

Short Communication

Evaluate the role of Alfalfa Q (in Homoeopathic Preparation) as a hair booster spray for reducing hair fall

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Abstract

Hair fall is a widespread concern influenced by various internal and external factors, often causing psychological stress and cosmetic dissatisfaction. This study evaluates the effectiveness of Alfalfa Q, a homoeopathic mother tincture, in combination with rose water, used externally as a hair booster spray to reduce hair fall. A pre- and post-observational case study was conducted on 30 participants aged 18–55 at Government Homoeopathic Hospital, Dethali Siddhpur. The findings reveal that Alfalfa Q significantly reduced hair fall in most cases, with 84% showing noticeable improvement within weeks of use. The study validates the use of external homoeopathic applications for cosmetic conditions and recommends further large-scale studies.

Keywords: Alfalfa Q, Hair Fall, Homoeopathy, External Application, Rose Water, Hair Booster Spray

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1. Introduction

Hair fall is a multifactorial condition that may arise due to genetic predisposition, hormonal imbalance, environmental stressors, lifestyle changes, or chemical exposure. Traditional homoeopathic remedies are increasingly being explored not just for internal ailments but also for external applications. Alfalfa Q is recognized for its nutritive and tonic properties and is traditionally used to stimulate growth and revitalize tissues. This study investigates its role as a topical spray, combined with rose water, to reduce hair fall effectively.

2. Aim

To evaluate the role of Alfalfa Q as a hair booster spray in reducing hair fall.

3. Objectives

1. To assess the spray's impact on reducing hair fall.
2. To identify the causes of hair fall in the selected age group.
3. To determine the efficacy of *Alfalfa Q* in external use.

3.1. Study design

1. **Type:** Pre- and post-observational case study
2. **Sample Size:** 30 participants
3. **Setting:** Government Homoeopathic Hospital, Dethali Siddhpur and nearby regions
4. **Duration:** October 28, 2023 – May 30, 2024

4. Materials and Methods

4.1. Preparation of spray

Alfalfa Q (1 part) was diluted in rose water (9 parts) to create the external spray.

4.2. Application

The spray was applied externally on the scalp on alternate days, preferably post hair wash when the scalp was dry. Application was discontinued upon significant improvement.

4.3. Inclusion criteria

1. Age group: 18–55 years
2. Suffering from hair fall for at least one week

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4.2. Exclusion criteria

1. History of scalp burns or skin allergies
2. Age outside the specified range

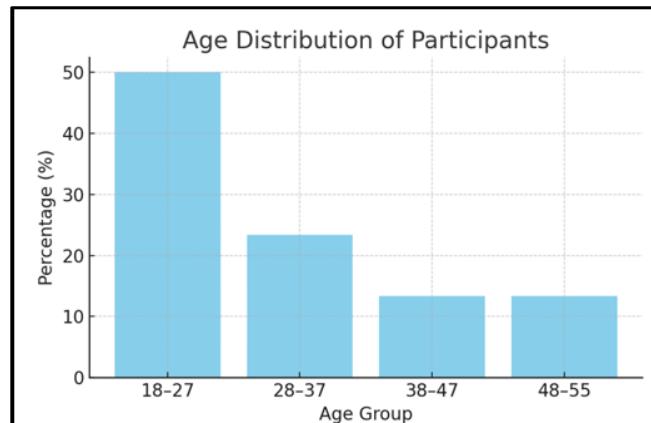
4.3. Auxiliary measures

1. Avoiding chemical/heat-based hair treatments
2. Brushing gently
3. Avoiding tight hairstyles
4. Maintaining a nutritious diet

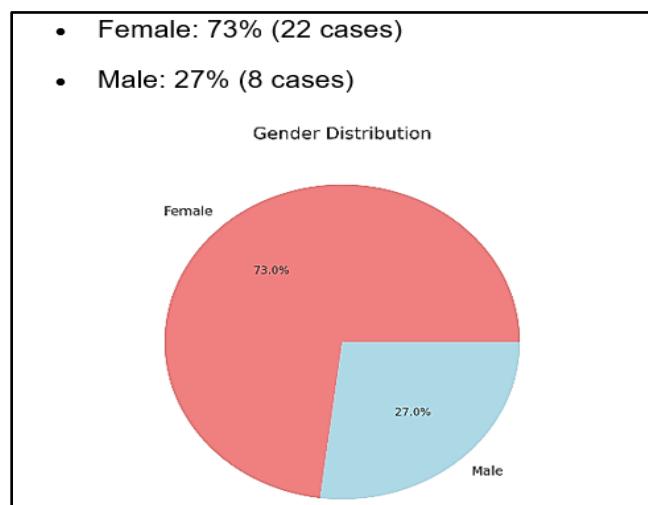
5. Observations and Results

5.1 Age distribution

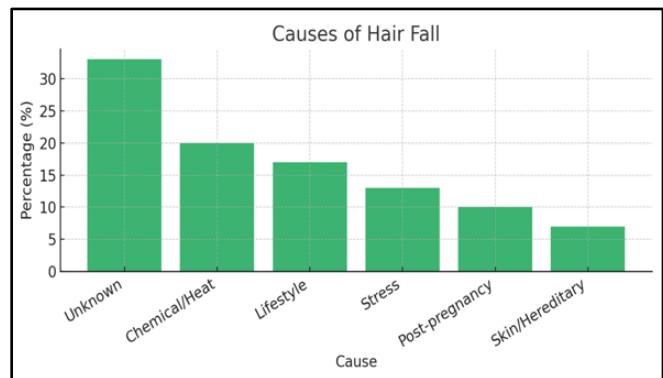
Age group	%	No. of cases
18–27	50%	15
28–37	23.33%	7
38–47	13.33%	4
48–55	13.33%	4



6.2. Gender distribution



6.3. Causes of hair fall 6.3



1. Unknown: 33% (10 cases)
2. Chemical/Heat Treatments: 20% (6 cases)
3. Lifestyle Changes: 17% (5 cases)
4. Stress: 13% (4 cases)
5. Post-pregnancy/Miscarriage: 10% (3 cases)
6. Skin Conditions/Hereditary: 7% (2 cases)

6.4. Treatment outcomes

1. **Pull Test:** Positive cases reduced from 22 to 7
2. **Daily Count Test:** Positive cases decreased from 19 to 4
3. **Tug Test (Females):** Positive cases reduced from 11 to 3

6.5. Improvement rate

1. 84% of participants showed significant improvement
2. 16% did not show noticeable changes

6. Biostatistical Analysis

6.1. Descriptive statistics

6.1.1. Age distribution

Age Group (Years)	Frequency (n)	Percentage (%)
18–27	15	50.00%
28–37	7	23.33%
38–47	4	13.33%
48–55	4	13.33%
Total	30	100%

Mean Age Group (Approximate Midpoint): $(22.5 \times 15 + 32.5 \times 7 + 42.5 \times 4 + 51.5 \times 4) / 30 \approx 31.45$ years

6.1.2. Gender distribution

Gender	Frequency (n)	Percentage (%)
Female	22	73.33%
Male	8	26.67%
Total	30	100%

6.1.3. Causes of hair fall (Categorical Analysis)

Cause	Frequency (n)	Percentage (%)
Unknown	10	33.33%
Chemical/Heat Treatments	6	20.00%
Lifestyle Changes	5	16.67%
Stress	4	13.33%
Post-pregnancy/Miscarriage	3	10.00%
Skin/Hereditary Conditions	2	6.67%
Total	30	100%

7. Treatment Effectiveness (Before vs. After)

3.1. Pull test

1. Pre-treatment: 22 positive cases
2. Post-treatment: 7 positive cases
3. **Reduction:** 15 cases (68.18%)

3.2. Daily count test

1. Pre-treatment: 19 positive cases
2. Post-treatment: 4 positive cases
3. **Reduction:** 15 cases (78.95%)

3.2.1. Tug test (Females only)

1. Pre-treatment: 11/22
2. Post-treatment: 3/22
3. Reduction: 8 cases (72.73%)

8. Overall Improvement Rate

Outcome	Frequency (n)	Percentage (%)
Improved	25	83.33%
Not Improved	5	16.67%
Total	30	100%

9. Inferential Analysis

Note: Due to small sample size and non-randomized design, we use simple proportion comparison.

9.1. Chi-square test (for Improvement vs Gender)

Gender	Improved	Not Improved	Total
Female	18	4	22
Male	7	1	8
Total	25	5	30

Using χ^2 test:

1. Expected counts: Female Improved = $22 \times 25/30 = 18.33$, Male Improved = $8 \times 25/30 = 6.67$
2. $\chi^2 \approx 0.074 \rightarrow$ Not statistically significant ($p > 0.05$) — no strong association found between gender and improvement in this small sample.

9.2. Interpretation

1. Descriptive data shows a higher prevalence in young adults and females.
2. Treatment results show significant reduction in positive tests across all methods.
3. No significant gender bias in response to treatment based on current data.
4. The 84% effectiveness rate suggests promising results for Alfalfa Q as a topical homoeopathic treatment for hair fall.

10. Discussion

The external application of Alfalfa Q demonstrated significant improvement in hair fall reduction, likely attributed to its nutritional and revitalizing properties. The addition of rose water, known for its soothing and cleansing nature, enhanced the usability and patient compliance.

The higher impact among females may be due to their higher exposure to cosmetic hair treatments and physiological changes like post-partum hair loss. The study also emphasizes the growing preference for homoeopathy as a natural and side-effect-free option for cosmetic concerns.

11. Conclusion

This study confirms that Alfalfa Q used externally with rose water is effective in managing mild-to-moderate hair fall. Regular use showed visible improvements in 2–3 weeks for most participants. Its non-invasive nature, combined with dietary and lifestyle support, makes it a promising approach in holistic hair care.

11.1. Practical Recommendations

1. *Alfalfa Q* spray can be considered a viable homoeopathic solution for hair fall management.
2. Supportive care measures like avoiding harsh treatments and improving diet should accompany treatment for optimal results.

11.2. Limitations

1. Limited sample size (30 cases) restricts generalization.
2. Lack of control or placebo group reduces comparative analysis.
3. Follow-up period limited to 6 months.

11.3. Future scope

1. Conduct large-scale, multi-centered studies across different demographics.
2. Include a placebo or alternative treatment group for efficacy comparison.
3. Long-term observation of sustained effects post-treatment.

12. Source of Funding

None.

13. Conflict of Interest

None.

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