Combating mobile phone addiction in children through homoeopathy

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Abstract

The amount of time that the children spend on mobile phones has been increased drastically, added to the development of applications, learning features, gaming had made children more vulnerable to use more time. When speaking about safe and efficient way of treatment in managing such problems, Homoeopathy has an upper hand due to its individualistic and holistic approach. So, this study is mainly concentrating to determine the efficacy of homoeopathic medicines in management of mobile phone addiction in children. A sample of 15 cases screened and diagnosed with Problematic Mobile Phone Use Questionnaire (modified) to have mobile phone addiction is taken from the hospital in Kulasekharam. After analyzing for a period of time, 73% (11 cases) showed marked improvement, followed by slight improvement in 7% (1 case) and no improvement in 20% (3 cases). Hence, Homoeopathy found to be effective in controlling mobile phone addiction in children.

Keywords: Addiction, children, homoeopathy, mobile phones, questionnaire

Introduction

Mobile phones initially used for communication purpose, but as days progressed it has revolutionized in every aspect in one’s life where we can able to access any data or information at any corner of the world in our fingertips. Smart phone use has surged during the last decade especially in developing nations like India. Early researches portrayed its positive outcomes. To be more particular, it has often been argued that smart phones gives access to communication without moving from place to place by confined at one spot [1].

Mobile phone dependence (MPD)/addiction refers to an increased indulgence to activities associated with mobile phones, amid eagerness and a robust and continuous dependence on mobile phones, which ends up in loss of self-control and compromised psychological and social functioning among individuals [2]. Due to the increased popularity and the amount of time spent on their smart phones, excessive usage had become one of the emerging widespread behavioral addictions.

Previous studies reveal that this addiction had caused variable mental problems in teenagers such as depression, suicidal ideas as well as physical problems like blurring of vision, headache, neck pain and disturbances in sleep. It also been found there is financial and social problems like suspension from school associated with this addiction especially in adolescent period [3].

Whereas, this addiction is not alone caused only by the children, involvement of parents also plays a vital part in it. So, this study is mainly concentrating to determine the efficacy of homoeopathic medicines in the management of mobile addiction in children.

Materials and Methods

It is a clinical study with pre and post assessment. 15 cases of Mobile Phone Addiction were taken from the college OPD of Sarada Krishna Homoeopathic Medical College. Screening was done by using Problematic Mobile Phone Use Questionnaire (PMPUQ Modified). Data was collected according to SKHMC case format.

Inclusion Criteria

Patients of age group between 2-17 years of age who are diagnosed to have Mobile Phone addiction. Children of both sexes
Exclusion Criteria
Patients below 2 yrs and above 17 years of age. Patients of unwilling parents.

Intervention
Medicine was selected based on the available totality of symptoms of the child. Potency was selected according to susceptibility of the patient. The outcome of the study is assessed by the same questionnaire used for screening i.e., Problematic Mobile Phone Use Questionnaire (PMPUQ). Added to it, overall performance of the patients is also assessed. Statistical data is done by paired t test for pre and post score assessment.

Result
Pre & Post Addiction Scores

![Graph showing Pre and Post Addiction Scores](image)

Fig 1: Pre and Post Assessment

Distribution of cases according to improvement

![Pie chart showing improvement distribution](image)

Fig 2: Inference
Distribution of cases according to medicine prescribed

Statistics
The mean value of post score (34.8) is lesser than the pre score (60.46) indicating marked improvement after homoeopathic medicines. The p-value equals 0.0000128, (p(x≤T) = 0.000006399 ). It means that the chance of type I error (rejecting a correct H₀) is small: 0.0000128 (0.0013%). The smaller the p-value the more it supports H₁. Since p-value < α, H₀ is rejected.

Conclusion
After a period of time, 73% (11 cases) showed marked improvement, followed by slight improvement in 7% (1 case) and no improvement in 20% (3 cases). In this study, the medicine which is given most was Calc Carb to 4 cases. This is followed by Sulphur and Lycopodium with 2 cases each. The other medicines prescribed was Phosphorous, Pulsatilla, Calc Phos, Nat carb, Sepia, Ars alb and Bryonia. There is significant improvement in pre and post dependency scores, thereby rejecting the Null Hypothesis. Hence, it is thereby evident that homoeopathic medicines are found effective in combating mobile phone addiction in children.

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