

Homeopathy

High relevance in modern healthcare

Facts, data and policy options



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Preamble

Since its founding by Samuel Hahnemann 220 years ago, homeopathy has repeatedly been the subject of heated health policy debates. Historically and still relevant today, regardless of all recent scientific findings regarding the CASUS KNACKSUS, the debate revolves around the seemingly irresolvable contradiction of the 'nothing in it – nothing to it' argument, as no active ingredients can be detected in highly potentised remedies using standard chemical detection methods.

Furthermore, complex regulatory models of [health and disease](#), such as those underlying homeopathy, cannot simply be understood through the prevailing research methods developed in the 20th century for science-oriented medicine.

Negative media campaigns over the last 20 years appear to have turned *homeopathy* into a scientific taboo, accompanied by biased academic criticism.

Changes to statutory health insurance reimbursement rules, coupled with growing cost pressures in the healthcare sector, further distort the public perception, whilst demand for homeopathic treatment among the population remains consistently high:

60–70% of the German population report positive experiences (Allensbach, 2023)

This provides sufficient reason and cause to correct the image of homeopathy, which has been distorted by misinformation. There is a need to fundamentally rethink the potential and significance of homeopathy for healthcare.

Constructive health policy measures – targeted research funding, quality assurance and balanced communication – should help to establish the potential of homeopathy as part of a modern, individualized medicine of the 21st century. Herein lies the untapped opportunity to better meet a significant proportion of the population's healthcare needs and, above all, to do so in a cost-effective and sustainable manner.

This requires an open-minded attitude from all those involved, an attitude inherent in the inquiring spirit of scientific thought and one that has characterised the development of homeopathy from the very beginning and throughout the ages.

*This Policy Brief is based on the [position paper 'Homeopathy – What it is and what it is not'](#), **author:** Tjado Galic, 03/2026, **publisher:** Constantin Hering Foundation for Homeopathic **Medicine**®, Nuremberg, office@constantin-hering-stiftung.com. All cited studies and reviews are documented in the full [list of references](#) in the complete position paper.*

Legal Basis

The state's responsibilities within the healthcare system establish the framework and serve the purpose of welfare. They are based on constitutional provisions:

Principle of neutrality: The state must not grant the prevailing scientific paradigm the right to judge other scientific paradigms (Zuck 2004).

Principle of equality: Different scientific research approaches must be given equal consideration and supported in their development.

Freedom of therapy: The choice between treatment methods lies primarily with patients and treating professionals.

Constitutional law: Like anthroposophy and phytotherapy, the complex therapeutic system of homeopathy enjoys a constitutionally guaranteed status, being enshrined as *a distinct therapeutic approach* within the German healthcare system (Federal Social Court, judgment of 4 April 2006 – B 1 KR 12/05 R).

Definition

Homeopathy is a complex healing system which involves the conscientious and prudent application of potentised single remedies (homeopathic remedies) according to defined rules, in both diagnosis and therapy. The therapeutic philosophy is based on a humanistic view of humanity that considers the person as a whole, just as they are, and their relationship to the world around them.

Homeopathic diagnosis and therapy encompass not only a comprehensive medical history and the current clinical picture but also all supplementary findings and data from the patient's medical history.

In particular, the qualitative aspects of subjective experience, as well as the family history, including the biopsychosocial context, are evaluated in order to arrive at a comprehensive, holistic *understanding of the individual case*. A broad-based humanistic approach to research and teaching, which goes beyond a purely scientific understanding, is crucial for this.

When practised professionally, homeopathy is a forward-looking, individualized form of medicine *par excellence* (individualized homeopathy, *iHom*).

The practical approach is based on a complex, regulatory model. Homeopathic remedies are understood as regulatory stimuli for the *organism's intrinsic and self-regulation*, which is why a minimum level of regulatory capacity in the patient is necessary for the remedy to be effective.

Homeopathic remedies

Homeopathic remedies are particularly safe medicines manufactured in accordance with clearly defined requirements of pharmaceutical law; they are legally enshrined in the European Pharmacopoeia (Ph.Eur.), specifically the Homeopathic Pharmacopoeia (German HAB), and in the German Pharmacy Operating Regulations (ApBetrO) through precise manufacturing regulations. They are primarily derived from plant, mineral, metallic and animal source substances.

From the very beginning, these effects have been and continue to be carefully tested in controlled clinical trials and have been clinically and empirically verified over the centuries. In addition, there are numerous valuable *case reports* in the homeopathic literature, which represent a still under-represented body of knowledge and await systematic evaluation in accordance with current scientific principles.

State of scientific evidence

Clinical research

Between 1991 and 2021, hundreds of clinical studies, six large *meta-analyses* and numerous *systematic reviews* on homeopathy were conducted (see also <https://www.constantin-hering-stiftung.com/en/homeopathy/clinical-research/>).

The systematic statistical analyses demonstrate that in over half to two-thirds of all applications, there is a chance of benefiting from homeopathic treatment.

Meta-analysis for all homeopathic applications (Linde et al. 1997, Lancet): OR 1.66 (CI 1.3–2.08)

Meta-analysis of individualised homeopathy (Mathie et al., 2014): OR 1.53 (CI 1.22–1.99), $p = 0.005$

Qualitative analyses in recent *systematic reviews* based on the six major meta-analyses demonstrate *high-quality evidence* for individualised homeopathy (*iHom*) and moderate-quality evidence for non-individualised homeopathy. A detailed search for bias factors reveals 53% positive results for *iHom* studies covering a broad spectrum of indications in high-quality specialist publications.

GRADE SYSTEM ANALYSIS, Hamre et al., 2023

AMSTAR-2 ANALYSIS, Bonamin et al., 2024

The quality of homeopathy studies is comparable to research findings from conventional medicine from the same period. *By way of comparison*: across the entire Cochrane Register of conventional medicine, only 10–12% of all interventions have high-quality evidence; 30% moderate, 34% low, and 24% receive the lowest level of evidence (Howick et al., 2022).

Basic research

Preclinical research over the last 25 years has demonstrated specific effects, which have been published in around 1,800 experimental studies across more than 1,380 publications in high-quality specialist literature.

Physical research: NMR measurements confirm the presence of superstructures (nanoparticles) in highly potentised solutions, which increase significantly as potency rises.

Nanomedicine parallels: The resulting superstructures exhibit similarities to nanoparticles, which are specifically used as drug carriers in modern medicine

In vitro and in vivo plant and animal studies: Reproducible, significant effects have been demonstrated across a wide range of experimental set-ups.

Biological mechanism of action: The effects of potentised substances exhibit a systemic regulatory character with clear indications of the activation of self-regulation.

The available data provides a basis for a wide range of further research opportunities to further decipher the biological effects using new and complex methodological systems. Advances in the life sciences and physics offer new research approaches for this purpose.

The placebo debate

A comprehensive follow-up study of the seminal placebo study (Beecher, 1955) revealed that all effects classified as *placebo effects* were attributable to other factors (Kienle, 1995).

The categorical assumption that a placebo is a sham medication or intervention that can be defined by means of a statistical significance threshold is based on a linear way of thinking. Everyday clinical realities such as contextual effects, complex reactions, paradoxical effects and the existence of a nocebo effect cannot be captured by this definition.

In fact, placebo effects occur in all diagnostic and therapeutic situations, irrespective of statistical analyses. It is therefore scientifically appropriate to refer to placebo effects in the sense of non-specific reactions that are not yet fully understood, as is sensible and customary when dealing with open research questions (see also <https://www.constantin-hering-stiftung.com/en/science/placebo-effect/>).

The results of the quantitative and qualitative analyses on homeopathy also show that equating homeopathy with a placebo cannot be justified from a scientific standpoint, even statistically.

Cost-effectiveness

Several health insurance evaluations and scientific studies over the last 20 years have also addressed the economic aspect. The most comprehensive *systematic review* to date reaches the following conclusions (Ostermann et al., 2024):

Recent high-quality studies show that homeopathic treatments represent an effective and cost-effective option in many cases.

There is no clear evidence of an additional burden on the statutory health insurance system; rather, there is a tendency towards a reduction in costs.

Insured individuals receiving homeopathic treatment have lower overall costs (SECURVITA, 2020)

Older studies of lower quality weaken the overall findings of the review, which is why further high-quality research is warranted and recommended.

Clinical relevance

Homeopathy is particularly sought after in cases where standard medical care does not provide adequate solutions, especially for common health concerns such as:

Susceptibility to infection, atopy and allergies, chronic headache disorders, back pain, metabolic disorders, somatoform disorders, anxiety disorders and depression, pregnancy and childbirth, menopausal symptoms, developmental issues in children, chronic progressive conditions with inadequate symptom control (oncology, neurology, rheumatology) and in the palliative care of seriously ill people.

The demand for homeopathy is historically documented; it is not a marginal phenomenon, but a permanent feature of society that has developed in Germany over 200 years and is deeply rooted across all social strata.

Health-conscious patients generally have a good understanding of the limits of self-treatment. In addition, there are patient organisations (*Federal Association of Patients for Homeopathy e.V.*), public campaigns (*Weil's hilft*) and lay associations (*Hahnemannia e.V.* since 1868).

If one considers the economic significance of the most common reasons for seeking advice and treatment, established homeopathic treatment provided by qualified physicians, naturopathic practitioners (German

Heilpraktiker) and midwives, together with expert advice from pharmacists, can structurally relieve the burden on standard healthcare provision in the long term.

Interdisciplinary medical care provided by different medical systems on the basis of fundamental rights, such as self-determination and freedom of choice of therapy, is a constitutional feature of liberal democratic societies.

Options for action in health policy

The current situation offers a wide range of areas for action that should be examined more closely in order to further develop the potential of homeopathy and make effective use of it in healthcare provision. This gives rise to several levels of policy instruments, which are summarised in the table below.

Area of action	Specific recommendation
Clarification of terminology	A clear definition of individualised homeopathy (<i>iHom</i>), distinguished from related approaches (spagyrics, anthroposophy, complex remedies), should be developed and promoted in collaboration with experts to provide transparent guidance for the general public and professional circles.
Research	Targeted promotion of interdisciplinary clinical and healthcare research. Incorporate the development of suitable study designs for individualised homeopathy (<i>iHom</i>) into the research frameworks of the Federal Ministry of Health (BMG) and the German Research Foundation (DFG). To promote targeted basic research in the various fields of efficacy research using appropriate bioscientific and physical methods. The establishment of interdisciplinary research networks in quantum biology and systems biology should be facilitated and supported for the purposes of homeopathy.
Training and Continuing Professional Development	Further develop uniform training and continuing professional development standards for physicians, naturopathic practitioners (German Heilpraktiker), midwives and pharmacists practising homeopathy, in collaboration with professional bodies, experienced experts and independent specialist advisers, and enshrine these in the legal framework. Promote the systematic evaluation of case reports.
Statutory health insurance reimbursement	Initiate a reassessment of eligibility for statutory health insurance reimbursement (G-BA) based on current evidence of cost-effectiveness, and specifically involve subject matter experts and patient representatives in negotiations.
Public discourse	Support and promote balanced, fact-based reporting through institutional communication. Ideologically driven <i>anti-homeopathy campaigns</i> are no substitute for scientific debate and, in the medium to long term, undermine trust in public institutions. Therefore, the framework conditions for a balanced dialogue between different viewpoints in the scientific discourse, free from bias, should be created in the interests of optimal healthcare provision.
Freedom of treatment	Actively protect the constitutionally guaranteed pluralism within the healthcare system – including against political pressure from the paradigmatic self-interests of various groups in the healthcare market and from academic institutions.

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