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ARTICLE

Title: Healing through loss: integrative strategies for grief management with homoeopathy

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ABSTRACT

Grief is a multifaceted emotional, cognitive, and physical response to loss that profoundly impacts individuals across all dimensions of life. This review explores the psychological, behavioural, and physiological manifestations of grief, emphasizing its stages and the broader implications on mental health. By integrating contemporary psychological frameworks and therapeutic approaches, including homoeopathy as an adjunct, this article underscores the importance of personalized care in grief management. Furthermore, it delineates the distinctions between grief, bereavement, and mourning, while incorporating cultural and societal perspectives. This structured analysis aims to provide clinicians with a comprehensive understanding of grief to enhance patient outcomes.

Keywords: *Grief, Bereavement, Mourning, Psychological Frameworks, Homoeopathy, Cultural Perspectives*

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INTRODUCTION

The death of a loved one, the end of a relationship or the loss of a cherished goal can bring on deep psychological and physiological changes. Grief, despite being ever-present, is one of the most complicated emotional conditions, a mix of stages, moods, expressions and cultural differences. An exploration of grief needs to be interdisciplinary, drawing on psychology, neuroscience, cultural studies. Though the five stages of grief proposed by Elisabeth Kübler-Ross serves as a reliable roadmap, new advances showcase the interplay of emotions, cognition, and behaviour. Furthermore, treating grief requires individualized, therapeutic approaches that address both the psychosocial and somatic needs of the client, including the possible benefit of adjunct treatments such as homoeopathy.

This article explains the process of grieving and different parts of grieving and aims to educate clinicians on European side the complexities of grief. Highlighting differences between grief, bereavement, and mourning, enlisting evidence-based practices, it aims at promoting a better understanding of grief as a holistic experience and its relevance for clinical practice.

STAGES OF GRIEF^[1]

The five stages of grief — denial, anger, bargaining, depression, and acceptance — are laid out in pioneering research by Elisabeth Kübler-Ross. Knowing these stages provides

a helpful framework to navigate the emotional chaos that comes with loss. Each stage is broken down below with a little psychology behind this.

1. Denial

A key part of loss's response is denial. It acts as a buffer for the person to protect against the harshness of reality. Denial can show up as not believing, feeling numb, or avoiding talks about the loss. This step gives a short break, helping the mind to slowly deal with the shock.

Psychological Aspect: As it provides a sense of safety and security, however prolonged denial can delay emotional growth. Therapy seeks to encourage individuals in not only acknowledging their experiences, but also feel safe enough to express how they feel.

2. Anger

When the protective shell of denial drops away, people tend to get angry instead. This feeling can also be externalized toward people, situations or even the lost one. Anger directed inward can take the form of self-blame or guilt. Anger is an emotional scream of sorts, but should not be a loud voice that ends up bursting and needs to be contained.

Psychological Aspect: To curb anger, it is important to also acknowledge their feelings and provide healthy outlets for them. Journaling, mindfulness and exercise are all techniques that can be used to channel anger in a constructive way.

3. Bargaining

Bargaining is an internal negotiation — a way of trying to regain control. This phase often entails the repeating interrogative found in statements of "if only" or "what if," going over what has happened again and again and finding ways to reverse the course of action. Psychological Aspect: This is not the stage of the life's journey when regret and helplessness should come into play. Shift the focus inward through therapeutic dialogue, which can teach what we can control and what we cannot, leading to acceptance, and self-compassion.

4. Depression

Depression is the emotional burden of acknowledging the finality of the loss. People can experience deep sadness, loneliness or indifference to daily life. This is a difficult stage, but is an important one in processing grief.

Psychological Aspect: Support in this stage is centred around active listening and reassurance. Therapeutic approaches such as cognitive-behavioural methods, to help patients to notice and reframe negative thoughts are used and patients are encouraged through gradual re-engagement with life.

5. Acceptance

Acceptance is the last phase, in which the person incorporates the loss. Survival involves adjustments to the new reality, finding new ways to cope, and new ways to honour the memory of lost.

Psychological Aspect: Acceptance does not mean you will not be sad; it is the individual process of incorporating the pain into your life story. Promoting protective behaviours, for example, to focus on the future and creating support groups, helps building of resilience.

GRIEF, BEREAVEMENT, AND MOURNING: KEY DIFFERENCES^[1,2]

While often used synonymously, grief, bereavement and mourning each describe different aspects of the experience of loss. Recognizing these differences is critical to better serve the needs of people on this

multifaceted journey.

Grief: The Emotional Journey Within

Grief includes the internal emotional and psychological responses to loss. Such responses are highly variable, including intense sorrow and anger but also times of numbness or disbelief. The personal nature of grief makes it less visible compared to mourning which can manifest through observable expressions.

Psychological Aspect: The unpredictable nature of grief creates a need for safe spaces where people can express their feelings without facing judgment. Psychotherapy enables individuals to delve into their emotional experiences while validating their feelings.

Bereavement: The State of Loss

The fact-based condition of bereavement involves the loss of an important person or object. The subject covers explicit situations like the passing of a loved one. Bereavement describes the external manifestation of loss but does not encompass the internal emotional processing that defines grief.

Psychological Aspect: The experience of bereavement prompts individuals to search for meaning in life and understand death. Counselling services along with peer support groups act as guides for individuals who are navigating their reflective period.

Mourning: The Cultural and Social Expression

People display their grief through mourning practices which follow the standards set by their cultural and religious traditions. Funerals and memorials along with other similar ceremonies give grieving individuals a framework to process their emotions and present opportunities to pay collective tribute to those who have passed away.

Psychological Aspect: Through mourning rituals people achieve closure while building support within their community. People are motivated to attend these rituals so they can share their feelings with others who have experienced similar losses.

EMOTIONAL AND BEHAVIOURAL MANIFESTATIONS

Emotional Responses^[1,3]

Grief is a combination of emotions that includes sadness, apathy, anger, and worry. These emotions are eccentric in expression, as they usually tend to repeat in cyclical fashion instead of straightforward progression. Such expression shows the complexity of the grieving process.

The Psychological Aspect: Healing emotionally is a part of managing active emotional expression and accepting normal emotional transitions.

Cognitive and Behavioural Symptoms^[1]

Thoughts of a loved one can be painful and intrusive which makes it extremely difficult to concentrate. When grieving, it is not uncommon to experience these cognitive symptoms that stem from ruminative thought processes. One can also notice some behavioural modifications such as excessive withdrawal from social events, insufficient food intake, or interrupted sleep cycles.

Psychological Aspect: It is possible to manage these disturbing thoughts through effective CBT as part of cognitive behavioural therapies. Such thoughts are also managed by providing one with a habit that relieves the disturbance.

Physical Manifestations^[1,3]

Chronic pain can be related with psychosomatization, migraines, or disorders of the immune subsystem. Grief also expresses itself in a physical manner through symptoms like fatigue and chest tightness and even gastrointestinal issues. The physical expression of grief is consistent with the findings from Stroebe and Schut's Dual Process Model, which emphasizes the need to switch coping strategies when dealing with loss and trying to restore the balance. Recognizing these dynamics allows for more appropriate intervention, including rapid emotional pain relief and practical assistance with grief-related issues.^[4]

Psychological Aspect: In terms of physical self-care measures, exercise and relaxation techniques can be combined to relieve somatic (bodily) symptoms and improve general well-being.

EXPANDING PERSPECTIVES ON GRIEF

Recent Research and the Integrated Process Model

The Integrated Process Model (IPM) outlines five significant dimensions of loss and grief: physical, emotional, cognitive, social, and spiritual. The said dimensions are proofs that grief affects not just the psychological but also the physiological well-being of a person. Grief presents fatigue, bodily aches, or even exacerbation of chronic conditions. Deep sorrow accompanies loss as well as anger or even numbness. Some of the cognitive effects are impaired concentration and difficulties with decision-making processes. Grief is also an isolating experience that confuses relational dynamics and reduces neighbourhood support. It can lead to questions about existence and require one to find purpose again.

The IPM framework through which grief is processed makes emphasis on the holistic nature of grief and thus encourages clinicians to consider more individualized approaches. For example, the care routines that clients are advised to put in place's physical dimension may be dealt with while emotional and cognitive interventions may require psychotherapy. Moreover, fostering social connections may create another along with multidimensional pathways of therapy along with the exploration of spiritual healing methods.^[5]

Neuroscience of Grief

Many studies show that grief affects brain function a lot, especially in the regions that deal with emotional regulation and cognitive processing. When people are usually grieving, the amygdala increases its activity levels which is an important structure in the processing of emotions; therefore, people become more sensitive to emotional stimuli.

Increased activity here may disrupt the functioning of the prefrontal cortex that regulates emotions; thus, people may have difficulties managing their sadness or even anger or anxiety. In addition, prolonged grief may impair the hippocampus involved in memory and learning; thus, making cognitive problems more prevalent like forgetting things or having some trouble with decision-making.

These results underscore the deep neuropsychological implications of grief and show how important it is to seek help early. Neuropsychological support, including mindfulness-based interventions and cognitive-behavioural therapies, help to relieve these effects by building emotional resilience and improving cognitive functions.^[6]

Cultural Variations in Mourning

Various cultures deal with loss in a way which reveals the differences among these cultures while the historical thought patterns, practices, and beliefs are in focus. For instance, in a collectivist culture, which rules in a lot of Asian and African countries, grief is generally shown publicly as a way to be shared with everyone. Mourning practices are undertaken at such a time as holding funeral ceremonies that may be open to all and public displays of mourning through which bereaved individuals are helped to move on. On the flip side, though Western cultures are generally deemed to be individualistic, which permits in-house meditation and private grief coping strategies that honour personal autonomy in the grieving process than collectivism. Along with that, the individualised habits of the people stand out as well. Buddhism supports the idea of reincarnation, whereas Muslims believe in life after death. However, grieving in Judaism is a more intimate and solemn affair. Hindu ritual of cremation, along with a 13-day mourning period, combines spiritually engaging counselling with necessary bereavement support. "Sitting shiva" in Judaism provides an official seven-day period for grieving together as a form of collective loss expression. The recognition of culturally unique bereavement customs allows

clinicians and other care-providers to adopt these interventions in a manner suitable for the cultural context of the person under their care. Cultural competence in the support of people who are mourning not only legitimizes their experience but also makes interventions relevant and effective.^[7]

Coping in a Post-Pandemic World

Plagues and epidemics have always brought unexpected twists to the experience of grief and the way it is expressed, which also gave rise to the necessity of trying new approaches to face these special challenges. Solitude and bereavement associated with the Covid-19 pandemic changed the way in which the indispensable mourning rituals could be performed—burials and wakes—providing a sense of community and closure. People experienced different vis-à-vis prolonged grief and remained with unsolved feelings, varying in last communal grieving among all. Digital commemoration events, online support forums, and tele-therapy units are among the greatest initiatives that emerged to tackle these urgent problems. Such strategies keep individuals in touch even amidst their separations, simultaneously providing grief support. The virtual organizations allow the people who are so sad to be accompanied between their living places even though far away from them as well. Thus, they get the time to work through what causes the sadness. Moreover, the proliferation of digital tools underscores the necessity for distressed and grieving individuals to effectively integrate technology into their coping strategies in order to navigate the needs of a post pandemic world.^[8]

HOMOEOPATHIC MANAGEMENT OF GRIEF ^[9,10,11,12]

Homoeopathy provides the holistic and individual process of treating grief based on the unique symptoms and responses of the person. Acute or chronic grief can follow from personal loss, but homoeopathic remedies can be personalised to a person's emotional state, physical symptoms, and general disposition.

Acute Grief

Acute grief, which comes on soon after a loss, manifests through extreme emotional reactions. Remedies for acute grief are chosen to assist the person process the wave of shock and sorrow.

1. **Ignatia amara:** This remedy is especially useful for someone going through grief from a sudden, traumatic death. Common symptoms include spasmodic weeping, a lump in the throat sensation, sighing, and general emotional disorientation. It is usually signalled when the individual can't articulate the grief and describe it openly, and have a tendency to repress their feelings.
2. **Opium:** Opium is indicated for those in shock, taboo, or disbelief after experiencing a traumatic event. This is highly effective for people who feel somewhat disconnected from reality, as though they are dazed or in a state of unreality. Such symptoms include confusion, indifference and an overall inability to process the event.

Suppressed Grief

Fewer emotions surface when we feel grief internally or hold it in which can result in physical or emotional problems, a feeling of numbness and lack of emotional involvement. The homoeopathic remedies for suppressed grief work by bringing the suppressed emotions to the surface, helping in better emotional release.

1. **Natrum muriaticum:** Homeopathic Natrum muriaticum is often indicated for people who hold in their grief and resist outer displays of emotion. They might lean towards isolation and not want to look out for or receive comfort from others. Symptoms are of feelings of sadness, repressed emotions, loneliness, and generally having the feeling of aloneness.
2. **Staphysagria:** Staphysagria's use is required in people who suppress their grief and may even feel angry or unjust. They

might feel really hurt but do not want to acknowledge their feelings or the feelings of others so they often experience this internal struggle and emotional repression. It is a remedy for emotional trauma deep down behind the placid face.

Chronic Grief

Unresolved loss can lead to chronic grief where the pain of loss never really ends, such grief can often extend as deep despair. Chronic grief is treated by homoeopathic remedies that aim at curing prolonged states of emotional pain and helping the person to accept the loss and restore the person to lead a hopeful life.

1. **Aurum metallicum:** Give this remedy to someone that feels deep sorrow, despair, or hopelessness. They can make life feel like for them, it is not worth living anymore and can cause them to detach from social interaction, isolating themselves from others. Aurum metallicum covers the suicidal thought process and excessive loneliness so common with chronic grief.
2. **Phosphoric acid:** Phosphoric acid works well for people who suffer fatigue, apathy, and indifference after long-term grief. This remedy helps and treats the emotional numbness and loss of interest that people experience after prolonged grief.
3. **Causticum:** This remedy is indicated for those individuals who complain of a feeling of injustice related to their grief. They can be emotionally attuned and sensitive, and have great sympathy for others' suffering, but another is reckoning with an unprocessed grief. Causticum is prescribed in cases where grief is combined with feelings of helplessness or a strong wish to correct what has been perceived to be wrong.

Physical Symptoms of Grief

Grief can also take a physical form, with symptoms including fatigue, shortness of breath and a sense of overall collapse.

Homoeopathic treatments target these physical manifestations to assist in the recovery of the individual on both mental and physical levels.

1. **Carbo vegetabilis:** This remedy is called for when grief causes shortness of breath or a sense of physical collapse. People might feel so weak and grave that they can feel like they cannot "breathe," overwhelmed by their feelings.
2. **China officinalis:** Useful in those with weakness or fatigue due to emotional stress. But your grief takes the energy of life away this remedy will bring your physical strength and vitality back.
3. **Gelsemium:** Gelsemium is used for individuals who experience anticipatory anxiety or nervousness surrounding their grief process. Symptoms often include trembling, weakness, and a loss of coordination along with an overwhelming sense of dread or fear.

Children Experiencing Grief

Children can feel their grief more acutely or incomprehensibly, and often express their feelings through changes in behaviour or emotional outbursts. Homoeopathy offers remedies for children in states of grief, helping them process their emotions healthily.

1. Pulsatilla: This medicine is commonly used for children who are sensitive, tearful, and clingy during periods of bereavement. They can be sensitive and need to be with family and friends to support them in their sorrow.

2. Chamomilla: Chamomilla is indicated for the irritable, inconsolable child who has been very much changed by grief. The child may have fits of temper, restlessness, and an inability to calm down.

Professional Intervention and Counselling

While homoeopathy might be an effective complementary approach for dealing with

one's grief, chronic or unresolved grief calls for professional intervention. Counselling or therapy will facilitate processing feelings in a healthy manner and can provide additional support alongside homoeopathic treatment.

COPING WITH GRIEF^[13]

Coping effectively requires a multi-faceted approach:

1. **Acknowledging the Loss:** The first thing that one could possibly do is to acknowledge the loss. This is probably the most significant first step one could take.
2. **Seeking Support:** Sharing activities with friends, family, and support groups provide all emotional nourishment.
3. **Self-Care:** Resilience is nurtured by attending to physical health through good nutrition, exercise, and sleep.
4. **Professional Help:** Therapy or counselling will provide structured support to deal with complicated emotions.

DISCUSSION

Grief is universal, but very individual and multilayered. Consistent with Bonanno's work on human resilience, it has been argued that people have a built-in resource that enables them to tolerate loss; however, the degree of this resilience may differ depending on individuals' characteristics and their environment. Integrating psychological support with adjunctive therapies like homoeopathy provides a holistic approach to healing, fostering both emotional recovery and practical adaptation.^[14] Future research exploring the synergistic effects of these modalities could further enhance outcomes for individuals navigating grief.

CONCLUSION

Grief requires a very personalized healing process. The multidimensional impact of loss calls for a structured framework that is constituent of both psychological and adjunctive therapies which offer deep options to navigate grief. Incorporating emotional, cognitive, and physical care lays the foundation for resilience and renewal.

REFERENCES

1. Kubler-Ross E. On Death and Dying. Southern Medical Journal [Internet]. 1969;64(5):641. Available from: http://www.psicoterapia-palermo.it/PDFS/On%20Death%20and%20Dying_Kubler%20Ross%20Elizabeth.pdf
2. Lang D, Cone N, Lally M, Valentine-French S, Carter S, Hoiland S. Grief, Bereavement, and Mourning. iastatepressbookspub [Internet]. 2022 Aug 1; Available from: <https://iastate.pressbooks.pub/individualfamilydevelopment/chapter/bereavement-grief-mourning/>
3. THE PROCESS OF GRIEVING [Internet]. Available from: https://www.nj.gov/humanservices/emergency/FCC_ESF8_ProcessOfGrieving.pdf
4. Stroebe, M., & Schut, H. (2010). The Dual Process Model of Coping with Bereavement: A Decade on. OMEGA - Journal of Death and Dying, 61(4), 273-289. <https://doi.org/10.2190/OM.61.4.b>
5. Guldin MB, Leget C. The integrated process model of loss and grief - An interprofessional understanding. Death Stud. 2024;48(7):738-752. doi: 10.1080/07481187.2023.2272960. Epub 2023 Oct 26. PMID: 37883693
6. mills kim. Speaking of Psychology: How grieving changes the brain, with Mary-Frances O'Connor, PhD [Internet]. Apa.org. 2022. Available from: <https://www.apa.org/news/podcasts/speaking-of-psychology/grieving-changes-brain>
7. Morris S. The psychology of grief – applying cognitive and behaviour therapy principles | APS [Internet]. psychology.org.au. 2011. Available from: <https://psychology.org.au/for-members/publications/inpsych/2011/dec/the-psychology-of-grief-applying-cognitive-and-b>
8. Delistraty C. Let's Talk About Our Grief [Internet]. TIME. Time; 2024 [cited 2024 Dec 30]. Available from: <https://time.com/6992594/talking-about-grief-essay/>
9. Allen HC. Keynotes rearranged and classified with leading remedies of the materia medica & bowel nosodes. B. Jain; 1999, p. 49,85, 90, 93, 100, 135, 153, 212, 226, 231, 250, 290.
10. Clarke JH. A Dictionary of Practical Materia Medica. 1902, p. 136-1167.
11. Kent JT. Lectures on Homoeopathic Materia Medica. 1905, p. 195, 391, 524, 721, 744, 768, 797.
12. Vithoulkas G. Essence of materia medica. Usa: B. Jain Publishers (P) Ltd; 2015, p. 21, 54, 130, 150, 188.
13. Park, Crystal & Folkman, Susan. (1997). Meaning in the Context of Stress and Coping. Review of General Psychology. 1. 115-144. 10.1037/1089-2680.1.2.115.
14. Bonanno GA. Loss, trauma, and human resilience: have we underestimated the human capacity to thrive after extremely aversive events? Am Psychol. 2004 Jan;59(1):20-8. doi: 10.1037/0003-066X.59.1.20. PMID: 14736317.