



DECLARATION

I Tamarin Samantha Holton, declare that this dissertation is my own work. It is being submitted for the degree of Masters of Technology in Homoeopathy at the University of Johannesburg. It has not been submitted before for any degree or examination at this or any other Technikon or University.

Candidate: _____



UNIVERSITY
OF
JOHANNESBURG

Date: _____

ABSTRACT

The aim of this study was to determine the efficacy of the combination of Nigersan® 4X, Citrokehl® 10X/30X/200X and Recarcin® 4X in the treatment of symptoms experienced with endometriosis. Endometriosis is a gynaecological disorder, where functioning endometrial tissue is present outside the uterine cavity. Symptoms are often associated with severe pain and/or infertility. The aetiology is unknown and there is no cure for endometriosis.

This was a double blind study in which a placebo group was compared to an experimental group. Twenty five females with pre-diagnosed endometriosis were analysed over a twelve week period. The participants were randomly divided into two groups, one receiving Nigersan® 4X, Citrokehl® 10X/30X/200X and Recarcin® 4X and the other placebo. This was a subjective study with reference to the participant's perception of their condition before, during and at the end of the study. Participants were asked to record the following on a daily basis: menstruation, pelvic pain, backache, nausea, vomiting and diarrhoea. The participants were then also asked to rate the following on a monthly basis: energy levels, general wellbeing, dysmenorrhea, pelvic pain, menstrual clotting, menstrual flow, menstrual colour and dyspareunia. All forms and questionnaires were then collected at four week intervals and analysed for comparison.

The data was statistically analysed using the Analysis of Variance technique and Chi-squared statistics. Results revealed a significant decrease in the average number of days of backache and pelvic pain within the placebo group while the experimental group indicated a significant improvement in energy levels and general wellbeing.

Therefore it is concluded that Nigersan® 4X, Citrokehl® 10X/30X/200X and Recarcin® 4X did not significantly alleviate symptoms associated with endometriosis.

Dedicated to

My Heavenly Father

Thank you for being my rock and my shelter and for never leaving my side

My incredible husband, Wayne

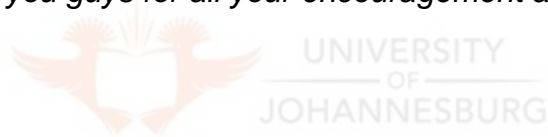
Thank you for your never ending love, support, patience and encouragement

My amazing family

Thank you all so much for your endless love, support and prayers.

To my special friends

Thank you guys for all your encouragement and prayers



ACKNOWLEDGMENTS

I would like to express my sincere gratitude to the under-mentioned for their assistance in the completion of the study and the preparation of this dissertation:

Dr N. Wolf (supervisor)

Dr S. Sarawan (co-supervisor)

Dr Ford from Medford and to Sanum for the sponsorship of the medication and placebo used in this study

University of Johannesburg for financial assistance

The incredible ladies who completed this study

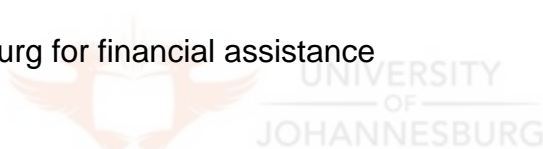


TABLE OF CONTENTS

DECLARATION	ii
ABSTRACT	iii
DEDICATION	iv
ACKNOWLEDGEMENTS	v
TABLE OF CONTENTS	vi
CHAPTER 1	1
INTRODUCTION	1
1.1 Problem statement	1
1.2 Aim of the study	1
1.3 Importance of the study	1
1.4 Hypothesis	2
1.5 Null Hypothesis	2
CHAPTER 2	3
LITERATURE REVIEW	3
2.1 Endometriosis	3
2.2 Aetiology of endometriosis	4
2.2.1 Retrograde menstruation	4
2.2.2 Coelomic metaplasia	4
2.2.3 Hereditary links	4
2.2.4 Lymphatic or vascular distribution	5
2.2.5 Immune system dysfunction	5
2.3 Underlying pathophysiology	5
2.4 Clinical manifestations of endometriosis	6
Table 1 Common signs and symptoms of endometriosis	7
2.4.1 Physical examination	7
2.4.2 Endometrioma/Chocolate cyst	8
	vi

2.4.3	Infertility	8
2.4.4	Differential diagnosis	9
2.5	Diagnosis of endometriosis	10
2.5.1	Staging of endometriosis	10
Table 2	Classification of endometriosis	11
2.5.2	Other laboratory tests	11
2.6	Medical treatment of endometriosis	11
2.7.1	Drug therapy	12
2.7.1.1	Analgesia	12
2.7.1.2	Anti-oestrogen therapy	13
2.7.1.3	Oral Contraceptive Pill (OCP)	13
2.7.1.4	Gonadotropin-releasing-hormone agonist (GnRH-a)	13
2.7.1.5	Androgens - Danazol (Danocrine)	14
2.7.1.6	Progestational agents	16
2.7.2	Surgical treatment	17
2.7.2.1	Conservative surgery	17
2.7.2.1.1	Laparoscopic surgery	17
2.7.2.1.2	Laparotomy	18
2.7.2.2	Radical surgery	18
2.7.2.2.1	Hysterectomy	18
2.8	Complementary therapies	20
2.8.1	Magnesium therapy	20
2.8.2	Vitamin B1 (Thiamine)	20
2.8.3	Transcutaneous Electrical Nerve Stimulation (TENS) and Acupuncture	20
2.8.4	Essential Fatty Acids (EFA)	21
2.8.5	Vitamin C and Vitamin E	21
2.8.6	Herbal therapy	21
2.8.7	Panag machine	21
2.9	Homoeopathy, Isopathy and Enderlein's Theory of Disease	22
2.9.1	Homoeopathy	22
2.9.2	Potentization	22

2.9.3	Isopathy	23
2.9.4	Enderlein's Theory of Disease	23
2.9.4.1	Nigersan® 4X Capsules	25
2.9.4.2	Citrokehl® 10X/30X/200X Drops	25
2.9.4.3	Recarcin® 4X Capsules	25
2.9.5	Previous homoeopathic research on endometriosis	26
CHAPTER 3		27
METHODOLOGY		27
3.1	Sample population	27
3.1.1	Inclusion criteria	27
3.1.2	Exclusion criteria	27
3.2	Sample group	27
3.3	Methodology	28
3.4	Data analysis	29
3.5	Ethical considerations	30
CHAPTER 4		31
RESULTS		31
4.1	Introduction	31
4.1.1	Inclusion criteria	31
4.1.2	Exclusion criteria	31
4.2	Results	32
4.2.1	Daily Evaluation Form (Appendix B)	32
Table 3	Average number of readings from the Daily Evaluation Form by the placebo group	33
Table 4	Average number of readings from the Daily Evaluation Form by the experimental group	34
4.2.2	Monthly Evaluation Form (Appendix C)	34
Graph 4.2.2.1	Ratings of energy levels by the placebo group	36
Graph 4.2.2.2	Ratings of energy levels by the experimental group	37
Graph 4.2.2.3	Ratings of general wellbeing by the placebo group	38

Graph 4.2.2.4	Ratings of general wellbeing by the experimental group	39
Graph 4.2.2.5	Ratings of dysmenorrhea by the placebo group	40
Graph 4.2.2.6	Ratings of dysmenorrhea by the experimental group	41
Graph 4.2.2.7	Ratings of pelvic pain and discomfort by the placebo group	42
Graph 4.2.2.8	Ratings of pelvic pain and discomfort by the experimental group	43
Graph 4.2.2.9	Ratings of menstrual flow by the placebo group	44
Graph 4.2.2.10	Ratings of menstrual flow by the experimental group	45
Graph 4.2.2.11	Ratings of menstrual clotting by the placebo group	46
Graph 4.2.2.12	Ratings of menstrual clotting by the experimental group	47
Graph 4.2.2.13	Ratings of menstrual colour by the placebo group	48
Graph 4.2.2.14	Ratings of menstrual colour by the experimental group	49
Graph 4.2.2.15	Ratings of dyspareunia by the placebo group	50
Graph 4.2.2.16	Ratings of dyspareunia by the experimental group	51
4.2.3	Preliminary Evaluation Form (Appendix D)	52
Table 5	Marital status	52



CHAPTER 5		54
DISCUSSION OF RESULTS		54
5.1	Introduction	54
5.2	Summary of results	55
5.2.1	Daily Evaluation Form (Appendix B)	55
5.2.1.1	Placebo effect	55
5.2.1.1.1	The psychological theory	56
5.2.1.1.2	The process of treatment theory/Expectancy Model	57
5.2.1.1.3	The Opioid Model	57
5.2.1.1.4	The Conditioning Model	58
5.2.1.2	Lack of compliance	60
5.2.1.3	Fluctuation of symptoms	60
5.2.2	The Monthly Evaluation Form (Appendix C)	60
5.2.2.1	Comparison within the placebo and experimental group	61
5.2.2.2	Comparison between the placebo and experimental group	62

5.2.3	Preliminary Evaluation Form (Appendix D)	63
5.3	Variable which may have had an impact on the study	64
5.3.1	Analysis of questionnaires	64
5.3.2	Stress and the impact on the body	64
5.3.3	Pain and psychology	65
5.3.3.1	Pelvic pain	66
5.3.3.2	Pain assessment	66
5.3.3.3	Conclusion	67
CHAPTER 6		68
CONCLUSION AND RECOMMENDATIONS		68
6.1	Conclusion	68
6.2	Recommendations	68
CHAPTER 7		70
REFERENCES		70
APPENDICES		80
Appendix A	Participant information and consent form	80
Appendix B	Daily Evaluation Form	82
Appendix C	Monthly Evaluation Form	83
Appendix D	Preliminary Evaluation Form	86

