



Focus on Alternative and Complementary Therapies

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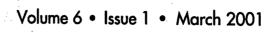
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Does a single dose of a homoeopathic ultramolecular dilution of Thyroidinum 30CH affect the decrease of body weight of fasting patients after stagnation of weight loss? A randomised placebo-controlled double-blind GCP-conforming clinical trial

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Objectives

During fasting, the daily decrease of body weight is partly counteracted by a low triiodothyronine (T3) plasma level and a corresponding reduction of protein and fat catabolism – an adaptation that can be overcome by T3 treatment. This study investigates whether an ultramolecular dilution of thyroid hormone (Thyroidinum 30CH) affects the course of body weight of fasting patients who had encountered a stagnation of weight loss, suggesting an underlying state of hypothyroidism.

Materials and methods

Fasting patients encountering a stagnation of weight received either a single oral dose (five globules) of Thyroidinum 30CH or placebo on the same day. Body weight and subjective complaints were measured daily, blood samples were taken on three successive days. Study medication was administered to 208 patients (intention to treat); 14 patients showed minor violations of the protocol and there were no dropouts. Primary outcome parameter was the decrease of body weight 2 days after

medication; secondary outcome parameters were the course of 34 laboratory findings and 15 complaints during the following 2–3 days.

Results

The decrease of body weight 2 days after medication was significantly (P < 0.05) lower in the Thyroidinum group (347 \pm 304 g, n = 102) than in the placebo group (439 \pm 313 g, n = 106). No striking significant differences were found in the laboratory findings and complaints.

Conclusion

The results suggest that clinical effects of ultramolecular doses may be demonstrated by means of objective parameters. Unlike substantial doses, an ultramolecular dose of thyroid hormone seems to reduce the decrease of body weight of fasting patients 2 days after administration. An assumed collateral aggravation of the state of hypothyroidism, however, cannot be supported by plasma levels of thyroid hormone, which did not differ significantly between the two groups.