

“Making Cases Count”

Report for Caroline Jurdon

Background

Homeopath Caroline Jurdon is registered with the Society of Homeopaths and has been practicing homeopathic medicine for eighteen years. Caroline’s practice includes two Peripatetic outreach clinics held once or twice a month, sponsored by Dolphin House Clinic – a charity that offers low-cost alternative treatment to ‘hard to reach’ marginalised communities in Brighton. Currently patients self-refer from post natal depression groups where the clinics are advertised through short (15 minute) talks.

Patients are offered consultations of 1 hour for adults, 0.5 hours for children upon their first visit and consultations of 0.5 hours on subsequent visits (which usually occur at 2.5-5 week intervals). All of the consultations are conducted face to face. There is no charge to patients for the consultations, but donations are encouraged. After the consultation patients are offered individualised homeopathic medicines; usually in the form of centesimal tablets. These tablets are prescribed according to the homeopathic principles ‘like cures like’ and ‘minimal dose’.

Caroline has routinely collected data from all her patients who consulted her since 2004 using the MYMOP validated outcome measure. This data was then inputted into a spreadsheet for analysis.

Information collected

Between the dates of (05/02/2004- 15/1/14) Caroline was consulted by 118 patients, with whom she conducted 395 consultations in total; of these 118 patients, 43 were males and 75 females and their ages ranged from 2 months – 52 years of age. Using the patient generated outcome measure (MYMOP) she collected initial data for all 118 patients who consulted her during this time period. Outcomes on 13 cases who consulted during this period were not collected due to resource problems at one of the clinics.

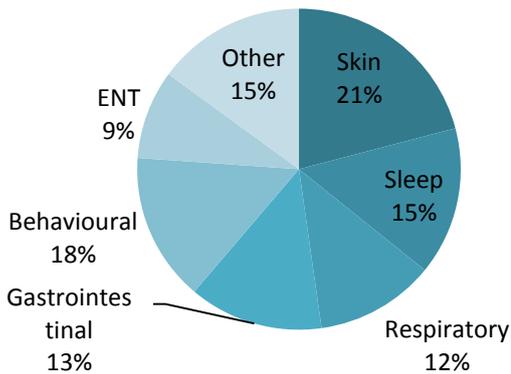
Patients were asked to write down their two ‘worst’ symptoms and to score them on a seven point Lickert scale; 0 being ‘as good as it could be’ and 6 being ‘as bad as it could be’. In addition patients scored their ‘general wellbeing’ according to the same scale. Of these 118 new patients, 90 completed both an initial and a follow up outcome measure. The outcome measures were filled out by the patient at the end of the consultation.

Analysis of Information

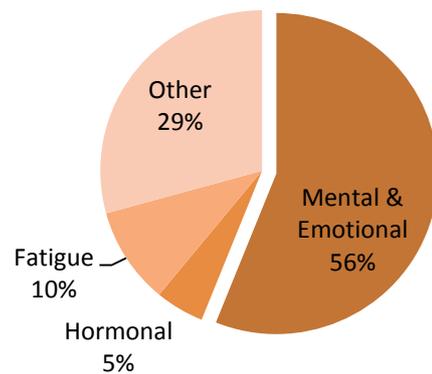
For these 118 total patients, the most commonly reported symptoms were; Eczema (11% of patients), anxiety or insomnia (9.3% of patients) and stress (6.8% of patients). Similarly the most commonly reported symptoms amongst the 90 patients who completed an initial and follow up

outcome measure were eczema (12% of patients) followed by insomnia (11% of patients) and stress (8% of patients). Other commonly reported symptoms were; asthma, respiratory problems, depression, irregular periods, post natal depression (PND), trapped wind, behavioural problems and teething. Over half (67/118) (57%) of all patients were under the age of 10. Using this data two pie charts were created, one for under 16s and one for over 16s (see below).

Pie Chart showing of symptoms at initial consultation for Under 16s



Pie chart of symptoms at initial consultations for Over 16s



After one or more follow up consultations, 55 of the 90 patients who submitted follow-up data reported that their symptoms were improved, 12 reported that their symptoms were worse and 23 reported no change; hence there was an average improvement of 1.14 in their symptom related scores. In addition 42 of the 90 patients who submitted follow-up data reported that their general wellbeing was improved, 25 patients reported it was worse and 23 reported no change; hence there was an average improvement of 0.36 in wellbeing scores.

Bar Chart showing change in MYMOP scores between initial and follow up

