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# MUCEDOKEHL

A Medicine With a Large Spectrum of Efficacy -  
Results of an Application Study

by

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## Introduction

One hundred and fifty six patients in nine doctors' practices were treated with the homeopathic preparation MUCEDOKEHL as capsules, drops, suppositories, drops for percutaneous application or injections. MUCEDOKEHL contains *Mucor mucedo*, a medically effective ingredient in varying homeopathic dilutions. Capsules contain *Mucor mucedo* 4X trituration, drops *Mucor mucedo* 5X dilution for oral or topical application; suppositories contain *Mucor mucedo* 3X trituration; and injectable solution contains *Mucor mucedo* 5X.

The purpose of the application study was to investigate applications and the actual efficacy of the preparation under the conditions of daily practice.

All patients who received at least one dose of this medicine were considered and included in the study.

## Participating patients

Patients aged 3 to 85 years of both sexes were included in the study. 75 men (48.1%) and 81 women (51.9%) participated in the study. The age of the patients varied between 3 and 85 years with an average of 27.8 years and a standard deviation of 23.2 years. The men were on average approximately 8 years younger than the women, with an average age of 23.9 years for the men, and 31.5 years for the women. The age difference

can be explained by the fact that 44 of the 75 male patients (58.6%) were younger than 12 years, while only 37 of the 81 women (45.6 %) were younger than 12 years. The gender groups also differed in average height.

More than half of all patients were under 12 years (51.9 %), 3.8% were between 13 and 30 years, 16.7 % between 31 and 45 years, 16.7 % were between 46 and 60 years, and 10.9 % were older than 60 years (*Fig. 1*).

## Diagnosis and accompanying illnesses

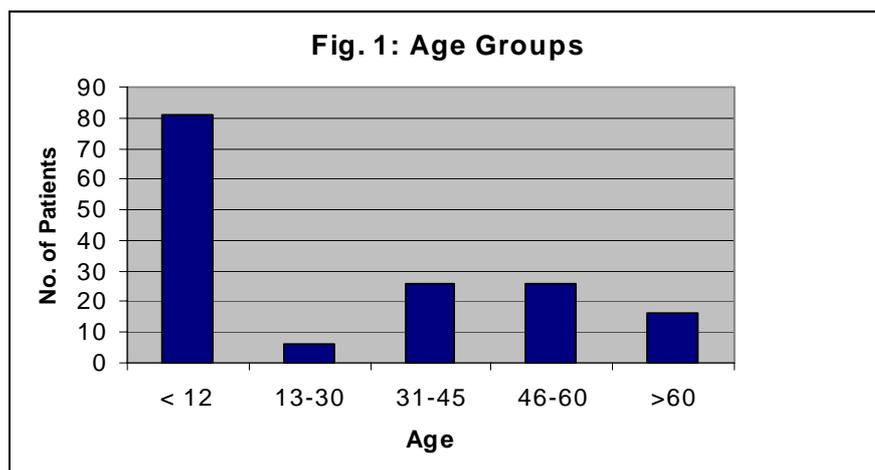
The diagnosis leading to prescription was indicated

in the study record. It appeared that according to isopathy MUCEDOKEHL is applied very broadly, especially with ailments of the ENT area. 82 % of the patients (128 patients) were treated in this area of indication. The following index (*Table 1*) gives information about the broad operational area of MUCEDOKEHL.

In order to achieve a measurement of the chronic illnesses, the patients were asked for how long the illness and/or the complaints existed. A time screen was therefore created for less than 6 months, up to 1 year, up to 3 years, and over 3 years. For 83 patients (53.2 %) the

Area of Indication	No. of Patients	Area of Indication	No. of Patients
Sinusitis	43	Apoplexia/stroke	1
Adenoids	1	Bronchopneumonia	2
Bronchitis	68	Neurodystonia	3
Grippal infections	5	Otitis	1
Lymphatic oedema	2	Cystitis	2
Pharyngitis	2	Rhinitis	5
Neurodermatitis	1	Prostatitis	1
Angina/tonsillitis	6	Ostitis of the jaw	5
Thyroid malfunctions	8		

*Table 1*



complaints existed for less than 6 months. Approximately equal numbers of patients gave statements of the following periods: 1 year, under 3, and over 3 years. 3 patients gave no statement at all. Of the 156 patients included in the study, 82 patients (52.6 %)

Continuance of No. of complaints	
Complaints	N = 153)
< 6 months	83
< 1 year	21
< 3 years	22
> 3 years	27

had already previously been treated with MUCEDOKEHL.  
**Point in time of consultations and duration of the treatment.**

According to the nature of an application study the doctor was not given a fixed time frame to carry out a final examination. This final examination occurred anywhere between 4 and 371 days, with an average of 35.5 +/- 40.7 days (Fig. 2).

### Dosage

The dosage was applied for each form of administration

Total population			
	Med. Dosage	Min. Dosage	Max. Dosage
Capsules	4.7 ± 1.5	2	9
Drops	8.2 ± 2.7	5	30
Suppositories	1.04 ± 0.4	1	2
Perc. rubbing	4.5 ± 2.5	2	10
Injection ml	1.9 ± 0.4	1	4

Table 2

as recommended on the package enclosure:

Capsules: daily 1 to 3 capsules before breakfast or in the evening before going to bed with some fluid.

Drops: once a day 8 drops before a meal.

Suppositories: once a day 1 suppository before going to bed.

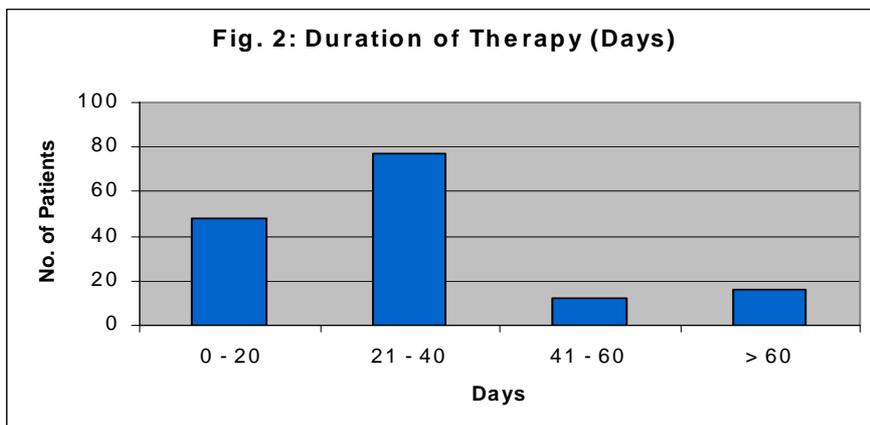
Topical application: Once a day 5 to 10 drops at the site of the symptom or in the bend of the elbow; with simultaneous injection treatment only on days with no injection, 2 x weekly 5 to 10 drops.

Injection solution: 2 times weekly 1 ml either i.m.; s.c.; i.c.; or i.v.

With reference to the form of administration, 73 patients were treated with capsules, 114 patients with drops, 62 patients with suppositories, 27 patients with drops to rub in and 52 patients with injections. Multiple listings were necessary if several administration forms were combined.

The medium dosage with reference to the form of administration (Table 2) is shown in the following index. Injection volumes are related to one week of application and the remaining forms of administration to a daily dose.

In both groups, younger and older than 12 years, the dosage was not significantly different. The age group younger than 12 years an average of 4.9 capsules per day were given and to the over 12 age group an average of just 4.3 capsules per day. Altogether a more compact dosage shows itself in the younger group, which is not only reflected in the smaller standard deviations but especially in the maximum doses.



In the current therapy the form of administration was combined freely in an almost equal number of patients (50.6 %). The simultaneous application of capsules, drops and injections was preferred to the combination of capsules, drops, suppositories and injections.

In both age groups a clear difference was noticed regarding the incidence of combining the forms of administration. Whilst with 41.3 % of the patients older than 12 years (N= 75) combinations of application forms were used, 63.0 % of the patients younger than 12 years (N= 81) were treated with combinations.

### Comparison from single and multiple users

In the last 5 years before this study 52.6 % of the patients had already been treated with MUCEDOKEHL. Especially distinctive was the mono-therapy with drops in 23 patients, suppositories in 14 patients and capsules in 10 patients.

More than half of the patients (52.6 %) had already, in the last

Patient Group	Opinion to Effectiveness according to Age Structure (%)							
	Patients' Opinion				Doctors' Opinion			
	Very Good	Good	Moderate	No Effect	Very Good	Good	Moderate	No Effect
All Patients	26.5	55.6	15.2	2.7	30.0	53.3	16.0	0.7
First User	34.8	50.7	8.7	5.8	38.2	47.1	13.2	1.5
Multiple User	19.7	59.3	21.0	0	23.2	58.5	18.3	0

Table 3

Patient Group	Opinion to Effectiveness according to Age Structure (%)							
	Patients' Opinion				Doctors' Opinion			
	Very Good	Good	Moderate	No Effect	Very Good	Good	Moderate	No Effect
All Patients	77.0	21.6	0.7	0.7	84.8	14.5	0.7	0
First User	67.2	29.8	1.5	1.5	76.8	21.7	1.5	0
Multiple User	85.0	15.0	0	0	91.5	8.5	0	0

Table 4

Patient Group	Opinion to Effectiveness according to Age Structure (%)							
	Patients' Opinion				Doctors' Opinion			
	Very Good	Good	Moderate	No Effect	Very Good	Good	Moderate	No Effect
All Patients	26.5	55.6	15.2	2.7	30.0	53.3	16.0	0.7
First User	15.0	61.3	22.5	1.2	17.3	61.7	19.8	1.2
Multiple User	39.5	49.3	7.0	4.2	44.9	43.5	11.6	0

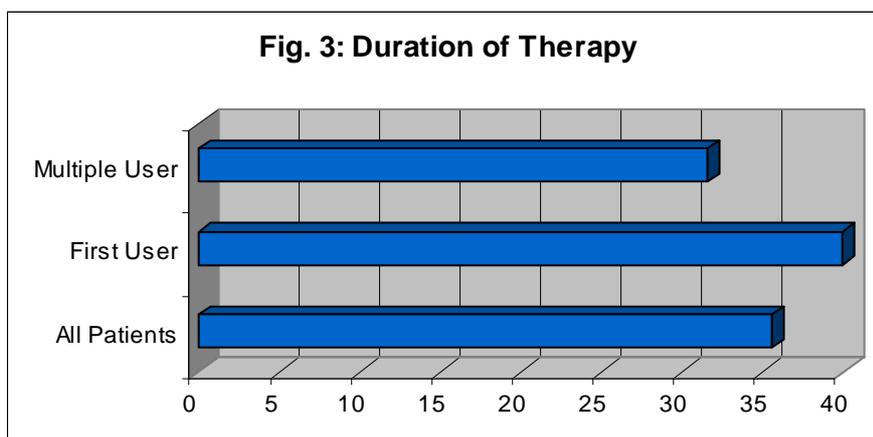
Table 5

5 years, received a therapy of one or several forms of MUCEDOKEHL. Thus it was indicated to compare these two groups of first time users and multiple users with reference to efficacy and tolerance. Conclusions with respect to a possible sensitisation against the medical ingredients should be possibly drawn from the compatibility data.

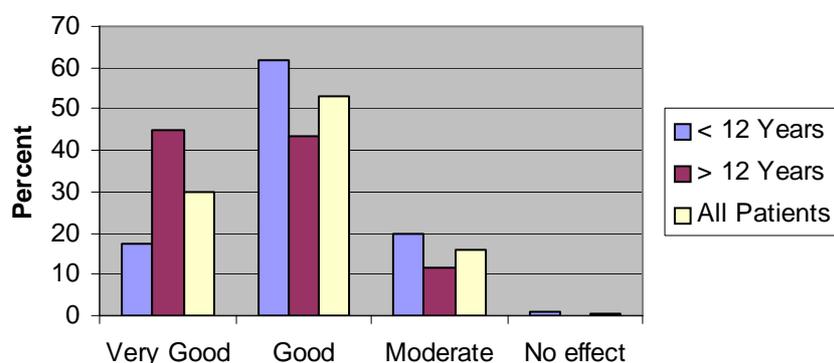
First time users judged the efficacy (category 'very good') better than

multiple users. Yet the multiple users never found 'poor efficacy' (Table 3). The therapy duration of multiple users was 4 days shorter than the average of 31.6 +/- 40.5 days. First time users were treated 40.0 +/- 40.5 days on the average (Fig. 3).

Also with respect to compatibility multiple usage came off clearly better than single usage. In the group of multiple users both patients and doctors judged exclusively with the appraisals 'very good' and 'good', moreover, 'very good compatibility' was much more distinct than in the total average. This data doesn't show any indication of sensitisation of the patients through the medically active ingredients of Mucor mucedo (Table 4).



**Fig. 4: Doctors' Opinion to Effectiveness**



### Final judgement of efficacy

In the final judgement, doctors and patients were asked about efficacy and compatibility. The categories for compatibility were 'very good', 'good', 'moderate' and 'no effect'. Additionally the doctor was asked about the compliance of the patient. Here the classifications were 'very good', 'good', 'moderate' and 'poor'. In the judgement of efficacy (N = 151) 26.5 % of the patients commented with 'very good' and 55.6 % of the patients with 'good'. 15.2 % of the patients only gave a 'moderate' efficacy, while 2.7 % registered 'no effect'. The doctors' judgement of the efficacy (N = 150) was similarly positive as that of the patients. In 30 % of the patients the doctors classified the efficacy as 'very good' and 53.3 % as 'good'. In 16 % of the patients the doctors registered only a 'moderate' efficacy and in 0.7 % of the patients 'no effect' (Fig. 4).

80 patients were judged by the doctors as 'very good' concerning

application conduct (N = 133), 50 patients as 'good'. This means that 83,3 % of all patients who were included in the study were certified with good or very good compliance. 3 patients were certified with 'moderate' compliance and no patient was certified with 'poor' compliance.

### Final judgement of compatibility

At the end of the investigation patients and doctors made a judgement regarding tolerance. They had to differ between the following categories: 'very good' 'good', 'moderate' and 'poor' tolerance. 77.0 % of the patients (N = 148) and 84.8 % of the doctors (N = 151) classified compatibility as 'very good'. 21.6 % of the patients and

14.5 % of the doctors certified MUCEDOKEHL a 'good' compatibility'. 0.7 % of the patients and doctors indicated

a 'moderate' compatibility. No doctor judged it as 'poor', however, one patient did, in this case the doctor had judged 'moderate' compatibility. The compliance in this patient was 'very good' (Table 4).

With respect to the group of children younger than 12 years, efficacy as well as compatibility was far more reservedly judged by doctors and patient, in comparison with the group older than 12 years. Whilst in the younger group only 15 % of the patients certified the effect with 'very good', in the over 12 age group 39.4 % certified same. This was also stated in the doctors' judgement: 17.3 % 'very good' efficacy in the younger group, 44.9 % in the older group (Table 5). In the judgement of the tolerance/compatibility the group differences were not very significant. 70.6 % of the patients younger than 12 years classified the compatibility as 'very good', and 84.3 % of the patients older than 12 years did so (Table 6).

Patient Group	Opinion to Effectiveness according to Age Structure (%)							
	Patients' Opinion				Doctors' Opinion			
	Very Good %	Good %	Moderate %	No Effect %	Very Good %	Good %	Moderate %	No Effect %
All Patients	77.0	21.6	0.7	0.7	84.8	14.5	0.7	0
First User	70.6	29.5	0	0	82.7	17.3	0	0
Multiple User	84.3	12.9	1.4	1.4	87.1	11.5	1.4	0

Table 6



### **Single considerations of administration forms**

If the single application forms of MUCEDOKEHL are considered, most doctors prefer a combination of the forms offered. Of the 156 patients who were included in the study, 73 were treated with capsules (11 in monotherapy), 114 with drops (26 in monotherapy), 62 with suppositories (13 in mono-therapy), 27 with drops

as percutaneous embrocation (3 in monotherapy) and 52 with injections (2 in monotherapy). With respect to the efficacy as well as the compatibility of the single administration forms 'good' to 'very good' results were achieved. With reference to the efficacy it again became clear, that doctors as well as the young patients judged more carefully in comparison to the group older than 12 years.

**In summary** it can be said that MUCEDOKEHL has a good compatibility and efficacy especially for chronic respiratory tract diseases, sinusitis and disturbances of the thyroid function.

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