 and 85 years. There we 44 patients with advanced tumour disease and 21 with early-stage disease. Conventional cancer treatment was chosen by 64 patients and one of them chose homeopathy only. Four patients made important changes in their lifestyle, and 8 had bio-decoding sessions. All patients had taken homeopathic medicines as palliative care tailored to different stages of their disease. A single drug treatment was used in 18 cases, based on the entire case. Ten cases we treated by applying Banergi protocols and constitutional medicine, and 37 cases were treated with different successive or combined drugs, depending on the state of the patient at the time, with the Minotti protocol for palliative care being applied in 9 cases. The predominant homeopathic dilutions were centesimals. The great variability of medications used on each of the patients shows the individuality of patient symptoms with the same clinical diagnosis, as well as the great variability in the criteria of homeopathy doctors when establishes a therapeutic strategy.

Homeopathy has helped to control the tumour disease (patient free of disease) in 10 cases of early stage cancer and 12 cases of advanced tumour disease. Homeopathy was only palliative in 7 cases of early-stage cancer, in 22 cases of advanced tumour disease, and in five other cancers without staging. Homeopathy did not work in one case of early stage cancer, in two cases of advanced tumour disease, and in one case without staging. There were 5 cases in which results could not be assessed at the time of the study. According to the subjective assessment by the homeopathic doctor, homeopathy contributed to the control of tumour disease (patient free of disease with biological and /or imaging tests) in 22 cases, it was palliative in 34 cases, 4 patients died, and 5 cases cannot yet be evaluated. According to the assessment by the patient, it helped to control and improve their quality of life in 55 cases and it does not help them at all in 5 cases. This observational study has enabled us to evaluate the effectiveness of our work in the context of our clinical reality and more accurately describe all parameters involved in the case, including conventional treatments and their impact. Patient opinion is part of the evaluation of the results and requires questionnaires that can be adapted and standardized. Homeopaths carry out their work within an ethical framework bound by civil responsibility and respect for patient autonomy, open to collaboration with the work of the other professionals with a common goal, which is none to cure, relieve the patient, and contribute to the advancement of knowledge.

**Keywords:** Advanced tumour disease; Early-stage disease; Lifestyle; Bio-decoding; Palliative; minotti protocol; Patient free of disease; Staging; Standardized

## Introduction

Homeopathy exercised by doctors is abided to a deontological code common to the medical profession and to a social responsibility setting established by law. Moreover, we homeopath doctors respect the patient's autonomy and do not compete with other therapeutic possibilities. We homeopath doctors are willing to collaborate with other medicine professionals and to equip ourselves with investigation and evaluation tools that will permit progress of the scientific knowledge.

### What does homeopathy offer to oncology patients?

Active listening, reflection scenarios, full symptomatic patient treatment and use of medicines with few and reversible

adverse effects compatible with chemotherapy, radiotherapy and hormonotherapy. Another, not least important aspect is that a homeopathy treatment is short and inexpensive.

### Reflection scenario: raising awareness

These four questions open a therapeutic space of active listening for the patient and the doctor (Figure 1). The patient evolves from being a case of adenocarcinoma to being an ill individual to whom we intend to help by searching for the most accurate medicine that suits him, his suffering and the tumor. The patient must understand his vulnerability and those facts, emotions or ways of life that make him sicken. For that he is given a reflection space. We do not speak about statistics or predictions. We commit ourselves to him, to help and attend his

needs. Undoubtedly, in our job as homeopath doctors this active listening is part of our therapeutic grounding.

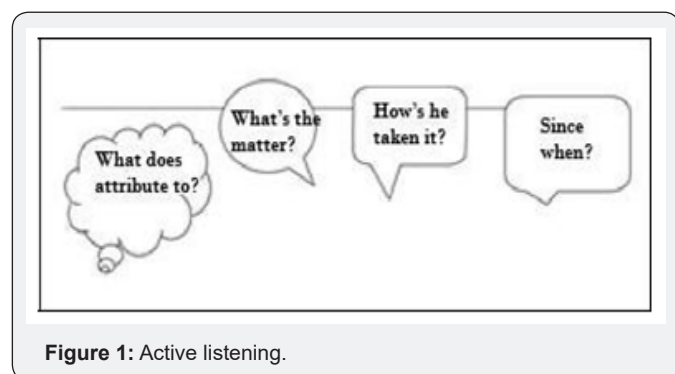


Figure 1: Active listening.

### Approaching the oncology patient

The oncology patient is a complex one. Besides his natural illness (the tumor), he also presents an artificial sickness derived from the adverse effects of his oncological treatment. Moreover, the impact of the diagnosis as well as the disease prognosis that, just by themselves, many times destabilize the patients, must be also be considered. For the homeopath, restoring the mental and physical equilibrium of the patient is a priority. Help him bear the treatments, make him lead the processes and maintain the hope alive, are also essential. In this case, a respectful

atmosphere for cooperation would be the ideal for the patient and the treatment's result.

### Observational Study (Appendix 1)

#### Sample

- 65 patient cases with different cancer diagnosis are collected at homeopath consultations in the Basque country/ Navarre during the period 2013-2015.
- Monitoring for 18 of the cases has been done at a health public service (primary attention) as for the rest 47 cases monitoring has been done at private consultation
- Patients from both sexes: 50 women and 15 men
- Ages between 11 and 85 years old
- A total of 44 patients present an advanced tumor disease
- 21 patients present the disease in an initial localized phase

#### Diagnoses

Table 1 shows the diagnoses along with the correspondent phase and number of cases. Simultaneous treatments to the homeopathy treatment (Table 2).

Table 1: Diagnoses, correspondent phase and number of cases.

Tumor	Phase	No of cases
Endometrial adenocarcinoma	II to IV	1
Endometrial adenocarcinoma	Localized disease	2
Cervical Ca.	II to IV	2
Cervical Ca.	In situ	2
Ovarian Ca.	II to IV	2
Ovarian Ca.	I	1
Breast adenocarcinoma	II to IV	8
Breast adenocarcinoma	I	4
Ductal carcinoma	II to IV	8
Ductal breast carcinoma	I	6
Colorectal cancer	II to IV	5
Colorectal cancer	I	1
Cavum	IV	1
Lung Ca.	II to IV	5
Lung Ca.	I	2
Multiple myeloma		1
Renal cell tumor	Advanced	1
Renal cell tumor	Initial	2
Pancreas Ca.	II to IV	4
Pancreas Ca.	I	1
Gastric Ca.	I	1
Nasopharyngeal Ca.	IV	1
Glioblastoma	Relapsed	1
Acute myeloid leukemia		1

Hepatocellular carcinoma	Advanced	1
Hepatocellular carcinoma	I	1
Prostate adenocarcinoma	II to IV	1
Prostate adenocarcinoma	I	1
Digestive system tumor	IV	3
Ca: carcinoma		

**Table 2:** Simultaneous treatments to the homeopathy treatment.

<b>Chemotherapy</b>	45
<b>Surgery</b>	44
<b>Dexamethasone</b>	2
<b>Biodecoding</b>	8
<b>Radiotherapy</b>	19
<b>Hormonotherapy</b>	8
<b>Lifestyle change</b>	4
<b>No other treatment</b>	1

**Common treatment**

Common treatment includes a combination of different procedures in which following different protocols, chemotherapy, radiotherapy, surgery and hormonotherapy can be combined for a healing or palliative purpose.

**Lifestyle change**

Lifestyle changes include change processes in habits such as diet or tobacco consumption, as well as changes in work, personal or family relations starting by a conflict awareness raising from the patient.

**Biode Coding**

Awareness raising and emotional unloading in relation to the conflict that unleashes the disease following a specific technique.

**Used strategies at the homeopathy consultation**

- a. All sample patients have taken palliative treatment adapted to various disease stages.
- b. Patients given a single medicine base on the situation and patient’s constitution: 18 cases.
- c. Banergi protocols and patient constitution based medicine: 10 cases.
- d. Other combined or successive medicines adapted for the patient: 37 cases.
- e. Minotti’s protocol (PAC): 9 cases.

**Potency usage in prescriptions**

Table 3 shows the prescribed potencies. The homeopathic medicine stimulates the healing capacity of every patient. Moreover, it also, at the same time, acts in the mental, emotional and physical areas. It is this aspect to which we refer when we speak about totality. The homeopathic medicine is compatible with other treatments and has few adverse effects. The great

variety of the medicines used in each patient expresses the symptom individuality of the patients with the same clinic or anatomopathological diagnose. Also, expresses the great criteria variability of the homeopath doctor when establishing a therapeutic strategy.

**Table 3:** Prescribed potencies.

<b>Korsakovian</b>	1
<b>Centesimal (CH)</b>	55
<b>Mother tinctures (Hydrastis Canadensis)</b>	3
<b>50 millesimal (LM)</b>	7
<b>PAC*</b>	9

\*Solution to the following medicines: ADN 6 CH, Hepatine 6 CH, Bone marrow 6 CH, Cardine 6 CH, Anilium 6 CH, Hairy Cranium Area 6 CH (Dr. Minotti’s formule).

**Homeopathy effectiveness estimation at the case management**

Homeopathy has contributed to control the tumor disease (free of disease patient) at the following cases (Table 4):

- a. Localized tumor disease (N0, M0): 10 cases
- b. Advanced disease (from phase II onwards): 12 cases

**Table 4:** Cases in which homeopathy has contributed to control the tumor disease (patient free of illness).

Sex/Age	Tumor (Phase)	Common Treatment and Others
F/57	Ductal breast Ca. (IV)	Letrozole
F/65	Colon adenocarcinoma (II)	Surgery
F/44	Lobular breast Ca. (II)	Surgery+ Cht.+ Tamoxifen
F/74	Cervical Ca. (II)	Cht., brachytherapy
F/58	Bilateral serous ovarian Ca. (IV)	Surgery, Cht.
F/68	Pancreas adenocarcinoma (II)	Surgery, lifestyle change
F/42	Breast adenocarcinoma (II)	Rejects common treatment
F/47	Relapsed ovarian Ca. (IV)	Surgery
M/44	Nasopharyngeal Ca. (II)	Surgery+ Cht.+ Rt.
F/58	Ductal breast Ca. (II)	Surgery+ Rt.
M/57	Lung Ca. brain metastasis	Surgery+ Rt.+ lifestyle change
F/44	Ductal breast Ca. (II)	Surgery+ Rt.+ Tamoxifen

F/40	Severe cervical dysplasia	Cone biopsy
F/49	Endometrial adenocarcinoma (I)	Surgery+ carboplatin+ Taxol
F/50	Breast adenocarcinoma (I)	Surgery and Cht.
F/60	Breast adenocarcinoma (I)	Surgery, Cht., decoding
F/58	Lung Ca. (I)	Surgery+ lifestyle change+ decoding
F/56	In Situ cervical Ca.	Surgery+ decoding
F/65	Multiple myeloma	Cht.+ lifestyle change
F/59	Endometrial adenocarcinoma (I)	Cht.+ brachytherapy+ lifestyle change
F/64	Gastric Ca. (I)	Decoding
F/70	Ductal breast Ca. (I)	Surgery

Homeopathy has turned out to be palliative only at the following cases (Table 5):

- i. Localized tumor disease (N0, M0): 7 cases
  - a. Advanced illness (from phase II onwards): 22 cases
  - b. Non-determined phase cases: 5 cases

**Table 5:** Cases in which homeopathy has turned out to be only palliative.

Sex/Age	Tumor (Phase)	Common Treatment and Others
F/47	Endometrial adenocarcinoma (IV)	Cht. And Rt.
F/51	Breast adenocarcinoma (II)	Surgery+ Rt.
F/62	Relapsed breast adenocarcinoma	Surgery+ Cht.
F/57	Breast adenocarcinoma (II)	Surgery, Rt., Cht., hormonotherapy
F/44	Cavum Ca. (IV)	Rt., Cht., rehabilitation
F/51	Breast adenocarcinoma (I)	Surgery+ Cht.+ decoding
F/42	Ovarian Ca. (I)	Surgery+ Cht.+ decoding
F/64	Ductal breast Ca. (III)	Surgery+ Cht.
M/12	Metastatic paraganglioma	Cht.+ lifestyle change
F/59	Breast adenocarcinoma (IV)	Surgery+ Cht.+ Rt.+ lifestyle change
M/59	Pancreas adenocarcinoma (IV)	Rt.+ Cht.
M/66	Cholangiocarcinoma (IV)	Cht.+ dexametasone+ raw food diet
F/55	Lung Ca. (I)	Cht.
F/56	Pancreas Ca. (III)	Surgery+ Cht.
F/64	Breast adenocarcinoma (III)	Surgery+ Cht.
M/76	Rectal Ca. (I)	Surgery+ Cht.
F/85	Colon Ca. (III)	Surgery, Cht.+ antidepressants
F/11	Wilms tumor (I)	Surgery+ Cht.

F/57	Papillary serous tumor (IV)	Surgery
F/41	Breast adenocarcinoma (I)	Surgery, Cht., Rt., hormonotherapy
F/52	Ductal breast Ca.	Surgery, Cht., Rt.
F/54	Cervical Ca. (IV)	Surgery, Cht., Rt.
F/67	Lung Ca.	Cht., corticosteroids
M/33	Acute myeloid leukemia	Cht. + bone marrow transplant
M/10	Multifocal epithelial hepatoblastoma	Surgery and hepatic transplant
F/51	Ductal breast Ca. (I)	Surgery
M/82	Mucinous intestinal tumor	Palliative Cht.
M/64	Colon Ca. (IV)	Surgery+ Cht.
F/48	Lung adenocarcinoma (III)	Cht., dexametasone, antidepressants
M/73	Prostate adenocarcinoma (II)	Surgery
F/56	Ductal breast Ca. (II)	Surgery, Cht., Rt.
F/41	Ductal breast Ca. (III)	Surgery, Cht., hormonotherapy, dexametasone
M/47	Relapsed glioblastoma multiforme	Rt. Cht., antiepileptics
F/67	Lung Ca. (III)	Palliative Rt.

- ii. Homeopathy has not worked in the following cases (Table 6):

**Table 6:** Cases in which homeopathy has not worked.

Sex/Age	Tumor (Phase)	Common Treatment and Others
F/47	Colon Ca. (III)	Surgery+ Cht.
F/56	Ductal Breast Ca. (I)	Surgery+ Cht., Rt.
M/72	Prostate Adenocarcinoma	Surgery
M/62	Pancreas Ampullary (II)	Surgery

- a. Localized tumor disease (N0, M0): 1 case
- b. Advanced illness (from phase II onwards): 2 cases
- c. Non-determined phase cases: 1 case (Table 7)

**Table 7:** Cases in which homeopathy has turned out to be only palliative.

Sex/Age	Tumor (Phase)	Common Treatment and Others
F/39	Ductal breast Ca. (I)	Surgery, Cht., Rt., tamoxifen, goserelin
F/58	Infiltrated ductal Ca. (II)	Surgery+ Cht.
M/63	Renal Ca. (IV)	Surgery+ Cht.
F/49	Infiltrated ductal Ca. (I)	Surgery
F/55	Hepatic Ca. (III)	Cht.
M/62	Pancreas Ampullary (II)	Surgery

- iii. Efficacy estimation based on the doctor:
  - a. Contributes to control the tumor disease (at the actual moment, free of illness patient with biopsy, image, scoreboards, endoscopy, etc. records): 22 cases.
  - b. Contributes only to palliate the effects of the disease or treatment (chemotherapy and radiotherapy), quality of life, tolerance to adverse effects: 34 cases.
  - c. Dead patients: 4 cases.
  - d. Cannot yet be established if the treatment works: 5 cases.
  - e. Treatment does not work: 4 cases.
- iv. Effectiveness estimation based on the patient:
  - a. Has helped to control and improve my quality of life during the treatment: 55 cases.
  - b. Has not helped at all: 5 cases.
  - c. Without opinion: 5 cases.

**Used homeopathic medicines**

**1) Constitution based medications:**

- A. Natrum Muriaticum: 9 cases.
- B. Pulsatilla: 8 cases.
- C. Lachesis: 4 cases.
- D. Calcarea Carbonica: 4 cases.
- E. Veratrum: 2 cases.
- F. Staphisagria: 8 cases.
- G. Samarium: 1 case.
- H. Alumina: 1 case.
- I. Germanium: 1 case.
- J. Ustilago: 1 case.
- K. Sepia: 8 cases.
- L. Aurum Metallicum: 6 cases.
- M. Ferrum Phosphoricum: 3 cases.
- N. Aconitum: 3 cases.
- O. Sulphur: 2 cases
- P. Aranea Diadema: 1 case.
- Q. Silicea: 1 case.
- R. Ignatia: 1 case.
- S. Argentum Nitricum: 1 case.

**2) Medicines in relation to the tumor disease:**

- A. Conium Maculatum: 14 cases.

- B. Phytolacca: 10 cases.
- C. Kalium Carbonicum: 4 cases.
- D. Chelidonium: 3 cases.
- E. Hydrastis Canadensis: 3 cases.
- F. Asteria Rubens: 2 cases.
- G. Rhododendron: 1 case.
- H. Carcinosinum: 8 cases.
- I. Thuya: 9 cases.
- J. Kalium Bichromicum: 3 cases.
- K. Calcarea Phosphorica: 3 cases.
- L. Ruta: 2 cases.
- M. Carbo Animalis: 2 cases.

**3) Table 8 shows the medicines used with palliative purpose for:**

**Table 8:** Medicines used with palliative purpose.

Arsenicum Album	13
Phosphorus	9
China	7
Phosphoricum Acidum	6
Calendula	4
Causticum	3
Natrum Sulphuricum	1
Muriaticum Acidum	1
Ipecacuana	4
PAC*	9
Nux Vomica	16
Lycopodium	7
Radium Bromatum	7
Arnica	5
Hypericum	4
Apis	3
Colocyntis	1
Pyrogenium	1
Belladonna	1

- A. Radio dermatitis
- B. Mucositis
- C. Nauseas and vomits
- D. Weakness
- E. Sadness
- F. Fear
- G. Swelling

- H. Post-operative
- I. Anemia
- J. Leukopenia
- K. Thrombocytopenia
- L. Helps to die
- M. Dyspnea

## How can we know, with accuracy, the effectiveness of our intervention?

To us, homeopaths, can be reproached that we do not publish our results, which is true, we barely do it. The purpose of the homeopathy associations and academies, is to offset this reality raising awareness amongst our colleagues of the importance of recording the cases homogenously and of publishing clinical results, at least, in our magazines. Due to the nature of the homeopathic practice, we must also explore new designs to contrast our results. We must change the subjective assessment of our work with validated tools from the general medicine sphere such as the life quality tests proposed by the EORTC (European Organization for Research and Treatment of Cancer) and other tools proposed by the ECH (European Committee for Homeopathy). In one word, use the common language of science to contrast our results. We prepare ourselves to search a respectful collaboration with other medicine professionals that help patients from a conventional perspective. This is the propose of integrative medicine: the patient improves and the science makes progress [1-6].

## Conclusion

At the presented sample, we are conscious that at the time of collecting the data, the free of illness patients still have a long journey of regular medical checks and that, at worse, they might present relapses of their tumor disease. Our purpose as doctors is to be available at this stage of the patients' life. Nowadays, one of the cancer treatments objectives, in those cases in which the illness cannot be cured, is to make the disease a chronic one. In our sample, there are two patients that present this situation and undoubtedly, homeopathy along with other procedures (palliative chemotherapy, hormonotherapy, etc.) helps them to get along with their lives.

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