

What can you do with the consultation notes in your files? Harness your success and share it

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Linlee Jordan

Acknowledgement of Country

The Aurum Project acknowledges the traditional custodians of our land, the Cammeraygal people of the Garingai nations and we pay our respects to the ancestors and elders, past, present and emerging.

As we engage in homeopathy and natural medicine research practices within The Aurum Project, we pay respect to the sovereign status of our hosts, and extend this to all Aboriginal and Torres Strait Islander people attending the webinar today.



About The Aurum Project

- Aurum Project launched in 2006
- Established Book Barn in 2016
- Over 170 members internationally
- Australian Research Priorities in 2018
- 1st National Survey in 2019 with 3 international seminars presenting results with paper published this week
- Regular Newsletter
- Connecting Homeopaths monthly meetings



Aims for this webinar

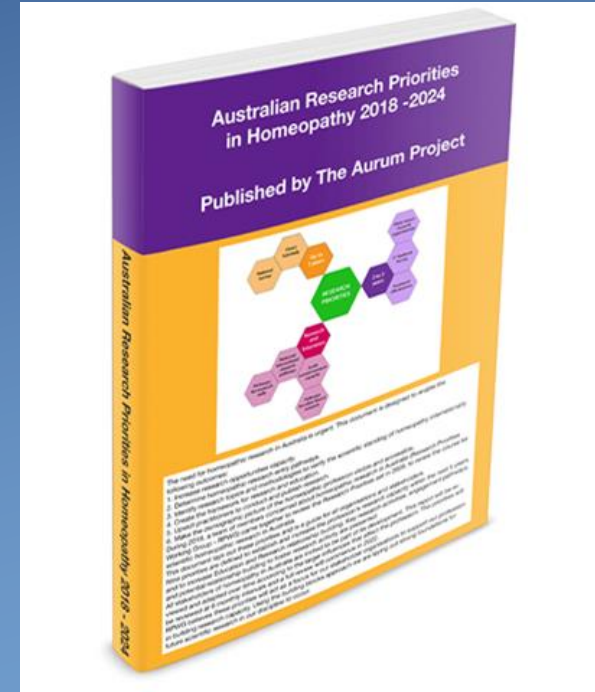
1. Literature review of Australian research publications about homeopathy since 1990
2. How to enhance case writing for publication by using internationally renowned guidelines used by the international homeopathy profession
3. Narrative writing style in Case studies, Materia Medica, Provings, Discussion, Rubrics, and Philosophy



1. Literature review

Australian Homeopathy Research Priorities 2018 - 2024

- Increase research capacity and funding
- Determine research entry pathways
- Seek opportunities for collaboration
- Identify research topics
- Create framework for research and education
- Upskill practitioners to conduct research
- Make the demographic picture of the homeopathic profession visible and accessible



<https://aurumproject.org.au/australian-research-priorities-in-homeopathy-2018-2024/>

Aims of the Literature Review

1. To determine the quantity, categorisation and focus of peer-reviewed research papers on homeopathy in Australia
2. To gain a deeper understanding of research conducted about homeopathy in Australia



Methods

Search strategy

- Eight online databases were searched (1990-2022)
- In a Hand search eligible papers from Similia Journal were screened (2005-2022)

Search Terms

1) homeop* or homoeop* or homœop* AND 2) Austral* or *all Australian states*

Eligibility of papers

- *Inclusion criteria:* peer-reviewed research studies in homeopathy conducted in Australia & published in English since 1990
- *Exclusion criteria:* not about homeopathy, not written or conducted in Australia, and any editorials, book reviews, opinions or conference reviews

Screening process

- Two reviewers independently undertook screening, data extraction and quality assessment with disagreements resolved through discussion with the 3rd reviewer

Guidelines followed

- PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses)

www.prisma-statement.org



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Library

Rating tools

We used the following tools to assess papers:

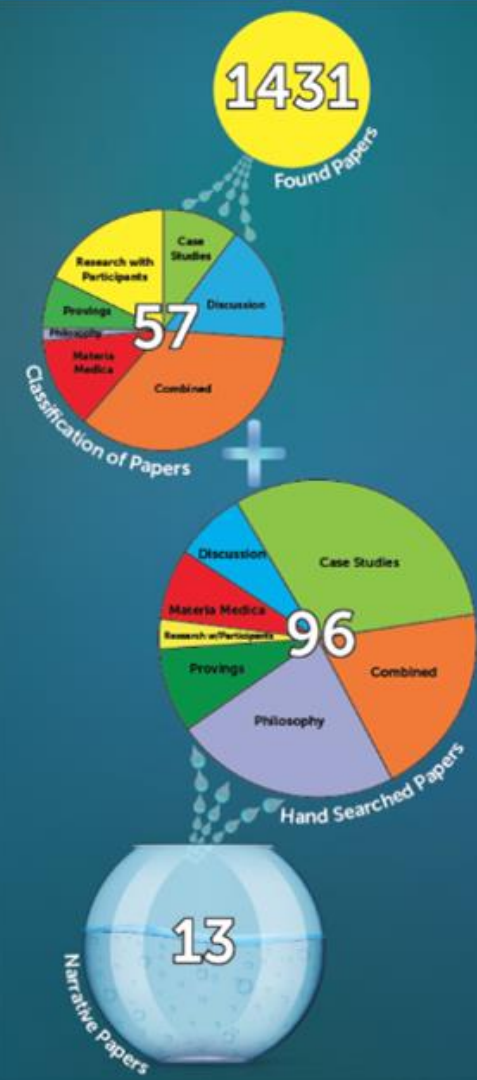
- RCT: Standard Quality Assessment Criteria for Evaluating Primary Research Papers from a Variety of Fields
- Non RCT: Methodological index for non-randomised studies (MINORS)
- Proving: Critical Appraisal Skills Program (CASP) Qualitative studies checklist
- Case series reports: JB Critical Appraisal Checklist for Case Series
- Case reports with one subject: JB Critical Appraisal Checklist for Case Reports



• A rating tool was also developed by the study authors to assess materia medica, philosophy, history and discussion and narrative papers

Results

	Main search (n=57)	Hand search (n=96)
Case studies	6	30
Discussion	9	7
Materia Medica	7	7
Provings	4	8
Research with participants	10	3
Philosophy	1	22
Combined	20	19



Conclusion & Take home messages

- Found high number of papers
 - Diverse provings unique to Australia
 - Narrative writing style exclusive to homeopathy
- Publications in Australia are growing
- However, difficult to identify papers in databases
 - We suggest to add the word '*homeopathy*' in the title, abstract & keywords
 - Similia journal articles not often found in the database
- Next steps
 - Quality appraisal
 - Update search
 - Publish the review



2. How can you publish a case?

Practical considerations

- The case is valuable to the research & homeopathic community
- Ethical consideration - before publishing make sure you have your client's consent
- No clearly identifying demographic details
- Follow-up longer than 12 months
- Evidence from pathology reports before & after treatment
- The writing style is clear and free of jargon
- Structure in the write-up, clear title, short abstract (up to 200-250 words), introduction, methods, results, conclusion, next steps/discussion

Example of case write-up

- Includes: x-rays, skin biopsy results, pathology results, photographs
- This is the first published successful homeopathy case of this difficult, congenital pathology



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Clinical Case Reports **WILEY**

CASE REPORT

Heterotopic ossification in a 7-year-old female patient treated with individualized homeopathy: A case report

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Abstract
Classical homeopathy can be included among the treatment options for congenital heterotopic ossification.

KEYWORDS
classical homeopathy, heterotopic ossification, individualized therapy

<https://onlinelibrary.wiley.com/doi/full/10.1002/ccr3.2547>

Published checklist/guidelines for case write-up (1)

WissHom Documentation Standard (2012)

*15 items in total

www.wisshom.de/documentation-standard/?lang=en



Project Case Documentation - Documentation Standard

Data collection covers the following areas:

1. Patient data
2. Medical history
3. Homeopathic case taking
4. Physical findings
5. Case analysis
6. Prescription
7. Follow-up examinations

Optional information is indicated accordingly.

1. Patient ID	<ol style="list-style-type: none">1. [In-house only: last name, first name, address, sex, date of birth]2. [In-house only: insurance and billing details if applicable]3. For anonymised case collection: in-house patient ID and, usually, year of birth
2. Therapist ID	<ol style="list-style-type: none">1. [Optional: last name, first name, address], area of operation, therapist ID for case collection
3. Case ID	<ol style="list-style-type: none">1. Definition acute/chronic2. Diagnosis (see 10.)3. Treatment date or dates
4. Homeopathic case taking	<ol style="list-style-type: none">1. Spontaneous report, controlled report (inquiries made, indicated accordingly); for individual symptoms locality, quality, modalities, first onset, triggers, progress over time, concomitant symptoms; for recurring symptoms frequency and correlations with biological rhythms; other observations2. Selection of important literal statements made by patient, complete symptoms, totality of symptoms3. History of vegetative disorders (chronic cases)4. Social history, occupation (chronic cases)5. [Optional: comprehensive verbatim transcript]

Published checklist/guidelines for case write-up (2)

CARE guidelines for case report (Case Report) (2013)

www.care-statement.org/checklist



CARE		CARE Checklist of information to include when writing a case report		(CC) BY-NC-ND	✓
Topic	Item	Checklist item description	Reported on Line		
Title	1	The diagnosis or intervention of primary focus followed by the words "case report"	_____	_____	_____
Key Words	2	2 to 5 key words that identify diagnoses or interventions in this case report, including "case report"	_____	_____	_____
Abstract (no references)	3a	Introduction: What is unique about this case and what does it add to the scientific literature?	_____	_____	_____
	3b	Main symptoms and/or important clinical findings	_____	_____	_____
	3c	The main diagnoses, therapeutic interventions, and outcomes	_____	_____	_____
	3d	Conclusion—What is the main "take-away" lesson(s) from this case?	_____	_____	_____
Introduction	4	One or two paragraphs summarizing why this case is unique (may include references)	_____	_____	_____
Patient Information	5a	De-identified patient specific information.	_____	_____	_____
	5b	Primary concerns and symptoms of the patient.	_____	_____	_____
	5c	Medical, family, and psycho-social history including relevant genetic information	_____	_____	_____
	5d	Relevant past interventions with outcomes	_____	_____	_____
Clinical Findings	6	Describe significant physical examination (PE) and important clinical findings.	_____	_____	_____
Timeline	7	Historical and current information from this episode of care organized as a timeline	_____	_____	_____
Diagnostic Assessment	8a	Diagnostic testing (such as PE, laboratory testing, imaging, surveys).	_____	_____	_____
	8b	Diagnostic challenges (such as access to testing, financial, or cultural)	_____	_____	_____
	8c	Diagnosis (including other diagnoses considered)	_____	_____	_____
	8d	Prognosis (such as staging in oncology) where applicable	_____	_____	_____
Therapeutic Intervention	9a	Types of therapeutic intervention (such as pharmacologic, surgical, preventive, self-care)	_____	_____	_____
	9b	Administration of therapeutic intervention (such as dosage, strength, duration)	_____	_____	_____
	9c	Changes in therapeutic intervention (with rationale)	_____	_____	_____
Follow-up and Outcomes	10a	Clinician and patient-assessed outcomes (if available).	_____	_____	_____
	10b	Important follow-up diagnostic and other test results	_____	_____	_____
	10c	Intervention adherence and tolerability (How was this assessed?)	_____	_____	_____
	10d	Adverse and unanticipated events	_____	_____	_____
Discussion	11a	A scientific discussion of the strengths AND limitations associated with this case report	_____	_____	_____
	11b	Discussion of the relevant medical literature with references.	_____	_____	_____
	11c	The scientific rationale for any conclusions (including assessment of possible causes)	_____	_____	_____
	11d	The primary "take-away" lessons of this case report (without references) in a one paragraph conclusion	_____	_____	_____
Patient Perspective	12	The patient should share their perspective in one to two paragraphs on the treatment(s) they received	_____	_____	_____
Informed Consent	13	Did the patient give informed consent? Please provide if requested	_____	_____	_____

Yes No

Published checklist/guidelines for case write-up (3)

Robert van Haselen HOM-CASE (*Homeopathic Clinical Case Reports*) (2016)

<https://pubmed.ncbi.nlm.nih.gov/27062953/>



Table 2

The HOM-CASE guideline items (in bold type font), and their proposed position in conjunction with the CARE guideline items (plain type font).

Topic	HOM-CASE guideline extension items (circled by dotted lines)
Title	The words “case report” should be in the title along with what is of greatest interest in this case
Keywords	The key elements of this case in 2–5 keywords
Abstract	Introduction—what is unique about this case? What does it add to the medical literature? The main symptoms of the patient and the important clinical findings The main diagnoses, therapeutics interventions, and outcomes Conclusion—what are the main “take-away” lessons from this case?
Introduction	Brief background summary of this case referencing the relevant medical literature
Patient information	Demographic information (such as age, gender, ethnicity, occupation) Main symptoms of the patient (his or her chief complaints) Medical, family, and psychosocial history including co-morbidities, and relevant genetic information Relevant past interventions and their outcomes
Clinical findings	Describe the relevant physical examination (PE) findings Clinical history detail (homeopathic symptoms used for decision, etc.)
Timeline	Depict important milestones related to your diagnoses and interventions (table or figure)
Diagnostic assessment	Diagnostic methods (such as PE, laboratory testing, imaging, questionnaires) Diagnostic challenges (such as financial, language, or cultural) Diagnostic reasoning including other diagnoses considered Prognostic characteristics (such as staging in oncology) where applicable
Therapeutic intervention	Types of intervention (such as pharmacologic, surgical, preventive, self-care) Type of homeopathy: individualized/formula; single- or multi-constituents/isopathy Medication(s); nomenclature (list individual prescriptions or constituents + trade names), manufacture, potency, scale and galenic form Administration of intervention (such as dosage, strength, duration) Changes in intervention (with rationale)
Follow-up and outcomes	Clinician- and patient-assessed outcomes Important follow-up test results Intervention adherence and tolerability (How was this assessed?) Adverse and unanticipated events Objective evidence^a (if applicable) Occurrence homeopathic aggravation^b Possible causal attribution of changes explicitly assessed/discussed^c
Discussion	Discussion of the strengths and limitations in the management of this case Discussion of the relevant medical literature The rationale for conclusions (including assessment of possible causes) The main “take-away” lessons of this case report
Patient perspective	Did the patient share his or her perspective or experience? (include whenever possible)
Informed consent	Did the patient give informed consent? Please provide if requested

^a Objective evidence: findings that reflect expert external observation of any measurement of the patient. Objective evidence includes lab tests, X-ray reports, health care provider examination or observation, or other similar data (proposed by the HPIUS Clinical Data Working Group).

^b Homeopathic aggravation: criteria should be specified, e.g., definition in accordance with Stub et al.^{3,10}

^c Causal attribution of changes: for assessment, consider using the ‘Modified Naranjo Criteria’ (Appendix 1).

3. Narrative writing style

What is a narrative writing style?

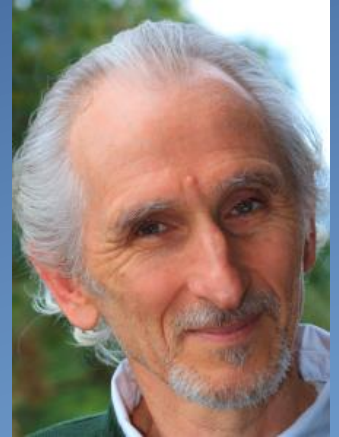
- Our literature review found Australian narrative style in 13 papers
- Richness in the style unique to homeopathy
- The writer tells a story, people love to read stories
- Actual life stories, symptoms and events are told in chronological order
- Include cases, materia medica, proving information, author reflections, before and after photos, pathology testing results



Example of narrative style

- *Rhodonite and the horn of plenty: the story*
- Written by Peter Tumminello
- Published 1999 Homeopathic Links

- “During an early morning meditation, I was visited by a vision. A beautiful tree, lush in foliage and with a curved trunk, appeared strongly before the inner eye.”
- Tells a travel story of discovering the substance with some chance encounters, then proving details and cases



Peter Tumminello

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Thank you

Aurum Project: <https://aurumproject.org.au/member-sign/#join>

Connecting Homeopaths once a month:

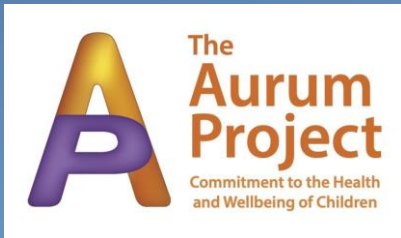
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