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Documenting our success stories: Merits of case reporting in homoeopathic research and practice

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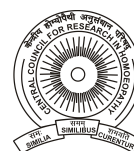
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Abstract

Editorial

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“The best teaching of medicine is that taught by the patient himself”

- William Osler

This esteemed quote by William Osler highlights the valuable learning opportunities physicians gain through patient interactions. As we reflect on the Indian Journal of Research in Homoeopathy's 18-year journey, we are pleased to present yet another case report special issue, featuring 15 unique case reports and 2 case series. Publishing case reports or case series in journals is a powerful means for clinicians to contribute to the scientific community, share clinical insights and advance evidence-based practice in Homoeopathy.

Despite the individualised nature of homoeopathic treatment, systematically documented clinical experiences can significantly enrich the field and provide a foundation for further research. One of the primary benefits of publishing case reports/series is to contribute to evidence-based medicine (EBM). Although case reports and case series are positioned lower on the EBM hierarchy, they offer valuable insights to clinicians, especially when dealing with rare cases.^[1] The key benefits of case reporting include the opportunity to document novel observations, formulate hypotheses, gather scientific data on rare conditions, conduct detailed narrative analyses and provide a valuable educational resource.^[2]

Although randomised controlled trials are considered the gold standard for reporting evidence in medicine, well-documented case reports and case series are essential in building real-world evidence. Publishing in reputed, peer-reviewed journals lends scientific credibility to a practitioner's clinical work,^[3] showcasing their commitment to transparent, ethical and standardised documentation. Over time, these fosters trust in the scientific community, amongst policymakers and within the general public.^[4]

Homoeopaths often treat diverse and complex cases successfully, but many such experiences remain undocumented. By publishing their work, practitioners promote a culture of clinical documentation and critical reflection. Also reading well-written case reports can be highly educational for students and young practitioners, bridging the gap between theory and practice, helping them understand the nuances of remedy selection and enhancing their confidence in applying Homoeopathy in challenging situations. A well-documented case can raise clinical or research questions, inspiring more structured investigations and facilitating dialogue with practitioners of other medical systems. Sharing patient outcomes in a scientifically accepted format builds mutual respect and opens avenues for integrative treatment models.

Our journal strictly adheres to the CARE guidelines and the more specific HOM-CASE guidelines^[5] for case reporting to ensure completeness and quality. We also encourage the use of MONARCH criteria to assess causal attribution between clinical outcomes and homoeopathic interventions.^[6]

Publishing case reports and case series is not merely an academic pursuit, it is a vital tool for promoting, validating and advancing Homoeopathy. It strengthens the evidence base, demonstrates clinical usefulness and empowers practitioners with knowledge-sharing and recognition. As homoeopaths, we should embrace publication as an essential responsibility for the progress of the system and its global acceptance.

In the present issue, we present case reports and case series on seventeen clinical conditions that are either rarely seen at homoeopathic clinics or are generally perceived to have a limited scope of recovery. We report a case of retrocerebellar arachnoid cyst,^[7] management of left ventricular ejection fraction,^[8] mixed hearing loss with chronic suppurative otitis media,^[9] cervical dystonia,^[10] a case of chronic urticaria,^[11] post-infective irritable bowel syndrome,^[12] nicotine dependence and withdrawal,^[13] primary infertility,^[14] segmental vitiligo,^[15] leiomyoma with ovarian cyst,^[16] a challenging case of secondary infertility with uterine fibroid,^[17] a case series suggesting usefulness of homoeopathic medicines amongst covid positive geriatric patients,^[18] an advanced case of benign prostate hyperplasia,^[19] a unique case of schizophrenia,^[20] generalized anxiety disorder,^[21] bilateral urolithiasis with involvement of bladder^[22] and a case of uterine fibroid with haemorrhagic ovarian cyst.^[23]

With this special issue on case reports, we aim to not only raise awareness within the homoeopathic community about managing complex clinical conditions but also to inspire practitioners to document and share comprehensive case reports. By doing so, we seek to contribute to the growing body of evidence-based literature that demonstrates the effectiveness of homoeopathic interventions.

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