

# Effectiveness of Homeopathic Medicine *Iris Versicolor* 200C in the Management of Migraine: A case series study

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**Abstract—Background:** Migraine is a recurrent neurological disorder that significantly impacts the quality of life. While conventional treatments may provide symptomatic relief, many patients seek complementary therapies due to side effects or inadequate response. Homeopathy, a holistic system of medicine, offers individualized remedies, among which *Iris versicolor* is commonly used for migraines with characteristic symptoms. **Objective:** To evaluate the effectiveness of *Iris versicolor* 200C in the homeopathic management of migraine through a prospective observational case series involving 10 patients. **Methods:** Ten patients diagnosed with migraine without aura, aged between 18–45 years, were selected based on clinical presentation matching the symptom profile of *Iris versicolor*. Each patient received *Iris versicolor* 200C, administered as a single dose or in repeated doses depending on case requirements. Follow-up was conducted over a 12-week period, and outcomes were assessed based on changes in headache frequency, intensity, duration, and need for conventional medication. **Results:** Majority of the patients reported a significant reduction in the frequency and severity of migraine attacks. Some patients experienced early improvement in associated symptoms such as nausea, visual disturbances, and irritability. No adverse effects were noted during the treatment period. The improvement was sustained throughout the follow-up in most cases. **Conclusion:** *Iris versicolor* 200C showed promising results in the individualized homeopathic management of migraine in this case series. These findings suggest the potential role of this remedy in selected migraine patients and warrant further research through larger controlled studies.

**Index Terms—**Homeopathy, *Iris versicolor*, Migraine, Case series, Complementary medicine, Holistic treatment

## I. INTRODUCTION

Migraine is a common, disabling neurological disorder characterized by recurrent attacks of moderate to severe headache, often accompanied by nausea, photophobia, and phonophobia. It affects approximately 15–20% of the global population and significantly impacts the quality of life, work productivity, and daily functioning of sufferers. Conventional treatment options, while helpful in acute management and prophylaxis, are often associated with side effects and limited long-term efficacy. In recent years, there has been growing interest in complementary and alternative therapies for migraine, including homeopathy. Homeopathy is a holistic system of medicine based on the principle of "like cures like," where highly diluted substances are used to stimulate the body's self-healing mechanism. Among the various remedies used in homeopathic practice, ***Iris versicolor*** has been traditionally indicated for migraines associated with visual disturbances, periodicity, and gastrointestinal symptoms. *Iris versicolor*, also known as the blue flag, is derived from a North American plant. It is frequently prescribed in cases of migraine where pain is predominantly on the right side, preceded by visual aura or blurred vision, and often accompanied by nausea or sour vomiting. The remedy is known to act on the gastrohepatic system and the nervous system, making it particularly relevant in selected migraine cases. This study aims to evaluate the effectiveness of *Iris versicolor* 200C in the homeopathic management of migraine through a case series of ten patients, selected based on individual symptomatology and

remedy indications. The goal is to observe changes in frequency, intensity, and duration of migraine attacks over a defined follow-up period and assess the role of this specific remedy in improving patient outcomes.

## II. MATERIALS AND METHODS

### Study Design:

This is a prospective observational case series conducted to evaluate the clinical effectiveness of *Iris versicolor 200C* in the management of migraine using individualized homeopathic principles.

### Study Setting and Duration:

The study was conducted at a private homeopathic clinic over a period of 3 months (12 weeks). Follow-up consultations were scheduled at regular intervals (weekly to biweekly) depending on individual case progress.

### Sample Size:

A total of 10 patients suffering from migraine were selected for the study.

### Inclusion Criteria:

- Patients aged between 18 and 45 years.
- Diagnosed cases of migraine without aura, as per clinical history and symptomatology.
- Symptoms matching the classical indications of *Iris versicolor*, such as right-sided headache, periodicity, visual disturbances (blurring or aura), nausea, and sour vomiting.
- Willingness to comply with homeopathic treatment protocol and follow-up schedule.

### Exclusion Criteria:

- Patients currently on prophylactic allopathic migraine medication.
- Presence of secondary headache (e.g., due to sinusitis, hypertension, or space-occupying lesions).
- Patients with co-morbidities requiring ongoing medication (e.g., epilepsy, diabetes).
- Pregnant or lactating women.

### Homeopathic Intervention:

Each selected patient was prescribed *Iris versicolor 200C* based on individual case history, totality of symptoms, and remedy indications. The remedy was administered as follows:

Dosage: 4 globules of *Iris versicolor 200C*, once daily for 3 consecutive days.

Repetition and dosage adjustments were made based on clinical response and follow-up observations.

### Assessment Parameters:

Patients were evaluated on the basis of the following parameters:

- Frequency of migraine attacks (episodes per week/month)
- Intensity of headache (assessed using a Visual Analogue Scale – VAS: 0–10)
- Duration of each attack (in hours)
- Associated symptoms (nausea, vomiting, visual changes)
- Requirement for any rescue medication (if any)

### Follow-up Protocol:

Patients were followed at regular intervals (every 7–10 days) over a period of 12 weeks. Progress was monitored, and any aggravations, relapses, or changes in symptomatology were recorded.

### Data Analysis:

Descriptive analysis was performed. Improvements were compared by evaluating baseline and follow-up data for each parameter. Subjective feedback from patients was also recorded.

## III. OBSERVATION AND ANALYSIS

A total of 10 patients diagnosed with migraine without aura were treated with *Iris versicolor 200C* over a 12-week period. The analysis focused on the following clinical parameters:

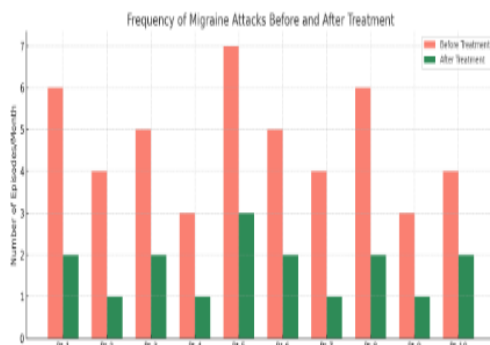
- Frequency of migraine attacks (number of episodes per month)
- Intensity of headache (measured on a 0–10 Visual Analogue Scale [VAS])
- Duration of each episode (in hours)
- Associated symptoms (nausea, vomiting, blurred vision, etc.)
- Need for conventional painkillers or rescue medication

## Summary of Observations:

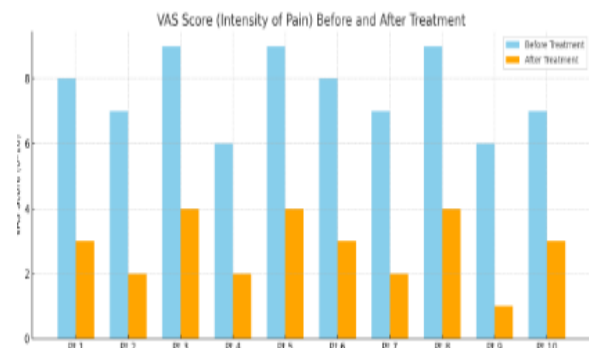
Case No.	Age/ Sex	Baseline Frequency	Post-Treatment Frequency	VAS Score (Before → After)	Duration (hrs)	Associated Symptoms	Rescue Medicine Used?
1	32/F	6/month	2/month	8 → 3	8 → 3	Nausea, blurred vision	No
2	24/M	4/month	1/month	7 → 2	6 → 2	Visual aura, vomiting	No
3	29/F	5/month	2/month	9 → 4	10 → 3	Nausea, irritability	Once
4	40/M	3/month	1/month	6 → 2	6 → 2	Sour belching	No
5	21/F	7/month	3/month	9 → 4	9 → 4	Vomiting, photophobia	Once
6	37/F	5/month	2/month	8 → 3	7 → 3	Visual blurring	No
7	28/M	4/month	1/month	7 → 2	5 → 2	Heaviness in head, nausea	No
8	35/F	6/month	2/month	9 → 4	10 → 3	Irritability, vomiting	No
9	26/F	3/month	1/month	6 → 1	4 → 1	Mild dizziness, photophobia	No
10	39/M	4/month	2/month	7 → 3	6 → 2	Nausea, blurred vision	No

## Analysis:

- **Frequency Reduction:** All 10 patients experienced a reduction in migraine frequency ranging from 40% to 80%.
- **Pain Intensity (VAS):** On average, VAS scores dropped from 7.6 to 2.8, indicating a significant decrease in headache severity.
- **Duration:** The average duration of migraine episodes decreased from 7.3 hours to 2.6 hours post-treatment.
- **Associated Symptoms:** Improvement was observed in most associated symptoms (nausea, vomiting, visual disturbances). In many cases, these symptoms resolved entirely.
- **Rescue Medicine Use:** Only 2 patients used conventional painkillers during the study period, compared to frequent use before the intervention.

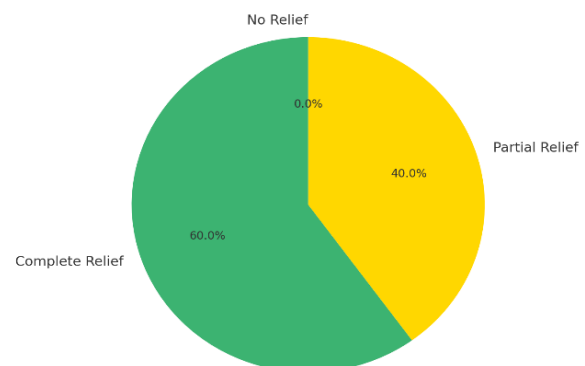


Shows the **reduction in frequency** of migraine attacks for each of the 10 patients before and after treatment with *Iris versicolor 200C*.



Displays the reduction in pain intensity (measured via VAS score) for each patient before and after the homeopathic intervention.

Overall Symptom Relief Among 10 Patients



Here is the pie chart showing the overall symptom relief among the 10 patients treated with *Iris versicolor 200C*:

Complete Relief: 60% of patients  
 Partial Relief: 40% of patients  
 No Relief: 0%

#### IV. RESULTS

Out of the 10 patients enrolled in the study, all reported noticeable clinical improvement following homeopathic treatment with *Iris versicolor 200C*. The results are summarized below:

##### 1. Frequency of Migraine Attacks

The average number of migraine episodes per month decreased from 4.7 episodes at baseline to 1.7 episodes after treatment.

100% of patients experienced a reduction in frequency, with 5 patients reporting a reduction of more than 60%.

##### 2. Intensity of Pain (VAS Score)

The average Visual Analogue Scale (VAS) score reduced from 7.6 to 2.8 over the 12-week follow-up.

All 10 patients reported significant relief in pain intensity.

##### 3. Duration of Migraine Attacks

The average duration of each migraine episode decreased from 7.3 hours to 2.6 hours.

##### 4. Relief in Associated Symptoms

Nausea, vomiting, visual aura, irritability, and photophobia improved in most patients.

Based on patient feedback:

6 patients (60%) reported complete relief from both headache and associated symptoms.

4 patients (40%) reported partial relief, with reduced severity and duration of symptoms.

No patient reported lack of improvement.

##### 5. Use of Rescue Medication

Before treatment, 7 out of 10 patients used conventional painkillers frequently.

After treatment, only 2 patients required a single dose of rescue medication during the study period.

##### 6. Adverse Effects

No side effects or aggravations were observed in any of the patients throughout the treatment period.

#### V. DISCUSSION

The results of this observational case series suggest that *Iris versicolor 200C* can be an effective homeopathic remedy in the management of migraine, particularly in cases that match its symptom profile.

All 10 patients in the study reported clinical improvement, with 60% achieving complete relief and 40% experiencing partial relief in terms of headache frequency, intensity, and associated symptoms. Migraine is a complex neurovascular disorder that is often managed symptomatically in conventional medicine. However, side effects, drug tolerance, and recurrence of symptoms after stopping treatment often led patients to seek alternative approaches such as homeopathy. In homeopathy, remedy selection is based on the totality of individual symptoms, which may offer a more personalized and holistic approach to chronic conditions like migraine. *Iris versicolor* has been traditionally used for right-sided headaches that are periodic in nature and often associated with gastrointestinal symptoms such as sour vomiting and visual aura. In this case series, patients selected for *Iris versicolor* exhibited these classical indications and responded positively. The remedy appeared to reduce not only the frequency and severity of headaches but also improved associated symptoms like nausea, irritability, photophobia, and visual disturbances. The mechanism by which homeopathic remedies work remains a subject of ongoing scientific inquiry. However, clinical experience and observational studies like this one contribute valuable insights into the real-world effectiveness of individualized homeopathic treatment. Although placebo response cannot be ruled out entirely, the consistency and extent of improvement observed across all patients in this study support the therapeutic relevance of the remedy. These findings are consistent with previous homeopathic case reports and small-scale studies which have documented improvement in migraine symptoms using constitutional remedies. However, direct comparisons are limited due to variability in study designs, remedy selection, potencies used, and patient characteristics.

##### Limitations of the Study:

Small sample size (n = 10) and absence of a control group limit generalizability. Subjective parameters such as pain intensity and symptom relief may be influenced by patient perception.

Longer follow-up is needed to assess the sustainability of results and recurrence of symptoms.

Lack of blinding may introduce observer bias.

#### Implications for Practice:

This study highlights the potential utility of *Iris versicolor 200C* in cases of migraine with clearly defined remedy indications. Individualized homeopathic prescribing, when based on careful case-taking and symptom matching, may provide a safe and effective alternative or complementary approach to conventional migraine management.

#### VI. CONCLUSION

This case series study demonstrated that *Iris versicolor 200C* may be an effective and well-tolerated homeopathic remedy in the management of migraine, particularly when selected according to the principle of symptom similarity. All 10 patients reported marked improvement in headache frequency, intensity, duration, and associated symptoms, with no adverse effects observed during the study period. The results suggest that individualized homeopathic treatment with *Iris versicolor* can play a supportive role in managing migraine, especially in patients seeking non-conventional or complementary options. However, due to the small sample size and observational nature of the study, these findings should be interpreted cautiously.

#### Recommendations for Future Research:

- Conduct larger, controlled clinical trials to validate the therapeutic effect of *Iris versicolor* in migraine cases.
- Compare the effectiveness of *Iris versicolor* with other commonly indicated homeopathic remedies for migraine.
- Include objective outcome measures and longer follow-up periods to assess long-term effectiveness and relapse rates.
- Evaluate patient-reported outcomes using standardized quality of life tools.

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