

## Usage and appraisal of educational media by homeopathic therapists — a cross sectional survey

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**Background:** During recent years the market for homeopathic education media has increasingly diversified with old (books, seminars) and new media (video-seminars, pc-programs, homeo-wiki and internet-courses). However, little is known about homeopaths' preferences in using educational media and their requirements of this topic.

**Aim:** This survey was designed to gain a better understanding of the usage and appraisal of educational media by homeopaths.

**Methods:** 192 homeopathic practitioners (GPs and health practitioners) at a educational conference were asked to answer a standardized questionnaire covering the topics "formal education and context of work" (9 items), "homeopathic practise and usage (24 items)", "utilization of educational media" (9 items) and "favoured attributes for educational media" (11 items).

**Results:** Out of 192 homeopaths who attended the conference, 118 completed the questionnaire (response rate 61.5 %). For their continuing homeopathic education they predominantly indicated to use books (scale value from 0 = never to 2 = always: 1.72) and seminars (1.54) whereas journals (0.98) and the internet (0.65) were used less often. The most favoured attributes concerning medical education media were reliability (1.76), relevance for clinical practice (1.74) and user friendliness (1.6). Less favoured attributes were inexpensiveness (1.1), graphical material (0.92) and interactivity (0.88).

**Conclusions:** The survey illustrates the current situation of medical education media in homeopathy. Although there are parallels to earlier research conducted in conventional GPs, homeopaths are more likely to refer to classical media. New education tools should be designed according to these preferences.

## Acceptance of homeopathy by the staff of an intensive care unit: a service evaluation

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**Background:** Although intensive care medicine relies mainly on mechanical interventions, technical devices and intensive drug treatment, initial experience demonstrated that additional homeopathic treatment may be helpful in these patients as well. We examined the acceptance of homeopathic treatment in the personnel of an intensive care unit (ICU).

**Methods:** the entire crew of the ICU of a Swiss hospital was asked to fill in a self-administered questionnaire.

**Results:** The response rate was 42% (13 of 31 persons). 58% were female. 73% of the participants were in the age group between 31 and 50 years. All participants had previous experiences with homeopathy (50% were treated with homeopathic drugs, 28% consulted a homeopath, 17% consulted a physician with homeopathic training and 5% took basic courses in homeopathy).

30% opted for the use of homeopathy on the ICU, 17 voted against it, whereas 50% were inconclusive.

67% wanted to get additional information about the use of homeopathy on an ICU.

**Conclusion:** our results demonstrate that merely a minority rejects the additional use of homeopathy on an ICU. Half of the participants were inconclusive, which is at least partly due to the lack of information about homeopathy. As a consequence, more than two thirds were interested in additional information concerning the use of homeopathy on the ICU, not for personal use. Based on the results of our survey, ICU personnel seem to regard homeopathy as a therapeutic option in their daily work, but they do not receive adequate support. In conclusion, the subject of homeopathy should be included in the specialized training of ICU personnel.

## Exploring the effectiveness of homeopathic treatment for irritable bowel syndrome

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**Aims:** This study had two aims: to explore the effectiveness of homeopathic treatment compared to usual care, and to investigate the feasibility of carrying out a study comparing homeopathic treatment to an attention control

**Background:** Irritable bowel syndrome is a common chronic complaint which has a significant impact on people's quality of life. Despite much research there is no consensus on the optimal treatment for IBS and prognosis