

CERTIFIED HOMEOPATHIC ONLINE COURSE - SESSION 12:

• Clinical Studies and Articles

Clinical Study

Homeopaths point to the nearly two hundred years of clinical experience of convinced doctors and satisfied patients. Homeopathic remedies are believed to be effective in treating a wide variety of illnesses: infectious diseases such as flu and colds; chronic conditions such as allergies, asthma, migraines, and PMS. Conventional medicine has not had much of success in treating many of these conditions.

Several clinical studies exist that show the effectiveness of homeopathic remedies. Many of these studies employed double blind studies, accepted by scientists. Recent clinical trials suggest that homeopathic medicines have a positive effect on allergic rhinitis, asthma, treatment of dermatological complaints, fibrositis, influenza, and for the treatment of migraine.

In 1994, the first study that involved homeopathy was published in a peer-reviewed American scientific journal. Jennifer Jacobs, M.D., led the study, which was conducted in Nicaragua and included eighty-one children with acute diarrhea. All the children received standard antidehydration treatment for diarrhea, consisting of water containing salt and sugar. In addition, half the children received homeopathic treatment and half received a placebo. The study confirmed homeopathy's effectiveness: the recovery time for children receiving homeopathic treatment was 20 percent faster than those receiving the placebo, reducing the bout of diarrhea by one day. These results are heartening because diarrhea is the leading cause of death in developing countries such as Nicaragua.

In 1991, the British Medical Journal published an analysis of 107 clinical studies published between 1966 and 1990. The authors found that in 81 of the experiments, the homeopathic treatments were successful. Even when they included only the 23 studies that they considered to be of the highest quality, the vast majority of these (15) showed positive results. Here's how the results broke down: 13 out of the 19 trials of respiratory infection treatment were effective, 6 out of 7 were positive for other infections, 5 out of 7 were positive for digestive system treatment, 5 out of 5 were successful for hay fever, 5 out of 7 showed accelerated recovery after surgery, 4 out of 6 helped in rheumatological disease, 18 of 20 were beneficial for pain or traumatic injury; and 8 out of 10 worked for mental or psychological problems.

In one study published in Lancet by Dr. David Taylor Reilly and his colleagues compared the effects of a homeopathic hay-fever remedy with a placebo. In this double-blind controlled study, Dr. Reilly found that those who received the homeopathic remedy had six times fewer symptoms and were able to cut their use of antihistamines in half.

Another study published in 1989 in the British Medical Journal dealt with fibromyalgia. The double-blind, controlled trial was also "crossed over," meaning the treatment lots were switched after one month so the subjects could be compared, not only with each other, but also with themselves. The results were evaluated by a rheumatology professional who was not a homeopath. The study found that the homeopathic remedy provided highly statistically significant improvement in both subjective and objective symptoms.

In a double-blind controlled study conducted in Britain in 1980, 82 percent of those receiving the homeopathic remedy enjoyed improvements in rheumatoid arthritis versus 21 percent of the control group on placebo. The subjects in this study received remedies that were individually prescribed.

Other significant positive studies show homeopathy helps in pain following tooth extraction (76 percent versus 40 percent for a placebo); reduces vertigo and nausea; reduces labor time in pregnant women (5.1 hours versus 8.5 hours); and reduces risk of abnormal labor (11.3 percent versus 40 percent).

Two double-blind studies compared Quietude, a combination of homeopathically prepared plant extracts that has been very popular in France, with diazepam (Valium). The subjects were adults and children who were nervous and suffered from sleeplessness. The results showed that the homeopathic product increased sleep time, reduced interruptions during sleep, and reduced nervousness. Both products relieved insomnia and minor nervous tension 63 percent of the time. However, the homeopathic remedy produced no side effects: there was no daytime dizziness, as opposed to 13 percent of the diazepam group. Homeopathic remedy group suffered no daytime drowsiness, but 53 percent of the diazepam group felt drowsy. In addition, Quietude was better at reducing children's nightmares, and 74 percent of the Quietude patients said the product was better than other treatments, as opposed to 48 percent of the diazepam group who felt this way.

A study, conducted in 1985, found that patients who took the homeopathic product Oscillococcinum, derived from duck heart and liver, experienced reduction in their fever much rapidly (in two days) than those who took placebo. Shivering disappeared by day four. In another controlled study, published in 1989 in the British Journal of Clinical Pharmacology, 66 percent more of the Oscillococcinum group recovered within forty-eight hours as compared to the placebo group.

Clinical studies show the effectiveness of homeopathic remedies in treating infectious diseases. In a French study published in 1987, silica, prepared homeopathically to the 10c potency, stimulated macrophage activity by nearly 70 percent. Macrophages are white cells belonging to the immune defense system that destroy harmful cells and microorganisms. Homeopathic remedies were also shown to be effective in correcting immunological disorders in mice. In other studies, eight out of ten homeopathic remedies tested were able to inhibit the growth of viruses (in chicken embryos) by 50 to 100 percent.

Other studies show the usefulness of homeopathic remedies in treating diabetes. A 1992 study examined sixty people with retinal problems due to diabetes. In approximately half of the patients taking the homeopathic remedy (Arnica), the eye condition improved; only 1 percent of the subjects receiving placebo improved a like amount. The subjects were evaluated using objective measuring instruments, indicating that homeopathy may prove valuable in helping this group of diabetics preserve their sight.

Conventional physicians often belittle homeopathic remedies and their effectiveness to placebo effect. However, several studies on animals and infants show that homeopathic remedies do work. Obviously, animals and infants are less likely to be influenced by placebo. In Germany, poultry farmers are treating their hens with homeopathic remedies instead of antibiotics for coughs, colds, and digestive problems. Farmers also treat their cats, dogs, horses, cattle, and birds homeopathically.

Other animal studies add to the evidence. A 3x potency of Chelidonium lowered cholesterol in rabbits by 25 percent. Microdoses of Arsenicum (10x up to 30x; and 5c up to 15c) helped rats eliminate toxic doses of arsenic from their systems, a study that has important implications for humans who are increasingly exposed to many heavy metals in the environment. And pigs given Caulophyllum had half as many stillbirths as those who received a placebo. Homeopaths have been reporting good results when treating infants for common health problems such as teething, colic, eczema, and fever.

Homeopathic Treatment of Uterine Fibroid and Ovarian Cyst

OBJECTIVE: To establish the positive role of Homeopathy in curing surgical diseases like uterine fibroid and ovarian cyst through homeopathic medicine at the general practice in Allahabad, India.



MATERIAL AND METHODS: The well-proven Homeopathic medicines were selected on the basis of principles of homeopathy to the patients of uterine fibroid and ovarian cyst during the period of 1996 to 2004.

The patients were assessed on the basis changes in the symptoms during the period of 3-4 months and ultrasound done after that to assess the size of fibroid.

Medicines Used: Pulsatilla 200c, Medorrhinum 200c, Sabina 200c, Sepia 200c and Tuberculum 1000c according to the symptoms.

No. Of Patients entered- 123

No. Of patients who followed the protocol-100

No. Of patients which improved-85

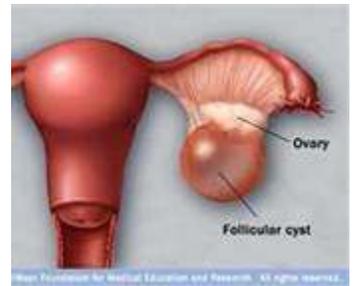
No. Of patients with complete removal of fibroid- 48

No. Of patients whose size reduced but not complete removal-20

Success rate Cure-48% (As of 2005-2006 it is now 80%).

Rate of Response to Homeopathy- 85% (As of 2005-2006 it is 92%).

CONCLUSIONS: Homeopathy is becoming increasingly popular in the world. Now it is time to prove to what homeopathy can offer in surgical diseases. Homeopathic medicines cannot take the place of surgery but can be of great help to the patients who do not want to go for surgery or cannot be operated upon due to various medical reasons. It is also ideal for underdeveloped and developing countries where financial factors play a major role in deciding the options for treatment.



Homeopathic Remedies for Traumatic Stress

If you are unfamiliar with homeopathy please read [Intro to Homeopathy](#) on this site. These are the leading remedies to consider and that every homeopath is familiar with:

- Aconite for shock
- Arnica for trauma, bruising, hemorrhage
- Hypericum for injury to nerve centers and tissues (including areas rich in nerves such as the fingers)
- Cantharis for burns
- Ledum for puncture wounds
- Staphysagria for incised wounds
- Silicea for helping to extrude small foreign bodies



Post-Traumatic Stress Disorder

An extract from Homeopathic remedies for traumatic stress by Miranda Castro, FSHom, RSHom (NA), CCH. Full text.

Aconite, Stramonium, and Arnica

The first two remedies to think of for the shock are Aconite and Arnica. Aconite is immediately recognizable because people who need it are visibly distressed. They look frightened. You can feel their fear. The symptoms that stand out are the trembling and the fear of death. This fear can surface immediately after a bad shock and/or surface at night after a bad dream. They can suffer from panic attacks if the acute shock isn't dealt with. A remedy with similar symptoms to Aconite is Stramonium. Those who need it experience and re-experience fear and terror after a bad shock. Aconite is more identifiably two-dimensional: shock and fear (of death) with trembling. Period. Stramonium can express a wider range of feelings (from hysteria with loud laughing to rage and feelings of unreality). While a fear of death may be present, the prominent fear that guides us to Stramonium is a fear of the dark. Children wake screaming in terror at night out of a nightmare unable to fully awake, and not knowing the parent who tries to comfort them. By sharp contrast, those who need Arnica might seem superficially to be OK. They say there's nothing wrong-even insist on it-especially during the daytime. But their unconscious betrays their deeper feelings in the form of bad dreams or nightmares that wake them at night. Images of the shocking stressor haunt them at night rather than during their waking hours.



Opium *, Gelsemium, and Phosphoric acid

Homeopathically prepared Opium* is another remedy for shock with quite a different presentation. They aren't OK, but they aren't distressed. They look spaced-out. They don't complain or ask for anything. The images of what happened haunt them in their waking hours, and each time they think about what happened all the same feelings pour over them again. They have difficulty falling asleep because of this-in spite of an overpowering sleepiness. They are oddly sensitive to noise. People who need Gelsemium have a similar kind of feeling: people who need it look and feel dull and droopy. They have trouble opening their eyes. These people experience loss alongside the shock, but can't cry. They become numb and shaky and drowsy. Typically the shock comes in the form of bad news. How many of us watched the news that fateful Tuesday morning and were catapulted into the kind of reality that was unimaginable? Phosphoric acid is sometimes confused with Gelsemium for those who receive bad news, especially when it comes by phone or letter rather than by experiencing it firsthand. People who need Phosphoric acid sink into

apathy and don't even want to talk. In spite of an immense apathy they are able to summon up energy to carry out physical activities if they have to. Those needing this remedy are thirsty especially for fruit juices and pop, whereas those needing Gelsemium are not thirsty at all.

* Homeopathically prepared Opium is available in the US only to DEA-licensed physicians.

Ignatia and Natrum muriaticum Ignatia is another remedy for people with loss who don't want to talk about it because they want to be alone to cry. They resist all comforting. They have a "lump" in their throats from the emotional tension of holding back their feelings. When they finally break down and cry, it is with great big sobs. They are haunted by feelings of guilt and regret. Natrum muriaticum is Ignatia's twin. They have so many similarities they can be hard to tell apart. Natrum muriaticum's depth of suffering and their bitterness set them apart from Ignatia. In addition, they have even more difficulty crying, even when alone, and if they do cry they are more likely to shed a few gentle tears rather than buckets.

Calcarea carbonica, Arsenicum, and Cocculus

People experiencing anxiety after a traumatic stress may need Calcarea carbonica, Arsenicum, or Cocculus. Those needing Arsenicum worry about themselves. They look at what happened and are tortured by what would have happened had they been in one of those planes. Security is really important to them and so the loss of safety is literally unbearable. They become scared of death (like Aconite, but it isn't accompanied by the naked, visible fear). They fear for their own safety, especially at night and especially when they are alone. They become irritable (not generally present in those needing Aconite) and restless-typically tidying up their environments in an attempt to compensate for internal disorder by creating external order. Calcarea carbonica is for those who have been badly affected by all the sad and tragic stories because they have such active imaginations. They respond to this stress by becoming deeply anxious. They worry about the future, about bad things happening, especially to others close to them. This wears them out, causing them to become physically sluggish and emotionally depressed. Those needing Cocculus also worry compulsively about loved ones. Their worrying keeps them from sleeping at night. They become exhausted in a particular way. Their world slows down (they feel as if everything is slow) and nothing feels real, but time passes quickly especially at night when they try to sleep but can't. They become confused, anxious and dizzy with the exhaustion. Cocculus and Nitric acid are the two remedies to think of for those who are sleep-deprived as a result of worry, or because they are actively engaged in rescue efforts or nursing the sick.

Nitric acid and Aurum metallicum

Those needing Nitric acid are exhausted and angry. Their anger is extreme. Their sensitive, compassionate nature cannot comprehend what happened and they react with hatred, fantasizing revenge against the "enemy," unable to sleep at night and becoming absolutely exhausted. Their anger eats away at them and bursts out uncontrollably, leading to depression. People who become seriously depressed after a traumatic stress may need Aurum metallicum. They fall into a deep, dark pit of despair after a brief period where feelings of anger surface and are then suppressed. They reflect on the nature of faith and typically turn to prayer and/or meditation in order to find solace, reconnecting maybe, with a neglected spiritual side. They find music soothing-but in a limited, melancholy way.

Anxiety

The Wall Street Journal on 10/12/01 reported that since September 11, sales of anti-depressants are up 16% from the same period last year, and sales of drugs for anxiety and insomnia are up 7%. Individual physicians cited a 1/3 increase in prescriptions for "coping" drugs - many to patients who never would have requested them previously. Clearly, many are in need of help at this time. Homeopathy has much to offer for these issues. Dr. Jonathan Davidson, professor of psychiatry at Duke University (Davidson JRT, Morrison RM, Davidson RT, Bedayn G, Homeopathic treatment of anxiety and depression, *Alternative Therapies*, 1997;1:46-49.) found a 58% response rate using conventional scales, in patients who had failed conventional therapy.



An extract from Homeopathic remedies for traumatic stress by Miranda Castro, FSHom, RSHom (NA), CCH. Full text

Pulsatilla and Causticum

Those who need Pulsatilla cry easily and want comforting, feeling better for both the crying and the consolation. Their moods are changeable and curiously, any lowness of spirits lifts once they are out in the fresh air. These are the sensitive children who've been deeply affected by the pictures and responses of those around them, who become clingy and needy. Causticum is another remedy for those who suffer as a result of the suffering of others. Only much more deeply. They care tremendously about the injustice of what happened and may react by becoming active in organizations that are fighting for justice. (Those needing Pulsatilla care more about the people that are hurting.) Feelings of anxiety-always about others, never about themselves - and uncertainty create an all-pervasive feeling of gloom that something terrible is going to happen.

Fear of flying

Incredibly, planes fill the skies again and those who have flights booked may be wondering how they will cope with the actual flying experience itself. Especially those who have always been nervous or even scared of flying. Here are a few remedies to consider taking along for the ride. Aconite. Panic attacks with fear of death especially if they feel hemmed in. Looks terrified. Cannot be calmed.



Gelsemium

Paralyzed with fear in anticipation of flying. Becomes dull and confused and trembly.

Argentum nitricum

Panic attacks with hyperventilating. Great restlessness and claustrophobia. A terrible fear of heights combined with claustrophobia.

Rescue Remedy

This little Bach Flower Remedy is not, strictly speaking, homeopathic, but its curative value in any worrying or scary situation is legendary. Take it if you take nothing else, and put a few drops in all your drinks.

Biological Attack

The current rash of Anthrax letters has lots of people skittish. Start with a rational assessment of whether you are in a job situation that puts you at risk. Most of us are not at risk from this and should relax. At this time, you are still more likely to die from being struck by lightning than to die from anthrax. But, we should also follow the rules of good hygiene that work for colds and flu as well - DON'T PUT STUFF IN YOUR MOUTH, especially your hands or anything that you or anyone else touches with hands unless they're washed first. This means don't chew your fingernails, or the end of your pencil. Don't eat with your hands unless you have washed them or the food can be held in its wrapper. Homeopathy did a great deal for epidemics and infectious diseases, but good hygiene and sanitation did more and will help keep you from getting sick in the first place



Prophylaxis and Nosodes

Industry Associations Warn Against "Natural" Anthrax Treatments.

Both the Silver Spring, Md.-based American Herbal Products Association (AHPA) and the Newport Beach, Calif.-based National Nutritional Foods Association (NNFA) have issued warnings about false claims that natural remedies exist for the treatment of the disease anthrax. NNFA has received inquiries from its members about products which are being marketed as alternative preventatives and treatments for anthrax and has issued a statement saying that no natural therapies have been approved for treating any form of anthrax infection. It is recommending that retailers refuse to stock or sell products claiming to treat the disease; to not promote the use of legally labeled dietary supplements as a cure or treatment; to advise customers who believe they are infected to seek medical attention and contact the local health department. In a statement, NNFA Executive Director David Seckman said, "Let's be very clear, no dietary supplement or other natural product has been approved for the treatment of anthrax. Even the most vague intimation that a product or combination of products will ward off or cure anthrax infection will be widely viewed as preying on the fears of a frightened public." AHPA has reminded manufacturers, marketers and retailers that federal regulations governing dietary supplements do not permit claims suggesting a supplement can "diagnose, mitigate, treat, cure or prevent" any disease. In an open letter to practitioners of complementary and alternative medicine, AHPA stated "There are not, however, any defined natural healing protocols for the treatment of any form of anthrax infection," and recommended that the practitioners contact the Atlanta-based Centers for Disease Control for information on anthrax. For more information contact AHPA's Director of Communications Robin Gellman at 301-588-1171, ext 107.



From articles by Eileen Nauman DHM (UK) with Catherine Creel. Full text.

ANTHRAX BIOLOGICAL WARFARE INFORMATION

The spores of *B. anthracis* can be produced and stored in a dry form and remain viable for decades in storage or after release. When released, the spores are easily dispersed in air for inhalation by unprotected troops (or civilians downwind) and may remain in soil for many years. The following is an excerpt from the U.S. Navy Manual on Operational Medicine and Fleet Support, entitled Biological Warfare Defense Information Sheet. "The disease Anthrax is caused by the bacteria *Bacillus anthracis*. Anthrax is normally found in sheep, cattle and horses but can be transmitted to humans who contact infected animals or their products. Usually humans acquire the disease by skin contact with the bacteria or by inhaling the bacterial spores found in

sheep wool. As an agent of biological warfare (BW), it is expected that a cloud of Anthrax spores would be released at a strategic location to be inhaled by the personnel under attack. As such, the symptoms of Anthrax encountered in BW would follow those expected for inhalation of spores, as opposed to those expected for skin contact or ingestion of the bacteria. These symptoms are discussed in the sections below."

Anthrax symptoms have TWO PHASES. The first set of symptoms mirror non-specific flu-like symptoms.

- progressive fatigue
- possible fever
- chills
- general discomfort, uneasiness, or ill feeling (malaise)
- headache
- nausea and vomiting
- shortness of breath/breathing problems
- cough, dry * congestion of the nose and throat
- mild chest discomfort with a non-productive cough
- joint stiffness
- joint pain
- possible sore throat
- possible night sweats
- loss of Appetite

Homeopathic Remedies for Inhalational Anthrax

- FEVER; HEAT in general (K1278) (205): Acon., Alum., Apis, Arg-n., Ars., Ars-i.
 - CHILL; COLDNESS in general (K1259) (213): Ant-t., Apis, Aran., Ars., Bism., Calc-f.
 - HEAD PAIN; GENERAL (K132) (305): Anthr., Calc-s., Cedr., Chin., Chin-s., Cocc.
 - STOMACH; NAUSEA (K504) (326): Ant-c., Ant-t., Arg-n., Ars., Bell., Carbn-s.
 - STOMACH; VOMITING; General (K531) (247): Acon., Aeth., Ant-c., Ant-t., Apis, Apom.
 - COUGH; DRY (K786) (288): Acon., Alum., Ars., Ars-i., Bell., Brom.
 - RESPIRATION; SUFFOCATIVE (Difficult) (107): Acon., Acon-f., Am-c., Ant-t., Apis, Ars.
 - NOSE; CONGESTION to nose (11): am-c., cham., cortico., cupr., hep., lith-c.
 - THROAT; FULLNESS (K452) (44): apis, arg-n., bell., cinnb., con., eucal.
 - CHEST; CATARRH (K824) (95): Ant-t., Ars., Bar-c., Bar-m., Bry., Cact.
 - EXTREMITIES; STIFFNESS (K1191) (133): Ars., Asaf., Bry., Caust., Chel., Cocc.
 - EXTREMITY PAIN; GENERAL; influenza; during (K1045) (8): Bry., Eup-per., acon., caust., chel., euph.
 - MIND; DISCOMFORT (SI 401) (Discontented) (Restlessness) (44): camph., grat., sulph., agar., ammc., ars.
 - STOMACH; APPETITE; diminished (K476) (133): Alum., Pic-ac., arg-n., aur., bar-m., cact.
 - EXTREMITIES; ANTHRAX (K952) (6): anthr., ars., sec., echi., lach., ther.
1. Anthracinum (anthrax nosode)
 2. Arsenicum album
 3. Lachesis muta
 4. Secale
 5. Bryonia

Then, you will experience improvement, and the symptoms seem to abate for 1-3 days, and you feel better. The second phase will hit you hard, and usually, within 24-36 hours. This phase is one marked by high fever, dyspnea (shortness of breath), stridor (lungs filling with fluid), cyanosis (blue-colored skin, and you are not able to get sufficient oxygen into your body due to breathing problems), and shock, and then you die. * Breathing Problems/pneumonia * Shock * Swollen Lymph Glands * Profuse sweating * Cyanosis (skin turns blue)

Homeopathic Remedies for Stage Two

- FEVER; HEAT in general (K1278) (205): Acon., Alum., Apis, Arg-n., Ars., Ars-i.
 - CHILL; COLDNESS in general (K1259) (213): Ant-t., Apis, Aran., Ars., Bism., Calc-f.
 - HEAD PAIN; GENERAL (K132) (305): Anthr., Calc-s., Cedr., Chin., Chin-s., Cocc.
 - STOMACH; NAUSEA (K504) (326): Ant-c., Ant-t., Arg-n., Ars., Bell., Carbn-s.
 - STOMACH; VOMITING; General (K531) (247): Acon., Aeth., Ant-c., Ant-t., Apis, Apom.
 - COUGH; DRY (K786) (288): Acon., Alum., Ars., Ars-i., Bell., Brom.
 - RESPIRATION; SUFFOCATIVE (Difficult) (107): Acon., Acon-f., Am-c., > > Ant-t., Apis, Ars.
 - NOSE; CONGESTION to nose (11): am-c., cham., cortico., cupr., hep., lith-c.
 - THROAT; FULLNESS (K452) (44): apis, arg-n., bell., cinnb., con., eucal.
 - CHEST; CATARRH (K824) (95): Ant-t., Ars., Bar-c., Bar-m., Bry., Cact.
 - EXTREMITIES; STIFFNESS (K1191) (133): Ars., Asaf., Bry., Caust., Chel., Cocc.
 - EXTREMITY PAIN; GENERAL; influenza; during (K1045) (8): Bry., Eup-per., acon., caust., chel., euph.
 - MIND; DISCOMFORT (SI 401) (Discontented) (Restlessness) (44): camph., grat., sulph., agar., ammc., ars.
 - STOMACH; APPETITE; diminished (K476) (133): Alum., Pic-ac., arg-n., aur., bar-m., cact.
 - EXTREMITIES; ANTHRAX (K952) (6): anthr., ars., sec., echi., lach., ther.
 - BACK; SWELLING of; Cervical region (4): con., iod., nux-v., phos.
 - GENERALITIES; SHOCKS; agg. (SII 578) (25): acon., acet-ac., am-c., arn., camph., cham.
 - PERSPIRATION; PERSPIRATION in general (K1293) (201): Ant-t., Calc., Chin., Ferr., Hep., Ip.
 - RESPIRATION; DIFFICULT; pneumonia, in (6): ANT-T., Chel., Kali-n., Kreos., Lyc., Phos.
 - GENERALITIES; CYANOSIS (K1356, SII 151) (RESPIRATION; Asphyxia) (109): Camph., Carb-v., Cupr., Dig., Lach., Laur.
1. Arsenicum album
 2. Phosphorus
 3. Lachesis muta
 4. Carbo veg.
 5. Baptisia tinct.
 6. Pyrogenium

CUTANEOUS SUMPTOMS OF ANTHRAX (Anthrax skin infection)

- Skin infection begins as a raised itchy bump that resembles an insect bite but within 1-2 days develops into a vesicle and then a painless ulcer, usually 1-3 cm in diameter, with a characteristic black necrotic (dying) area in the center.
- A reddish brown sore that breaks open and forms a scab. Lymph glands in the adjacent area may swell. About 20% of untreated cases of cutaneous anthrax will result in death. Deaths are rare with appropriate antimicrobial therapy.
- Usually find a typical painless lesion (ulcer) at site of infection with a black, necrotic (dying tissue) eschar (scab).
- Local swelling is prominent
- Possible fatigue
- Possible chills

Homeopathic Remedies for Cutaneous Anthrax

- SKIN; ANTHRAX (2): ip., lob.
 - SKIN; ERUPTIONS; vesicular (K1322) (148): Ars., Canth., Carb-ac., Caust., Clem., Croto-t.
 - SKIN; SWELLING; affected part, of (K1332) (57): Bell., Kali-c., Merc., Puls., Rhus-t., Sep.
 - SKIN; DISCOLORATION; blackish (K1305) (19): Ars., Plb., Sec., apis, arg-n., carb-v.
 - SKIN; ITCHING (K1327) (242): Agar., Apis, Ars., Bov., Carb-v., Carbn-s.
1. Arsenicum album
 2. Lachesis muta
 3. Nitric acidum
 4. Secale
 5. Carbo veg.

GASTROINTESTINAL ANTHRAX (eating it)

The intestinal disease form of anthrax may follow the consumption of contaminated meat and is characterized by an acute inflammation of the intestinal tract. Initial signs of nausea, loss of appetite, vomiting, fever are followed by abdominal pain, vomiting of blood, and severe diarrhea.

- Abdominal Pain
- Inflammation of the Intestinal Tract
- Intestinal anthrax results in death in 25% to 60% of cases.

Homeopathic Remedies for Gastrointestinal Anthrax

- STOMACH; APPETITE; wanting (K479) (284): Ars., Asar., Calc., Cham., Chel., Chin.
 - STOMACH; VOMITING; General (K531) (247): Acon., Aeth., Ant-c., Ant-t., Apis, Apom.
 - STOMACH; NAUSEA (K504) (326): Ant-c., Ant-t., Arg-n., Ars., Bell., Carb-n-s.
 - ABDOMEN; PAIN; general (K554) (397): Ars., Bry., Canth., Cham., Cocc., Colch.
 - STOMACH; VOMITING; blood (K536) (131): Arn., Cact., Carb-v., Chin., Crot-h., Ferr.
 - RECTUM; DIARRHEA (K609) (STOOL; Frequent) (285): Agar., Aloe, Ant-c., Ant-t., Apis, Arg-n.
1. Arsenicum album
 2. Ipecac
 3. Phosphorus
 4. China
 5. Veratrum album

HOMEOPATHIC INFORMATION YOU NEED

POTENCY and DOSAGE Potency ordered from a homeopathic pharmacy (or, if you buy a kit) should be a 30C. Take these white pellets UNDER your tongue and let them melt way. Do NOT take them with water. Take every 15 minutes until you can receive emergency medical help. If you cannot get to the hospital. Take every fifteen minutes until the symptoms go away. When they stop: STOP taking the remedy.

Prophylaxis - NCH Board

In the history of homeopathy, the remedy that has worked well for treatment of the illness, has also worked well for preventing infection among exposed individuals. In epidemics, the infection is usually so virulent that most people respond to it with similar symptoms. Thus, one or a very few remedies will work for most people, and the usual need for individualization of therapy is made much easier. The remedy for the epidemic becomes known as the genus epidemicus. However, the genus epidemicus may change with each epidemic even though it is the same disease just as a different flu vaccine is made each year in conventional medicine as the flu strain changes.

Another strategy has been to attempt prophylaxis with the nosode, the remedy made from actual diseased tissue. While this is attractive because it doesn't require finding the genus epidemicus, there is less evidence for its efficacy. Additionally, current information about the source material for some nosodes is lacking, the old nosodes may not fit the current strains of infection, and some nosodes are available only by prescription.

While prophylaxis with nosodes is not certain, we do have modern evidence of at least partial effectiveness in the animal model. Dr. Wayne Jonas, former director of the Office of Alternative Medicine at NIH did a study with tularemia in the mouse model. (Jonas WB, Do homeopathic nosodes protect against infection? An experimental test, *Alternative Therapies*, 1999;5:36-40) Mice given tularemia nosode prior to infection with *F tularensis* had 22% greater survival than control mice given the infection without prior nosode treatment. However, mice given conventional vaccine had 100% survival. While it may not be appropriate to apply this limited information to humans and a different disease, we have to conclude that if a suitable vaccine is available, it would appear to be the safer course at this moment in time. However, if no suitable vaccine is available, nosode therapy is likely to be better than nothing.

In another article in the same issue, pig herds in Germany, particularly susceptible to infections due to their crowded growing conditions, were treated with a combination remedy (remedies chosen for the particular symptoms of infection and combined into one remedy), prophylactic doses of antibiotic or full doses of antibiotic. (Albrecht H, Schutt - Homeopathy versus antibiotics in metaphylaxis of infectious diseases: a clinical study in pig fattening and its

significance to consumers, *Alternative Therapies*, 1999; 5:64-68.) The pigs treated homeopathically fared as well as those given prophylactic antibiotics, though neither group did as well as those given full dose antibiotics.

There is much promise for homeopathic prophylaxis, particularly when the genus epidemicus has been determined. What is especially needed at this time is specific homeopathically oriented symptomatology (symptoms from the mental/emotional, general, and organ specific areas along with timing and modalities) from the course of disease in affected individuals in order to determine the genus epidemicus. And we need intense research in the application of both genus epidemicus and nosode therapy. We hope that governmental agencies and scientific investigators will pursue this much needed investigation expediently so that better informed recommendations and protocols for these cost effective and potentially extremely valuable strategies can be developed. We welcome your suggestions and personal contacts in furthering these goals.

The following is an excerpt of an official FDA correspondence to HPCUS in May 1997

Chemical Attack

(In progress)

Nuclear Attack

Dr. Arthur Grimmer writing at the height of the cold war (*The Homeopathic Recorder*, Vol LXVI, no.9 March 1951, p. 262 in Currim AN Ed. *The Collected Works of Arthur Hill Grimmer MD*, Hahnemann International Institute for Homeopathic Documentation Norwalk CT. 1996 p.145.) recommended carrying arnica and phosphorus. He suggested they would be helpful to any survivor not too close to the center of an atomic explosion. Arnica should be taken for the immediate effects such as contusions. This, or any exposure to radiation, should be followed after half an hour by phosphorous which he states "meets the destructive effects produced on the capillary circulation and later on the blood elements as well. PHOS is a remedy for deep burns as well as for ulcerations of a serious nature."

Side Effects

If you do find yourself in an exposure situation, follow your public health official's recommendation. While homeopathy has a long history of success, we don't have enough current data to rely on it solely when other options known to be efficacious are available.

If you are advised to take an antibiotic, take the simplest one you can. E.g. in anthrax, penicillin and tetracycline, both available generically, are as effective as Cipro, readily available, and much less expensive. More importantly, penicillin has a much narrower spectrum of bacteria that it kills. This means that it knocks off fewer of the good bacteria needed for digestion and other bodily functions, and it is less likely to create bacteria that are resistant to Cipro if you ever need it for something else that is not sensitive to penicillin.

Any time you take an antibiotic, it's a good idea to eat live culture yogurt every day or to take a supplement of *Acidophilus Bifidus* (available in the refrigerator section of your health food store). This helps to replenish the healthy bacteria in your gut that are incidentally being killed by the antibiotic, and diminishes the risk of developing diarrhea or other GI side effects.

Swine Flu and the Great Flu Pandemic of 1918-19

The Similarities and What History Can Teach Us

The Great Flu Pandemic of 1918-19 killed more people than any other outbreak of disease in history. It is estimated that between 50 and 100 million died from what was then known as “Spanish Flu”. It most often killed those in the prime of life, and it killed with extraordinary swiftness, often causing great trauma to the lungs.



The events have given us cause for concern that there may be another pandemic flu on the horizon. The Swine Flu or H1N1 as it is being named has several important characteristics that validate this concern. First, it is a “novel” or new virus. In the world of epidemiology this means that it is a strain that the world has not been seen before and therefore people will not have had exposure to it in the past. This means that we do not have natural antibodies against this virus, no natural immunity. H1N1 refers to the specific genetic makeup of the virus. The Spanish Flu was also an H1N1 type A influenza virus. As of this writing, there have been

many deaths in Mexico and many confirmed, but milder, cases here in the US just this past week. A usual seasonal flu in fact kills tens of thousands of people every year. Those that fall victim to usual or seasonal flu, however, are the elderly and the very young. A characteristic feature of a Pandemic is that it kills young, healthy adults in the prime of their life.

The feeling of most experts is that this will be the first of a few “waves” of this epidemic, just as what occurred during the Spanish Flu. The Spanish Flu actually began in early 1917 but did not appear at first to be very serious. No-one raised the alarm during those early months. The second most deadly wave began in late 1917 and killed most of its victims in 1918. Note the similarities to what we are seeing with this H1N1 Swine Flu. Most people are hearing that it is “mild.” However, because it is novel and this is just the first wave, we must be hypervigilant and follow the epidemiology of this virus very closely.

Currently it looks as if this virus is sensitive to two main anti-viral agents (Tamiflu and Relenza). There is currently no vaccine and that would take many months to mass-produce. One of the greatest problems facing conventional medicine is the amount of time required to identify and manufacture drugs and vaccines capable of helping manage a deadly outbreak of flu. The virus may drift or change by the time a vaccine was made available, so this, too, must be closely monitored. Viruses mutate or change their form quickly and develop resistance to drugs and vaccines over time. Will this happen? All these are questions we must ask and trust the experts to monitor. So what can Americans learn from the Pandemic of 1918-19 that could guide us now? Were there any treatments that helped stem the tide of that killer?

A recent comprehensive epidemiological study of some 61,000 confirmed cases of Spanish Flu from 1918-19 by Canadian physician, Dr. Andre Saine, shows that patients treated with a form of medicine called homeopathy had death rates of 0.7 percent compared to death rates in the untreated and from conventional care of 30 percent or more. Is homeopathy something that we should be looking into and investigating as a possible source of prevention and cure for this H1N1 virus? If history is said to repeat itself, then the answer must be, yes. We owe it to the people we serve to investigate all possible treatments and cures, regardless of how popular they may or may not be to drug companies or within mainstream medicine. That is the way of science: to investigate without bias or prejudice and make objective decisions based on facts.

Homeopathy is a 200 year-old system of medicine based on a law of nature first discovered by Hippocrates and others. That law states that substances able to produce symptoms of

disease can cure those symptoms in a sick person. In the US, the medicines used in homeopathy are produced in pharmacies under strict FDA regulations. They are non-toxic, gentle and inexpensive. It is also relatively easy to mass-produce these drugs in the event of a national crisis. The system itself is unlike any other system of medicine known to man. In fact, sophisticated new research released by the material science labs at Penn State University in 2006 and 2007 is just beginning to explain its extraordinary potential. There are hundreds of high quality, peer reviewed pre-clinical and clinical studies published in journals like Pediatrics, Rheumatology, Lancet, CHEST, and others showing that homeopathy works. Additionally, there is solid epidemiological data to suggest that homeopathy's success in 1918-19 was not an aberration. Reliable medical records from deadly epidemics throughout the 19th century of cholera, diphtheria, yellow fever, dengue fever, scarlet fever, typhoid, malaria and other infectious diseases repeatedly show that homeopathy was a very effective system for treating disease evidenced by mortality rates a small fraction of those seen in untreated as well conventionally treated patients. Homeopathy shines in the face of epidemics. That is what put homeopathy onto the map and began a system of healthcare that flourished here in the US, in Europe, and in India. Homeopathy is in fact experiencing a world-wide resurgence because it is effective in treating both chronic and epidemic disease. Few people know that the renowned Hahnemann Hospital in Philadelphia was in fact founded in honor of the father of homeopathy. Many medical schools and hospitals at the turn of the 20th century were homeopathic hospitals.

So the question is – could homeopathy help again? Could it help prevent the massive loss of life anticipated by the Centers for Disease Control and the World Health Organization from the next pandemic?

Epidemic disease tends to have a rather fixed nature. The symptoms of each individual epidemic are often fairly uniform across populations. Homeopathy uses a very particular technique for discovering the treatment and cure for epidemics. This approach is the same, regardless of the nature of the epidemic. Homeopaths gather the specifics of a number of human cases with the disease. The symptoms of each case will be carefully recorded with attention paid to distinguishing or unusual characteristics of each case (i.e., whether the cough is dry or wet, the specific nature of any pains, the side of the chest most effected, the conditions that make the symptoms better or worse, the nature and time of chills and fever, etc., etc.). It is these precise details gathered on a small representation of the affected population that tell us the remedy or remedies that will be most useful in the epidemic. Armed then with this information, homeopathic physicians will be able to identify a small number of medicines effective for treating the vast majority of cases in any full scale pandemic. A little known fact is that these same medicines can be used to PREVENT the illness as well. This is called “homeoprophylaxis.”

Homeopathic medicine is very different. The homeopathic drugs needed for any outbreak of infectious disease are already available and can be manufactured quickly in quantities sufficient to treat very large numbers. The manufacturing process is sophisticated, but uncomplicated.

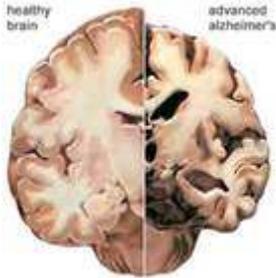
According to the CDC and the World Health Organization, millions are at risk of dying should a pandemic strike again. With the H1N1 Swine Flu, this reality now appears to be closer at hand. We must turn over any stone and investigate any system of medicine that has the potential to save lives. Homeopathy is such a system. Its proven track record must no longer be ignored. Its history is clear and we have the capability to treat masses of people infected or at risk of being infected by this Flu.

For more information about homeopathy and the flu, contact the National Center for Homeopathy in Alexandria, Virginia (www.nationalcenterforhomeopathy.org). This non-profit organization is the organizing body for homeopathic medicine in America.

Caring For Elderly Patients with Alzheimer's Disease or Dementia

Patients with Alzheimer's disease or dementia pose special challenges for caregivers. Allopathic medicine uses an array of pharmaceutical drugs to "manage" these patients - often with cruel consequences.

One challenge for caregivers is managing the Alzheimer's/dementia patient who suffers with bouts of irritability and irrational anger. These patients can be very cranky, abusive in their language, and restless... IRRITABLE.



A remedy to consider for these patients - to make them more comfortable and calm - is Chamomilla. It is a remedy known to produce a very irritable mood; patient snaps and snarls; will not speak or answer civilly; mad with excessive uneasiness; anxiety; agonized, tossing about...

If you know anyone caring for an elderly patient who suffers with Alzheimer's and who shows these characteristics - please share this post with them. It may help improve the lives of the patients and the caregiver.

Indisputable Evidence for Homeopathic Remedies

So called "skeptics" of homeopathy love to falsely claim that there is no proof that ultra-dilutions are anything more than plain water - having no effect what-so-ever. Their "the system is implausible therefore impossible" argument is the unscientific basis for their rejecting all evidence of homeopathy's effectiveness.

Now there have been hundreds of basic science, pre-clinical and clinical research studies showing that homeopathy works. But just one that is indisputable is all one needs to prove that ultra-dilutions - homeopathically prepared ultra-dilutions are active. If they work - they work. End of the argument.

Well there is now indisputable, reproducible evidence for that fact - evidence that has been published in countless peer reviewed journals. In the last 25 years, there have been a repeated series [1] of in vitro experiments on the allergic response to anti-bodies using the human basophil degranulation test. These experiments have been conducted independently and on a multi-center basis in distinguished university research centers around the world. What these tests have shown is that extremely high dilutions of histamines (dilutions well into the ultra-molecular range, i.e., beyond Avogadro's number) consistently produced measurable basophil reactions (basophils are white blood cells produced by the human body). **These reactions are only possible - repeat - these reactions are only possible if homeopathically prepared ultra-dilutions are active substances - something more than just plain water.**

This evidence for homeopathic ultra-dilutions is incontrovertible. It is time to look at evidence of homeopathy's effectiveness with a scientific mind - an open mind - so that the wonders and immense benefits of this system can be fully explored.

1. (Sainte Laudy and Belon, 2009; Endler et al. 2010; Belon et al. 2004; Eizyaga 2007)

Great Remedies to Conquer Morning Sickness

No woman should ever have to suffer with prolonged bouts of morning sickness. Homeopathy, used correctly, is a safe, effective and gentle way to make every phase of pregnancy enjoyable.



Here are a number of the most often indicated remedies for women suffering with morning sickness. While this list is not exhaustive – it provides many good options. The key to selecting the correct remedy is in matching the most characteristic symptoms of your morning sickness to the characteristic symptoms of the remedy. The correct remedy will relieve morning sickness in virtually all cases.

The information that follows comes to us from Henry Guernsey M.D. - one of homeopathy's greatest masters and a pioneer in obstetrics and homeopathy.

- **Arsenicum album:** Very great debility and exhaustion. *Very pale, white look.* Bitterness in the mouth, particularly after eating or drinking. Sensation of a stone in the stomach. Cold water seems to lie in the stomach unassimilated - therefore she cannot drink it. Nightly vomiting. Vomiting of fluids as soon as they are taken in. Can also have exhausting diarrhea.
- **Bryonia:** Nausea on waking in the AM. Nausea relieved by keeping still. Dry parched lips and mouth. Splitting headache. Vomiting of food immediately after eating. *Worse from any motion is a very important symptom for selecting this remedy.*
- **Cocculus:** Buring in the esophagus extending to the back of the throat. Taste of sulphur in the mouth. She is scarcely able to raise herself in the AM due to the nausea and inclination to vomit. Metallic taste in the mouth.
- **Cuprum:** Violent vomiting with frothy mucus. When drinking the fluid descends with a gurgling noise. Sensation of something bitter in the stomach. *The violent nausea and vomiting are relieved by drinking cold water.*
- **Ipecac:** *Continual sense of nausea ALL the time.* Not a moment's relief. Vomiting of large quantities of mucus.
- **Magnesia carbonica:** Much sour taste and sour vomiting. All symptoms are aggravated every third week. Much roughness or burning in the throat with desire to vomit.
- **Natrum mur:** *Waterbrash - profuse and constant.* Always wakes with a headache. She *craves salt* and can have aversion to bread. Much nausea. Feeling of great hunger without appetite.
- **Nux vomica:** Feels as if she would feel better if she could vomit. *Nausea and vomiting every morning* - can be accompanied by constipation. Putrid taste when hawking up mucus from throat. Food and drink smell awful. Cannot stand smell of tobacco. Not much appetite, restless sleep - particularly after 3:00 AM with nausea and vomiting in the AM. *She is irritable and wishes to be alone.*

- Sepia: Vomiting of milky water or milky mucus. Sense of emptiness in stomach. *The thought or smell of food sickens her.* Burps taste like rotten eggs. Taste of manure. Aversion to meat. Inclination to vomit in AM when rinsing her mouth. She cannot ride in a car due to the nausea. Can feel painfully hungry despite nausea.
- Sulphur: Profuse salivation - the taste of which causes nausea and spells of vomiting. *All the trouble seems to stem from the nauseating saliva.* *Flushes of heat;* heat on the top of the head. Short sleep at night. She wakes constantly. Can have profuse waterbrash.
- Veratrum album: Much thirst for cold drinks. Craves fruit and juicy items. Wants everything cold. Violent retching. Critically important symptom to see to prescribe this remedy: *cold sweat on forehead with all sufferings.*

If you or someone you know is pregnant and suffering - share this article with them. There is no reason to feel poorly during a pregnancy.

Homeopaths without Borders Is Helping in Haiti

September 2011 Update -- Next Mission to Haiti September 25--October 2

Holly Manoogian, newly appointed executive director of Homeopaths without Borders, announces the next mission to Haiti is set for September 25 to October 2. Along with Holly, the group includes veteran Haiti volunteer Sally Tamplin and new volunteers Oregonian Doug Brown and Barbara Gosney who hails from British Columbia. The dual goals of this trip are to continue clinic work and to establish a path to teaching. Another mission is planned for early December. For information about volunteering and donating visit HWB's website:

<http://www.homeopathswithoutborders-na.org>

August 2011 Update -- Homeopaths Without Borders-NA Appoints Executive Director

Holly Manoogian, MST, CCH, has been selected to be Executive Director of Homeopaths without Borders-NA (HWB). She will assume her duties on August 1. Holly, who has a private homeopathic practice in Wolfeboro and Amherst, NH, has extensive experience with non-profit organizations. Currently, she serves as a supervisor/coach at the Teleosis Homeopathic Collaborative in Newton, MA, and, along with a colleague, offers a free homeopathic clinic monthly for children and teens who struggle with learning, behavioral, emotional or attention difficulties. She was a co-founder of the Appalachian Mountain Teen Project in Wolfeboro. The Appalachian Mountain Teen Project works collaboratively with youth, parents, and educators to strengthen self-esteem, foster resilience, enrich opportunities, and develop stable, secure relationships in the lives of young people who face difficult life circumstances. Energetic and enthusiastic, Holly was a member of the HWB team that went on an extensive and grueling 10 day mission to Haiti in May. The board of directors of HWB is looking forward to working with Holly. Two missions to Haiti in the fall and early winter are currently in the planning stages. More information about HWB can be found by visiting www.homeopathswithoutborders-na.org.

June 2011 -- Homeopaths without Borders-NA -- Update on Haiti Mission

Homeopaths without Borders-NA (HWB) has accomplished another successful mission to Haiti!

Volunteers Sally Tamplin, Holly Manoogian and Alyssa Wostrel traveled to Port-au-Prince on May 23 and returned home on June 3, participating in the longest, most intense undertaking in that country by HWB. Responding to requests by charitable groups in Haiti, the volunteers worked not only in the capital but also traveled to sites in the countryside. Their ten-day schedule was a whirlwind of compassionate homeopathic intervention.

Sally, who was on her third mission to Haiti, led the group. Beginning their clinical work with a return to St. Vincent's School for the Handicapped, where HWB has treated students and faculty since July 2010 provided an opportunity for Holly and Alyssa to gain familiarity with the Haitian culture and with using a translator to gain information for diagnosis.

The comparative comfort of St. Vincent's was left behind as the group traveled to Leogane, the epicenter of the January 2010 quake, over roads still difficult to maneuver, where they set up a clinic for two days at Living Waters for Top of the World, an affiliate of the Presbyterian Church. As has been true of all the sites where volunteers have offered care, the group was welcomed and kept busy with a steady stream of ill people. Several days later, the group was on the road again, going to the Ganthier School, west of Port-au-Prince near the Dominican Republic border.

In between these road trips and during their last few days, various sites around Port-au-Prince served as clinic venues. The trio devoted very full days providing medical assistance at two sites run by the Baptist Mission Group (one of which had been served before by HWB), the Carrefour Cote de Plage tent camp and the Association of Protection of Women and Children

Again, the number of people in need of help almost overwhelmed the group; meals and breaks were forsaken in an effort to diagnose and treat as many as possible.

The team reported that conditions in Haiti remain difficult; piles of rubble still sit in the streets, roads are filled with potholes and rebuilding is extremely slow. Potable water is scarce as is sufficient food and fear of cholera is evident.

Haitians continue to demonstrate symptoms of trauma and grief from an earthquake that took place a year and a half ago. Skin problems such as ringworm are prevalent as are gastrointestinal problems including severe diarrhea; some of the latter are related to poor nutrition. Vaginal infections persist. Sadly the group treated several very ill infants who were malnourished, dehydrated, underdeveloped, feverish and covered with rashes from head to toe.

Although a great variety of remedies were used, following were the most frequently administered: Arnica, Aconite, Ignatia, Causticum, Nat mur, Sepia, Phosphorus acid and Sulphur.

May 2011 -- Homeopaths without Borders-NA -- Update on Haiti Mission

After an interval of reassessing its activities in Haiti, Homeopaths without Borders-NA (HWB) is sending a team on May 23 to continue its clinic at St. Vincent's Center for Handicapped Children in Port-Au-Prince. Additionally, plans will be finalized for a nursing education program in Leogane, a city about 30 miles from Port-Au-Prince; the curriculum will include a clinical component for HWB volunteers, along with their nursing students, to treat patients in outlying areas. Discussions are also underway to coordinate efforts with other volunteer organizations.

Members of the team include Holly Manoogian, HWB's Projects Coordinator; Sally Tamplin, Mission Site Manager, Haiti and Alyssa Wostrel.

Holly Manoogian, CCH, a graduate of the New England School of Homeopathy, has a private practice, Homeopathic Health Care, LLC, in Wolfeboro and Amherst, NH. Additionally, with colleague Suzanne Smith, she offers a free homeopathic clinic once a month for children and teens who struggle with learning, behavior, emotional or attention difficulties. Her interest in the health and welfare of young people led her to co-found the Appalachian Mountain Teen Project in Wolfeboro. Her extensive experience with non-profit organizations as well as her homeopathy knowledge makes her a welcome addition as Projects Coordinator for HWB.

Sally has traveled to Haiti twice before as a HWB team member, actively participating in both treating at St. Vincent's and teaching nursing students at the University of Notre Dame. Hailing originally from the UK and now residing in Illinois, Sally holds a DIH from the British Institute of Homeopathy. She is an experienced homeopathic practitioner and consultant, working through her company, Alternative Horizons LLC. Her list of accomplishments includes an education degree and classroom teaching at all levels.

Alyssa, a resident of Venice, California, also holds a DIH from the British Institute of Homeopathy. In addition to experience treating clients privately, she has spent more than 13 years working in the homeopathic field in sales, marketing and the regulatory aspects of homeopathic production and distribution, both as a consultant under the aegis of her own company, IM Integrative Solutions, and in corporate positions with Heel Inc. As a Global Fellow with Unite for Sight, she traveled to India with a volunteer medical mission where she engaged in triage in city slums, villages and orphanages.

January 2011 -- Off to a good start!

Homeopaths without Borders (HWB) has formed an alliance with the American Medical College of Homeopathy (AMCH) in Phoenix that will allow nursing students at the University of Notre Dame in Port-au-Prince, Haiti to enroll in a certification program led by AMCH faculty.

A year after responding to emergency needs following the devastating earthquake in Haiti, HWB is continuing its commitment to treat and teach in that country. The AMCH course at Notre Dame has evolved from enthusiastically received introductory lectures last fall to the current curriculum for fourth-year students. HWB volunteers will be traveling to Haiti in late January, March and May to carry out the program.

Volunteers will also continue to conduct clinics at St. Vincent's School for Handicapped Children and the Baptist Mission in the Delmar area of Port-au-Prince.

HWB is seeking volunteers with extensive experience in homeopathic practice and teaching for missions being planned for 2011. Applications can be found on the organization's web site: www.homeopathswithoutborders-na.org.

Donations to support this critical work can be also made on the web site or mailed to Homeopaths without Borders, c/o Jean Hoagland, president, 601 McDonald St., #108, Mount Dora, FL 32757. Homeopaths without Borders is a 501 c (3) non-profit organization. All donations are tax deductible.

2010 Summary

As 2010 recedes into memory, Homeopaths Without Borders-NA extends its appreciation to all who have contributed to its efforts to spread the use of homeopathy through healing and teaching in communities in need.

Responding to the catastrophic earthquake in February, HWB volunteers treated thousands of physically and emotionally injured Haitians in a makeshift clinic on the grounds of the Hospital Francais d'Haiti in Port-au-Prince. These emergency response experiences in February and March have been followed by longer-term teaching and clinical commitments.

Teams of volunteers conducted two first aid homeopathy sessions for nursing students at the University of Notre Dame. Building on the enthusiastic response of the students and administrators at the school, HWB is formulating plans to present a curriculum leading to certification.

Volunteers will also continue their clinical work at St. Vincent's School for Handicapped Children where successful treatment of acute and chronic conditions has made HWB welcome. At present, HWB's efforts are focused on the students, staff and their families; if conditions permit, in the future the clinic may be open to neighborhood residents.

Thanks to all who engaged in our missions in 2010 by donating! We hope you will continue to recognize our work in the year ahead. For more information, contact visit our web site: www.homeopathswithoutborders-na.org

Lisette Narragon, Laurie Grossman, and Sally Tamplin teaching homeopathy in Haiti -- Nov. 2010
Homeopaths without Borders-NA: Mission Six (November 2010)



Undaunted by the threat of cholera or the heavy rains of Hurricane/Tropical Storm Thomas, a group of Homeopaths without Borders volunteers assembled in Port-au-Prince on November 7 for a busy week of healing and instruction.

Led by Haiti Project Coordinator Dr. Lauri Grossman, Lisette Narragon on her third trip, Sally Tamplin, Greg Meyer and Kathy Farrell continued the work begun on previous missions. Returning to the St. Vincent's School for Handicapped Children, the volunteers were warmly greeted by children and staff. They welcomed the good news about improvement of conditions treated by the mission participants in September. During their clinics, they attended to a variety of maladies including acute and/or chronic stomach problems, headaches, eye problems, rashes, vaginal infections and coughs -- ailments common throughout the Haitian population.

While maintaining our commitment to treat the children and staff at St. Vincent's School on an ongoing basis, HWB is focusing on another of its primary goals: the need to create health care independence among the Haitian people. To attain that objective HWB has begun to train nursing students to become practitioners of homeopathy and hopes, eventually, to broaden the scope of the program to include other members of the health care community.

Approximately 120 enthusiastic nursing students at the University of Notre Dame attended the lecture in November, responding eagerly to the first aid homeopathy instruction presented by Lauri Grossman, Lisette Narragon and Sally Tamplin. This was DOUBLE the number of students who participated in an introductory seminar in September. Through an arrangement with the nursing program, HWB is offering a certification program under the auspices of the American Medical College of Homeopathy in Phoenix.



Lisette Narragon and Laurie Grossman in Haiti

Volunteers will be returning in January, February and March 2011 to continue the certification program. The cost of textbooks and other supplies are beyond the means of the students in this poor country. [We need financial support of the homeopathic community to carry out this important mission.](#)

To make a contribution, please visit: www.homeopathswithoutborders-na.org, or send a donation to: Homeopaths Without Borders, C/O Jean Hoagland President, 601 McDonald St., Unit 108, Mount Dora FL 32757

Homeopaths without Borders-NA is a 501 c-3 charitable organization. Its helping programs exist through the generosity of the homeopathic community. All donations are tax-deductible. For additional information about the organization, including stories about past missions, and to donate, visit www.homeopathswithoutborders-na.org.

Homeopaths without Borders-NA: Mission Five (September 2010)



Lisette Narragon, Lauren Fox, Joseph, Mary Salica

The following is excerpted from a letter written by homeopath Mary Salica about her trip to Haiti with HWB-NA

This is just a note to thank all of you for including me on the latest team to Haiti. The devastation in Haiti is truly heartbreaking and there is so much to be done. These are a few brief highlights of our time in Port au Prince and Leogane.

St. Vincent's Center for Handicapped Children is the most amazing school and home. The residents and staff were very welcoming and came asking for help in dealing with acute problems resulting from the earthquake as well as severe chronic problems that so many were born with. Michelle, the staff nurse at St. Vincent's, did her best to stay on top of translation, as did Lisette who was translating and treating at the same time. Patients who were seen and treated by previous teams were happy to report their progress. The time went quickly and we saw a large number of patients. That evening, energized by our day, we inventoried and organized our homeopathic remedies.

Tuesday we proceeded to the nursing school in Leogane. Although the head of nursing had to cancel at the last moment, we decided to carry out our plans anyway with the hope of making contact with one of her colleagues. As it turned out, we were able to speak with an associate who was very gracious with her time. She expressed interest in pursuing a course in homeopathic instruction for the nursing students and promised to discuss our conversation with the doyenne of nursing. We also were given a complete tour of the school. Leogane, a city about 30 miles from Port au Prince, was hard hit by the January earthquake.

Our driver Joseph did a great job steering us (as well as he could) over earthquake ravaged roads and countryside. Joseph was very helpful and protective of the three of us--Lisette Narragon, team leader, Lauren Fox and myself. Thirty miles is a long and unpredictable journey in Haiti.

The following day we arrived at the Notre Dame School for Nursing in Port au Prince ready to initiate our course of instruction there. The staff and students were expecting us and seemed happy we were there. Lisette did an amazing job teaching First Aid etc., in French, for three hours. This session proved to be an excellent beginning for an ongoing program of homeopathic instruction, both acute and chronic. They are truly a wonderful group of staff and students.

During our stay, we returned to St. Vincent's school with a first aid kit and instructions for Michelle who is eager to learn basic homeopathy. (Pere Leon, head of the Center, was very happy for her to have it). Two students asked for help and we did a brief workup for them, as well as for the accountant for the school.

Again, thank you for including me on this team. My hope is to return to Haiti in whatever capacity would be most useful.

Update, July 24, 2010

Homeopaths without Borders-NA Returning to Haiti: Mission Four

Homeopaths without Borders-NA sent another team to Haiti the week of July 17-25. Six months after the earthquake, the situation in Haiti is no longer considered an emergency; however, this poor nation has hundreds of thousands of people living in tent cities and in tents and makeshift plastic housing along the streets. Malaria is already visible. With the shifting away from emergency status, personnel at the Hospital Francais, a private facility, informed HWB-NA there was no longer a need for their services where they had treated thousands of patients on previous missions. The goals of this current team were to explore a venue where treatment of patients was still considered a need and to establish a relationship with an institution where homeopathy could be taught to health care personnel.

The efforts of the team, consisting of Kim Sikorski, M.D., team leader; Lauri Grossman, D.C.; Lisette Narragon, CHC and Myrna Merron, EdD, resulted in the attainment of those objectives. The team treated children and adults with serious maladies at St. Vincent's Center for Handicapped Children. Additionally, they met with a distinguished surgeon at Hospital Canape Vert who was sympathetic to the desire of HWB to promote health care independence through homeopathy. That meeting led to a conversation with the head nurse at a university in Port Au Prince; the group is also exploring teaching nurses at a facility in Leogane, 30 miles from Port Au Prince.

The ultimate goal of HWB-NA is to continue treating at St. Vincent's while conducting teaching programs at medical institutions. The plan includes establishing a number of teams that will work in Haiti on a rotating basis. At this time, Haiti is a nation dependent on charity from the outside. HWB hopes to champion self-sufficiency.

Update, May 25, 2010

Homeopaths without Borders-NA Returning to Haiti: Mission Three

Plans are underway for a third mission to Haiti in July. Volunteers are gearing up to return to Port-au-Prince on July 18 for a week of treating clients. Additionally, Kim Sikorski, MD, a member of the HWB board will present an introduction to homeopathy to health care personnel in response to interest shown during the last mission. A portion of the time in Port-au-Prince will be spent treating children at a nearby orphanage and training staff members in the use of remedies for some common ailments. An affiliation with the orphanage is expected to be ongoing.

With the island country now contending with the rainy season, homelessness and poverty will exacerbate the effects of tropical diseases. HWB continues to be appreciative of contributions to help it carry out its two-fold mission in Haiti: to treat and to teach.

HWB relies on the generosity of the homeopathic community to cover expenses to carry out its missions. HWB is a humanitarian, 501 C-3 corporation and all donations are tax deductible. For more information about HWB, to volunteer, and to make a donation visit:

www.homeopathswithoutborders-na.org.

Update, April 23, 2010.

Volunteers for Homeopaths without Borders-North America (HWB) conducted their second successful emergency response clinic in Port Au Prince March 23-30.

Working out of tents on the grounds of the Hospital Francais d'Haiti, Sushila Lalsingh, executive director of HWB, Lauri Grossman, Helen Hardinge-Field, Robin Murphy and Andrew

Lustig, all experienced homeopathic practitioners, treated approximately 500 patients each day. They were warmly greeted by the Haitian people on their return and received positive feedback from patients who were aided during the first mission in February.

Noted was the shift in problems from acute to chronic. Basic health care was foremost with an emphasis on nutritional issues. Additionally, the group was confronted with skin and eye problems, hypertension, women's maladies, fever and colds. As Haiti enters the rainy season, HWB personnel are preparing for the onset of tropical diseases when they again visit Haiti in midsummer.

Keeping in the forefront the dual goals of HWB to provide treatment and education to populations in need, the group laid the groundwork for the training of medical personnel in Port Au Prince. In response to enthusiasm and cooperation demonstrated by health care professionals at the Hospital Francais, Sushila and Robin met with individual doctors to introduce them to homeopathy. Plans are underway for a large-scale teaching seminar during the next mission, which is scheduled for summer 2010.

As a result of the success of the clinic, HWB is also responding to a request from Mother Mary of Mercy orphanage in Port Au Prince to minister to the children residing there. This undertaking will begin in the summer and run concurrently with the clinic; as a component of the program, caretakers will receive instruction in the basics of homeopathy.

The ultimate goal of HWB-NA is to establish a permanent clinic in Port Au Prince with Haitian health care professionals actively participating under the supervision of HWB volunteers.

To continue its efforts in Haiti and to achieve this objective, the organization needs the continued generous support of the homeopathic community at large. Tax deductible donations may be made via the website: homeopathswithoutborders-na.org or by mail: Homeopaths without Borders-NA, PO Box 5301, Titusville, FL 32783. Homeopaths without Borders is a humanitarian 501 C3 corporation.

Feb. 6, 2010.

The first group of dedicated volunteers from Homeopaths without Borders-NA has arrived in Haiti and has already treated over 1000 clinic patients. Curtailment of flights by the U.S. military forced a change in plans. The group, along with 800 pounds of equipment, remedies and medical supplies flew to Santo Domingo and traveled 10 hours overland to Haiti. Communication is difficult but we will try to inform the homeopathic community as we hear from team leader Sushila Lalsingh, executive director of HWB-NA.

To contribute to their efforts, please go to <http://www.homeopathswithoutborders-na.org>.



Sushila, Laurie, Helen, T.Namaya, and Mike in Haiti



Hospital Francais d'Haiti



Our clinic at Hospital Francais d'Haiti



Haitians outside gate of clinic



Outside of clinic



Praying amidst the ruins



Destroyed building next to our clinic



Sushila, Lauri, Philippe, Nancy and Helen



The children say goodbye to Mike

Homeopathy proves effective for cat and dog conditions



Owners can now be confident homeopathic medicines can be effective for common canine and feline conditions in many animals, following a recently published clinical study.

In the largest-ever study of its type, the newly published Clinical Outcomes survey has identified a number of clinical conditions in dogs and cats that may be promising targets for future research in veterinary homeopathy.

Twenty-one homeopathic veterinary surgeons in the UK recorded data from their patients over a 12-month period and collected information from a total of 1500 dogs and 400 cats.

The most frequently treated feline conditions overall were dermatitis, renal failure, over grooming, arthritis and hyperthyroidism. The most commonly recorded canine conditions were dermatitis, arthritis, pyoderma, colitis and fear. By owners' assessments, a moderate or major improvement was reported overall for 68% of dogs and 63% of cats.

The authors of the study conclude that a program of controlled research in homeopathy for frequently-treated feline and canine conditions is clearly indicated.

For further information please visit www.bahvs.com

The Abuse of Antibiotics -- and One Solution: Homeopathy!

Classical homeopath Ronald D. Whitmont MD has published an excellent four part series on the abuse of antibiotics in modern medicine and the serious consequences that have resulted. He also points out, in Part IV, how homeopathy is an excellent alternative to the allopathic approach to infections.



Antibiotics, long considered to be the wonder drugs of conventional medicine, were developed before the middle of the last century. Early on, they appeared so incredibly effective that investigators predicted that they would end the threat of infectious diseases.

The optimism was so contagious that the use of antibiotics quickly spread through a diverse range of industries. Within a relatively short time, these agents were being applied to a wide variety of different conditions in a host of different environments. Antibiotics are currently being used extensively in agriculture, medicine, and in personal-care products.

An unfortunate result of this unbridled enthusiasm was overuse. When these drugs were used in so many applications, their miraculous nature soon began to unravel. Antibiotics then revealed other, darker qualities. Following the use of this new generation of drugs was a wake of associated problems—the emergence of an entirely new class of infections and a host of other related complications.

As quickly as these agents were disseminated into the commercial world, they began to unleash a backlash of complications now considered modern plagues. The overuse of these drugs is directly responsible for these complications. Additionally, the environmental impact of their use has yet to be fully comprehended.

The use and overuse of antibiotics is a controversial topic, but even fundamentally conservative organizations like the American Medical Association (AMA) and the Infectious Disease Society of America (IDSA) have begun to lobby for stricter controls. Leaders of these organizations recently testified before a subcommittee of the U.S. House of Representatives on the hazards of antibiotic overuse. They strongly advise greater limits in a vain attempt to curtail them.

Conventional medical experts have been well aware of the problems caused by these agents for quite some time, but these organizations have largely been powerless when it comes to limiting their use.

Many believe that these agents are harmless and that the problem is that they are *underutilized*. Physicians are frequently at the crossroads of this view, which was recently the subject of an article in the science section of The New York Times. The article chastised doctors for not prescribing antibiotics *frequently enough* in the treatment of common respiratory infections, colds, and coughs—infections that are known to be almost exclusively viral illnesses and therefore unresponsive to antibiotics!

Public expectations also drive many practices in medicine, and physicians frequently report that patients not only expect but also demand prescriptions for antibiotics. In addition, many professionally established treatment protocols advocate the early and liberal application of antibiotics in routine health care.

Today, it is increasingly likely that initial exposure to antibiotics will take place before birth. These agents are utilized with aplomb throughout pregnancy, the intrapartum, and postpartum periods.

In childhood, antibiotics are the mainstay treatments of most fevers and are the leading cause of adverse drug reactions and complications in this age group. The use of antibiotics is now considered routine in the common cold, influenza, coughs, sinusitis, and many other self-limited conditions, which are known to be primarily virally mediated.

In many countries, antibiotics are available over the counter without a prescription. This allows the public to self-prescribe on a whim, without diagnostic or clinical experience. The public, which consumes these agents without much thought, has been lead to believe that these agents are not only safe, but also that they are good for the body and even necessary for recovery from most illnesses.



Most people may be unaware that the body not only can heal from infection without pharmaceutical intervention, but also that it is necessary for it to do so.

Pharmaceuticals and cosmetics are considered an integral and essential part of our culture. This perception is not based on science but is the result of socialization and marketing.

Many have even suggested that life would be simpler if antibiotic agents were added to the food and water supplies

Unfortunately, these drugs are already in the water, but how they got there is different story. It turns out that antibiotic use is already so widespread and ubiquitous that the combined effect of medical, personal, and agricultural uses has led to their accumulation in almost every ground water supply on the planet.

Europeans have been aware of this phenomenon for over a decade, but the United States lags behind in this field of research and concern. The long-term effect of these persistent low-level residues has not even been estimated.

The addition of these drugs into the water table through agricultural runoff and human and animal waste means that they ultimately enter the food chain and eventually affect all life on the planet.

The problems created by the abuse of antibiotics are just the tip of the iceberg, as the environment becomes the repository of an ever-more-concentrated brew of toxic mélange.

This buildup has led to a number of problems, including the development of a new class of super bacteria that are resistant to virtually all the available antibiotic agents known to man.

In the United States, nearly 90,000 people die from hospital-acquired infections every year. Seventy percent of the bacteria responsible for these infections are resistant to at least one of the antibiotics typically used to treat them.

Antibiotic overuse in the medical environment has led to the evolution of a multitude of public health and environmental crises. The AMA, the Infectious Diseases Society of America (IDSA), the Centers for Disease Control (CDC), and others are very concerned that the overuse of these agents will eventually make this entire class of drugs more harmful than helpful, eventually creating a situation where they are utterly useless.

Hospitals have long been familiar with these emerging organisms, including methicillin-resistant *Staphylococcus aureus* (MRSA), vancomycin-resistant enterococci (VRE), multi-drug-resistant tuberculosis (MDRTB), Pseudomembranous enterocolitis (*Clostridium difficile*), New Delhi metallo-beta-lactamase (NDM-1), and other multi-drug-resistant organism infections (MDROs).

Many hospitals and clinics struggle with extensive hygiene and stewardship programs aimed to control the spread of these organisms, but the results of these efforts are disappointing. The incidence of these organisms has steadily increased since they were first isolated more than 40 years ago. Programs typically stress diligent hand washing, but the real culprit is our continued dependence on antibiotics as the sole method of treating infections.

An example of the failure of these programs is the fact that these organisms have already moved beyond the boundaries of hospitals and clinics and entered the larger community. MRSA has been increasingly detected in nonmedical environments and on otherwise healthy individuals.



Another pernicious side effect of antibiotic overuse is the insidious change that these agents cause in the immune system. The use of antibiotics directly suppresses immune functioning and can sometimes make it nearly impossible for the body to eradicate acute infections and develop long-term immunity to many common illnesses. This bizarre and ironic twist is a direct result of the actions of antibiotics on the immune system.

The mechanism by which this immune suppression takes place is well-known and has been extensively studied. All medical students are taught the fundamentals of these processes, but practicing physicians apparently fail to remember them

These drugs turn off and impair the immune system at different levels by acting as anti-inflammatory agents. They block a cascade of events that normally serves to activate both the innate and adaptive immune systems.

When these components of the immune system are inactivated, the body is unable to resolve infections and to create a foundation for long-term immunity. The limited short-term benefit derived from using these agents can be quickly erased by the combined impairment in long-term health and the development of resistant bacterial organisms.

This interference with immune functioning is visible in the epidemic of “revolving-door” infections (most commonly Streptococcal pharyngitis, otitis media, and sinusitis). Each time antibiotics are utilized in these benign, acute, self-limited conditions, the immune system can be further weakened until it becomes unable to develop natural immunity, and a chronic illness is created. The No. 1 chronic illness in the United States today is sinusitis, which was almost always limited to acute illnesses before the introduction of antibiotics!

Once these conditions become chronic, the further application of antibiotics becomes useless. Eventually a surgeon must be consulted to mechanically remove the tonsils, place tubes in eardrums, or widen the openings to sinuses.

When these drugs fail, the body becomes the next target for blame, while the cause (antibiotics) is ignored. These examples demonstrate not only of the failure of the antibiotic approach to resolve these conditions but also the failure of the medical profession to critically self-examine its tools and interventions. Too long has this profession acted as the pawn of the pharmaceutical industry.

Antibiotics are grossly overused as first-line treatments for most infections. Sometimes their use is unavoidable, but frequent antibiotic use risks damaging the immune system and changing acute diseases into chronic ones.

Ultimately, this chain of events creates more illness, suffering, complications, and interventions that could have been avoided if proper management of the initial condition had been given. Simply left alone or treated with safer and more natural methods, these conditions would in most cases have resolved quickly and permanently.



A third important side effect of antibiotic agents occurs when they cause collateral damage, either to the microbial flora of the body or to the vital organs, including the lungs, kidneys, bone marrow, and liver.

When the native bacterial defenses are disrupted by antibiotic exposure, the risk of opportunistic bacterial, fungal, and viral infections dramatically increases. The resulting imbalance, known as dysbiosis, predisposes to many different syndromes, depending upon which anatomical sites are most impacted. Antibiotic-triggered dysbiotic illnesses include candidiasis, irritable bowel syndrome (IBS), leaky gut syndrome, chronic fatigue syndrome, asthma, and allergies.

According to the Centers for Disease Control and Prevention (CDC), the bacterium *Clostridium difficile* alone is responsible for nearly 30,000 hospital deaths annually.

Infections with *C. difficile* are the direct result of antibiotic use that damages the bacterial balance of the digestive tract, leading to a monoculture of organisms. The resulting dysbiosis [intestinal microflora imbalance] causes a failure of digestion and absorption, resulting in pain, bloating, intractable diarrhea, malnourishment, dehydration, and ultimately death if not managed well.

Physical damage from antibiotics can lead to fatal anemia, kidney failure, liver damage, and destruction of many other organs.

Due to worldwide overuse and over-reliance on these drugs, we are in the midst of a series of health and environmental crises of drug-resistant organisms, recurrent infections, failed immunity, and dysbiosis.

Sadly, there is still no serious discussion in the medical community, and very little effort is being made to curb the use of these agents or to look at alternatives.

The major ongoing debate in this field tends to focus on the costs and timeliness of developing better and stronger antibiotics. Very little effort is spent exploring alternatives to these drugs, many of which already exist.

The development and approval of new antibiotics is a costly endeavor that can take many years. There are very few of these potential antibiotics (less than 10) currently in the pipeline undergoing review, so no immediate relief from these problems is in sight.

Logic suggests that the current course of action by the medical and pharmaceutical industries will be too little, too late. Although there might be modest, delayed, and temporary benefit from the introduction of new drugs, this course will ultimately prove to be fruitless, and these industries already know it

We have come to the much-heralded end of the antibiotic era. Many factors have contributed to this end: The bacterial world cannot and will not be eradicated by our drugs. Antibiotics can seriously damage the body, and the environment will hold us ultimately accountable for all of our collective follies and misdeeds in this realm.

The heavy financial and social investment in these drugs has made it difficult for society to abandon this course and to seek safer, more ecologically sound, and viable alternatives. The allopathic medical system of medicine is embedded in the antibiotic approach practically as well as philosophically. A significant change in perspective—a paradigm shift—is needed before alternative solutions that favor strengthened immunity, symbiosis, and a healthier environment can be embraced.

A healthy immune system is the result of a lifetime of ongoing challenges. Similar to the way muscular strength develops, the immune system cannot become strong unless it is directly challenged and exercised by exposure to bacteria and certain illnesses.

The best way to achieve strong immunity is to allow the immune system to interact with the bacterial world while being supported by interventions that do not suppress it.

Antibiotics are short-term solutions with a myriad of problems that ultimately perform a disservice to health by damaging the immune system and weakening the body, leading to perpetual dependence and the inability to coexist with the natural world.

There are many viable strategies that offer more reasonable alternatives to antibiotics and forego the aggressive “chemical warfare” strategy that ultimately damages both our health and the health of our environment.

These alternative methods reflect a greener, gentler approach that stresses individualized treatment, an ecologically sustainable symbiotic balance, immune resiliency, and illness prevention.

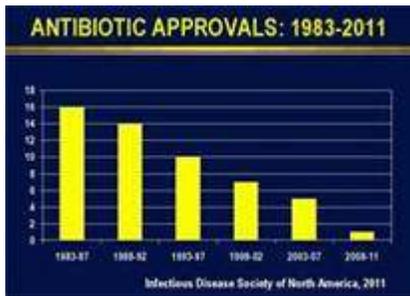
Classical homeopathy is first in this field with more than two centuries of archived experience dealing with a vast diversity of infectious illnesses. Homeopathy has proven its benefit through epidemics and public health crises leading to improved health in the face of allopathic naysayers, political expulsion, and excommunication from the academic world.



HOMEOPATHIC PHARMACY: Homeopathic treatment is a potent alternative to antibiotic overuse. (Peter MacdiarMid/Getty iMaGes)

Homeopathy combined with certain naturopathic approaches, responsible nutrition, and intelligent lifestyle choices can offer a potent alternative to antibiotic overuse. These treatment approaches work to assist and strengthen the immune system rather than deplete it.

These methods can be extremely helpful as first-line, primary defenses that limit more damaging allopathic approaches. A side benefit is that most of these methods embody ecological and environmental sustainability, are non-toxic, and support the intrinsic homeostatic mechanisms of the body.



When these approaches are utilized as first-line treatments, antibiotics and other harmful therapies can be held back for use at a later time, *if* these safer, more natural methods fail. This is one important way that antibiotic use can be significantly reduced in health care.

In other industries, particularly agriculture, the practices of biodynamic and organic farming should be strongly encouraged, if not subsidized. These methods rely less heavily on chemicals and antibiotics and enable a safer, more ecologically sustainable and humane practice of food production and animal husbandry.

If worldwide patterns of antibiotic use are ever to change intelligently and voluntarily, it will probably require the involvement of a large public-advocacy campaign that demands these agents be utilized more responsibly. It may ultimately be up to the public to speak out on these issues. One of the most important and immediate steps that anyone can take is to *eschew medical practices that utilize reckless and harmful prescribing methods*.

Simply expecting the medical establishment or the pharmaceutical industry to take the initiative in this arena is a bit like waiting for the fox to protect the henhouse. Serious consideration needs to be given to the local and global impact of any medical diagnostic study, intervention, or treatment. Whenever health care services are utilized, patients should be active, informed participants equally engaged in the process of making decisions.

Health care is no longer the exclusive domain of the physician. Individuals must take responsibility to educate themselves, to learn about the risks of irresponsible prescribing, and to explore alternatives that will enable the achievement of better health for themselves, their family, the community, and the ecosystem. Waiting idly while expecting benevolent treatment from an industry entrenched in its own financial interests is lazy and naïve.

Science is a tool that can be (and has been) manipulated by indiscriminate individuals and organizations for personal financial gain. Our society should no longer tolerate the flagrant abuse of the public trust and welfare, while we are led, like sheep, by the pharmaceutical and the insurance industries down dangerous and irresponsible paths. If we choose to ignore these choices collectively, then we will indeed reap what we sow.

Initiative on this issue needs to spread from the grassroots level from the individual to the family, to the community, and ultimately to society and to the world. In the same way that the support of local organic farming promotes personal, family, and environmental health, so does the pursuit of natural health care, using homeopathy and other natural methods.

Each of us has the responsibility to decide what can be tolerated and what is acceptable in the practice of health care, food production, and in the responsible shepherding of the environment. The time has come to accept responsibility for the health of our world and ourselves. We must practice what we preach, walk the walk, and dance the dance.

Support your local organic farmer, natural medicine practitioner, and classical homeopath

Another bad year for pharmaceutical drugs. Are there safe options?

Cold and Flu Drugs Pulled From Market While Cholesterol and Anti-Depression Drugs Called Into Question.

First, it was the announcement that anti-inflammatory drugs like Vioxx and Celebrex created life threatening side effects. Now the FDA is banning over-the-counter cold and flu drugs for toddlers and infants and the cholesterol drug Vytorin has been found to be potentially dangerous. On top of that, a new study in the New England Journal of Medicine (January 2008) raises serious questions about why drug companies have failed to report large numbers of negative studies on their leading anti-depressant drugs. Is it time for Americans to consider healthier alternatives? Two hundred years ago a system of medicine called homeopathy was discovered.



Since that time, it has been a life-saver in many of the deadliest epidemics of the last two centuries while also proving to be a great option for patients with a wide variety of chronic diseases. So what is this system of medicine and why don't Americans know more about it?

Homeopathy is based on a law of nature. It relies on an idea that dates back to Hippocrates – namely that substances capable of causing symptoms can cure those same symptoms when administered to the sick.

The medicines employed in homeopathy are from plants, animals and minerals, are extremely gentle, can be used by the young and old, are regulated by the FDA as Class 2 drugs, and have an outstanding safety record. When homeopathy first arrived in America from Europe, it was little noticed until the great and deadly epidemics of the 1800s. Results obtained by homeopathy during these epidemics reveal a very important and clear constancy: namely, a very low mortality rate when compared to medicine of the day as well as to that of contemporary times.

This constancy remains, regardless of the physician, institution, time, place or type of epidemic, including diseases carrying a very high mortality rate, such as cholera, smallpox, diphtheria, typhoid fever, yellow fever and pneumonia. So what happened? Where is homeopathy today in our American health care system? The success homeopathy enjoyed in its earliest years brought it some powerful adversaries. During the great epidemics of the 1800s, homeopathy was so successful and became so popular that conventional practices began to suffer, losing their patients and their livelihood. The American Medical Association was started in part as an attempt to thwart the rise of homeopathy. Conventional doctors, being far more numerous than their homeopathic counterparts, organized and made it extremely difficult for homeopaths to practice. Eventually homeopathy faded from the American landscape.

Today we are left with age-old prejudices. Conventional doctors and their pharmaceutical allies know little about homeopathy, yet are quick to dismiss it as impossible. “The medicines are too dilute” they say. “No studies have been done”. Well, does it work? What does modern science now tell us?

New research emerging from laboratories like Penn State University's world renowned Material Science Laboratory, and others, are now finding that homeopathic medicines do in fact have unique structures – and that structure more often than composition determines a substance's properties. Given these new findings, the claim that homeopathy is impossible can be completely dismissed.

But are there clinical studies showing effectiveness? Yes. In fact, large numbers of pre-clinical and clinical studies published in esteemed medical journals like Rheumatology, Annals of Internal Medicine, Pediatrics, The International Journal of Neuroscience and others, report the biological effects of homeopathic remedies. What's more, multiple published observational studies on thousands of patients around the world are overwhelmingly positive for homeopathic treatment in real world clinical practice.

Tens of millions of patients in Europe and Asia use homeopathy regularly. It is a wonderful option for patients of any age and suffering from any illness. For parents looking for safe options to banned OTC products to treat colds, flu, and allergies, homeopathy is a wonderful tool. For adults with coughs, sore throats, nausea, diarrhea, fever, chills and all other forms of acute illness, homeopathy works wonders. For simple first aid in emergencies, homeopathy is indispensable. For the millions of Americans suffering with chronic diseases of all dimensions, homeopathy can improve their lives.

There is really little doubt that homeopathy works. And it is inexpensive and accessible. With a little training (very important!), anyone can use homeopathy successfully to treat simple acute conditions. For more challenging disease states, it is always best to find someone who has trained extensively in the field. Many have said that homeopathy is the most challenging form of medicine to practice well. To learn out more about this extraordinary system of medicine for yourself and your family, visit www.nationalcenterforhomeopathy.org. The National Center for Homeopathy is the organizing body for homeopathic medicine in the United States and a great source of basic information, research articles, education, and so much more. (A complete copy of this article with research citations is available at www.nationalcenterforhomeopathy.org under "Media"). Nancy Gahles DC, CCH, RSHom (NA) President, National Center for Homeopathy, Alexandria, VA

HELP PROTECT YOUR ACCESS TO HOMEOPATHY

Please make a donation to the National Center for Homeopathy today.

Chronic diseases are becoming epidemic in the U.S. population. Homeopathy can significantly improve the lives of those suffering with these diseases. The National Center for Homeopathy (NCH) is the major organization in the United States dedicated to protecting your access to this branch of medicine. NCH fights to make homeopathy accessible for you and your family while also serving as an important education resource to health care providers and the public (you!). Your donation is important if NCH is to continue this work. Please help with a donation large or small.

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“Homeopathic medicine is a great tool for helping patients battling common and chronic diseases. Help us train those in healthcare to use it properly and keep it accessible. Please make a tax deductible contribution today to help protect your access to homeopathy.”

Why Donate?

- Homeopathic medicine is not only effective but very inexpensive for patients, making it a threat to pharmaceutical interests around the world.
- Because homeopathy is seen as a threat by these powerful companies, it's under renewed attacks across the globe.
- In the United States, only the National Center for Homeopathy protects your access to homeopathy.
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