



To Evaluate The Role Of Individualized Homoeopathic Medicine In Cases Of Lower Back Pain In Adult Population By Using A Numerical Pain Rating Scale:A Case Series Study

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Abstract: Background -Lower back pain (LBP) is one of the most common musculoskeletal complaints worldwide, significantly affecting the Daily life and individual's functional capacity especially within the adult population. It is a leading cause of disability, absenteeism from work, and healthcare utilization. Conventional management often includes analgesics, physiotherapy, and sometimes invasive interventions, which may offer only temporary relief or come with potential side effects. In recent years, there has been growing interest in complementary and alternative medicine approaches, such as homoeopathy, for managing chronic pain conditions like LBP.

Homoeopathy is a holistic system of medicine that emphasizes individualized treatment based on the totality of symptoms and the unique constitution of the patient. Individualized homoeopathic medicine aims not only to alleviate physical symptoms but also to address underlying emotional or psychological factors that may contribute to pain perception.

This case series study was conducted with 30 cases of lower back pain, selected through stratified random sampling from the OPD/IPD of a homoeopathic medical college and hospital, peripheral OPDs, etc. Each case was assessed and treated with individualized homoeopathic remedies. The use of the Numerical Pain Rating Scale (NPRS), a simple and reliable tool, allows for objective assessment of pain intensity and helps evaluate treatment outcomes.

Out of the 30 patients, 24 (80%) showed significant reduction in NPRS scores following individualized homoeopathic treatment indicating an improvement in lower back pain and overall wellbeing. However, 6 patients (20%) did not show any significant improvement in their lower back pain despite receiving individualized homoeopathic treatment.

This case series study demonstrates that individualized homeopathic medicine may play a significant role in the treatment of low back pain.

Index Terms – Case series study, Homoeopathic treatment, Homoeopathy, Individualized remedies, Low back pain

I. INTRODUCTION

Low back pain (LBP) is a prevalent musculoskeletal disorder and a leading cause of disability worldwide, affecting individuals across all age groups and socioeconomic backgrounds.^[1,2] It is estimated that up to 80% of people will experience at least one episode of LBP in their lifetime.^[3] The condition is defined as pain, muscle tension, or stiffness localized below the costal margin and above the inferior gluteal folds, with or without leg pain.^[4]

LBP is typically classified based on duration into acute (<6 weeks), subacute (6–12 weeks), and chronic (>12 weeks) forms.^[5] While most cases are non-specific and self-limiting, a significant proportion can become chronic, resulting in considerable functional impairment and reduced quality of life.^[6] The etiology is often multifactorial, involving mechanical factors such as muscle strain, ligament sprain, and intervertebral disc degeneration, as well as lifestyle and occupational risk factors including physical inactivity, obesity, poor posture, and repetitive lifting.^[7,8]

Specific causes of LBP, though less common, include conditions such as herniated discs, spinal stenosis, vertebral fractures, infections, and malignancies.^[9] The economic burden of LBP is substantial, encompassing direct healthcare costs and indirect costs due to lost productivity and work absenteeism.^[10] Given its widespread impact, LBP remains a critical public health concern requiring comprehensive management strategies and preventive measures.

Back pain is widespread in the adult population. Some studies have shown that up to 23% of the world's adults suffer from chronic low back pain. This population has also shown a one-year recurrence rate of 24% to 80%. Some estimates of lifetime prevalence are as high as 84% in the adult population.

However, the prevalence is much less apparent in the pediatric literature. One Scandinavian study demonstrated that the point prevalence of back pain was approximately 1% for 12-year-olds and 5% for 15-year-olds, with a cumulative incidence of 50% by age 18 for females and age 20 for males. An extensive systematic review demonstrated an annual rate of adolescents suffering from back pain of 11.8% to 33%.^[11]

In addition to its high prevalence, low back pain is recognized for its complex pathophysiology and varied clinical presentation. Most cases are non-specific, where no clear underlying pathology can be identified, which makes diagnosis and treatment particularly challenging.^[12] Advances in imaging techniques have improved diagnostic accuracy, but routine imaging is generally discouraged in non-specific LBP due to limited clinical benefit and potential for harm from overdiagnosis.^[13]

Psychosocial factors—such as depression, anxiety, job dissatisfaction, and social stress—have also been shown to play a significant role in the development and persistence of chronic low back pain.^[14] As a result, the biopsychosocial model is increasingly emphasized in both the evaluation and management of LBP, advocating for a more holistic, patient-centred approach.^[15]

Treatment strategies for LBP depend on the underlying cause and duration of symptoms. First-line management often includes patient education, physical activity, and non-pharmacologic therapies such as physiotherapy and cognitive behavioural therapy. Pharmacological treatments, including nonsteroidal anti-inflammatory drugs (NSAIDs), may be used in select cases, but opioids are generally avoided due to the risk of dependency and limited long-term efficacy.^[16]

Homoeopathy, based on the principle of "law of similimum," offers an individualized approach to treatment, where remedies are prescribed according to the unique symptoms and constitutional make-up of each patient. This personalized treatment approach holds potential in managing low back pain without the adverse effects commonly associated with conventional treatments.

The objective of this study was to assess the role of individualized homoeopathic medicines in the treatment of Low back pain. By observing and analyzing a series of 30 cases, this study aimed to explore the effectiveness of homoeopathic interventions in improving the symptoms of low back pain, while also considering the patients who did not respond to treatment. The results of this case series could provide insights into the scope and limitations of individualized homoeopathic treatment for a Low back pain.

3.methodology

Study Setting - OPD, Peripheral OPD & Camps organized at Nashik, Maharashtra.

Selection of samples: - 30 cases.

Inclusion criteria -

1. Adult population.
2. Both sexes male and female.
3. Peoples having low back ache more than 3 months.

Exclusion criteria: -

1. Pregnancy and lactating women's
2. Back pain referred from other organs.
3. Malignancy and Irreversible pathological changes.
4. RTA patients

Study design: A Case series study

Intervention: - With Homoeopathic medicine.

Selection of tools:

History of patient

Homeopathic software RADAR

Numerical pain rating scale (NPRS)

Data Collection:

History was taken from patient itself, parents, and from physician's observation.

Statistical Techniques and Data analysis:

The data generated is quantitative type. Therefore, proportion is used for data analysis. To evaluate the effect of individualized homoeopathic medicine in the management of Low back pain students paired t -test is used.

Ethical issues, if any: Ethical clearance was obtained from the ethical committee of the institute.

1. OBSERVATIONS AND RESULTS

Charts/Figures/Diagrams

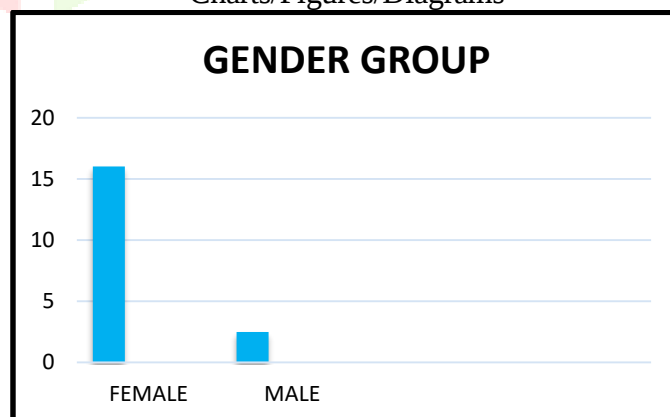


Figure 1: Gender wise distribution in case study

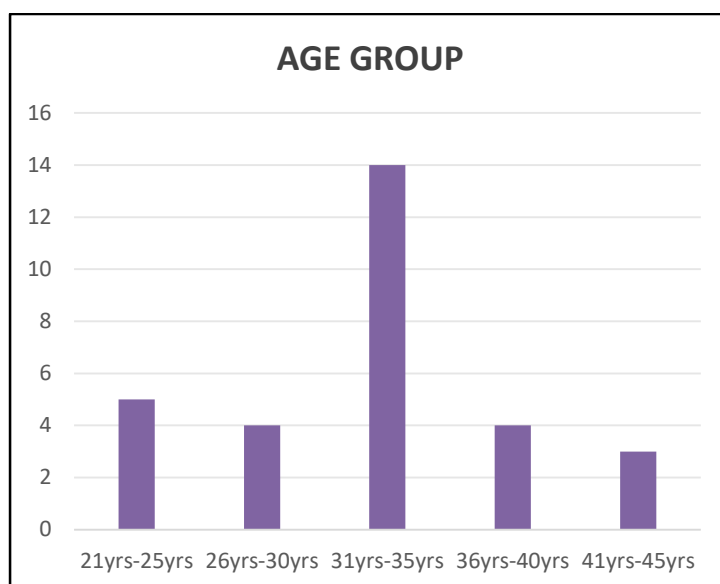


Figure 2: Age distribution in case study

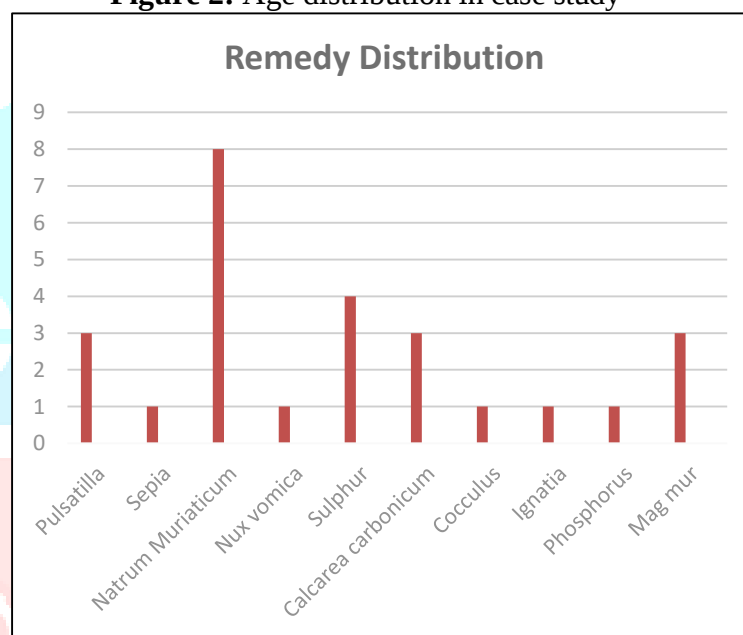


Figure 3: Homoeopathic prescription / Medicine

2. STASTICAL ANALYSIS

Student's t - test was applied for statistical analysis. Total of 30 patients (07 male and 23 females) were observed and t - test was applied. The change in the severity of lower back pain, scored with the Numerical pain rating scale, assess the improvement of the patients. **Calculated value of t (21.93) was greater than table value of t (1.721)** which is Highly significant. Therefore, we conclude that severity of lower back pain can be reduced by the use of homoeopathic medicines.

3. DISCUSSION

Low back pain is a silent epidemic and a major health problem of modern society. WHO has labeled the first decade of the third millennium as decade of campaign against musculoskeletal disorders.

Low back pain is an important clinical, social, economic, and public health problem affecting the population indiscriminately. It is a disorder with many possible etiologies, occurring in many groups of the population, and with many definitions.

The present case series aimed to evaluate the role of individualized homeopathic medicine in the management of lower back pain (LBP) among adults, using the Numerical Pain Rating Scale (NPRS) as a tool for assessing changes in pain intensity. The results observed across the included cases suggest a positive trend in pain reduction following individualized homeopathic treatment, thereby indicating a potential role of homeopathy as a complementary approach in managing LBP.

Individualized homeopathic prescriptions, based on the totality of symptoms and constitutional characteristics, were administered in this study. The rationale behind using individualized remedies—as opposed to generic or protocol-based prescribing—is rooted in classical homeopathic principles, which

emphasize the uniqueness of each case. Notably, patients showed a gradual but consistent decline in their NPRS scores over the course of treatment, which may indicate a beneficial therapeutic effect.

In the present study, demographic analysis revealed that the most affected age group was **31–40 years**, accounting for a significant proportion of the total cases. This finding is consistent with existing literature, which identifies this age group as particularly vulnerable to lower back pain (LBP) due to factors such as peak physical activity, work-related stress, sedentary lifestyle, prolonged sitting or standing, and inadequate posture during occupational tasks. Individuals in this age bracket are often engaged in either demanding physical labor or desk-bound jobs, both of which are associated with the onset or aggravation of LBP.

Gender distribution showed a **higher prevalence in females**, with **23 out of 30 patients (76.7%)** being women, compared to **7 males (23.3%)**. This observation may reflect both biological and sociocultural factors. Hormonal fluctuations, pregnancy, and postural strain due to household responsibilities may contribute to increased susceptibility among women. Additionally, women are more likely to seek medical attention for pain-related complaints, potentially leading to their overrepresentation in clinical studies.

The sex-based difference in pain perception and reporting may also be influenced by psychosocial elements such as coping strategies, health-seeking behavior, and pain tolerance thresholds. These findings highlight the need for gender-sensitive approaches in both diagnosis and treatment of lower back pain.

This case series study was conducted to evaluate the effectiveness of individualized homoeopathic treatment in managing lower back pain in adults. A total of 30 adult patients presenting with varying degrees of lower back pain were included in the study. Each patient received homoeopathic medicines prescribed on the basis of individualized case analysis, taking into account their physical, mental, and emotional symptoms. Out of 30 patients **24 patients (80%) showed improvement** in their pain scores, indicating a positive response to individualized homoeopathic treatment... Patients reported better mobility, reduced stiffness, and improved quality of life. Improvement was not only subjective (as per patient feedback) but also objectively noted through consistent score reductions on the NPRS. Some cases showed **dramatic pain relief**, especially in patients with acute flare-ups of chronic conditions. While **6 patients (20%) showed no significant improvement** during the study period. These patients showed **little to no change** in their pain levels over the treatment course. Despite individualized prescriptions, these cases did not respond favorably during the study period, indicating a possible need for either longer treatment duration, revised case analysis, or multimodal management.

This study suggests that homoeopathy, may be effective in treating Lower back pain. However, further studies are necessary to confirm these findings and refine treatment strategies for better therapeutic outcomes.

4. CONCLUSION

The findings of this case series study suggest that individualised homoeopathic treatment can be an effective therapeutic approach for managing lower back pain in the adult population. A significant improvement was observed in 80% of the **cases**, as measured by the Numerical Pain Rating Scale (NPRS), indicating a reduction in pain intensity and improvement in overall patient well-being. While this case series provides promising preliminary evidence, larger studies with control groups, longer follow-up periods, and standardized outcome measures are recommended to confirm these findings and better establish the scope and limitations of individualised homoeopathic treatment in musculoskeletal disorders.

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Conflict of Interest: none

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