

12 weeks. Subjects allocated to group three were offered yoga after the end of the study (waiting list) and served as a control. Outcome was assessed at entry and after 3 months by SF-36, Cohen Perceived Stress Scale, Stait-Trait Anxiety Inventory, Profile of Mood States, CESD-Depression Scale, Bf-S/Bf-S' Well-Being scales and physical complaint lists.

**Results:** Subjects in the intensified yoga group showed reduced adherence with the recommended programme compared to moderate yoga. Both yoga groups showed significant improvements of quality of life, stress, anxiety, depression, anger and pain-related symptoms compared to waiting list controls. There was no difference in outcomes between moderate or intensified yoga.

**Conclusions:** Iyengar yoga seems to offer considerable promise in subjects suffering from mental distress and related symptoms. Intensified yoga training is not more effective than moderate intensity yoga due to decreasing adherence.

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### Kneipp hydrotherapy for menopausal symptoms— Results of a pilot study

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**Objective:** The aim of this prospective randomized controlled study was to investigate whether Kneipp hydrotherapy with short cold water stimuli helps alleviate menopausal symptoms such as hot flashes, insomnia, or depressed mood. No prior studies investigating this topic could be identified.

**Material and methods:** The study included 80 women (mean age  $55.0 \pm 4.93$  years) with menopausal symptoms (minimum score of 10 points on the Menopause Rating Scale II (MRS II), a validated 11-item questionnaire). Patients were randomized either into group 1, which immediately started 6 weeks of daily home-based hydrotherapy or group 2, which waited for 6 weeks before beginning the same intervention. The treatment consisted of at least two self-applied hydrotherapy sessions daily. Every patient received professional group instruction before beginning hydrotherapy. After 6 weeks of treatment, all patients were asked to continue for another 6 weeks.

**Results:** A total of 60 women completed the study. Mean baseline MRS II scores were comparable between the two groups (group 1:  $20.8 \pm 6.0$ ; group 2:  $21.1 \pm 5.8$  n.s.). After 6 weeks, means for MRS II showed improvements in favour of the intervention compared to the waiting list group (group1:

$\Delta_{6\text{weeks}}$ :  $-6.1 \pm 6.6$ ; group 2:  $\Delta_{6\text{weeks}}$ :  $-4.0 \pm 3.0$ ; group comparison,  $P = 0.33$ , Mann-Whitney  $U$  Test). Group comparison of the relative differences between MRS II scores before and after intervention just failed to reach significance only by a small margin (group1:  $\Delta_{6\text{weeks}}$ :  $31.9 \pm 30.4\%$ ; group 2:  $\Delta_{6\text{weeks}}$ :  $18.9 \pm 14.8\%$ ; group comparison,  $P = 0.052$ , Mann-Whitney  $U$  Test). After 12 weeks of therapy, both groups demonstrated marked improvements of 41.3% (group 2) and 41.5% (group 1) in MRS II scores (total score difference before and after hydrotherapy:  $-7.4 \pm 5.5$ ,  $P < 0.001$ , Wilcoxon test). Altogether, 59 out of 60 patients expressed a strong interest in continuing hydrotherapy after completing the study.

**Conclusion:** Cold stimuli such as those applied in Kneipp hydrotherapy appear to have moderate effects in alleviating of menopausal symptoms. Patient acceptance of hydrotherapy was remarkably high. Further studies are needed to examine the mode of action of hydrotherapy and long-term effects of hydrotherapy.

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### Unani medicine: An integral part of health care system in Indian subcontinent

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Unani medicine is known by various names including *Al-Tibb-Al-Arabi*, *Al-Tibb-Al-Unani*, *Al-Tibb-Al-Aa'Shaab*, etc. It is a part of the culture of the Indian subcontinent, Arabian and Middle Eastern, China, Mongolia, Central Asian and many other countries, where it is widely practiced and developed into an established profession and being taught at doctorate level. The Humoral theory is the basis of Unani system of medicine. According to this theory, there are four humors: Blood, Phlegm, Yellow bile and Black bile. Every person has a unique humoral constitution which represents the healthy state of the person. *Mizaj* (temperament) which is an important concept of Unani medicine, represents the metabolic constitution, psychological make up and behavioral pattern of an individual. It is expressed as sanguine, phlegmatic, choleric and melancholic temperament. Unani Tibb believes in promotion of health, prevention of diseases and cure. According to this science, the health of human beings is based on the six essentials. The six essentials are—Atmospheric Air, Drinks & Food, Sleep & Wakefulness, Excretion & Retention, Physical Activity & Rest, and Mental Activity & Rest. There are four ways to treat the diseases, which include *Elajbil Tadbeer* (Regimental Therapy), *Elajbil Ghiza* (Dietotherapy), *Elajbil Dawa* (Pharmacotherapy) and *Elajbil Yad* (Surgery). Today, there seems to be a strong urge of reviving the glorious past which is not a going back, but is well in tune with the needs of modern era as in other fields, in the medical field too. The World Health Organization's Alma Ata Declaration, 1978, has given serious consideration to the development, promotion and recognition of the

age-old traditional systems of medicine including Unani. In this regard, India has taken lead by integrating Unani medicine with conventional medicine at national level, along with many other traditional therapies and collaboration among diverse health professionals for better patient-centered care.

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## Tunbridge Wells Homeopathic Hospital outcome study

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**Objective:** To assess health changes seen in routine homeopathic and acupuncture care for patients with a wide range of chronic conditions who were referred to a hospital outpatient department.

**Design:** Observational study of consecutive follow-up patients during a nearly 7-year period (1 st Jan 1999–Nov 2006).

**Setting:** Hospital outpatient unit within an acute National Health Service (NHS) Trust in the United Kingdom.

**Participants:** Every patient attending the hospital outpatient unit for a follow-up appointment over the study period was included, commencing with their first follow-up attendance.

**Main outcome measure:** Outcomes were based on scores on a 7-point Likerttype scale at all follow up consultations and were assessed as overall outcomes compared to the initial baseline assessments.

**Results:** A total of 15,249 consecutive follow-up appointments from 4,571 patients were given outcome scores. 77% reported positive health changes; 21 % little better (+1), 25% moderately better (+2) and 31 % reported to be much better (+3). A condition specific analysis of improvement over time is presented. The most common conditions seen were eczema, menopause, CFS, IBS, osteoarthritis, depression and migraine.

**Conclusions:** Homeopathy and acupuncture seem to have a positive effect in a substantial proportion of this large cohort of patients with complex chronic conditions and previous unsatisfactory response to conventional treatment. Further research needs to look at the most promising conditions using more reliable designs and include an assessment of all the patients who were lost to follow up.

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## Dermal application of a *Cimicifuga racemosa* (CR)-containing cream has beneficial effects on acne

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We have recently shown that the BNO 1055 extract of *Cimicifuga racemosa* rhizome contained 5- $\alpha$ -reductase inhibitory effects by which it inhibited growth prostate cancer cells *in vitro* and *in vivo* [Seidlova-Wuttke et al., *Planta Medica* 2550;72:521–6]. Hence, conversion of testosterone to the more active androgen 5- $\alpha$ -dihydro-testosterone (5- $\alpha$ -DHT) can be inhibited by this extract.

Production of sebum and growth of facial and body hair is also stimulated by 5- $\alpha$ -DHT and its formation occurs locally through 5- $\alpha$ -reductase located in sebum-producing apocrine cells and in hair follicles. The development of acne is a result of overproduction of sebum which is often due to excessive 5- $\alpha$ -DHT action in the skin. This can possibly be inhibited by the 5- $\alpha$ -reductase inhibitor(s) present in CR. Therefore, we tested the efficacy of a dermal application of a CR extract. In this open study, the beneficial effects on androgenic acne in female and male patients were tested. The severity of facial or body rump acne ranged from moderate to severe and was documented photographically. Each patient was seen 4–8 weeks after initiation of local application of the CR-containing cream and the severity of acne was documented photographically again. In all cases, in both females and males, the severity of acne was significantly reduced. In 8 of the 12 patients, the acne pustules had totally disappeared.

It is concluded that the *Cimicifuga racemosa* extracts present in the dermally used preparation have significant beneficial effects on acne which are most likely attributable to the 5- $\alpha$ -reductase inhibitory ingredients in *Cimicifuga racemosa*.

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## Mindfulness-based coping with university life (MBCUL): A randomised wait-list controlled study

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An 8-week mindfulness meditation-based programme has been developed at the University of Northampton by the researchers to help students cope with university life and the many associated stresses and strains. This study builds on the promising results of a non-randomised wait-list controlled pilot study of Mindfulness-based coping with university life (MBCUL) which was conducted in early 2007. In the current study, students at the University of Northampton who were interested in attending MBCUL were randomised into two groups: the MBCUL group ( $N = 14$ ) or the wait-list control group ( $N = 11$ ). Three levels of measurement were administered: psychological questionnaires, measures of the physiological stress response (via salivary cortisol) and qualitative analysis of post MBCUL interviews. Initial results show significant within-group decreases in perceived stress ( $z = -2.191$ ,  $p = .03$ ), anxiety ( $z = 2.409$ ,  $p = .02$ ), depression ( $z = -2.547$ ,  $p = .01$ ), on problem solving ( $z = -2.333$ ,  $p = .02$ ) and