

Homeopathic treatment found to be cost-effective when used in addition to usual care for reducing recurrence of tonsillitis

Ostermann T, Park A-L, De Jaegere S, Fetz K, Klement P, Raak C, McDaid D. Cost-effectiveness analysis for *SilAtro-5-90* adjuvant treatment in the management of recurrent tonsillitis, compared with usual care only. *Cost Eff Resour Alloc*, 2021;**19**:60.

Synopsis

Inappropriate antibiotic prescribing is an issue in acute and recurrent tonsillitis³, contributing to the global health crisis of antimicrobial resistance. To avoid this, using homeopathy alongside conventional treatment, may be a useful therapeutic option¹.

In 2017, a pragmatic randomised clinical trial followed 256 children and adults (aged 6 to 60 yrs) diagnosed with moderate recurrent tonsillitis, over two years. This 'TocTo study' found that using the homeopathic medicinal product *SilAtro-5-90* alongside conventional treatment, was effective in reducing the number of acute throat infections, tonsillitis-specific symptoms, and the need for antibiotics, when compared to conventional treatment alone⁴.

Using the results from this 'TocTo study,' Ostermann et al. conducted a further analysis of the data to determine the cost-effectiveness of adding *SilAtro-5-90* to usual care. Specifically, the primary aim of the study was to assess the incremental costs per acute throat infection that was avoided by adding homeopathic treatment.

For this purpose, a model-based economic evaluation was constructed to compare the cost-effectiveness of usual symptomatic care plus *SilAtro-5-90*, with usual symptomatic care alone, for recurrent tonsillitis. The analysis found that:

- **For children under 12 years, additional treatment with *SilAtro-5-90* is cost-effective regardless of the severity of recurrent tonsillitis** i.e. it reduces the number of acute throat infections at a lower cost than using conventional treatment alone, based on a 2-year period
- **For adults and children aged 12 years and over, additional treatment with *SilAtro-5-90* becomes cost-effective if patients had 'severe' recurrent tonsillitis** (more than three acute throat infections in the preceding year).

This study indicates that *SilAtro-5-90* may be a promising, cost-effective additional treatment option for all age groups.

For adults and children aged 12 years and older with 'severe' recurrent tonsillitis, **whilst the *SilAtro-5-90* incurred additional costs of €157 for preventing one acute throat infection, this add-on homeopathic treatment helped to avoid expensive surgical tonsillectomy** – the most common treatment for such patients, which bears a small but significant risk of haemorrhage and is particularly painful for adults.

Upper respiratory tract infections, including tonsillitis, account for 60 per cent of antibiotic prescriptions in primary care, even though the vast majority of these infections are caused by viruses, for which antibiotics do not work¹. This is a critical issue because of the risk of antimicrobial resistance in today's health care: In 2019 there were 865,767 infections with antibiotic-resistant bacteria in the European Union.² Thus, **as well as benefiting individual patients by reducing the number of acute throat infections they experience, adjunctive treatment with *SilAto-5-90* can also benefit the health care system and society by reducing antibiotic use.**

A systematic review published in 2024, providing an overview of cost-effectiveness studies of homeopathy assessed this study to be a gold standard, model-based economic evaluation⁶. Economic evaluations are essential to accurately inform healthcare decisions and more high-quality studies of this type are urgently needed⁵ to identify areas of clinical medicine where homeopathic treatments can make a positive contribution to both patient outcomes and management of healthcare costs.

References

1. Fixsen A. Homeopathy in the age of antimicrobial resistance: is it a viable treatment for upper respiratory tract infections? *Homeopathy*, 2018;**107**:99-114
2. Assessing the health burden of infections with antibiotic-resistant bacteria in the EU/EEA, 2016-2020 (europa.eu)
3. Spinks A, Glasziou PP, Del Mar CB. Antibiotics for sore throat. *Cochrane Database Syst. Rev.* 2013;**11**; CD000023.
4. Palm J, Kishchuk VV, Ulied A, Perotti Fernández J, De Jaegere S et al. Effectiveness of an add-on treatment with the homeopathic medication SilAto-5-90 in recurrent tonsillitis: An international, pragmatic, randomized, controlled clinical trial. *Complement. Ther. Clin. Pract.* 2017;**28**:181-191.
5. Viksveen P, Dymitr Z, Simoens S. Economic evaluations of homeopathy: a review. *Eur J Health Econ.* 2014 Mar; **15**(2):157-74.
6. Cannon JW, Wyber R. Modalities of group A streptococcal prevention and treatment and their economic justification. *NPI Vaccines*, 2023;**8**:59.