

EVALUATING THE EFFECTIVENESS OF HOMEOPATHIC AND HERBAL REMEDIES FOR UTERINE FIBROIDS: LITERATURE ANALYSIS

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Abstract

Uterine fibroids are recognized as the most prevalent benign gynecological tumors found in women of reproductive age. Although the prevalence has only marginally increased globally over the last few decades, lifestyle, hormonal, genetic, and environmental factors continue to influence the course and patterns of the disease. Various allopathic medications are available for and surgery is last option for large size fibroids removal. This review reports the role of homeopathic/ herbal medications in the treatment of uterine fibroids, including *Thuja occidentalis*, *Fraxinus americana*, *Nigella sativa*, and several specific homeopathic remedies without any surgery. The results from case reports, observational studies, and small clinical series show promise for improving quality of life, reducing bleeding, relieving pain, and maybe reducing fibroid size, even though the evidence is limited. There is reason to investigate the more promising therapeutic activities of these therapies, mainly with regard to their anti-inflammatory, antioxidant, hormonal modulator, and anti-proliferative actions, even though there are only a few randomized controlled trials to support these claims. For definitive treatment recommendations, however, additional randomized controlled trials and improved clinical quality are required, as with any innovative medication.

Keywords: Uterine fibroids; leiomyoma; homeopathy; *Thuja occidentalis*; *Fraxinus americana*; *Nigella sativa*.

Global data on fibroids

In 2021, the age-standardized prevalence rate of uterine fibroids worldwide was approximately 2,841 per 100,000 women (95% CI: 2,164–3,682). There was a very small annual percentage change between 1990–2021: incidence increased on average 0.23% years; and prevalence increased on average just 0.05% per year. Based on GBD projections, rates are expected to continue to be stable in the global population until 2050— with modest increases predicted during the annual average (Zihan *et al.*, 2025; Lou *et al.*, 2023). Hence, the global prevalence in 2025 would be minimally different from the prevalence levels in 2021, as there does not appear to be symptoms of steep increase. The prevalence ratio in Australia is 7.3% at ages 45-49; globally there are upward trends but in many countries we cannot specify % (Wilson *et al.*, 2024).

Causes and risk factors of uterine fibroids

Obesity and high BMI, high blood pressure, heredity, pregnancy, hormone issues, vitamin D deficiency, dietary habits, age, metabolic issues (Qu *et al.*, 2023; Yang *et al.*, 2022). Symptoms reported were menorrhagia, pelvic pain, prolonged bleeding, inter-menstrual bleeding, frequent periods (periods more frequent than every 24 days), and irregular bleeding patterns. Pain symptoms included bladder pressure, pelvic pain that was chronic, pain at various points in the menstrual cycle (mid-cycle, after cycle, during menses), and dyspareunia (Zimmermann *et al.*, 2012).

Reasons for the increasing spread of uterine fibroids

Enhanced diagnostic capacity consisted of the wider use of ultrasound and magnetic resonance imaging which has led to increased detection, even among women without symptoms. Changes in lifestyle consisted of urbanization and economic development, which contributed to decreased levels of physical activity and increased overweight and obesity (Zhou *et al.*, 2023). Unhealthy dietary practices consisted of consuming more red meat and processed meat, and consuming less fruit and vegetables, thereby increasing risk. Environmental exposures consisted of exposure to substances that alter hormones, which are linked to industrialization and may increase fibroid risk. Reproductive behavior changes consisted of delaying childbearing and lower parity to have longer lifetime exposure to estrogen and progesterone. Growth of the population and longevity consisted of increases in the number of women living into the high-risk age group (30–50 years), thereby increasing global prevalence (Zihan *et al.*, 2025).

Food Item limited use in uterine fibroids

Red meats (beef, lamb, goat), processed meats (ham, sausages, salami), processed carbs (white bread, white rice, pasta made with refined flour), full-fat dairy products, and foods and beverages containing sugar (cakes, pastries, soda), fried or fast foods (foods that are oily, or higher in fat), alcohol (especially beer) (Krzyżanowski *et al.*, 2023; Chiaffarino *et al.*, 1999).

Fibroids treatment in allopathic and homeopathic medicine

In Allopathic medicines, treatment of fibroids focuses on symptoms management like (control bleeding and pain) rather than tumor elimination or use hormones for shrink the fibroids. Various treatment

available included GnRH agonist (Lupron), progestins, tranexamic acid, and oral contraceptives. These used with NSAIDS for reduction of pain and tumor size prior to surgery. Surgery is last option of large size (5-10cm) of fibroid in allopathic treatment (Vanessa *et al.*, 2014).

In homeopathy, without surgery it can reduce or remove large size (5-10cm) uterine fibroids by using herbal or homeopathic medicine (Manna, 2025). Individualized homeopathic treatment may have positive impacts on uterine fibroid patients' standard of life and symptom reduction, according to numerous research and case reports. But, the evidence from larger randomized controlled trials has been lacking, and current gynecological standards do not describe homeopathy as the main treatment (Wadhwa *et al.*, 2024). Therefore, one might pursue homeopathy as an adjunctive or additional treatment rather than as a replacement for the usual medical treatment. The most recent research examining the advantages of homeopathic remedies for the treatment of uterine fibroids consistently indicated that homeopathy has advantages, such as enhanced quality of life, reduced fibroid size, and symptom relief. Numerous treatments were shown to be helpful in a variety of potencies (Aphale *et al.*, 2024).

***Thuja occidentalis* for the treatment of Fibroids**

Classified under the Cupressaceae family, *Thuja occidentalis* is commonly known by several names: Northern white-cedar, thuiercedre, cedre-thuya occidental, eastern white cedar, and American or eastern arborvitae. The new leaves of Thuja (identified with the dry substance) contain the following: 0.6% essential oil; 2.07% decreasing sugar; 4.9% polysaccharides that dissolve in water; 2.11% minerals that dissolve in water; 1.67% free acid; and 1.31% tannins. 65% thujone, 8% is thujone, 8% fenchone, 2% α -pinene, and 5% Sabinene make up the essential oil of the young leaves (indicated with the monoterpene division) (Fig. 1-5). The monoterpenes carvotanacetone, origanol, origanols, myrcene, and camphene are also present in the essential oil. Thuja has exhibited antimicrobial, antibacterial, antiviral, anti-cancer, anti-HIV, antibody formation, soothing, free radical scavenger, anti-diabetic, radioprotective, hepatoprotective, insect repellent, anti-atherosclerosis, neuropharmacological, sedating, and antifungal action (Gupta *et al.*, 2021).

***Fraxinus Americana* for the treatment of Fibroids**

Member of family Oleaceae, common name is white ash. The leaves and bark of white and green ash trees contain key ingredients, including coumarone, flavonoids, sugars, and tannins. These substances have antibacterial, antioxidant, anti-inflammatory, anticancer, and neuroprotective properties, as well as potent anti-aging, anthelmintic, and antiviral properties (Almasi *et al.*, 2017). *Sepia 200c* and *Fraxinus americanus* Q 10 drops were administered twice a day, morning and night, to a 51-year-old woman who had been experiencing heavy bleeding for ten to fifteen days. The patient's heavy bleeding and subsequent uterine fibroid were resolved, but she did not make a full recovery. This case study demonstrates that homeopathy is not just treating symptoms, but underlying is addressing the cause. This medication aids in reducing the size of uterine fibroids (Tummala *et al.*, 2023).

Other Homeopathic treatments

Thlaspi bursa pastoris 6X: Profuse bleeding from uterine fibroids accompanied by back pain and a bruised sensation. Menstrual periods are heavy and too often. Every other period is really taxing. Women who struggle to recuperate from one menstrual cycle before another can benefit from this therapy (Gaware *et al.*, 2009).

Calcarea flour: This biochemical salt treatment is very effective in removing hard tumors from any smooth muscle and regaining the lost flexibility of smooth muscles. This treatment primarily targets the uterus, which is a smooth muscle organ. This treatment is strongly advised for uterine fibroids if they are stone hard and the uterine region has ruptured swellings. Additionally, this treatment may be able to treat uterine fibroids that cause bearing down discomfort (Fatima, 2017).

Natrum muriaticum 200c: A case study states that a 30-year-old woman with uterine fibroids was first prescribed *Natrum muriaticum* 200c, a customized homeopathic remedy, and then additional drugs as needed. After receiving homeopathic treatment for about a year, the patient's health started to get better. According to ultrasonographic results taken both before and after treatment, a MONARCH score of +7 suggested that the homeopathic treatment was probably responsible for the clinical enhancement. The efficacy of customized homeopathic therapy for uterine fibroids is demonstrated by this case study (Afroza, 2022).

Nigella sativa

Its common names include black cumin, fennel flower, nutmeg flower, black seed, and black caraway. It is a member of the Ranunculaceae family. It is made up of 30% saturated fatty acids (palmitic and stearic acid), sitosterol, thymoquinone (30%–48%), thymohydroquinone, dithymoquinone, p-cymene (7%–15%), carvacrol (6%–12%), 4-terpineol (2%–7%), t-anethol (1%–4%), sesquiterpene longifolene (1%–8%), alpha-pinene and thymol, and alkaloids. Antibacterial, antiviral, antifungal, hair loss, antioxidant, preservative, sun protection, wound healing, anti-inflammatory, anti-aging, anticancer, skin pigmentation, anti-diabetic, antioxytotic, cosmetic use, gastroprotective, cardiovascular, nephroprotective, pulmonary protective, anti-asthmatic, and hepatoprotective benefits (Paarakh *et al.*, 2010). *N.sativa* has a clinical history to fibroids in Ayurveda in Sri Lanka. *N. sativa* active compounds *thymoquinone*, *nigellone* and *alpha-hederin* have anti-inflammatory, antioxidant and anti-proliferative effects. These effects could empirically confer factors that suppress growth of abnormal smooth-muscle cells or fibrotic tissue. It notes that some animal studies suggest modification of activity of estrogen and progesterone may be important in understanding effects of *N.sativa* because these hormones are considered important in allowing fibroid growth. Increases uterine blood flow and decreased congestion; that is also thought to increase immune regulation and decrease oxidative stress, both of which have been implicated in abnormal cell proliferation within the uterus (Nigella sativa, 2023). In post-menopausal women, seed extracts of *N. sativa* affected estradiol, FSH and vaginal maturity index. Suggests human reproductive/hormonal effects of *N. sativa* but not fibroid specific, however, altering hormone levels is the pathway that has been implicated in fibroid biology (Sukatendel *et al.*, 2024).

Methodology

Key data of case report studies by using combine homeopathic/herbal medicines is summarized in results and discussion.

The chemical structure shows a cyclohexanone ring with two methyl groups on the C2 carbon. The C3 carbon has a hydrogen atom attached with a dashed bond, indicating it is on the same side of the ring as the C2 methyl groups (cis configuration).

The chemical structure depicts a complex polycyclic alkaloid, possibly a tropane derivative. It features a tropane core (8-azabicyclo[3.2.1]octane) fused to a benzene ring. The structure is further substituted with a quinuclidine-like system and a quaternary carbon atom bonded to two methyl groups. Several hydroxyl groups are attached to the structure, including a carboxylic acid group on the benzene ring and multiple hydroxyl groups on the tropane and quinuclidine systems. The nitrogen atom is highlighted in blue.

Figure 5: Sabinene

Results of case studies of homeopathic/ herbal medicines

Table 1: Case study of homeopathic/ herbal formulation

Homeopathic/ Herbal formulation	Symptoms	Efficacy result	Reference
<i>Calcarea carbonica</i> , <i>Pulsatilla</i> , <i>Phosphorus</i> , <i>Lycopodium</i> , <i>Sulfur</i> , & <i>Kali carbonica</i> .	Fibroid (103 individual)	Statistically significant reductions in symptoms & fibroid size (p = <0.05)	Quadri et al., 2012
<i>Sepia officinalis</i> and <i>Natrum muriaticum</i>	Intramural fibroid 3.2 x 2.8cm	Improvement in symptoms	Samina et al., 2025
<i>Aurum muriaticum natronatum</i>	Fibroids	Significantly improve subsequent infertility treatment	Swarup et al., 2025
<i>Apis mellifica</i>	Utrine fibroid with burning pains with excessive tenderness of uterus	Good results	Sharma et al., 2022
<i>Sepia</i>	Utrine fibroid, abundant menstrual flow & UTI infection	Good results	Sharma et al., 2022
<i>Thuja occidentalis</i>	Leiomyoma (Utrine fibroid with ovarian cysts)	Size reduction.	Wadwah et al., 2025
<i>Thuja occidentalis</i>	Bulky uterus with uterine fibroid	Positive result	Wadwah et al., 2025
<i>Fraxinus amricana</i>	Uterine enlargement, fibroids	Positive result	Manna, 2025
<i>Nigella sativa</i> & <i>Anithun</i>	Uterine fibroid	<i>A.sowa</i> is more potent than <i>N.sativa</i>	Kaumadi et al., 2020

Results and Discussion

Results of case studies of homeopathic and herbal medicines are present in table -1 and their active phytochemical structure in Figure 1, which showed that *Thuja*, *Fraxinus Americana*, *Sepia* and *N. sativa* have potential to treat fibroids. *Thuja occidentalis* has been previously stated in case reports and small clinical series to be helpful for the treatment of uterine fibroids, with multiple case reports suggesting

complete regression on imaging ultrasound assessment (Wadhwa *et al.*, 2025; Siddiqui *et al.*, 2024). In an MD dissertation including 30 patients, Thuja was noted as one of the most frequently prescribed constitutional remedies overall, with documented recovery or improvement noted in 73% of cases (Pujar *et al.*, 2011). Older reviews have specifically listed Thuja for fibroids, polyps, or both, while some recent reviews appear biased towards giving it consistent priority over other remedies in this case (Kasliwal *et al.*, 2022). While it has been considered as a part of an individualized prescription in randomized controlled trials, there is no data indicating a specific effect on fibroid size (Luthra *et al.*, 2023). Overall, Thuja is seen as a complementary aspect of individualized homeopathic management of fibroids: however, strong controlled evidence is lacking (Kasliwal *et al.*, 2022).

Fraxinus Americana Mother Tincture treats uterine cancers and uterine outgrowths (fibroids), relieves foot pains, and prevents the uterus from returning to its usual size after childbirth (bearing-down). Prolapse, or uterine displacement, and watery vaginal discharge are two other ailments that Fraxinus Americana mother tincture helps with (Tummala *et al.*, 2023).

N. sativa contains phytochemicals, antioxidant/free radical scavenging properties may be clinically relevant because oxidative stress/inflammation may be related to fibroid growth. *N. sativa* extracts increased female reproductive hormones and created uterine effects in rodent studies. A rodent study is important because it demonstrates *N. sativa* biological activity on uterine/reproductive tissue in the animal studies (Nagy *et al.*, 2024)

Conclusion

The majority of current research offers some justification for thinking about using herbal and homeopathic therapies to assist women with uterine fibroids with significant supporting advantages. Promising treatments for symptoms like heavy menstrual bleeding, pelvic pain, and hormonal imbalances include *Thuja occidentalis*, *Fraxinus americana*, *Nigella sativa*, *Natrum muriaticum*, and *Calcarea carbonica*. Some case reports also show partial or total regression of fibroid size. These treatments' established anti-inflammatory, anti-proliferative, hormone-modulating, and antioxidant properties all promote biological pathways linked to fibroid growth. Unfortunately, the strength of conclusions is hampered by the fact that the great bulk of the information currently available is restricted to tiny studies or reports of case studies. Therefore, high-quality, controlled clinical trials are necessary to establish standardized treatment protocols and demonstrate efficacy, even though homeopathic and herbal therapies may be reasonable herbal or non-invasive options for women seeking complementary treatment options or a holistic approach to treatment.

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