

# Clinical Evaluation of Individualized Homoeopathic Intervention in Alcohol Dependence: A Randomized Placebo-Controlled Study

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## Abstract

### Background:

Alcohol dependence represents a chronic relapsing disorder with profound physical, psychological, and socio-economic consequences. Despite the availability of pharmacological agents, challenges such as relapse, adverse effects, and limited personalization necessitate exploration of complementary therapeutic strategies. Homoeopathy, based on individualized prescription principles, may offer a holistic alternative. The present study investigated the therapeutic impact of individualized Homoeopathic medicines on alcohol dependence severity using the Alcohol Use Disorders Identification Test (AUDIT).

### Methods:

A randomized placebo-controlled clinical trial was conducted involving 100 screened individuals, of whom 84 fulfilled eligibility criteria. Participants were randomly allocated into two equal groups: individualized Homoeopathic treatment (n = 42) and placebo (n = 42). Prescriptions were formulated according to symptom totality, constitutional background, and repertorial evaluation. AUDIT scores were recorded at baseline and after a 3-month intervention period. Within-group and between-group comparisons were performed using paired t-tests and Welch's independent t-test. Statistical significance was defined at  $p < 0.05$ .

### Results:

Participants receiving individualized Homoeopathic therapy demonstrated a substantial decline in mean AUDIT scores from 29.4 to 20.1, reflecting a mean reduction of  $9.26 \pm 2.96$  ( $t = 20.310$ ;  $p < 0.001$ ). Conversely, the placebo arm showed negligible change (29.1 to 28.9; mean difference  $0.21 \pm 1.37$ ;  $t = 1.013$ ;  $p = 0.317$ ). Intergroup comparison revealed highly significant superiority of the Homoeopathy group ( $t = 17.997$ ;  $p < 0.001$ ), with a Cohen's d of 3.93, indicating an exceptionally large effect magnitude.

### Conclusion:

Individualized Homoeopathic management produced statistically and clinically meaningful reduction in alcohol dependence severity when compared to placebo. The magnitude of effect observed warrants further multicentric trials with extended follow-up.

**Keywords:** Alcohol Dependence, Homoeopathy, AUDIT, Placebo-Controlled Trial, Individualized Treatment

## Introduction

Alcohol dependence, clinically classified as Alcohol Use Disorder (AUD), is a chronic and progressive condition characterized by impaired control over drinking, tolerance, withdrawal

manifestations, and persistent consumption despite harmful consequences [1]. Prolonged alcohol intake adversely affects multiple organ systems including hepatic, neurological, and cardiovascular systems,

and may result in cognitive dysfunction and neuropathic complications [2,3].

Beyond physical consequences, alcohol dependence significantly disrupts social relationships, occupational functioning, and psychological stability. Comorbid psychiatric conditions such as anxiety and depressive disorders are commonly associated with chronic alcohol use [4].

Pharmacological management often includes agents such as Naltrexone, Acamprosate, and Disulfiram, aimed at reducing craving or inducing aversion [6]. However, relapse rates and adherence challenges remain substantial concerns [7].

Homoeopathy adopts an individualized therapeutic approach, addressing constitutional tendencies, emotional triggers, and behavioral patterns associated with alcohol dependence [5,8,9]. The Alcohol Use Disorders Identification Test (AUDIT), developed by the World Health Organization, is a validated screening instrument widely utilized to quantify alcohol-use severity and monitor therapeutic outcomes [10].

The present randomized controlled study was undertaken to systematically evaluate the efficacy of individualized Homoeopathic intervention in alcohol dependence.

### **Aim**

To assess the clinical effectiveness of individualized Homoeopathic medicines in individuals diagnosed with alcohol dependence.

### **Objectives**

1. To compare changes in AUDIT scores between individualized Homoeopathy and placebo groups.
2. To evaluate behavioral and psychological improvement following Homoeopathic intervention.

### **Methodology**

#### **Study Design and Setting**

This randomized, placebo-controlled clinical study was carried out at the Hospital Wing of Sri Ganganagar Homoeopathic Medical College Hospital & Research Institute, Rajasthan, over a

duration of one year. Ethical clearance was obtained from the Institutional Ethical Committee. The trial was prospectively registered under CTRI (Registration No.: CTRI/2024/11/076639).

### **Sample Characteristics**

Out of 100 screened individuals, 84 satisfied inclusion and exclusion criteria and were enrolled. Participants were randomly allocated into two equal groups:

- Homoeopathic treatment group (n = 42)
- Placebo group (n = 42)

Follow-up duration was 3 months with assessments every 15 days (total six follow-ups).

### **Inclusion Criteria**

- Age between 18–65 years
- Diagnosis of alcohol dependence based on AUDIT criteria
- Minimum follow-up of 3 months
- Provided informed written consent

### **Exclusion Criteria**

- Inability to provide reliable history
- Presence of major systemic illness
- Coexisting psychiatric disorders (panic disorder, OCD, PTSD, specific phobia)
- Dependence on substances other than alcohol

### **Intervention**

#### **Homoeopathic Group**

Participants received individualized prescriptions based on:

- Totality of symptoms
- Miasmatic background
- Repertorial analysis

Commonly prescribed remedies included Nux vomica, Sulphur, Arsenicum album, Phosphorus, Acid sulphuricum, and Lycopodium. Potency selection ranged from 30C to 1M depending on patient susceptibility and response.

#### **Placebo Group**

Participants received indistinguishable placebo preparations administered with identical dosage schedule and follow-up protocol.

## Outcome Assessment

AUDIT scores were recorded at:

- Baseline (Pre-treatment)
- 6 weeks
- 3 months (End of study)

## Statistical Analysis

- Paired t-test for within-group comparison
- Welch's independent t-test for between-group comparison
- Significance threshold:  $p < 0.05$
- Descriptive statistics: Mean, Standard Deviation, 95% Confidence Interval
- Effect size calculation using Cohen's  $d$

## Results

### Participant Distribution

Eighty-four individuals completed the study protocol, evenly distributed across both groups (42 per arm). Baseline characteristics were comparable.

### Within-Group Outcomes

In the Homoeopathy group, the mean AUDIT score declined from 29.4 at baseline to 20.1 after three months. The mean reduction was  $9.26 \pm 2.96$ , which was highly statistically significant ( $t = 20.310$ ;  $p < 0.001$ ).

In contrast, the placebo group demonstrated minimal variation, with scores changing from 29.1 to 28.9 (mean difference  $0.21 \pm 1.37$ ). This change was not statistically significant ( $t = 1.013$ ;  $p = 0.317$ ).

### Between-Group Comparison

Comparative evaluation showed a statistically significant superiority of individualized Homoeopathic treatment over placebo ( $t = 17.997$ ;  $p < 0.001$ ). The 95% confidence interval (8.04–10.06) consistently favored the intervention group.

The calculated Cohen's  $d$  value of 3.93 reflects an extremely large treatment effect, indicating strong clinical relevance.

## Discussion

The present findings demonstrate a statistically and clinically significant reduction in alcohol

dependence severity among patients receiving individualized Homoeopathic treatment.

Previous observational and exploratory studies have suggested potential benefits of Homoeopathy in alcohol dependence and withdrawal management [5,9]. Case-based evidence also indicates improvement in craving patterns and psychological stabilization with individualized prescriptions [8].

The significant reduction in AUDIT scores observed in the medicinal group aligns with earlier reports suggesting that individualized Homoeopathic intervention may assist in behavioral modulation and craving reduction [5,7]. In contrast, the placebo group did not exhibit statistically meaningful change, reinforcing that the observed improvement was attributable to therapeutic intervention rather than spontaneous remission.

The extremely large effect size (Cohen's  $d = 3.93$ ) further strengthens the clinical relevance of the results.

Future research incorporating larger multicentric samples and extended monitoring periods would enhance external validity and clarify long-term outcomes.

## Conclusion

Individualized Homoeopathic intervention significantly reduced alcohol dependence severity compared to placebo, demonstrating both statistical robustness and meaningful clinical benefit. The findings suggest that Homoeopathy may serve as an effective integrative therapeutic approach in alcohol addiction management.

## Financial Support

None.

## Conflict of Interest

The authors declare no conflict of interest.

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