

Key Notes



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Your health E-newsletter from Yuma Homeopathy

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A “keynote” in homeopathy is a unique symptom that can point to a certain homeopathic remedy. For example, someone who has a condition with piercing, sharp radiating pains might need *Spigelia*, a remedy made from the woodland pinkroot plant.



In this issue...

Family health tip *Do antidepressants work?*

Homeopathy case *Homeopathy for depression*

Did you know? *Homeopathy costs less: cost-benefit analysis of respiratory illness treatment*



Family health tip

Do antidepressants work? (from *Medscape*, newsletter of the American Medical Association)

The latest attempt to trick ourselves into believing that the past few decades of prescribing antidepressants has been an effective strategy comes from one of the most prestigious medical journals, *The Lancet*. The published meta-analysis' basic finding—since repeated all over the

press—is that antidepressants work because they are all better than placebo. What they don't tell you is that they are hardly any better than placebo, and that the only drugs with clinically meaningful benefits are the ones that are used rarely today, the older tricyclic agents.

The authors looked at 522 randomized clinical trials of 21 antidepressants versus placebo in Major Depression Disorder (MDD) in over 100,000 patients. Overall, all antidepressants were more effective than placebo. In the "network" analysis, which allows for the direct and indirect comparison of multiple treatments, the authors report the lowest direct efficacy for reboxetine (odds ratio [OR], 1.36) and the highest efficacy (OR, 2.13) for the tricyclic antidepressant amitriptyline.

If these results were accepted at face value, we would conclude that clinicians should feel confident that all antidepressants are effective in MDD in general, and they would lean towards the agents listed above that were "more" effective, and against those that were "less" effective. Unfortunately, that isn't the case.

On the positive side, the authors included much unpublished data (52% of all of the studies). Because of this, their results are not limited to or mostly influenced by the published literature, which is known to be markedly biased in favor of antidepressant drug efficacy. (This is because pharmaceutical companies usually have not published negative studies of antidepressants.)

On the negative side, nowhere in this dense and detailed paper did the authors report the absolute effect size of benefit with antidepressants on the depression rating scales used. Instead, they provide odds ratios, which are relative effect sizes over placebo. A drug might be 50% better (an OR of 1.50), but this could be a difference between 2 points with drug and 3 points with placebo on a depression rating scale (a tiny and clinically meaningless effect). Or it could be a difference between 20 points with drug and 30 points with placebo on the scale (a huge and clinically meaningful effect). In other words, how much better did patients get?

[Additional Data Reveal Study's Actual Findings](#)

The real truth isn't found within the published paper but rather within a busy table on page 142 of the online appendix. It is here where the authors report what we want: the actual difference between drugs and placebo, before and after treatment, on the depression rating scales. Here we see that the Cohen's d standardized mean difference effect sizes range from a low of 0.19 to a high of 0.62 with amitriptyline. Thus, amitriptyline exceeds the clinically meaningful threshold of 0.50, with a traditional meta-analytic method. No other drug does so, with the closest second place being fluvoxamine, with a Cohen's d value of 0.44.

Looking at all of the agents, 10 drugs have Cohen's d values less than 0.30, which is very small and clinically meaningless, whereas four have effect sizes from 0.30 to 0.34. Thus, 74% (14/19) of antidepressants clearly have little or no clinically important benefit in this analysis (for some reason, no data are provided in this table with two of the drugs). Four drugs have effect sizes of 0.37-0.44, and as noted, one agent exceeds the 0.50 threshold (amitriptyline).

Perhaps a clearer conclusion than anything else is the well-proven fact that the tricyclic antidepressants are more effective than newer agents (there were no monoamine oxidase inhibitors in this meta-analysis).

The main point to conclude from the above description is that almost all antidepressants had small, clinically meaningless benefits. And only one agent exceeds the threshold of a Cohen's d effect size of 0.50 or greater, which can be considered clinically meaningful benefit.

The Honest Conclusion

In short, one has to go to page 142 of the appendix to find the real result of all this effort: This meta-analysis confirms the results of prior meta-analyses which found that antidepressants have small overall effects in "MDD" and do not provide major clinical benefit in general.

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This conclusion puts aside the more important issue of the scientific validity of the MDD concept itself, which the authors ignore completely. Our profession seems devoted to believing that antidepressants "work." They don't, at least not for "MDD." Maybe the problem is with "MDD"—which is a heterogeneous clinical syndrome that is not valid scientifically as a single diagnosis^[5]—rather than with antidepressants. In other words, these drugs do something biologically, but maybe we aren't giving them to the right clinical group of patients to see benefits.

The only clear take-away from this analysis, besides confirming the prior analyses that antidepressants are not very effective, is that amitriptyline is the most effective antidepressant tested, and apparently it's the only one with clinically meaningful benefit. That's it.

[Adapted from: Ghaemi, N, June 13, 2018: <https://www.medscape.com/viewarticle/897878>]



Homeopathy case

Homeopathy for a 44-year-old woman with depression

"I'm a mess. I'm taking Prozac for outright depression. I have had days that I call black-hole days when I couldn't even cope with making a grocery list much less get to the store. Low, low energy.

I've had five miscarriages and had a lot of grief. I had a real attachment to bringing a second child into the world.

On my worst days I'd feel immobilized, scared to death, bordering on panic attacks... helpless and powerless, filled with anxiety and despair. I just couldn't stop my mind. I was not able to be present. I was stuck in this mindset of "What should I do? What should I do?" Unable to make a decision.

On bad days, I feel so, so tired. I've had so many people check my thyroid. Oppressed by fatigue. I wanted to go in a hole, wrap myself in a blanket, and pull the floorboards over me. That's when I went to doctor and asked for antidepressants. I was laying on a sunspot on kitchen floor. I could have laid there all day. I felt so tired that I would close my eyes at stoplights.

I'm very shy, introverted. My energy is drained by being around people for too long. Shallow talk zaps and bores me. I freeze up in social situations... talk too much. Nervous prattle. I feel embarrassed. I want to be liked.

Intense would describe me. I have big feelings, big desires, big ideas. I don't stay tepid. I get foul-mouthed and fairly dramatic when I'm angry. Lots of gesticulating.

I have to be right. 'Opinionated' is a word many people would use to describe me. Sort of a narrowness. I can argue to the death when I know I'm not right. I somehow protecting myself that way. If I weren't right, I would feel belittlement, embarrassment, shame.

I've always had a spiritual orientation. I was raised Methodist, but knew it didn't fit for me early on. I had spiritual experiences as child. The rapture. No one else in the family had those convictions, experiences. Those small boxes of religion didn't work for me".

Musculoskeletal: Large cyst at base of middle finger on left hand; stress in upper neck and back; severed right ACL in skiing accident; right bunionectomy. Bone structure in feet is not good resulting in foot pain.

Head: Most chronic physical symptom is a ten-year history of headaches. Pain all around head with intense pain focused around left eye. Accompanied by sinus congestion and stiffness in neck. Better from heat, Tai chi, meditation, massage, and anti-inflammatories.
Gynecological: Dysmenorrhea, five miscarriages with D and Cs; recurrent ovarian cysts; adenomyosis.

She was prescribed a daily high-potency dose of a homeopathic remedy.

Follow-up After Seven weeks

"I am doing well. I cut my Prozac in half to twenty milligrams. My mood has definitely improved. My dream activity has been incredible. The cyst on my left hand is no longer painful and it has

reduced in size. The doctor told me before he'd never seen one so large. My last period was only two days. That's amazing. My headaches are only minor. I feel upbeat, confident, and positive. An overall, general sense of well-being. I'm tripping lightly and it feels great. My security buttons aren't being pushed. I'm able to trust in God, a higher power. Those are really big strides for me.

I don't feel that indecisiveness is a problem either. My confidence has come back. Before I felt conflicted about whether to go back to work or not. It all cleared up. I'm not going back to work. End of story. I also feel a lot clearer about interacting with my husband's parents.

I feel less pushed by duty. I'm not making to-do lists anymore. My new mantra is 'I don't have to do anything if I don't want to. And it's all working fine. I'm just walking lightly.

My confidence is coming back in relationships, too. I am feeling less isolated and I no longer need to engage people in conversation. I'm learning about listening. I never realized how wonderful the power of silence can be. My husband is expressing appreciation for how nonreactive, supportive, loving, compassionate I am".

She was instructed to take the remedy twice a week for one month then once a week.

After three months

"I'm struggling to maintain some sanity. My husband is quitting his job. Our son is picking up on our financial problems. The marriage is in jeopardy but I don't want to leave my husband. I have been taking the remedy once a week. My mood is okay.

The cyst on hand is totally pain free. I have absolutely pain-free menstruation. Some sexual dreams with my husband. Memories of having sex with other men when I didn't want to. I'm doing work with my counselor about that and trying to understand what I want from husband and be able to communicate that to him.

She was instructed to take the remedy once a week during the current stress, then one dose every two weeks.

After ten months

"I feel like the remedy has worked beautifully. I'm taking it twice a month. I'm feeling fine. No pain with menstruation. The cyst on finger doesn't hurt. My moods and energy are good. There is no fatigue. I haven't been sucking air at all- just haven't had the need. I am enjoying taking the dog out for fast walking and fresh air. I go out every night and toss some food over the fence to the creatures- skunks, deer."

She was instructed to take a single dose of the remedy as needed.

Thirteen months later

“I’m still doing really well. Since I talked to you, I’ve taken the remedy twice during some anxious moments. I felt an immediate bounce both times. No gynecologic symptoms. I recently had a very early miscarriage from an unexpected pregnancy. It’s the most normal miscarriage I’ve had. We’ll be moving soon.”

[Adapted from Ullman, J and R Ullman, 2001: <http://healthyhomeopathy.com/oldsite/cases/a-case-of-depression/>]



Did you know?

Homeopathy costs less: cost-benefit analysis of respiratory illness treatment

A study conducted in Lucca, Italy revealed that costs of pharmacological therapy specific for respiratory diseases were reduced by 46.3% in the first year and by 47.5% in the second year of homeopathic treatment. Reduction in general drug costs during homeopathic therapy was 42.4% in the first year and -49.8 in the second year. Costs for patients affected by chronic asthma showed a reduction in expenses of 71.1% for specific medicines relative to the group in homeopathic treatment vs. an increase of 12.3% in the group treated only with conventional drugs after the first year of follow-up and, respectively, a reduction of -54.4% for homeopathic treatment vs. +45.2% after the second year. For patients with recurrent respiratory infections we found a reduction of 35.8% in the homeopathic group in the first year, compared to an increase 8.6% of costs for specific drugs in the control group; in the second year the respective figures were -43.6% versus +7.8% in the control group.

CONCLUSIONS:

Homeopathic treatment for respiratory diseases (asthma, allergic complaints, Acute Recurrent Respiratory Infections) was associated with a significant reduction in the use and costs of conventional drugs. Costs for homeopathic therapy are significantly lower than those for conventional pharmacological therapy.

Adapted from: <https://www.ncbi.nlm.nih.gov/pubmed/19135953>

