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Dr. Pulla Uma Maheswari
¹ Assistant Professor, ASR
Homoeopathic Medical College
Tadepalligudem, Andhra
Pradesh, India
² Consultant, MBM
Multispecialty Homeopathic
Clinics, Hyderabad, Andhra
Pradesh, India

Pingali Ananda Kumar
¹ Ph.D. Research Scholar,
Lincoln University College,
Malaysia
² Professor, ASR
Homoeopathic Medical College
Tadepalligudem, Andhra
Pradesh, India
³ Chief Consultant, MBM
Multispecialty Homeopathic
Clinics, Pithapuram, Andhra
Pradesh, India

Dr. Dondapati Uma Maheswari
Consultant, MBM
Multispecialty Homoeo Clinics,
Hyderabad, Telangana, India

Dr. Chilaka Uma Maheshwari
Consultant, MBM
Multispecialty Homoeo Clinics,
Tadepalligudem, Andhra
Pradesh, India

Corresponding Author:
Dr. Pulla Uma Maheswari
¹ Assistant Professor, ASR
Homoeopathic Medical College
Tadepalligudem, Andhra
Pradesh, India
² Consultant, MBM
Multispecialty Homeopathic
Clinics, Hyderabad, Andhra
Pradesh, India

Harmonizing homoeopathy and assessment scales: Enhancing autism spectrum disorder treatment

Dr. Pulla Uma Maheswari, Pingali Ananda Kumar, Dr. Dondapati Uma Maheswari and Dr. Chilaka Uma Maheshwari

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Abstract

Autism Spectrum Disorder (ASD) is a complex neurodevelopmental condition characterized by difficulties in social interaction, communication, and repetitive behaviors. Traditional medicine often struggles to address the individualized manifestations of ASD, leading to a focus on enhancing the quality of life through alternative therapies such as Homoeopathy. Homoeopathy operates on the principle of "similia similibus curentur" or "like cures like", selecting remedies that align with the comprehensive symptomatology of the patient. This holistic approach aims to balance the body's internal environment, targeting the underlying dysfunctions causing ASD symptoms.

The integration of objective assessment scales in Homoeopathic practice can enhance treatment efficacy by providing measurable data on symptom severity and progress. These scales are crucial for early detection, accurate diagnosis, personalized treatment planning, monitoring therapeutic progress, facilitating research, and improving communication among healthcare professionals and caregivers. Common assessment tools discussed include the autism-spectrum quotient test, communication and symbolic behavior scales, autism spectrum rating scales, childhood autism rating scale, gilliam autism rating scale, autism diagnostic observation schedule, autism diagnostic interview-revised, social responsiveness scale, Indian scale for assessment of autism, and the modified checklist for autism in toddlers-revised.

By harmonizing qualitative Homoeopathic case-taking with quantitative assessment measures, practitioners can achieve a more comprehensive understanding of each patient, fostering evidence-based and individualized treatment strategies. This synergy holds promise for advancing ASD treatment, promoting interdisciplinary collaboration, and enhancing patient outcomes.

Keywords: Autism spectrum disorder, homoeopathy, assessment scales, individualized treatment, holistic approach, evidence-based practice, neurodevelopmental condition

Introduction

Introduction to Autism and the Approach in Homoeopathy

Autism Spectrum Disorder is a multifaceted neurodevelopmental condition marked by variations in social interaction, communicative skills, and a tendency towards repetitive behaviors ^[1]. The intricate nature of ASD, coupled with its individualized expression in each person, makes it a challenge for traditional medicine to address thoroughly. The absence of a definitive cause and cure directs our focus toward interventions that aim to enhance the quality of life for those affected.

Amidst the spectrum of therapeutic approaches, Homoeopathy presents itself as a holistic system of medicine, grounded in the axiom "similia similibus curentur" or "like cures like". This principle posits that substances capable of eliciting symptoms in a healthy individual can be used in diluted forms to treat similar symptoms in someone experiencing illness.

Homoeopathy's individual-centric approach meticulously considers the comprehensive symptomatology-including the Behavioral, sensory, and communicative nuances characteristic of ASD. The art of Homoeopathic treatment lies in the selection of remedies that resonate with the totality of a person's expression of autism, thus serving the patient rather than the condition alone.

This approach endeavours to recalibrate the equilibrium within the body, potentially targeting the deeper dysfunctions that manifest as the observable symptoms of ASD. Homoeopathy's essence is to bolster the body's self-regulatory mechanisms, encouraging a holistic sense of wellness. In summation, Homoeopathy offers a distinctively nuanced and personalized approach in managing ASD. By tailoring treatment to the individual idiosyncrasies of each case, it purports to harmonize one's overall health, potentially enhancing the outcomes achieved through conventional interventions.

The need for assessment scales, their utility, and need in homoeopathic treatment of autism

An assessment scale is a tool that is used to measure, evaluate, or quantify specific attributes, abilities, or characteristics of an individual or a group. These scales are typically designed to be systematic and standardized to ensure consistency and reliability in the data they produce. In a clinical or psychological context, assessment scales can help practitioners determine the presence or extent of certain conditions, track changes over time, and guide treatment decisions. For instance, in the context of Autism Spectrum Disorder, assessment scales are used to identify hallmark features of ASD, such as social communication difficulties and restrictive or repetitive patterns of behavior. These tools are crucial for providing actionable insights that enable healthcare professionals, therapists, and educators to offer more tailored support and interventions that cater to the individual needs of each person with ASD.

Furthermore, assessment scales can span a variety of formats, including questionnaires, checklists, and observational protocols, each serving different purposes ranging from initial screening to detailed behavior analysis. The selection of an appropriate assessment scale often depends on the goals of the evaluation—whether it is for clinical diagnosis, monitoring developmental progress, or conducting research. Overall, assessment scales are vital instruments in the assessment and management of various developmental, psychological, and educational challenges.

Objective assessment scales are indispensable in the management and understanding of Autism Spectrum Disorders, serving multifaceted roles:

1. **Early Detection:** The foundation for effective ASD management starts with early detection, which can alter the course of intervention significantly. Assessment scales are crucial in pinpointing early signs of autism, thus enabling prompt and effective support and interventions.
2. **Accurate Diagnosis:** The importance of reliable diagnosis cannot be overstated. Standardized assessment scales provide a systematic framework for evaluating symptoms against recognized criteria, ensuring consistency and accuracy in diagnosing ASD.
3. **Customized Treatment Planning:** A holistic view of the individual is vital for effective Homoeopathy, and assessment scales offer insight into the strengths and challenges unique to each individual with autism. This is instrumental for Homoeopaths in crafting highly personalized treatment protocols.
4. **Tracking Therapeutic Progress:** Assessment scales serve as benchmarks to monitor an individual's progress throughout Homoeopathic treatment. They deliver

quantifiable data that can reflect changes and guide the therapeutic direction, contributing to a more dynamic and responsive treatment plan.

5. **Facilitate Research and Evaluation:** For the broader scientific community and Homoeopathic research, assessment scales standardize measures to evaluate and compare the effectiveness of various interventions, thereby enhancing understanding and treatment approaches in ASD.
6. **Collaboration and Communication:** Clear communication amongst the care team, educators, and families is key. Assessment scales offer a common language that aids in sharing observations and strategizing goals, fostering cohesive care in individuals with autism.

These scales augment the nuanced approach of Homoeopathy, aligning its qualitative case-taking with quantitative measures of ASD symptoms. This integration enhances the holistic Homoeopathic management by contributing to a deeper understanding and more targeted treatment of individuals living with ASD. Through their use, Homoeopathic practitioners can substantiate their clinical observations, optimize therapy in real-time, and facilitate a unified approach to addressing the complexities of ASD, thereby supporting an individual's journey toward well-being and functional integration.

Assessment Panorama: A comparative overview of autism assessment tools

This section provides a detailed compilation of assessment scales utilized in the evaluation of Autism Spectrum Disorder. Each scale is examined for its distinctive benefits and limitations to aid in the selection of the most appropriate tool tailored to the individual's needs. Below, we explore the pros and cons of each assessment instrument and the contexts in which they are most effectively applied".

1. Autism-Spectrum Quotient Test ^[2]

Advantages: Quick self-assessment, reflects personal perception of autistic traits, used for older adolescents and adults.

Disadvantages: Lacks diagnostic specificity, may not capture the full range of ASD features, self-reporting can be unreliable due to lack of self-awareness.

When to Use: As a preliminary screening tool for older adolescents and adults to identify potential ASD traits.

2. Communication and Symbolic behavior scales developmental profile ^[3]

Advantages: Short administration time, focuses on early social communication benchmarks.

Disadvantages: More suitable for initial screening than detailed assessment, may not capture all dimensions of ASD.

When to Use: During the early stages of development (6-24 months) to screen for potential communication delays or social challenges related to autism ^[3].

3. Autism Spectrum Rating Scales ^[4]

Advantages: Quick, covers a significant age range, looks at behaviors across different settings.

Disadvantages: May not capture the nuanced behaviors of an individual, relies on observer reporting.

When to Use: For a broad behavioural assessment in children and adolescents up to 18 years old.

4. Childhood Autism Rating Scale ^[5]

Advantages: Comprehensive, can be used with very young children, includes input from caregivers.

Disadvantages: Might not cover all ASD characteristics, scoring can be subjective.

When to Use: For evaluating younger children suspected of having ASD to determine symptom severity.

5. Gilliam Autism Rating Scale ^[6]

Advantages: Easy to administer, spans a wide age range including early adulthood.

Disadvantages: May not cater to very context-specific behaviors, reliability can vary depending on the ratter.

When to Use: For assessment of individuals from 3 to 22 years old focusing on key behavioural components of ASD.

6. Autism Diagnostic Observation Schedule ^[7]

Advantages: Highly regarded, detailed observation, can differentiate between ASD and other developmental disorders.

Disadvantages: Requires extensive training to administer, time-consuming.

When to Use: As part of a comprehensive assessment for diagnosis, across all age.

7. Autism Diagnostic Interview Revised ^[8]

Advantages: In-depth collection of developmental history, considered a highly reliable and valid measure for diagnosing ASD.

Disadvantages: Lengthy administration time, requires trained professionals to administer and score, may not be suitable for quick screenings.

When to Use: For a comprehensive evaluation of children and adults when a detailed developmental history is necessary to ascertain ASD diagnosis.

8. Social Responsiveness Scale ^[9]

Advantages: Useful across a wide age range, helps quantify the severity of autism-related symptoms, easy to administer and score.

Disadvantages: Self and teacher reports may be subjective, may not capture all behavioural nuances, and is not a diagnostic tool on its own.

When to Use: For quantifying social impairment and identifying possible ASD symptoms; can inform decisions about further diagnostic assessment.

9. Indian Scale for Assessment of Autism ^[10]

Advantages: Culturally appropriate for Indian population, covers a broad range of Behavioral domains, helpful in educational and therapeutic planning.

Disadvantages: Limited application outside of Indian context, requires individuals experienced with Indian culture for accurate scoring.

When to Use: For diagnosing ASD in India, particularly when considering cultural factors in assessment and seeking to inform treatment and educational strategies ^[5].

10. Modified checklist for autism in toddlers, revised ^[11]

Advantages: Free and easy to administer screening tool for very young children, helps in identifying those at risk who may benefit from early interventions.

Disadvantages: Not a diagnostic tool, false positives and negatives can occur, follow-up interview required for confirmation.

When to Use: As an initial screening tool for younger toddlers between 16 and 30 months to flag potential ASD risks prompting further evaluation ^[6].

Each of these scales plays a significant role in the multifaceted and comprehensive approach to evaluating and diagnosing ASD.

Discussion

In the realm of Homoeopathy, known for its person-centered and individualized treatment methodology, the integration of assessment scales introduces a valuable dimension for enhancing the therapeutic process. The role of these objective tools in Homoeopathic practice requires careful analysis, as it involves balancing the quantitative data derived from scales with the qualitative subtleties Homoeopathy embraces.

Benefits of Integrating Assessment Scales in Homoeopathy

- a) **Enhanced Objectivity:** Assessment scales provide a structured method to ascertain symptoms and their severity, which complements the subjective narrative obtained during case-taking. This objectivity can help validate the practitioner's observations and the patient's subjective experience.
- b) **Benchmarking and Monitoring:** Given Homoeopathy's dynamic nature, scales can serve as benchmarks for the patient's state at different time points. This is particularly beneficial for tracking the progress or regression of ASD symptoms over the course of treatment and making necessary adjustments.
- c) **Improved Communication:** Objective measures can simplify communication with other healthcare professionals, caregivers, and educational teams. They offer a shared framework that can be universally understood and discussed, thus promoting a more collaborative care approach.
- d) **Evidence-Based Practice:** In an increasingly evidence-driven healthcare landscape, integrating assessment scales with Homoeopathic practice can enhance credibility and acceptance among wider medical communities and patients by providing an evidence base for treatment efficacy.

Challenges in integrating assessment scales

- a) **Maintaining the Holistic View:** Homoeopathy's strength lies in addressing the patient as a whole, beyond the confines of specific symptoms. There's a risk that focusing too much on scale outcomes could overlook other essential subjective aspects of the patient's experience and condition.
- b) **Interpreting Scores:** The interpretation of assessment scales requires caution, as numerical scores may not always reflect the complexity of an individual's condition or the qualitative improvements perceived by the patient or the practitioner.

- c) **Consistency of Use:** The variable use of these scales among Homoeopathic practitioners can lead to inconsistent approaches in assessments, which could potentially affect the comparability of treatment outcomes.

Complementing qualitative findings with quantitative measures

The qualitative information gathered through meticulous case-taking in Homoeopathy is rich with personal narratives, individual symptoms, and subtle cues that are paramount in selecting the right remedy. When used alongside assessment scales, these qualitative findings can be given a quantitative anchor, enabling a more comprehensive understanding of the patient's condition.

For instance, while qualitative case-taking may elicit detailed personal experiences of ASD-related challenges, an assessment scale can quantitatively track the intensity and frequency of these challenges. By employing both qualitative and quantitative assessments, Homoeopathic practitioners can create a more detailed and nuanced picture of the patient's overall health.

In practice, a Homoeopath might use the information from assessment scales to corroborate their clinical impressions and refine the selection of remedies. As treatment progresses, these scales can be repeatedly applied to objectively measure improvements or identify areas requiring further attention, thus informing ongoing treatment strategies.

Moreover, integrating assessment scales allows Homoeopaths to document treatment outcomes in a manner that can be readily understood and analyzed within the broader medical community. This contributes to evidence-based practice and can enhance the collaborative efforts between Homoeopaths and practitioners of other modalities when managing complex cases such as ASD.

However, it's essential for Homoeopaths to remember that while assessment scales can provide crucial insights, they should not overshadow the holistic principles that underpin Homoeopathy. These principles dictate that therapy should be tailored to the patient's entire state, rather than just the symptoms measurable by a scale. Maintaining this balance is a crucial aspect of the Homoeopath's skill set.

To summarize, the integration of assessment scales within Homoeopathy offers both challenges and opportunities. When used judiciously, scales can augment the traditional Homoeopathic approach, providing a clear, objective framework to support and verify the subjective and individualized approach that is central to Homoeopathic philosophy and practice.

Author Contributions

PUM: Drafted the manuscript, performed the research. AKP: Conceptualized the study methodology and edited the manuscript. DUM & CHUM: Assisted in the review.

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Conclusion

In closing, the thoughtful integration of assessment scales into Homoeopathic practice presents a harmonious blend of objectivity and personalization that is particularly pertinent to the treatment of Autism Spectrum Disorder. By harnessing the quantitative, objective metrics these scales provide, Homoeopathic practitioners can enhance the precision of their case analysis and monitor treatment efficacy more reliably. This integration not only strengthens the individualized treatment approach inherent to Homoeopathy but also contributes to its evidence-based evolution.

The potential synergy between Homoeopathic treatment and assessment scales for ASD is evident. Objective measures lend a grounded dimension to the Homoeopathic practitioner's nuanced understanding of a patient's state, thus facilitating targeted and effective interventions. These tools can help chart a course of treatment that is responsive to the individual's evolving needs and contribute to a more collaborative, interdisciplinary approach to care.

Future research initiatives could focus on developing guidelines for incorporating assessment scales into Homoeopathic practice, tailoring them to complement the holistic perspective of Homoeopathy without compromising its core principles. Further studies are required to elucidate the impact of such integrated approaches on long-term outcomes for individuals with ASD. Additionally, ongoing dialogue across medical disciplines will be crucial in refining these tools and approaches, ensuring they are adaptable and sensitive to the diverse presentations of ASD. Ultimately, the aim is to foster a climate where Homoeopathy and objective assessment tools coexist in a mutually beneficial relationship, each enhancing the other to provide the best possible outcomes for individuals with Autism Spectrum Disorder. The interplay between Homoeopathy's individualized approach and the structured insights provided by assessment scales holds promise for advancing ASD treatment, empowering practitioners and patients alike with a more comprehensive framework for navigating this complex condition.

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