

Patients' Preference towards Homeopathy Medicine with reference to Coimbatore District, Tamilnadu

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Abstract

Like allopathic medicine, homoeopathy is regarded as the most popular and secure alternative medical approach. It was first used by a German physician who felt that a medication's smallest dose might treat symptoms in a way that was comparable to other traditional kinds of care. In the modern day, patients have access to a wide range of alternative medical treatments in addition to the traditional allopathic therapy. Of these, homoeopathy is one of the safest and most extensively used alternative medical treatments in use today. a system wherein physicians and other health care providers—including nurses, chemists, and therapists—treat illnesses and their symptoms using medication, radiation, or surgery. Also known as Western medicine, orthodox medicine, mainstream medicine, biomedicine, and conventional medicine. The objectives of the study are to determine the people satisfaction towards homeopathic medicine. A pretested questionnaire containing personal information and study related question was used to collect the data. Homoeopathic medications are widely used because of their great effectiveness, affordability, superior taste, few side effects, and historical usage.

Keywords: Homeopathy, Patient Satisfaction, Integrative medicine, Attitude, India.

INTRODUCTION

Research attention has always been in the area of patient satisfaction in finding out how satisfied patients are with their care in a medical practice environment may help to clarify the standard of care given. A longer history of improving health status has been linked to greater levels of patient satisfaction. While the relationship between improved health and patient satisfaction has not yet been established,¹ patient satisfaction has been a significant predictor of community engagement, doctor-patient interactions, treatment compliance, and health outcomes.

Over the past ten years, reports have indicated that patient satisfaction is rather high among patients who attend homoeopathic settings worldwide, including Iran, Norway, Switzerland, Brazil, India, and most European Union nations (i.e., Belgium, France, Germany, Italy, Portugal, and Spain). Research on homoeopathy has recently increased, with an emphasis on patient activation, patient-assessed chronic disease treatment, patient-centred care, and patient-centred care in Indian homoeopathic hospital settings. It has long been recommended that complementary and alternative medicine (CAM) be included into public health and conventional healthcare systems in industrialised nations.^{16, 17} The "CAMbrella" roadmap, which was recently designed, offers a framework for both qualitative and quantitative research and suggests key topics of study, such as public opinion on CAM integration models. The Indian government is currently working to mainstream Ayurveda, yoga, unani, siddha, homoeopathy, and amchi/sowa-rigpa/Tibetan medicine (AYUSH) through the creation of the National Policy on the Indian System of Medicine and Homoeopathy (ISM&H) in 2002 and the execution of numerous programmes.

Traditional methods life; enhance the standard of social and economic growth; protect cultural diversity; enhance local community development and health; and concentrate attention on healthcare facilities meant to promote the physical, mental, spiritual, and social well-being of people, the environment, and nature. Since its inception, it has prioritised patient-centred treatment above the disease-centred approach of traditional medicine, placing an emphasis on holistic health. It is a valuable and long-lasting resource for a variety of medical specialties; but, in order to ensure the effectiveness, safety, and calibre of health services and goods, its integration into the public health system needs to be accompanied by a sufficient scientific review procedure.³ Nonetheless, patient desire for the same is equally crucial to the growth and accomplishment of integrated services.

However, there is lack of studies assessing the preference of Indian patients for the integrated services. The study was the first local study to assess patients' demand of integrated medical services. We intend to assess: (1) preference for integrated services of the patients already availing services from homeopathy hospitals (part 1); (2) satisfaction of patients from integrated services (part 2); and (3) preference for integration where integrated service is not available (part 3). This paper presents the results of the part 1 study. The objective was to examine the knowledge, attitudes, and practice of patients toward homeopathy as well as to assess their preference for integration of homeopathy into mainstream health care.

LITERATURE REVIEW

Frederic Rouillon Patients seeking care with a homeopathic GP did not differ greatly in their socio-demographic characteristics but more so by their healthier lifestyle and positive attitude toward CAM. Further research is needed to explore the directionality of those associations and to assess the potential economic benefits of homeopathic management in primary care.

Bhupendra N Rasaily in India, complementary and alternative medicine (CAM) therapies, namely Ayurveda, yoga, unani, siddha, homeopathy and amchi/sowa-rigpa/Tibetan medicine (AYUSH), are being integrated into mainstream health care; however, public opinion on this integrated model has not been evaluated.

METHODOLOGY

The study is indented to understand the people's preference towards homeopathy medicine and their satisfaction. The study used as a survey method comprising of sample elements of 22 of respondents. The data was collected with a help of a questionnaire through google forms mailed to a randomly selected respondents comprising of patients, patients using homeopathy medicines and patients in Coimbatore.

Research Design:

A cross-sectional survey of patients visiting five integrated homeopathy clinics across Coimbatore district (i.e. Singanallur, Narasipuram, Kalapatti, Kuniyamuthur) was undertaken during April 2024. The clinics were selected using a simple random method and patients were selected using convenience sampling.

Sample Frame:

Included were patients aged 18 years and above, who had provided information consent to take part in the study. Excluded were patients who were too sick for consultation, unable to read patient information sheets or unwilling to participate.

Sample size:

Based on a margin of error of 5%, a confidence interval of 95%, an unknown population size, and an estimated response distribution of 50%, the required sample size was 50 (i.e. 5 participants per study centre). However, in order to improve the generalisability of the results, each site investigator was requested to obtain as many responses as possible within the stipulated time frame. As we obtained 22 responses, the margin of error was reduced to 2.5%

Survey instrument:

The 20-item questionnaire included four sections: sociodemographic information (section A), patient satisfaction following the integration of homeopathy into conventional health care (two questions; section B), and overall patient satisfaction following medical consultation (8 questions; section C). The questions under sections B-C used five-point Likert scale response sets (i.e. 1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree and 5 = strongly agree). No universally accepted standardised questionnaire in local Coimbatore was available for the purpose of this study. Hence, we obtained items for sections B and C from a self-administered questionnaire originally developed by Allam et al.²¹. The survey was modified with the authors' permission to ensure it portrayed a homeopathic perspective; it was then translated and back-translated independently by two translators in local Coimbatore, following standard procedures. The questionnaire was piloted on five patients in each clinic before widespread distribution to check the appropriateness of the wording. After little modification, as per the feedback from the pilot sample, the questionnaire was finalised. Following the distribution of patient information sheets and an explanation of the study objectives, written informed consent was obtained from all patients. The self-administered questionnaire was subsequently administered.

RESULT

The questionnaire was distributed to 50 patients, of whom, 22 returned the completed questionnaire, providing a final response rate of 44%.

Table 1: Sociodemographic profile of the survey respondents

<i>Characteristics</i>	<i>Percent(%)</i>
Age (years)	
18–30	100%
31–45	0
Gender	
Male	27.30%
Female	72.70%
Marital status	
Married	9.10%
Unmarried	90.00%
Education	
UG	31.80%
Graduate or above	68.20%
Monthly household income (Indian rupees)	
Less than 30 000	68.20%
More than 30 000	31.80%
Occupation	
Student	27.30%
Unemployed	9.10%
Treatment prefers	
Homeopathy	68.20%

Allopathy	31.80%
Reason to prefer	
No side effects	54.50%
Effectiveness	18.20%
All of these	27.30%
First- time usage	
Yes	45.50%
No	54.50%
Normally go to medicine	
Only sick	72.70%
Only needed	27.30%

Sociodemographics:

The age of the survey respondents was the participants mostly spanned the 18–30 years (n=22; 95%) age groups. Patients were mostly female (72.7%), unmarried (90.9%), had an education level of graduation or above (68.7%), and had a monthly household income of <20000 Indian rupees (68.2%), occupation of student (27.3%). People prefer Homeopathy (68.2%), their prefer only for No side effects (54.5%), No first-time using medicine (54.5%), People goes to medicine only for sick (72.7%) (Table 1)

Attitude towards Integration:

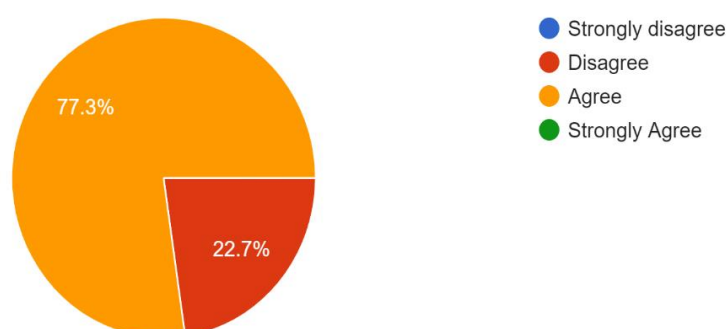
In-house referrals were compromised, with only agree (77.3%) admitted patients being referred by allopathic doctors to homeopathy physicians, and (68.2%) patients being referred to specialists or allopathic doctors by homeopathic physicians.

Satisfaction after Consultation:

Altogether 21 (99.8%) out of 22 patients disclosed their satisfaction following consultation with homeopathic physicians. Interestingly (54.5%) considered their encounters better than those with other doctors; while (45.5%) felt that their examination was careful and complete; while (54.5%) considered examination to be perfect. Fourteen (68.2%) believed that the homeopathic physicians knew everything the needed to know in order to treat them, and 11 (50%) deemed that their homeopaths knew how they themselves thought. Twelve (54.5%) patients were satisfied with the time given for consultation, Eleven (50%) indicated that the doctor listened to what they wanted him/her to do, and Eleven (50%) believed their doctor was honest.

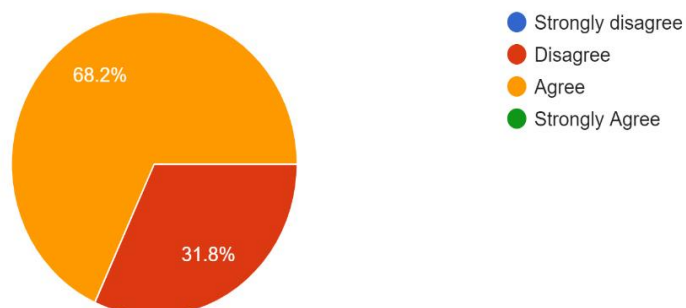
11.Prefer allopathic doctors to know about homeopathy

22 responses



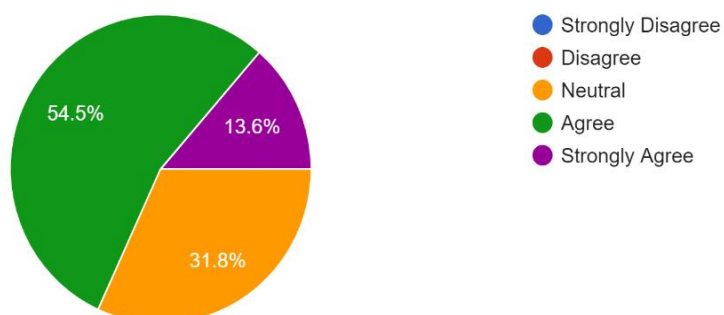
12. Prefer allopathic doctors to prescribe homeopathy

22 responses



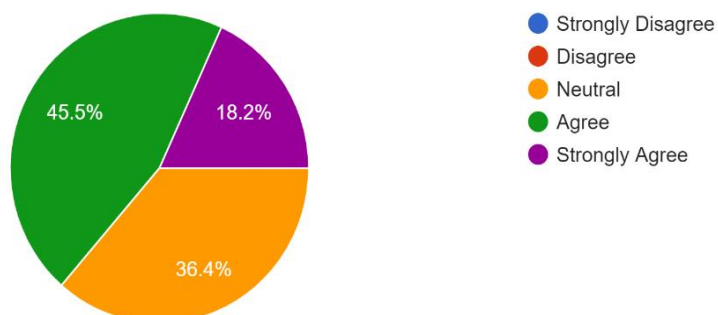
13. Consultation was a better one

22 responses



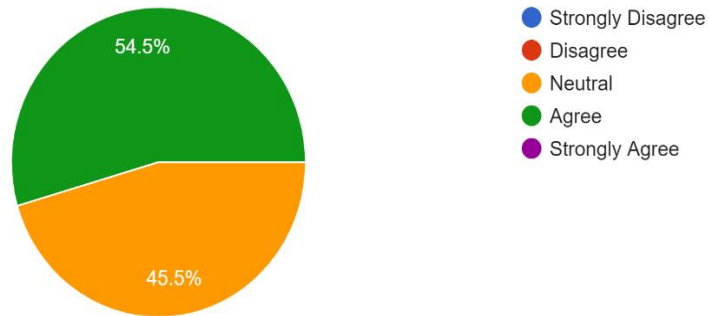
14. Examination was careful and complete

22 responses



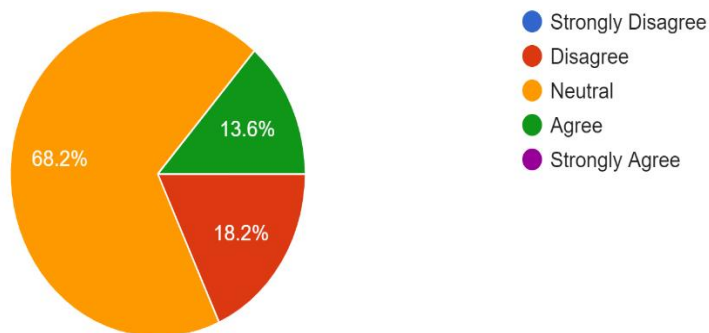
15.Examination was perfect

22 responses



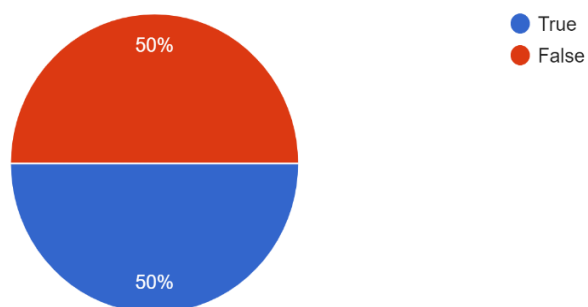
16.Doctor knew everything about me

22 responses



17.Doctor knew how I thought

22 responses



CONCLUSION

Reporting the surveys, patients expressed a high degree of satisfaction and were found to be happy with the integrated services offered. The patients prefer homoeopathic doctors to prescribe homoeopathic treatments, even while they preferred allopathic doctors to be knowledgeable about homoeopathy. It appears that incorporating public feedback into the creation of integrated CAM models in India is an essential, required, and rational step before developing any further tactics.

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