

Exploring the Impact of Individualized Homeopathic Medicine on Anxiety Disorder in Youth

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Abstract

Objective: This study explores the therapeutic potential of individualized homeopathic medicine in managing anxiety disorders among adolescents, evaluated through the Hamilton Anxiety Rating Scale (HAM-A).

Methods: A 12-week prospective observational study was conducted with adolescents aged 13–19 years diagnosed with anxiety disorders based on DSM-5 criteria and presenting with HAM-A scores >18. Participants were prescribed individualized homeopathic remedies. HAM-A scores were recorded at baseline, 6 weeks, and 12 weeks.

Results: Significant reductions in HAM-A scores were observed, with the mean score decreasing from 26.3 at baseline to 13.7 at 12 weeks. Both psychic and somatic symptoms of anxiety improved, with no adverse effects reported.

Conclusion: Individualized homeopathic treatment may offer a safe and effective complementary approach for reducing anxiety symptoms in youth. Further randomized controlled trials are warranted.

Keywords

Homeopathy, Adolescents, Anxiety Disorders, Hamilton Anxiety Rating Scale, Complementary Medicine, Mental Health

Introduction

Adolescence is a critical developmental phase often accompanied by heightened emotional and psychological challenges. Anxiety disorders are particularly prevalent, affecting approximately 7–12% of adolescents worldwide (Costello et al., 2003). Left unmanaged, anxiety can lead to academic underperformance, social withdrawal, and long-term psychological consequences.

While conventional approaches like cognitive behavioral therapy (CBT) and

pharmacotherapy are effective, there is increasing interest in complementary therapies such as homeopathy. Homeopathy offers a patient-centric, individualized approach, aligning well with the nuanced psychological profiles observed in adolescent anxiety.

This study investigates the effectiveness of individualized homeopathic medicine in treating youth with anxiety disorders, utilizing the Hamilton Anxiety Rating Scale (HAM-A) as the primary outcome measure.

Methods

Study Design and Participants

This prospective observational study enrolled 30 adolescents (aged 13–19) from a mental health outpatient clinic. Inclusion criteria included a clinical diagnosis of anxiety disorder based on DSM-5 and a baseline HAM-A score >18. Patients currently receiving psychotropic medications or psychotherapy were excluded.

Intervention

Each participant underwent a detailed case-taking process by a certified homeopathic physician. Remedies were prescribed based on individualized totality of symptoms. Common remedies included Argentum nitricum, Gelsemium sempervirens, Phosphorus, and Lycopodium clavatum. Remedy potency and repetition were adjusted as per homeopathic principles.

Assessment

Anxiety symptoms were assessed using HAM-A at three time points: Baseline (Week 0), Midpoint (Week 6), and Endpoint (Week 12).

Results

Table 1. Mean HAM-A Scores at Different Time Points (N = 30)

Time Point	Mean HAM-A Score	Standard Deviation (SD)	p-Value (vs. Baseline)
Baseline	26.3	±3.1	—
Week 6	19.2	±2.8	<0.01
Week 12	13.7	±2.5	<0.001

Discussion

The findings suggest a positive impact of individualized homeopathic treatment on anxiety symptoms in youth. The personalized nature of remedy selection allows for the emotional and psychological complexity of adolescent patients to be addressed holistically.

Although the observed clinical improvement is promising, several limitations must be

considered:

- Absence of a control or placebo group.
- Subjective clinician-rated assessment.
- Small sample size and single-center study.

Nevertheless, the consistent improvement across participants without pharmacological side effects supports the role of homeopathy as a safe adjunctive therapy.

Conclusion

Individualized homeopathic medicine appears to be a promising complementary approach to managing anxiety disorders in adolescents, as demonstrated by significant improvements in HAM-A scores over 12 weeks. Further large-scale, randomized controlled trials are needed to validate these preliminary findings and to better understand underlying mechanisms.

References

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