

# homeopathy TODAY

YOUR GUIDE TO HEALTH THROUGH HOMEOPATHY

SPECIAL DIGITAL EDITION - *Women's Health*

**SWEET RELIEF FOR  
HORMONAL UPS & DOWNS:**  
Homeopathy for women's  
health at every stage

**HEALTHY WOMEN,  
BACK IN BALANCE!**  
Healing the itch and pain,  
restoring micro-flora,  
with homeopathy

**GOTTA GO, GOTTA GO!**  
Women choose homeopathy  
over painful, invasive treatments

**HOMEOPATHY IN HISTORY:  
THE NIGHTINGALE'S NEST:**  
Florence Nightingale Ward-Homeopath,  
Physician and Surgeon, Founder of San  
Francisco's Only Woman-Run Hospital

**GO WITH THE FLOW:**  
Every woman's guide to healthy,  
pain-free periods —naturally

**MIRROR, MIRROR ON THE WALL:  
Self-Esteem and homeopathy**

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## TODAY

### WOMEN'S HEALTH Article Collection



- 1 AFTER A PAP TEST OR SURGICAL INTERVENTION: REMEDIES TO SPEED HEALING**  
By Miranda Castro, FSHom, CCH  
*Fall 2007-October*
- 2 IRREGULAR PAP TESTS, GENITAL WARTS, AND HERPES: HOW ONE TRIATHLETE OVERCAME ALL—  
WITH HELP FROM HOMEOPATHY**  
By Amy Rothenberg, ND, DHANP  
*Fall 2007-October*
- 3 GOTTA GO, GOTTA GO! WOMEN CHOOSE HOMEOPATHY OVER PAINFUL, INVASIVE TREATMENTS FOR INTERSTITIAL CYSTITIS**  
By Susanne Saltzman, MD  
*Summer 2009*
- 4 BLADDER INFECTION? NIP IT IN THE BUD! ACUTE URINARY TRACT INFECTIONS YIELD TO FAST-ACTING HOMEOPATHY**  
By Judyth Reichenberg-Ullman, ND, DHANP, MSW & Robert Ullman, ND, DHANP  
*Summer 2009*
- 5 SWEET RELIEF FOR HORMONAL UPS & DOWNS: HOMEOPATHY FOR WOMEN'S HEALTH AT EVERY STAGE**  
By Dr. Trevor Holly Cates  
*Spring 2012*
- 6 CLEAR UP BLADDER TROUBLES NATURALLY**  
By Begabati Burke Lennihan, RN, CCH  
*Fall 2014*
- 7 HEALTHY WOMEN, BACK IN BALANCE! HEALING THE ITCH AND PAIN, RESTORING MICRO-FLORA, WITH HOMEOPATHY**  
By Natalie Ham, ND  
*Fall 2015*
- 8 ONCE IN A BLUE MOON? IF VAGINITIS IS RARE FOR YOU, HERE'S WHAT TO DO**  
By Judyth Reichenberg-Ullman, ND, DHANP, MSW  
*Fall 2015*
- 9 GO WITH THE FLOW: EVERY WOMAN'S GUIDE TO HEALTHY, PAIN-FREE PERIODS —NATURALLY**  
By Lia Bello, RN, FNP, CCH  
*Fall 2016*
- 10 MIRROR, MIRROR ON THE WALL... SELF-ESTEEM AND HOMEOPATHY**  
By Judith Acosta, LISW, CCH  
*Spring 2017*

# homeopathy

YOUR GUIDE TO HEALTH THROUGH HOMEOPATHY

## TODAY

SPECIAL DIGITAL EDITION - Women's Health

- 11** **PERIMENOPAUSE & UNPREDICTABLE PERIODS SWEET SOLUTION: HOW ONE PILATES INSTRUCTOR AVOIDED A HYSTERECTOMY**  
By Alicia Gonzalez, ND, DHANP, CCH  
*Summer 2018*
- 12** **HOW I ELIMINATED HOT FLASHES IN 3 WEEKS WITHOUT DIET OR EXERCISE- MANAGE YOUR MENOPAUSE, NATURALLY!**  
By Cristina Cantu, ND  
*Summer 2018*
- 13** **9 WAYS TO INCREASE YOUR LIBIDO JUST IN TIME FOR VALENTINE'S DAY**  
By Michele Brookhaus, RSHom(NA), CCH  
*Winter 2018*
- 14** **SAY GOODBYE TO UTIS- WHEN IT HURTS TO GO, HERE'S SAFE, GENTLE, NATURAL RELIEF!**  
By Michele Brookhaus, RSHom(NA), CCH  
*Spring 2019*
- 15** **RAGING RED-EYE BLADDER INFECTION: ANOTHER HOMEOPATHIC MIRACLE!**  
By Judyth Reichenberg-Ullman, ND, MSW  
*Spring 2019*
- 16** **TOO YOUNG FOR MENOPAUSE? GET BACK IN BALANCE! BALANCE HORMONES, BOOST FERTILITY— SAFELY AND NATURALLY**  
By Natalie Ham, ND  
*Spring 2021*
- 17** **HOMEOPATHY IN HISTORY: THE NIGHTINGALE'S NEST: FLORENCE NIGHTINGALE WARD-HOMEOPATH, PHYSICIAN AND SURGEON, FOUNDER OF SAN FRANCISCO'S ONLY WOMAN-RUN HOSPITAL**  
By Edi Pfeiffer, CCH  
*Spring 2021*



# After a Pap Test or a Surgical Intervention

## Remedies to speed healing

by MIRANDA CASTRO, FSHom, CCH

**P**ap tests and other interventions to examine, biopsy, or treat the cervix may be mildly uncomfortable or very painful, depending on the procedure and the person, and bleeding afterwards is common. Happily, homeopathy excels in repairing damaged tissues after surgical tests or procedures. Use the following remedies to help your whole body heal easily and speedily.

### *Aconite*

Take before a procedure if you feel downright scared—some people are frightened of surgical procedures—especially if an anesthetic is involved.

▶ Take a single dose of *Aconite* before a procedure to calm feelings of fear and one dose the night before if you are having trouble sleeping because of it.

### *Arnica*

*Arnica* is the king of healers after a surgical procedure—bringing swelling and bruising down and preventing excessive bleeding. It is especially well indicated when you feel sore and bruised (anywhere) afterwards.

▶ Take *Arnica* three times daily for up to three days afterwards—stopping once any soreness has healed.

### *Gelsemium*

Take before a procedure if you just feel jittery and anxious—like before an interview.

▶ Take a single dose of *Gelsemium* before the procedure to calm feelings of anxiety.

### *Magnesium phosphoricum*

This remedy will help with menstrual-type cramps afterwards that are significantly better from heat (hot water bottle or heating pad) and hard pressure.

▶ Take *Magnesium phosphoricum* three times daily for up to three days.

### *Millefolium*

For bleeding after a procedure, when there is lots of bright red blood which comes in gushes—or in a steady flow.

▶ Take *Millefolium* three times daily for one day.

### *Staphysagria*

Even a Pap test can hurt—in women with sensitive cervixes. Those women are sometimes treated as if they are over-reacting, thereby adding “insult to injury.” The feelings afterwards—both physical and emotional—can be substantial. If those feelings linger, then a single dose of *Staphysagria* will provide sweet healing. After a procedure, the pains can be severe—sharp, stitching or tearing pains. There are feelings of emotional as well as physical injury. Emotionally, women feel as if they and their body were assaulted. There may be some anger towards an insensitive surgeon or nurse or an unexpectedly painful procedure.

▶ Take *Staphysagria* three times daily for up to three days after a procedure.

### *Rescue Remedy*®

For feelings of anxiety or fear or shock at any time (before or after a procedure). Put a few drops into all your drinks until those feelings have abated. (Note: this is not a homeopathic remedy, but rather, a Bach Flower Remedy.)

### Taking a Remedy: General Directions

- Take one remedy at a time in a 12c or 30c potency.
- Repeat it according to the severity of the symptoms.
- Stop on improvement.
- Repeat if it helped at first, but the symptoms return.
- If you've taken six doses and it hasn't helped at all, select a different remedy.
- Consult a homeopathic professional (as well as your doctor, of course, unless they are one and the same) if your symptoms are severe and/or are not responding to the remedies outlined above.

Miranda Castro, FSHom, CCH is a British homeopath who has been practicing homeopathy since 1982. She is author of the best selling *The Complete Homeopathy Handbook*. See page 27 for more about her.



# Irregular Pap Tests, Genital Warts, & Herpes

## How one triathlete overcame all—with help from homeopathy

by AMY ROTHENBERG, ND, DHANP

WHEN I FIRST SAW SHERRI'S INTAKE FORM, I WAS STRUCK BY HOW NEATLY and completely she had filled it out and described her chief complaint: "I have genital warts, which have caused my Pap smears to be abnormal. I have needed to have biopsies to the area and a procedure to remove the top layers of my cervix. I also have herpes simplex in my genital area and suffer from monthly outbreaks. I have some history of mild depression." When a patient is organized and able to describe her history and symptom picture so clearly, it can surely be a help to the homeopath.



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Sherry was an eager, if a bit nervous patient that first time I saw her ten years ago. She was put together well, with a crisp outfit and recent stylish haircut. She wore quite a bit of make-up, and her nails were freshly manicured and polished.

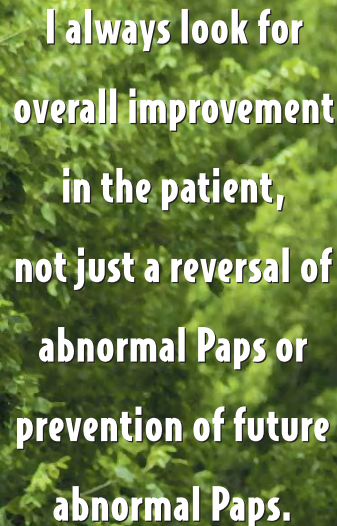
### Worried about the future

At twenty-five, Sherry worked as a counselor at a local high school and was engaged to be married. She was seeking help for her gynecological issues, concerned about the fact that having HPV infection put her at risk for problems like cervical cancer down the road. (HPV/human papillomavirus is the name of a group of sexually transmitted viruses that can cause genital warts as well as abnormalities in cervical cells—from mild dysplasia to cancer. See pages 12–14 for more about HPV.)

Sherry was also worried about her herpes and the possibility that if she ever became pregnant, a vaginal birth might not be an option because of the risk of passing herpes to the baby. She disliked the antiviral medication she took to treat her herpes; she felt that the treatment was suppressive because she could sense the eruptions just under the surface.

The genital warts she thought she had contracted from a college boyfriend, though she was not sure. They were small lesions on her labia (which her gynecologist had biopsied), and she experienced no discomfort or other effect from them. She had had irregular Pap test results for sev-

THUJA OCCIDENTALIS DETAIL BY DR. MICHEL SERET ©HOMEOPATHEINTERNATIONAL WWW.HOMEPOINT.ORG



I always look for  
overall improvement  
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eral years culminating in the recent procedure to remove the top layer of the cervix. Her fiancé did not have any visible lesions on the genitals.

The herpes simplex she did contract from her fiancé; the first outbreak was two years prior to our visit. The lesion was the size of a quarter on her left labia and quite raw and painful. She had experienced a flu-like feeling and fatigue for weeks before and after the outbreak. Subsequent episodes had been less intense, especially with regard to her systemic symptoms; nonetheless, the lesions were painful and itchy. Sherri could count on getting a herpes lesion before almost every menstrual period. She would also suffer an outbreak if she was under a lot of stress, mostly related to her job.

### **“Dirty, gross, and out of control”**

Sherri felt self-conscious and embarrassed about her health issues; they made her feel “dirty and gross.” This young woman was very particular about many things, cared a great deal about how others perceived her, and kept her work and home space neat and organized. The worst thing about the HPV and the herpes was that she felt out of control and like she had no say in what her body was doing. She was hoping that homeopathy and other natural medicines might help her, and she was willing to do whatever was suggested.

Sherri had been a high school and college athlete and seemed to take pride in her physical fitness and high energy level. She trained intermittently for mini-triathalons, but often had to forgo training because of her health issues.

### **Putting on a happy face**

In exploring the history of depression Sherri had mentioned on her intake form, I learned that this condition ran in her family, especially on her mother’s side. For Sherri, the depression mostly manifested as having very low energy and low self-

esteem. She would also feel anxious and worried about almost anything. In recent years, she had felt better emotionally, which she attributed largely to her loving and strong relationship with her fiancé, but she remained

concerned that these problems could come back. She suffered a bit from seasonal affective disorder and would always feel at least somewhat better by getting exercise and being outdoors each day.

In the course of our interview, Sherri described the way in which her emotional world was suppressed both in her family and, to some degree, at work. She did not feel she was free to show negative emotions such as anger or frustration. She would just put on a smile and pretend everything was okay. This sort of hiding of emotions takes a tremendous amount of energy, and Sherri knew it was not healthy.

A review of Sherri’s bodily systems turned up nothing remarkable except for some minor musculoskeletal issues that would arise from sports injuries. She would sweat profusely under her arms when nervous, and she was self-conscious about that. She had numerous warts removed from both her hands and feet; every few years she would have several frozen off. She tended to be on the chilly side and complained of chronically oily skin on her face; she had no problem with acne or other blemishes, just oiliness.

### **Looking for long-term effects**

In a case like this, I am always hoping to have a long-term impact on the patient. I wanted to see Sherri’s Pap test results revert to and stay normal. I wanted to see her have fewer or at least less uncomfortable outbreaks of herpes. I wanted her confidence and self-assuredness to grow. Tall

orders for a homeopathic remedy but, in my experience, not unrealistic.

I gave Sherri the remedy *Thuja occidentalis*, one commonly used for issues related to genital warts. Many times, those who

need this remedy will have a history of something being suppressed, whether it be a physical complaint or an emotional issue. In Sherri’s situation, she spoke about the sense that she was constantly suppressing the herpes with drugs; likewise, at work and within her family, she was always suppressing her emotions. Her additional warts on her hands and feet and the left-sidedness of her herpes were good confirmatory symptoms to indicate *Thuja*. Temperamentally, being overly concerned about what others thought, getting much of her self-definition from her work and from her partner (as opposed to from within), as well as carrying around an underlying feeling of self-disgust—each of these elements also pointed to *Thuja*. Her oily skin and profuse perspiration were additional physical general symptoms indicative of *Thuja*.

I prescribed one dose of *Thuja* 200c and asked to see her two months later. I wanted a few menstrual cycles to go by, to see if we had impacted the herpes. I also wanted Sherri to have results from a follow-up Pap smear. Whenever we can use conventional laboratory results to monitor improvement, we try to do so, in order to provide objective guideposts to judge the efficacy of our treatment.

### **Helpful supplements**

I also recommended a naturopathic protocol for Sherri’s abnormal Pap smears, advising her to stay away from coffee and caffeinated products, alcohol, and refined

sugars. I also suggested the following supplements:

- Folic Acid, 5mg/day for 3 months only
- Vitamin B-6, 100 mg/day
- Vitamin B-12, 1 mg/day
- Beta-carotene, 50,000 IU/day
- Vitamin C, 1000 mg/day
- Vitamin E, 400 IU/day
- Selenium, 200 mcg/day

This combination of high potency B vitamins and strong antioxidants has been shown to be helpful in such situations. There are other things that can be added or shifted depending on the particular case at hand, but this was the protocol used for Sherri.

### Early results look good

When Sherri returned two months later, she came into the office excitedly waving her most recent Pap results: normal. This I would expect based on the procedure she'd had before seeing me; I would want to see at least six months or even a year of normal Pap test results before I would be happy. Based on her previous pathology reports, Sherri was having Pap tests every three months.

Sherri also reported no herpes outbreaks since her last visit, and that she was feeling well and upbeat even though it was the dead of winter when she usually felt

emotionally low. Certainly the *Thuja* and the vitamin therapy were helping her. We reduced the folic acid dosage as well as the beta-carotene dosage and kept all else the same. I did not give her any more *Thuja*, but instead decided to wait and see.

At the next follow-up visit, Sherri came in with another good Pap test result and still no sign of the herpes.

### A healthy, ten-year run

Over the course of the last decade, I have continued to see Sherri, and she has done very well. She has had one slightly abnormal Pap test result during these years, which reverted to normal after additional doses of *Thuja*.

I have seen this many times in my practice; women who have had repeated bad Pap test results subjected to procedure after procedure (as they should be) who are quite frightened by such occurrences. When they take the right homeopathic remedy and appropriate supplements, most women I have treated do quite well. Even women who were exposed to DES and have more of a potential to have difficulties do surprisingly well.

I always look for overall improvement in the patient, not just a reversal of abnormal Paps or prevention of future abnormal Paps. I look for an improvement in



**I wanted to see her have fewer outbreaks of herpes. I wanted her confidence and self-assuredness to grow. Tall orders for a homeopathic remedy, but not unrealistic.**

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overall energy level, sleep, digestion, and skin, as well as improvement on the mental and emotional levels. I look for an amelioration of other physical troubles—in Sherri's case, for example, the herpes.

## THUJA, TREE OF LIFE

**T***huja occidentalis*, also known as Arbor Vitae or Tree of Life, is an evergreen native to the northeastern US. It grows wild in swampy areas but is also cultivated in Europe and the US as an ornamental tree.

The flat foliage and fresh twigs are used in the preparation of the homeopathic medicine.

Samuel Hahnemann, homeopathy's founder, claimed to be first to make serious use of *Thuja* medicinally (although he may not have known that Native Americans had been using it much earlier). In his *Materia Medica Pura* he stated that "the pure effects of this uncommonly-powerful medicinal substance, will be regarded by the homeopathic practitioner as a great addition to his medicinal treasury ... useful... in some of the most serious diseases of mankind, for which hitherto there has been no remedy."

Homeopaths have had great success using homeopathically prepared *Thuja* in cases of gonorrhea, genital warts,

and other warts, tumors, or growths, especially those with a cauliflower-like appearance. It has been used to treat urogenital problems, ovarian cysts, uterine fibroids, prostatitis, malignancies, headaches, depression, herpes, sinusitis, skin conditions, and more—but only when the individual symptoms of the patient match the unique indications for this remedy. James Compton Burnett popularized *Thuja's* use for the side effects/ill effects of the smallpox vaccination; later homeopaths have used it to treat side effects from some other immunizations.

### Don't try this at home

Along with *Thuja's* powerful action, however, comes this word to the wise: *Thuja* lends itself more to use by skilled homeopathic practitioners for the treatment of chronic conditions than to use by home prescribers. Esteemed homeopaths such as Drs. James Tyler Kent and Margaret

Sherri has had herpes outbreaks only a handful of times in the ten years since our initial visit, but has head them off with the use of Lysine, an amino acid which is known to help with the prevention and treatment of herpes. Before I saw her, Sherri had been using Lysine along with her antiviral medication, but without substantial effect; she was still having painful outbreaks at least once a month. Immediately after homeopathic treatment, however, she did not have a herpes outbreak for many months. When she did finally feel one coming on, it was extremely mild and the Lysine did the trick without side effects. This was an immediate and impressive reduction in occurrence, duration, and intensity of her herpes outbreaks. While it is true that, over time, many long-time herpes sufferers naturally experience a gradual reduction in their outbreaks, with or without any kind of treatment, one would not expect the outbreaks to end so abruptly and become so mild. Yet I have often seen this sort of dramatic response in my herpes patients and find that positive results are the norm for those treated homeopathically and naturally.

I have prescribed doses of *Thuja* from time to time for Sherri when her stress is very high or when other acute illnesses

arise that are indicative of this remedy. I have also given her the remedy *Lycopodium* at a few junctures when an acute viral illness required it.

### Help for the whole person

Over time and during the course of our many years working together, Sherri has become a confident and self-assured young woman, feeling good both at work and at home. Her mild depression is largely a thing of the past, though she can have low times during the long winters. So, though it is useful in such cases to look at the Pap test results, as always with homeopathy, we look at such results in the context of the whole person.

What I have learned from this and similar cases of HPV and/or genital herpes—some that have responded to *Thuja* and others to different well-prescribed remedies—is that we can help over the long run; the problems might not go away

completely, but they can certainly be deeply impacted as the individual patient gets healthier and stronger. At some point, I imagine that Sherri would like to become pregnant and I do wonder how the stress of a pregnancy will impact her system, but I know that she will use me as a resource as needed, based on her happy results with treatment over the last ten years.

### Ready to race!

Last summer, I ran into Sherri at the start of a local triathlon where my daughter happened to be competing. Looking trim and fit as usual, Sherri was adjusting her water bottle and setting out her biking shoes in the space allowed for the transition between the long swim and the bike ride. I introduced her to my daughter as “a friend.” Sherri winked at me, looked at my daughter, and said, “I would never be able to do *this* kind of event without your mother’s help. Good luck in the race!”



#### ABOUT THE AUTHOR

Amy Rothenberg, ND, with her husband and partner, Paul Herscu, ND, teaches for the New England School of Homeopathy. For information on joining the Two-Year Certificate Course to begin January 2008 in Portland, Oregon, or to subscribe to the online, *Herscu Letter*, visit [www.nesh.com](http://www.nesh.com).



Tyler have warned against using *Thuja* without adequate knowledge or repeating it too frequently. See the cases on pages 16 and 20 for examples of the kind of in-depth prescribing by homeopathic professionals that is typically suggested for the use of this remedy. (Note, however, that the *topical* use of *Thuja* in ointment or oil form is a time-honored home remedy for warts.)

### More information

Much more information on *Thuja* and its indications can be found in the homeopathic literature. Below is a sampling.

#### From Morrison’s Desktop Guide:

The typical *Thuja* patient “suffers with marked lack of self-esteem and feelings of worthlessness. This inner doubt causes the patient first to spend great energy to portray a pleasing and expected image to the world. The focus on image and hiding the unpleasant leads later to a

secretiveness or even deceptiveness and lying. Depression and low self-esteem are often the primary reasons that the patient seeks treatment.”

#### From Tyler’s Drug Pictures:

“Peculiar sweats, oily, sweetish, fetid: and a unique condition of ‘profuse sweat only on uncovered parts.’ ... makes mistakes in reading and writing. Speaks slowly, as if at a loss for the words ... fixed ideas.”

#### From Boger’s Synoptic Key:

Symptoms are generally worse in cold, damp conditions; at 3 a.m.; from the heat of the bed; at the new moon; during the menstrual period; from tea; from onions. Symptoms are better in warm air; from touch; from crossing the legs; from wrapping the head.

—compiled by *Homeopathy Today* staff

THUJA OCCIDENTALIS PHOTO BY JULIAN WINSTON


# Gotta Go, Gotta Go! Gotta Go!



Women choose homeopathy  
over painful, invasive treatments  
for interstitial cystitis

by SUSANNE SALTZMAN, MD

IMAGINE HAVING CONSTANT OR RECURRENT BLADDER pain, with an urgent need to dash to the bathroom 20 or even 30 times a day! What if these bladder symptoms dragged on for years and antibiotics or conventional medicines were not helpful?



## Breaking Free from Chronic Bladder Problems

don't help; although the problem may *feel* like an ongoing bladder infection, it's not caused by detectable bacteria. A cystoscopic exam via a tube inserted into the urethra for viewing sometimes shows a scarred, stiff, or ulcerated bladder wall. Many women with interstitial cystitis have other conditions such as fibromyalgia and irritable bowel syndrome, which is why some experts believe that this syndrome may be part of a more general inflammatory or autoimmune condition.

That's what it can be like for someone suffering with interstitial cystitis—also known as Painful Bladder Syndrome. As you can imagine, this syndrome definitely affects a person's quality of life!

### Long-suffering women

The vast majority (90%) of Painful Bladder Syndrome sufferers are women—more than one million in the U.S. Symptoms vary from one person to the next but typically include pain or pressure in the bladder and pelvis along with a frequent, urgent need to urinate. Menstruation and vaginal intercourse often make the symptoms worse.

This syndrome is still a bit of a mystery; researchers have some clues, but the cause is unknown. Urine cultures are typically free of bacteria, which is why antibiotics

### What can be done?

Conventional medical practitioners use a variety of techniques to treat interstitial cystitis, but results are mixed and some procedures are invasive or painful. Oral medicines such as pain relievers (e.g., Advil®, Motrin®) and antidepressants may help relax the bladder and block pain. Elmiron®, the only oral drug specifically approved for interstitial cystitis, is another option; 30–40% of people may get some relief after 4–6 months, but hair loss and gastrointestinal upset can be unpleasant side effects.

Stimulating nerves in the area via a TENS device (transcutaneous electrical

nerve stimulation) may provide some relief after daily use for months. Distending (stretching) the bladder by inserting water or gas is another option that sometimes gives temporary improvement. Yet another procedure involves instilling the bladder with medication, usually DMSO, for 15 minutes, every week for 2–8 weeks, to decrease bladder inflammation. Surgery is a last resort in severe cases that are resistant to the above treatments, but it's not always effective and can worsen symptoms.

### The good news!

As a homeopathic practitioner, I have treated numerous people with interstitial cystitis through the years. Many had tried conventional treatments with poor results and/or unwanted side effects. Others sought my help to avoid invasive procedures, such as bladder distension and distillation, that were suggested by their other doctors.

Thanks to homeopathy and its safe, effective, non-toxic remedies, most of these women made complete recoveries. They now “have their lives back”—free of the pain, inconvenience, and emotional distress associated with interstitial cystitis. Below, I'll introduce you to three of these women.

### A separate remedy for each

Because homeopathy is patient-specific *rather than* disease-specific, every interstitial cystitis patient that I've seen has required a completely different homeopathic remedy. The symptoms that led me to choose a helpful remedy were often *not* the urinary pain, urgency, and frequency that are common in most people with interstitial cystitis (unless the urinary symptoms were unusually intense or unique, as in Stacy's case below). Instead, it was usually the constitutional remedy that fit the patient's overall mental, emotional, and physical nature that alleviated the interstitial cystitis. In the following stories, you'll get an idea of how uniquely individual homeopathic treatment truly is.

## Cindy: “a total romantic”

Cindy, age 31, came to me in November 1997 for interstitial cystitis symptoms she'd had for about a year. She suffered with chronic bladder irritation, pain after urination, and a frequent urge to urinate that was worse from alcohol, caffeinated drinks, and sexual intercourse. Her urologist and gynecologist had suggested conventional treatments, but she'd refused them because of her concern about side effects.

Cindy also complained of worsening constipation, low energy, and stress in her relationship with her boyfriend. She said she felt “excluded” and “left out” to the point where her anger towards him was “turning into rage” (although she had no thoughts of physical violence toward him or herself).

Cindy described herself as having a “reckless streak.” She had experimented with illegal drugs (cocaine and hallucinogens) at age 13 and described herself as promiscuous. “I don't like to be alone,” she said. “I always have to be in a relationship.” She became bored easily in relationships, however, because they limited her “freedom and spontaneity.” She described herself as a “total romantic” who “loved being in love,” almost like a sexual obsession. She also complained of “tingling” sensations in her upper lip, claustrophobic fears, and difficulty sleeping on occasion.

## P'd off?

I pointed out to Cindy that it sounded as if her interstitial cystitis symptoms had grown worse over the past year, as her relationship with her boyfriend had deteriorated. I asked if the fact that she was “pissed off” at him had anything to do with her urinary symptoms. After a good laugh, Cindy admitted that there might be a connection. As a homeopath, I have observed that many women with urinary and/or genital symptoms have unresolved anger or grief that precipitates or exacerbates their urinary symptoms. Often, the correct homeopathic remedy will alleviate their mental-emotional suffering and restore their physical health.

In analyzing Cindy's case, I considered her need for excitement and drama, sexual excesses and obsession, angry impulses, and tingling sensations of her lips, which led me to give her the homeopathic rem-

edy *Platina*. I wasn't completely confident in this prescription, however, because Cindy lacked the haughtiness, narcissism, and subtle contemptuousness that I often find in patients who need *Platina*; also, *Platina* is not represented in the repertory rubrics that describe Cindy's bladder symptoms (e.g., *Bladder, pain after urination; frequent urging; and frequent urination*). Since such urinary symptoms are very common for interstitial cystitis and also common to many different remedies, I did not consider them decisive factors in choosing a remedy; even so, I would have preferred to see *Platina* represented in at least some of these rubrics.

## The road to the right remedy

When Cindy returned a month later, she told me she'd broken up with her boyfriend because she realized that the relationship was no longer serving her. She also said that she felt somewhat more energetic. Her urinary symptoms remained unchanged, however. When the mental-emotional state of a patient improves after taking a homeopathic remedy, it is often only a matter of time before the physical symptoms follow. Because of the improvements in Cindy's energy and confidence (as evidenced by her ability to let go of an unhealthy relationship in such a short time), I decided to “wait and see” rather than give her a remedy at this visit.

One month later, however, Cindy reported no change in her cystitis symptoms. She continued to have pain in the bladder especially after urination, as well

## Although the problem may feel like an ongoing bladder infection, it's not caused by detectable bacteria.

as much urging to urinate that “drove her crazy.” At this point, I decided that *Platina* was not going to help Cindy's urinary symptoms and I needed to select a different remedy. I chose *Medorrhinum* because, like *Platina*, it fit her passionate nature and sexual obsessions. In fact, *Medorrhinum* seemed to match her intensely needy state even better than *Platina*. People who need *Medorrhinum* tend to be sensitive and emotionally demonstrative, with addictive

behaviors and extremes of mood. Passionate and intense, they may have volatile relationships where they vacillate between enmeshment and isolation. Genitourinary symptoms are common in those who need *Medorrhinum*, and this remedy fit Cindy's urinary symptoms, too. I gave her one dose of *Medorrhinum* 200c.\*

## Symptom-free for two years

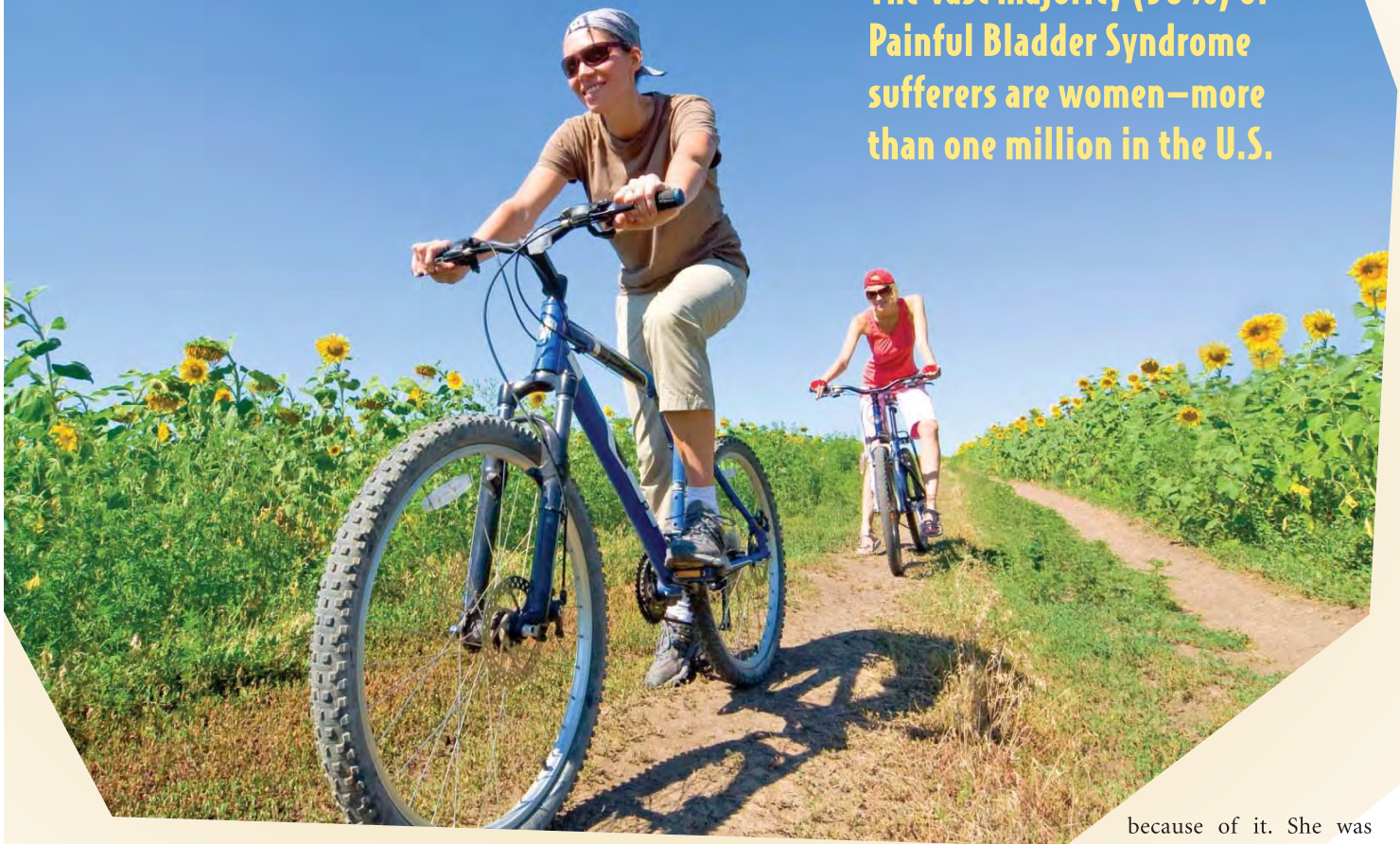
During the following week, Cindy's cystitis worsened, and she also felt a lot of anger again at her ex-boyfriend. (A short-term worsening of symptoms after taking a homeopathic remedy—which is known as an “aggravation”—often signals that healing is taking place.) Her symptoms steadily improved after that, and one month after taking that dose of *Medorrhinum*, Cindy's urinary problems were gone! She remained symptom-free for the next two years!

In 1999, when Cindy found herself in a stressful job situation, her urinary symptoms began to return a bit so she again sought my help. In analyzing her symptoms, I decided that *Medorrhinum* still seemed to be a good match, so I gave another dose of *Medorrhinum* 200c. Once again, Cindy was symptom-free for the next two years.

When Cindy returned to my office in 2001, she was in a healthy long-term relationship with a man she intended to marry. Her sex drive, however, was stronger than her mate's (not unusual for people needing *Medorrhinum*), and she said this intimidated him. Cindy was also



The vast majority (90%) of Painful Bladder Syndrome sufferers are women—more than one million in the U.S.



remedy, I mailed her another dose of *Medorrhinum* 1M and told her to stay completely away from experimental drugs. Cindy has remained symptom-free for 5 years!

### **Maria: childhood troubles**

Thirty-four-year-old Maria came to see me in July 2006 for interstitial cystitis that had been diagnosed by her doctors 8 months earlier. She complained of chronic bladder burning/irritation, a feeling of pressure in the bladder area, and a “need to pee every second of the day.” She felt as if her bladder never completely emptied when she urinated. She also complained of pressure in her lower back.

Maria reported a history of recurrent bladder infections as a young child, the result of urinary reflux. (It’s estimated that this condition, in which some urine flows backward toward the kidneys, is present in about 15% of children; most of them outgrow it.) Maria had been on prophylactic antibiotics for a few years during childhood until her urinary symptoms resolved.

Except for one episode of “honeymoon cystitis” five years before coming to see me, Maria had had no urinary problems—until she began potty training her daughter a year ago. She said she developed an irrational fear that her daughter would develop urinary reflux and infections, too—even though her daughter was asymptomatic. Soon, Maria began to notice increasing pain and pressure in her bladder area; urine cultures and other tests were all negative, which led to the diagnosis of interstitial cystitis.

Maria found the cystitis to be physically and emotionally draining. Her bladder symptoms made sex painful, and this lowered her libido. She enjoyed her work as a graphic designer and had a good marriage. She seemed very competent and confident in general, but when I asked about her fears, she revealed some very interesting things.

### **Fear of rape & robbers**

Maria had a strong fear of being raped; the fear started at age 13, and at the time, she would often sleep in her parent’s bedroom

because of it. She was hypervigilant whenever she walked down a street alone. She was intensely afraid of robbers and of being killed. She had recurrent dreams of being violated (in fact, she said that upon first hearing her diagnosis of interstitial cystitis, she “felt violated”). Maria described an intense physical reaction or a feeling of terror whenever she witnessed any kind of violence, whether on TV or in person. She remembered being terrified of the dark as a child. Even now, when her husband was away on business trips, Maria slept with a nightlight on.

Although Maria had no memory of sexual abuse or of being violated in any way, her father was a child Holocaust survivor who was plagued with depression as a result of his experience. Maria learned about the Holocaust as a teenager, and it deeply disturbed her.

### **A remedy for fear**

Maria’s story made me think of *Stramonium*, a homeopathic remedy that I often use for children or adults who have a strong fear of violence or an inclination to violence in any form. Children who bene-

fit from *Stramonium* will often be intensely afraid of the dark, of death (e.g., by choking, drowning, etc.), or of being killed or mutilated. These fears will typically develop after seeing something frightening on TV or hearing of a child's death. Men needing *Stramonium* will often have a history of violence or outbursts of rage, while women will express fears of being alone at night, of crime, of violence, and of being raped. What is remarkable about *Stramonium*, in my experience, is its ability to completely dissolve these fears (in those for whom it's indicated), often restoring physical health as well.

Checking the homeopathic repertory, I noted that *Stramonium* also fit Maria's cystitis symptoms (it appeared in the *Bladder* rubrics: *urging to urinate, morbid desire, frequent; urination, frequent; urination, incomplete; and retention*). But most importantly, *Stramonium's* indications matched Maria's central underlying disturbance—her intense reaction to violence and her fear of the dark, of crime,

and of being raped. I gave Maria one dose of *Stramonium* 30c.

### Steady improvement

At a six-week follow-up visit, Maria told me that her urinary symptoms had initially been much worse for a few days after taking *Stramonium*. She also experienced "complete exhaustion" and very violent dreams for a week. But after that, she improved steadily to the point where she was experiencing bladder discomfort only in the evenings instead of round-the-clock. She also felt much better emotionally, more relaxed, and without "that panic feeling" she'd had all the time. She'd had no nightmares in the past four weeks. She still could not tolerate watching violence on TV. At this point, I decided to wait rather than give her a remedy, since she was improving steadily.

Maria came back to see me eight months later. She reported feeling much calmer now, and she'd not had one violent dream in that whole time. When I asked how she felt about robbers she replied,

"Oh, I haven't even thought about it." She'd had no bladder discomfort or urinary frequency either—until just a few days earlier when some of her cystitis symptoms started to return slightly. She complained of being under stress at work for the last few weeks and of feeling increasingly fatigued. It appeared that the *Stramonium* had acted well for the past 8 months, but its effects were wearing off, perhaps under the stress of her recent job difficulties, so I decided to give her a higher dose—*Stramonium* 200c.

Maria was again symptom-free for almost a year before she returned with a worsening of her interstitial cystitis symptoms. One month earlier, she'd had a urinary tract infection and taken antibiotics; this was during the first trimester of her second pregnancy. Although tests showed that the infection was gone, she still complained of intense burning and pressure in the bladder area with constant urging to urinate. And once again, she was experiencing violent dreams of being murdered and of people being mutilated. At this

## Self-Help for Painful Bladder Syndrome

Many women have a sense that mental and emotional stresses worsen their interstitial cystitis symptoms, which prompts them to seek a more holistic treatment approach. Homeopathy, as practiced by a trained homeopathic professional, is the ultimate holistic approach, in my opinion, and should be one of the first choices for anyone who has been diagnosed with interstitial cystitis! But there are additional things you can do as well:

### ► De-Stress!

Since stress worsens symptoms, it makes sense to emphasize stress reduction techniques. Get into a regular habit of low-impact exercise and gentle stretching (e.g., yoga, tai chi). In addition, learn to meditate or listen to self-hypnosis/guided imagery recordings. Consider consulting a biofeedback expert who can help you monitor how your stress reduction techniques are working. Experiment with massage and bodywork, with special emphasis on the lower half of the body.

### ► Watch what you eat

Not surprisingly, many people find that reducing their intake of certain foods helps alleviate symptoms. The most irritating substances seem to be alcohol, coffee, tea, tomato and tomato products, citrus fruits and juices, spicy foods (chili, hot peppers, vinegar, horseradish), chocolate, and artificial

sweeteners.

Smoking also worsens symptoms in many people. But each individual is different, so you may need to experiment to see which foods affect you adversely. Other foods that have been implicated include nuts, aged cheeses, and smoked or cured meats.

### ► Train your bladder

Bladder training techniques may help reduce urinary frequency by urinating at set intervals (whether you have to go or not) and then gradually lengthening the time in between urination. Ask your doctor about this option. Sometimes problems with the pelvic floor muscles go hand in hand with interstitial cystitis, and in such cases, physical therapy to strengthen the pelvic floor muscles may be helpful.



point, I gave her a second dose of *Stramonium* 200c, and she has remained free of cystitis symptoms for the past year. She is doing well since the birth of her baby, and she continues to refer many of her friends and family members to me for homeopathic treatment.

### Stacy: genitourinary pain

Stacy, age 43, came to see me in July 2000 for help with interstitial cystitis along with vulvodynia—which is chronic pain, burning, soreness, itching, or stinging in the vulvar/vaginal area. These symptoms had begun after the birth of her only child three years earlier. Stacy had undergone infertility treatments involving hormones and medications for two years prior to getting pregnant. She complained of constant pressure and burning in the bladder area with pain at the end of urination, along with intermittent burning and itching in the genital area.

Stacy told me that she was raised in a strict Catholic home where she felt “smothered” and “suppressed.” She believed that this early home environment was partially responsible for her promiscuous behavior in college. She felt very guilty about that behavior and was torn between her sexual desires and her religious beliefs/upbringing.

Stacy had fears of death and getting cancer; her mom had died of breast cancer one year earlier. She also had a fear of rejection and was very sensitive to the smallest criticisms her husband might make. She complained of a generalized anxiety, which was much worse before her menstrual period (as if “I’m crawling out of my skin”). She was easily overwhelmed by housework and taking care of her family.

I treated Stacy for a number of years, giving her various homeopathic remedies over that time. Each remedy helped her to a certain extent, but none completely eradicated her vulvodynia/interstitial cystitis symptoms or her anxiety. While this was not the ideal result, Stacy continued to pursue homeopathic treatment because she was grateful for even small improvements. In challenging cases like this, I have found that if people are willing to stick with homeopathy, they will usually find the cure they seek.



### Tenth visit holds the key

It wasn’t until three years into treatment at Stacy’s tenth visit, that I finally found her *simillimum*—the constitutional remedy that would give her the greatest help overall. In September 2003, Stacy came for a follow-up visit. She reported that her urinary urgency and frequency continued, though with less intensity than when I’d first seen her. She still complained of vaginal burning and itching that was worse before and during her period, and after intercourse. Her anxiety through the years was much improved, though she still had occasional flare-ups (*Ignatia* had helped with this).

But on this visit, she reported some new information: in addition to the usual burning, the pain in her bladder after uri-

nation felt “like a spasm,” a term Stacy had never used before. She also described feeling a need for protection: “I just want to be taken care of... and comforted.” She felt “so alone” when she experienced any cystitis or genital pain, almost like “despair” or “abandonment.” She said she kept her home very neat and tidy and felt extremely anxious if things were out of place. She felt a tremendous pressure to get things done and worried a lot about her family. She also admitted for the first time that she felt intensely jealous if her husband showed any attention towards other women even though she trusted him implicitly.

I repertorized the following symptoms: *Bladder, convulsions, spasms after urination; Female, pain, burning, vagina; Mind, fastidious; Mind, ailments from jealousy;*

Mind, full of cares and worries about domestic affairs; and Mind, general fear of being alone.

Total	Puls.	Natr-u.	Phos.	Sep.	Aggr.	Hrs.	Nat-m.	K-all-c.	Apis	Arg-n.	Carc.	Graph.	Lyc.	Nit-ac.	Sulph.	Canth-s.
URINATION, AFTER: (5)																
MIND, FASTIDIOUS (34)																
CARES, worries, full of (3)																
PAIN, burning, vagina (44)																
FEAR, alone, of being (80)																
AILMENTS from: jealousy (9)																

The remedy that came up strongly was *Pulsatilla*. I use this remedy very frequently in my practice, yet I did not initially recognize that it fit Stacy's symptoms. The typical woman or man who benefits from *Pulsatilla* constitutionally is soft, gentle, emotional, and dependent. Family is central in their lives, and they need strong support from others. Stacy initially appeared to be more independent, rebellious, and self-assured than

the typical *Pulsatilla* patient. Although she did have a number of hormonal problems that fit *Pulsatilla* (e.g., infertility issues and onset of interstitial cystitis after pregnancy), it wasn't until years into treatment when she began to open up about her deeper insecurities concerning her husband, her need for protection, and her fears of abandonment that the correct remedy revealed itself to me. I asked Stacy to take a daily dose of *Pulsatilla* 12c for a few weeks. (I suggested this daily lower dose rather than a single higher dose because she was having a lot of dental work that month, which can sometimes weaken the action of a single dose of a constitutional homeopathic remedy.)

Stacy came back three months later. "I can't believe how much better I am. I feel great!" she exclaimed. The *Pulsatilla* had

**Conventional medicine uses a variety of techniques to treat interstitial cystitis, but results are mixed and some procedures are invasive or painful.**

helped her on every level. The vulvodynia and interstitial cystitis symptoms that she'd suffered with for six years had completely disappeared! She reported that her relationship with her husband was much improved, and they were having sex more often now that she was pain-free. Emotionally, she was also much better stating, "I haven't felt this calm and peaceful in 20 years!"

## Bladder Infection? Nip It in the Bud!

Acute urinary tract infections yield to fast-acting homeopathy

by JUDYTH REICHENBERG-ULLMAN, ND, DHANP, MSW & ROBERT ULLMAN, ND, DHANP



Bladder infections are no fun, as any of you who have suffered from the burning pain and nonstop, often urgent, trips to the bathroom will agree. And for those of you who have had more severe symptoms such as incapacitating bladder and kidney pain or blood in your urine, it may have been a frightening experience. Bladder infections can come on quickly and, if untreated, can sometimes move up to the kidneys in a matter of hours or days, so they are not to be ignored.

### One of our favorites

Acute bladder infections in women are one of our favorite conditions to treat. Why? Because homeopathy almost always works beautifully, as long as the patient doesn't wait too long. Our office staff knows to notify us immediately if a patient calls with a urinary tract infection, and we will interrupt what we are doing to speak with the patient immediately.

The other reason it is so gratifying to treat cystitis is because the pain, often severe, can be relieved so quickly and gently. In fact, many women are so convinced by their success with homeopathy for an acute bladder infection that they can't wait to be treated constitutionally for their chronic problems.

Acute bladder infections are a condition for which one of several common homeopathic medicines is very likely to work. (When bladder infections are recurrent, it is another story, and the patient may need a different remedy—often a repetition of their constitutional medicine.)

### The Top Three Medicines

**1 Sarsaparilla** (wild licorice). It is ironic that this medicine, so commonly indicated for women with bladder infections, is one that some homeopaths may not learn about in their training. We find it even more commonly indicated than *Staphysagria* and *Cantharis*, both of which are much better known. The key symptom experienced by those needing *Sarsaparilla* is

On her own, she had obtained some *Pulsatilla* 30c from the health food store that she took on occasion if she felt any slight hint of urinary discomfort. She noted, however, that in just the past few days she'd felt some small signs of her old anxiety returning.

I decided the *Pulsatilla* had helped her greatly but perhaps she could now use a stronger dose since her symptoms were returning a bit, so I gave her a dose of *Pulsatilla* 200c. That was more than four years ago, and Stacy has been free of anxiety, interstitial cystitis, and vulvodynia symptoms ever since.

### Deep healing

In my 16 years of practicing medicine, I have never known any treatment to be as deeply healing and as remarkably effective

as the correct homeopathic remedy. The change the *simillimum* produces in a patient's mental/emotional and physical states is profound—as you can see in the cases of Cindy, Maria, and Stacy. Along with a relief of their troubling symptoms, they experienced an overall improvement in their health and their outlooks on life.

Though finding this *simillimum* is not always easy, it is well worth the effort. To be able to alleviate chronic suffering *without doing harm* by using such a simple, gentle, yet effective method as homeopathy is an immensely gratifying experience for the practitioner—and a miracle for the patient. It's the way medicine was intended to be!

\* For a fuller discussion of the indications for *Medorrhinum* and other remedies, I suggest Ananda Zaren's *Core Elements of the Materia*

*Medica of the Mind* volumes I and II. Ananda was a brilliant homeopath and one of my finest teachers. She had a keen intuitive sense of people and a profound knowledge of materia medica. Her recent death is a real loss to the homeopathic community.



#### ABOUT THE AUTHOR

Susanne Saltzman, MD, a graduate of Albert Einstein College of Medicine, has a family practice in Hartsdale (Westchester county) and Spring Valley (Rockland county), NY. For 16 years, she has practiced classical homeopathic medicine. She also teaches a course in homeopathy in Tarrytown, NY. She lives with her husband, Daniel, and has two children, Jason (20), Sara (16), a dog (*Pulsatilla*), a cat (*Sulphur*), and a very loud cockatiel (*Nux vomica*). She can be reached at 914-472-0666.

a burning pain in the urethra at the end of urination. The pain may be severe, especially if the infection has gone on for hours or days. Although the sooner the symptoms are reported, the better the response, we have used *Sarsaparilla* even with acute cases of some days' duration. We do not tend to see any particular mental or emotional symptom profile associated with those needing this medicine for cystitis.

**2** *Staphysagria* (stavesacre). This is the second most commonly prescribed medicine in our practice for women with acute bladder infections. The onset tends to occur after sexual intercourse ("honeymoon cystitis"), or else following an episode of anger (often suppressed), humiliation, insult, or indignation. The pain can be a burning in the urethra, much like that of *Sarsaparilla*, but *Staphysagria* covers many different kinds of pain and urinary symptoms.

**3** *Cantharis* (Spanish fly) unquestionably corresponds to the most intense cystitis symptoms of these three medicines. Patients needing *Cantharis* are likely to experience a cystitis characterized by a rapid, often excruciating, onset. If these women do not receive this medicine very quickly after the initial onset of the symptoms, it is very likely that they will end up taking antibiotics. The pain can be described as intense, stinging, cutting, burning, and intolerable and is accompanied by tremendous urgency and frequency of urination. There is often blood in the urine soon after the onset of symptoms. Urination can be absolutely unbearable. The patient typically exhibits great restlessness and has a hard time sitting still because of the intensity of the suffering.

### Remedies in action

At a yoga retreat we once attended, we were about to go to bed for the evening when we were called to treat a woman with a severe bladder infection. You might call this a kind of collective treatment, since there were four of us homeopathic

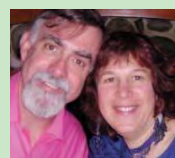
yogis present! The woman was frantic. She could barely sit still and paced to and fro as we talked. Her extreme bladder pain and blood in the urine had come on very quickly. We all agreed on homeopathic *Cantharis*. She was somewhat better within a few hours of taking it and considerably better the next morning. She still had slight burning pain in the urethra at the close of urination, however, for which we gave her homeopathic *Sarsaparilla*. She was surprised at how quickly and completely she improved, without needing antibiotics.

When treating women with acute bladder infections, we expect symptoms to improve within 15 minutes to several hours. When using a high potency remedy, such as a 1M, we rarely need to repeat the dose during the illness. (Those with chronic urinary conditions will need a constitutional remedy, and different guidelines and expectations apply.)

### Natural self-help

Remember to drink as much water as possible at the first sign of cystitis, and drink unsweetened cranberry juice or concentrate or take cranberry capsules. We often recommend an herbal combination including, for example, *Bucchu* and *Uva ursi*, along with the indicated homeopathic medicine.

Portions of this article originally appeared in "A Quick Fix for Bladder Infections" in *The Townsend Letter*, October 1, 2007 <[www.townsendletter.com](http://www.townsendletter.com)> and in "Bladder Infections, Rapid Relief," 1996, at *HealthWorld Online* <[www.healthynet.com](http://www.healthynet.com)>.



#### ABOUT THE AUTHORS

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# Sweet Relief for Hormonal Ups & Downs

## Homeopathy for women's health at every stage

by DR. TREVOR HOLLY CATES

**B**eing a woman is full of wonderful advantages such as the ability to bring a new life into the world and nurture a child through breastfeeding. Along with the joys of growing up as a woman come the sometimes difficult symptoms and conditions associated with hormonal development—from PMS and menstrual cramps to morning sickness and then, later, hot flashes. Fortunately, homeopathy provides relief for many of women's common health concerns. Constitutional homeopathic remedies prescribed by a homeopathic professional are an excellent approach, but acutely prescribed homeopathic remedies often provide relief and can be tried first.

### PMS & painful periods

When a girl turns the corner into womanhood, she may experience menstrual cramps. While good nutrition can help prevent symptoms, many women struggle with discomfort during their periods. Homeopathic *Magnesia phosphorica* may be indicated if bending forward and warm applications ameliorate cramping. *Colocynthis* is another remedy to consider when the woman is irritable and applying strong pressure to her abdomen relieves the cramping. If the pain is severe, lasts more than a few days, or is accompanied by prolonged or heavy bleeding, consult with your doctor.

Many women feel tense, irritable, or down during the days leading up to their menstrual period. Along with these feelings often come breast tenderness, bloating, and fluid retention. When a woman bursts into tears easily and has irregular periods and painful breasts, *Pulsatilla* may be helpful. *Nux vomica* may be well indicated if she has irritability, chilliness, constipation, and sweet cravings. For women who experience irritability and jealousy, are worse on first waking in the morning, and cannot tolerate tight clothing, *Lachesis* may help.

### Pregnancy & morning sickness

Though a break from the inconveniences of menstruation, pregnancy may bring morning sickness and other troublesome symptoms. Many prescription and herbal medications are not safe for pregnant women, but homeopathy is safe and effective for various concerns during pregnancy, labor, and delivery. Morning sickness can sometimes interfere with women obtaining the nutrition they need during pregnancy. *Nux vomica* may provide relief for women who have nausea that is worse in the morning, feel chilly and irritable, and have a desire for coffee. For persistent nausea with vomiting of both liquids and solids, and a lack of thirst, consider *Ipecacuanha*. *Sepia* is a popular remedy for morning sickness when nausea is accompanied by irritability and weepiness, and the woman may have a desire for pickles or other sour and vinegar-containing foods.

### Mid-life challenges

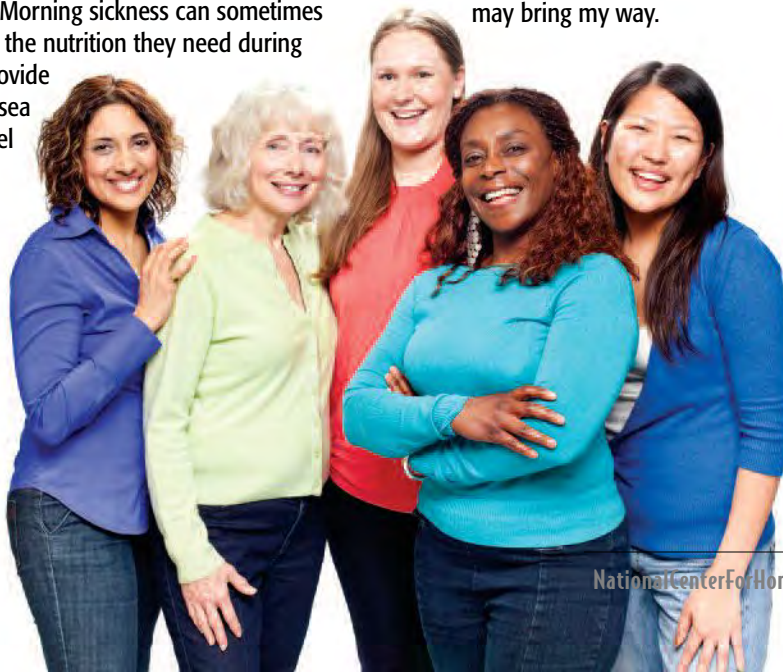
Once a woman's hormones begin to shift towards menopause, she may have hot flashes. Women experience menopause symptoms to a varying degree, so hot flashes and night sweats can range from mild to intense. *Lachesis* may provide relief when a woman has hot flashes, sweating, dizziness, and irritability, and is aggravated by the pressure of her clothes. If a woman has hot flashes, cries easily, feels chilly, and prefers open air, she may benefit from *Pulsatilla*. *Sepia* may be indicated if the woman has hot flashes and sweats that are worse at night, and she is chilly, irritable, and averse to sex.

### Finding the best remedy

As you can see from the repetition of some of the remedies suggested above, a single homeopathic remedy can be used to help various health concerns. The key to finding the best remedy is to not only look at the symptoms but to also factor in the person's emotional state as well as the situations that make the symptoms better or worse. After selecting a remedy, you can take 6, 12, or 30 C or X potencies for these acute conditions. Take the remedies at least 15 minutes away from food and drinks, and place the pellets in the cap or on a spoon and then directly into your mouth. The selected remedy may be repeated as often as every 30 minutes, if needed, and taken up to about 6 times/day. Once symptom-free, you should stop taking the remedy.

Even with the suggestions above, it is important to remember to consult with your healthcare practitioner if symptoms worsen or continue without improvement. Women, especially those with more intense symptoms, may get the most benefit from a constitutional remedy prescribed by a professional homeopath. Constitutional prescribing takes into consideration many factors and helps balance a woman's physical and emotional state.

I wouldn't change being a woman for anything in the world. I love being a mom and the compassionate and nurturing qualities of being a woman, but I am happy to have the benefits of homeopathy at my fingertips to help get through challenges that fluctuations in hormones may bring my way.



### ABOUT THE AUTHOR

Trevor Holly Cates, ND, is a licensed naturopathic physician who received her medical degree from the National College of Natural Medicine in Portland, OR, in 2000. Dr. Cates was the first woman licensed as a naturopathic doctor in California. She practices in Santa Barbara, California and Park City, Utah at the Golden Door Spa at the Waldorf Astoria Park City. For more information please go to [drtrevorcates.com](http://drtrevorcates.com).





# Clear Up Bladder Troubles, Naturally

by BEGABATI BURKE LENNIHAN, RN, CCH

## Help for Urinary Incontinence

### Quick Fix

- **Causticum** for “stress incontinence” in older adults. (This means leaking a bit of urine when you sneeze or cough or laugh. Don’t laugh, it’s really common in older women.) It has worked almost across the board for my clients, however it’s especially likely to work when the person has the typical *Causticum* emotional symptoms: anxiety about the welfare of family members and/or a sense of injustice and of fighting for the underdog.

Another good option: a combination homeopathic remedy that includes a number of medicines likely to help with urinary incontinence (such as *Enur-Aid* by Hylands).

### Ongoing Care

- **Equisetum** (horsetail) tincture strengthens the muscles of the bladder and helps improve control. Take a dropperful twice a day in water or juice.

### Lifestyle Support

If natural medicines don’t work, **chiropractic** adjustments can help with bowel and bladder problems in older adults, especially if there has been an injury to the lower back (where the nerves come out that go to the bowel and bladder). Or there may be an injury to the pubic bones, typically from falling onto the crotch (for example from falling onto the crossbar of a bike). My chiropractic colleagues have cured many a case of incontinence by adjusting dislodged pubic bones.

## Say Good-bye to UTIs

### Quick Fix

- **Cantharis** is the most widely used natural medicine for urinary tract infections. It covers the typical symptoms of frequency and urgency, with a cutting or burning pain, and the urine may even feel hot as it comes out—typically drop by drop. It may have a little blood in it. The pain may be excruciating. Don’t panic yet—try *Cantharis*, but if your natural remedies don’t

work and you have a substantial amount of blood, go see your doctor.

- **Apis** is another likely candidate, especially if there is edema (swelling) anywhere in the body (fingers, ankles) or a sore, swollen abdomen painful to the touch.
- **Sarsaparilla** is a medicine you’ll need to special-order to have on hand, if you typically get UTIs that are really painful at the end of urination.
- **Sepia** will match best if you have typical *Sepia* symptoms (exhausted, overworked, feeling like you have not a minute to yourself, you need a vacation, you are draggy, and even your bladder and uterus feel like they are sliding down). Especially likely for UTIs during pregnancy or postpartum.
- **Staphysagria** works best for what used to be called “honeymoon cystitis” (UTIs after lots of sex, but of course many people don’t wait for their honeymoon anymore). The urine may feel like it’s rolling down drop by drop, and/or you may always feel like there’s more in there that won’t come out. Sensitive people, or anyone with a history of abuse or of suppressed anger, should use *Staphysagria* in a low potency (strength) such as 6c because a higher potency (30c) may bring out suppressed memories or anger.

If one of the above homeopathic medicines matches your symptoms well, your UTI should be on its way to clearing up after a couple of days. (Dose: 2 pellets, every 4 hours when symptoms are intense; 2 pellets twice a day when on the mend. Stop when totally better.)

If you like herbal teas, try **corn silk tea**. You can get it in a health food store, or you make your own by storing the silk from ears of corn in the freezer, then boiling a handful when you have signs of a UTI. It can work quickly like the medicines above.

### Ongoing Care

**Cranberry juice** helps treat and prevent urinary tract infections because it contains a plant nutrient that makes the infection slide right on out instead of sticking to the walls of your urinary tract. It’s really sour, though. Sugar-sweetened commercial cranberry juice is not a great idea because sugar weakens your immune system. Some people can handle unsweetened cranberry juice from the health food store. Mixing it with a sweet juice like organic apple juice can make it go down easier.

## If you like herbal teas, try corn silk tea.

There’s a better way, though: **concentrated cranberry capsules**, which may contain the equivalent of a gallon of cranberry juice. (Solaray Cran-Actin is a good brand.)

Or cranberry plus traditional herbs for the urinary tract—**parsley, bearberry, goldenseal, golden rod** (as in Vibrant Health-UT Vibrance.) Several thousand extra units of **Vitamin C** will also help.

Be on the lookout for a kidney infection (lower back pain with fever), which is a serious condition requiring medical care. If your symptoms do not clear up and you develop kidney pain, see a doctor immediately.

### Preventing Recurrence

If you get frequent urinary tract infections, consider the following:

- Take **cranberry caps** on a regular basis.
- Use a high potency **probiotic** (each capsule has billions, not just millions, of organisms) such as Jarro-Dophilus or MegaFood’s MegaFlora.
- Wipe front to back (women), wear cotton underwear.
- Be sure to drink plenty of water to keep your bladder flushed out.
- Eat foods that will create a more alkaline urine (see Felicia Kliment’s *The Acid-Alkaline Balance Diet*).

—adapted from her book, *Your Natural Medicine Cabinet, A Practical Guide to Drug-Free Remedies for Common Ailments*

### ABOUT THE AUTHOR



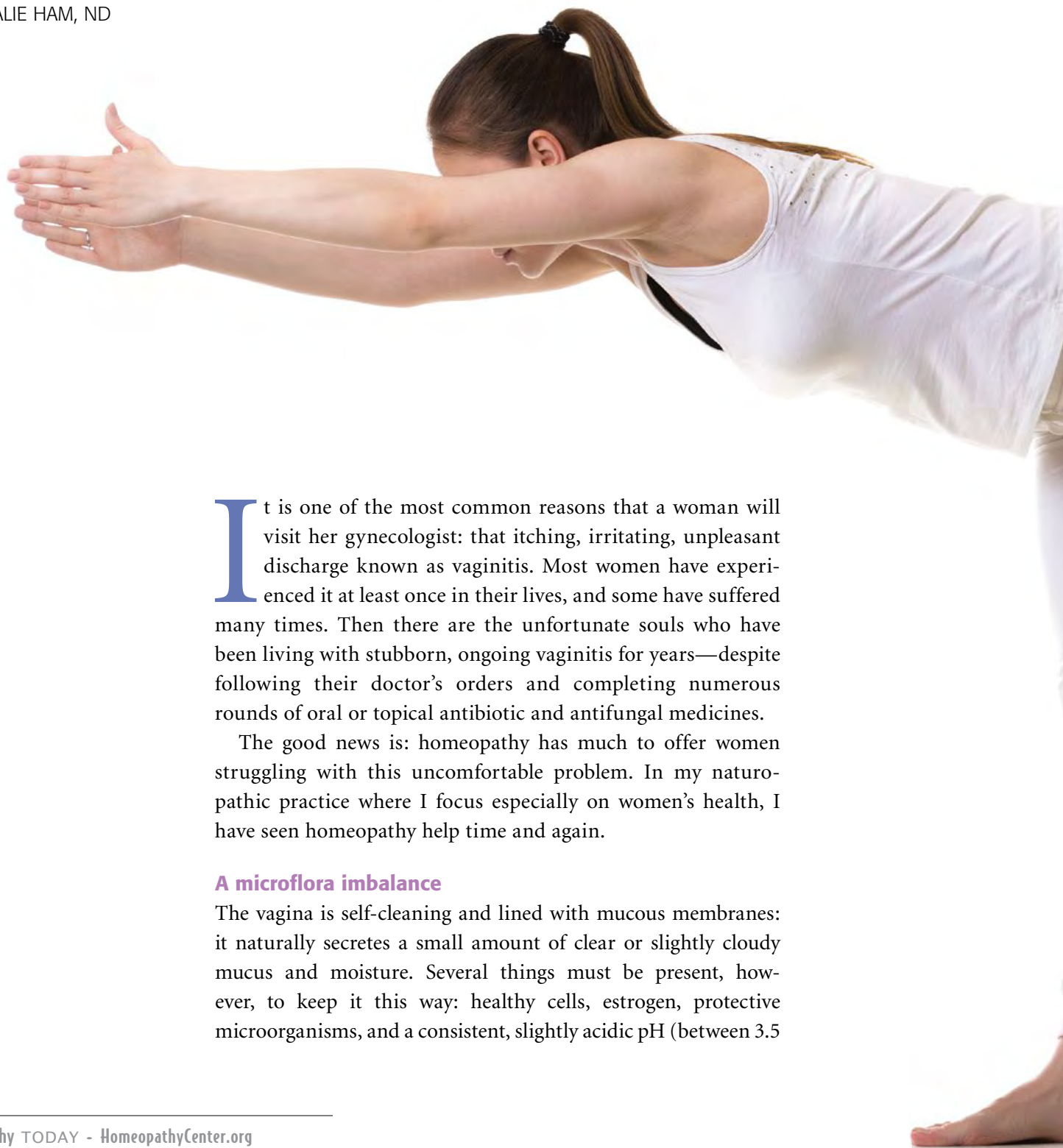
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remedies while operating her own natural foods store for 16 years. She wrote *Your Natural Medicine Cabinet* to bring homeopathy to a wider audience and makes the book available at cost to the homeopathic community. Contact her at [Burke@YourNaturalMedicineCabinet.com](mailto:Burke@YourNaturalMedicineCabinet.com).

# Healthy Women,

Healing the itch and pain, restoring the microflora,

by NATALIE HAM, ND



**I**t is one of the most common reasons that a woman will visit her gynecologist: that itching, irritating, unpleasant discharge known as vaginitis. Most women have experienced it at least once in their lives, and some have suffered many times. Then there are the unfortunate souls who have been living with stubborn, ongoing vaginitis for years—despite following their doctor’s orders and completing numerous rounds of oral or topical antibiotic and antifungal medicines.

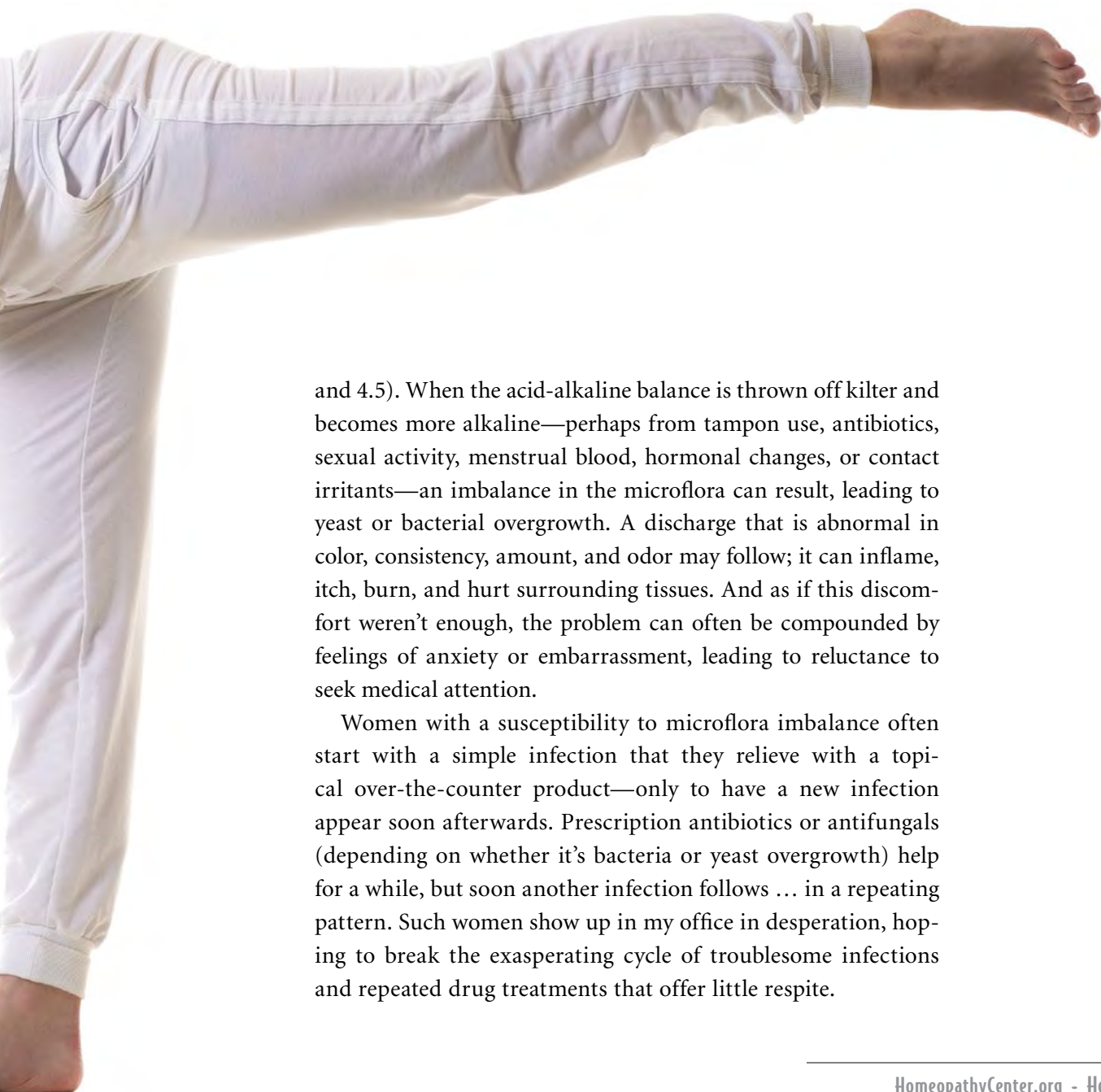
The good news is: homeopathy has much to offer women struggling with this uncomfortable problem. In my naturopathic practice where I focus especially on women’s health, I have seen homeopathy help time and again.

## **A microflora imbalance**

The vagina is self-cleaning and lined with mucous membranes: it naturally secretes a small amount of clear or slightly cloudy mucus and moisture. Several things must be present, however, to keep it this way: healthy cells, estrogen, protective microorganisms, and a consistent, slightly acidic pH (between 3.5

# Back in Balance!

with homeopathy



and 4.5). When the acid-alkaline balance is thrown off kilter and becomes more alkaline—perhaps from tampon use, antibiotics, sexual activity, menstrual blood, hormonal changes, or contact irritants—an imbalance in the microflora can result, leading to yeast or bacterial overgrowth. A discharge that is abnormal in color, consistency, amount, and odor may follow; it can inflame, itch, burn, and hurt surrounding tissues. And as if this discomfort weren't enough, the problem can often be compounded by feelings of anxiety or embarrassment, leading to reluctance to seek medical attention.

Women with a susceptibility to microflora imbalance often start with a simple infection that they relieve with a topical over-the-counter product—only to have a new infection appear soon afterwards. Prescription antibiotics or antifungals (depending on whether it's bacteria or yeast overgrowth) help for a while, but soon another infection follows ... in a repeating pattern. Such women show up in my office in desperation, hoping to break the exasperating cycle of troublesome infections and repeated drug treatments that offer little respite.

## Women with a susceptibility to microflora imbalance often start with a simple infection that they relieve with a topical over-the-counter product ...

Here are the stories of Darla, Kendra, and Emma—three women who successfully did put an end to their chronic infections—thanks to homeopathic treatment.

### DARLA: Trials to Transformation

Darla, age 27, had been struggling with a “never-ending cycle of infections” for more than 18 months. “Here’s what’s been happening,” she told me. “I go to the doctor for help with this awful, irritating discharge. She tests and says it’s caused by bacteria [bacterial vaginosis] and gives me antibiotics. I get some

relief for a week or two, but then the discharge comes back! So I return to the doctor, and this time she says ‘oh, it’s a yeast infection’ and gives me antifungal ointment. That helps for a while, until it stops working. So I go back to the doctor, who says, ‘you have another bacterial infection,’ and she gives me more antibiotics ... and it’s just been going on and on like that! Except lately, the antibiotics and ointments are hardly helping anymore, and now I pretty much have the problem non-stop. I really want to get off this merry-go-round! So I started taking probiotics and made an appointment with you.”

Darla described an irritating, white discharge and a fishy odor. As these are very common symptoms in bacterial vaginosis, they didn’t help me narrow down the field of homeopathic remedy choices much. So I moved on to consider the rest of her physical and emotional symptoms, hoping that a remedy aimed at “the big picture” would balance her system enough to heal her vaginal tissues as well. I prescribed *Natrum muriaticum* 30c in repeated doses because it fit her depression, her fault-finding with herself and her body image, her wanting to be alone when she was at her worst, her tendency to dwell on the past, and her sensitivity to the suffering of others, especially animals. (In addition, this remedy’s symptom profile includes vaginal discharge.) Over the next three months of treatment with increasing potencies of *Natrum mur*, Darla’s vaginal symptoms improved by about 50%, and she noticed some improvements in her emotional state as well.

### New symptoms, new realizations

At our next appointment, however, Darla reported changes that caught my attention. She had started to feel “a warm sensation” in the genitals. “Even my urine feels noticeably warm,” she said. Also, although she had always described her discharge as “white,” she now added that it was “thick and cream-like.” And sur-

prisingly, it no longer irritated, burned, or itched her skin, as before—or as is typical in most cases of vaginitis.

Darla also elaborated on her emotional mindset: “I feel invisible to the world ... I’ve been retreating to my room to be alone.” The only thing that improved her mood is if her husband would make her feel wanted, especially if they had sex, which made her feel desirable and connected to him.

“Since I started seeing you, I’ve been having big realizations,” she told me. “When I was a little girl, my mother took off ... she left me and my brothers with my father ... and ever since then, I’ve been afraid of that happening again.” To illustrate, she told me about her husband going on a weekend fishing trip with his friends. “Logically, I know he loves me and our two kids. And I *want* him to have an outlet for himself. But when he left, I just stood at the door and cried ... I couldn’t help feeling unwanted and unloved.” Her husband tried to soothe her by telling her not to worry, that he would return safely and soon. When I asked her what he could have done differently that might have made her feel better, Darla said through tears: “I just wanted him to hug me and tell me he loved me and that he wasn’t going to leave me! I know that sounds irrational, I know my husband loves me, but I kept thinking, ‘What if he doesn’t come back? What if he leaves like my mother did?’”

Darla also reported a pain in her heel. “I’ve had it for a while but never mentioned it because it was pretty minor. But this month it’s really flared up. As soon as I get out of bed in the morning, it hurts; it loosens up the longer I walk on it. If I apply a cold-pack, it calms down instantly.”

Darla’s new symptoms were especially interesting because they indicated that she needed a different remedy. In his *Organon of Medicine* (Paragraph 170), Hahnemann tells us that when a change in the disease condition occurs, a remedy homeopathic to the new set of symptoms

**Darla used homeopathy as a tool to break free of old stories and pain, and it catapulted her to the best version of herself.**



## "The discharge is completely gone—it was gone within a week of starting the new remedy!"

must be chosen. I suspected that *Natrum muriaticum* had been a "close" remedy or a *simile*—it had helped somewhat on both the physical and emotional levels (with Darla having become more emotionally self-aware)—while also bringing out new, stronger, characteristic symptoms that pointed to a more accurate remedy, hopefully, the *simillimum*.

### Remedy right on target

Darla's newly-reported symptoms of heel pain, vaginitis, and depression with fear of abandonment pointed to the remedy *Pulsatilla*. It is a match for thick, creamy, and bland (non-irritating) discharges, such as Darla's. It also fit her symptoms of a sensation of heat in the genitals and urine. Darla's emotional state also clearly matched that of someone who responds to *Pulsatilla*: feeling alone with a fear of abandonment, desire for consolation, desire for sex, and weeping when reporting symptoms. Her heel pain strongly confirmed the remedy choice, as rheumatic pain calling for *Pulsatilla* is very similar to that of the well-known remedy *Rhus tox*; both are worse on first motion but better with continued motion, as Darla's was. The difference is that people who react to *Pulsatilla* feel better with cold applications, and those responding to *Rhus tox* are better from heat. *Pulsatilla* also has a very strong affinity towards heel pain in general.

I prescribed *Pulsatilla* 30c, 3 pellets, once a day. When Darla returned the following month, she was overjoyed. "The discharge is completely gone—it was gone within a week of starting the new remedy!" she exclaimed. "My heel pain is much better, and my sleep and energy are the best they've been in a while." Her relationship with her husband was remarkably better. "Poor thing," she said, "He was doing his best to convince me he was never going to leave; I didn't realize what a toll that takes on a man. He has been lighter, and our relationship just feels easier. I can actually focus on our family instead of worrying it is going to disappear." She also had started to exercise and meditate.

After several more months of treatment with gradually increasing potencies of *Pulsatilla* (as needed, whenever symptoms relapsed slightly), Darla's depression was no longer an issue and her heel pain resolved completely. Six months into taking *Pulsatilla*, she stopped for a few weeks, and a very small amount of white discharge returned, which promptly resolved when I placed her back on *Pulsatilla*. This made me realize that Darla still needed *Pulsatilla* to balance her system for a little longer before I could remove her from the remedy completely. That time finally came several weeks ago. All of Darla's symptoms have been resolved for eight months, so I took her off *Pulsatilla*, and she remains healthy and free of troubling symptoms!

### Journey to her best self

Darla is an inspiration to me. "Since starting homeopathic treatment, I feel like I've been on a spiritual journey," she says. "I meditate now, have outlets to satisfy my emotional and spiritual needs, and take classes to help me on my path." Darla used homeopathy as a tool to break free of old stories and pain, and it catapulted her to the best version of herself. She continues to dig deep to be the person she always wanted to be and is not settling for less. To me, this is an embodiment of paragraph 9 of the *Organon* where Hahnemann says that when a person reaches a true state of health, "the spirit-like vital force (dynamis) animating the material human organism ... maintains the sensations and activities of all the parts of the living organism in a harmony that obliges wonderment. The reasoning spirit who inhabits the organism can thus freely use this healthy living instrument to reach the lofty goal of human existence."

**"Since starting homeopathic treatment, I feel like I've been on a spiritual journey."**



**Kendra was searching for the "one thing" in her life that was causing these symptoms. I explained to her that her symptoms were more likely a product of an unbalanced system ...**

### KENDRA: Searching High and Low

Kendra, age 45, struggled with chronic vaginitis for a year before coming to see me. "It all started with a yeast infection," she said. "My gynecologist prescribed fluconazole [an oral antifungal]. It helped for a while but not completely and not for long. Since then, I've been miserable with terrible burning, itching, and discharge. When I go back to the doctor, I sometimes test positive for a yeast infection, so she orders another antifungal drug or ointment. But more often, the test doesn't show any yeast or bacteria—so the doctor is at a loss for how to help me.

"One of the worst things is the toll this is taking on my relationship with my boyfriend of two years. I am always inflamed and in pain. It hurts to have sex, but it hurts all the time anyway, so for the sake of my boyfriend, I just do it. But that

## Our goal would be to strengthen her system with homeopathy so she became less reactive to her environment.

doesn't make either of us very happy.”

Kendra had also begun to experience peri-menopausal symptoms of irregular periods and hot flashes during the previous year. She had tried topical bio-identical estrogen and progesterone creams, which had helped her hot flashes but not her vaginitis. She also had tried vaginal estriol cream, which increased her itching. Since none of these creams had helped her main concern, she stopped using them.

### **No stone unturned**

Kendra's misery prompted her to search high and low for answers. She analyzed her diet as well as her clothing and the

products that came into contact with her skin, vowing to stop anything that might increase her symptoms. Sometimes she'd get improvement—such as when she stopped eating citrus and sugar—but slowly and surely, the symptoms returned even while avoiding these trigger foods.

Kendra was searching for the “one thing” in her life that was causing these symptoms. I explained to her that her symptoms were more likely a product of an unbalanced system, combined with lower levels of estrogen in her body, making her more susceptible to any changes in her environment. Our goal would be to strengthen her system with home-

opathy so she became less reactive to her environment, thereby alleviating her suffering.

### **“I'm on fire”**

Severe burning and itching from a milky vaginal discharge was the biggest problem. “The burning pain is so intense, it feels like I'm on fire,” Kendra said. The pain was also present after urination for up to an hour. Intense itching was much worse if she was in a hot bath or if she got overheated. Her rectal area was also inflamed, red, and itchy to the point that she had tried several types of oils and creams to alleviate the discomfort. She experienced a sensation of heat in her vaginal area that

# Once in a Blue Moon?

## If vaginitis is rare for you, here's what to do

by JUDYTH REICHENBERG-ULLMAN, ND, DHANP, MSW

If you develop mild vaginitis and you rarely have such symptoms, you can try the naturopathic self-care measures and/or homeopathic remedies described here. If your symptoms keep coming back or never entirely go away, however, see a homeopathic professional who can help you get over your susceptibility to recurrent infections. You will be happier for it, much like the women whose stories appear in these pages.

It is also a good idea to seek help from a health practitioner who can test the discharge to determine if there is a microbial imbalance. Finding yeast or bacteria is the most common result

of testing, but sexually transmitted diseases such as gonorrhea, chlamydia, or syphilis can also be found; if so, you need immediate medical attention, and so do your sexual partners.

### **Naturopathic self-care**

- The easiest and most effective answer: Insert one capsule of boric acid powder vaginally in the morning and one capsule of acidophilus at bedtime for five days. Stop during your period.
- Douche with one tablespoon of white vinegar in a pint of warm water daily for five days. Insert one tablespoon of unsweetened, live-culture yogurt after each douche.

- If the vaginitis is only on the labia and vulva, rather than in the vagina, and is caused by yeast, apply a preparation of half vinegar and half water topically.

- For yeast infections, some women insert a clove of garlic, wrapped in cheesecloth or gauze, vaginally for yeast infections.

- If there is rawness externally *not* due to yeast, *Calendula* cream topically can be helpful.

- Insert vitamin E suppositories into the vagina for atrophic vaginitis associated with menopause.

- *Calendula* or vitamin A or herbal vaginal suppositories can be soothing. Occasionally, one tablespoon of baking soda in a quart of warm water works better as a douche than acidifying treatments such as vinegar or boric acid.

was worse in summer or if she became overheated and perspired. She suffered from mild, generalized hot flashes at night that woke her between 3 and 4 a.m.

In addition, Kendra had a severe cat allergy; she would break out in hives and get terribly red, itchy eyes and had taken steroids for this in the past. She also had a tendency to easily develop a watery, burning diarrhea. She craved cold, sweet foods, such as ice cream, and was relatively thirsty. She was sensitive to the sun, warm weather, and loud noises. She got tired easily in the afternoon around 4 p.m., was sensitive to clothing around her abdomen, and would stick her feet out of the covers at night because her feet were “very hot.”

### *Homing in on a remedy*

In deciding on a remedy for Kendra, I considered *Kreosotum*, *Lycopodium*, and *Sulphur*. *Kreosotum* is one of the leading

remedies for vaginitis with acrid, burning discharge that also causes intense itching, much like Kendra’s symptoms. *Lycopodium* also fit her burning vaginal discharge, along with some of her general symptoms, such as feeling worse at 4 p.m. and being sensitive to clothing around the abdomen. *Sulphur*, however, fit the totality of Kendra’s case the best: the intensity of the vaginal burning and itching that was worse from heat and sweat, milk-like discharge, burning after urination, red itchy rectum, vaginal heat, hot flashes, aggravation time of 3 - 4 a.m., history of suppression of symptoms, redness and itching of the eyes, watery and acrid diarrhea, and sticking her feet out of the covers at night.

When I treat people with chronic conditions, I typically start with a daily dose of a remedy in either 6c or 30c. Kendra’s history of allergy symptoms suppressed by steroids led me to start with a lower potency, *Sulphur* 6c daily, rather than 30c, as I wanted to minimize the possibility of a troublesome aggravation (where symptoms get much worse before getting better).

### *Flames extinguished*

“I was worried when the burning and discharge got a little worse,” Kendra told me at our follow-up meeting one month later, “but after a week on the remedy, everything was way better. I can

## **Kendra's misery prompted her to search high and low for answers.**

### **Invaluable vaginitis remedies**

While there are many possibilities when it comes to choosing the best homeopathic remedy for your symptoms, these are the five remedies most commonly indicated for acute bouts of vaginitis.

***Caladium*:** Terrible itching of the vagina. Vaginitis during pregnancy. Dryness of labia and vulva. Itching of vagina and vulva with burning. Worse from sex, worse from tobacco.

***Kreosotum*:** Yellow vaginal discharge that is terribly itchy and burning. Extreme rawness of the mucous membranes. Discharge smells putrid or like green corn. Swelling of the labia. Scratching makes the itching and inflammation worse. Vaginitis is worse during pregnancy or before the menstrual period starts.

***Pulsatilla*:** Thick, bland yellow-green or creamy, milky discharge. Discharge is usually thick and painless but can also be thin, irritating, burning. Woman feels warm, feels worse

in a stuffy room, desires fresh air and open windows. Changeable emotions. Clingy and weepy. Wants company when sick. Not thirsty. Desire for butter, ice cream, and creamy foods.

***Sanicula*:** Discharge smells like fish brine. Body odor smells like old cheese. Stubborn, irritable, and touchy. Bearing down sensation in the pelvis. Desire for salt, bacon, and ice cold milk.

***Sepia*:** White or yellow discharge that can be slimy, lumpy, or bloody and results in a raw, burning, itching vaginal area. Discharge is worse during the day. Symptoms are generally caused by a hormonal imbalance. Woman feels depressed, sluggish, dull, irritable, and overwhelmed; cries easily. Dryness of vagina in menopausal women that feels worse while walking. Aversion to partner and to sex. Bearing-down sensation in pelvis. She feels better from vigorous exercise or dancing. Desire for vinegar and sweets.

### **Dosing & what to expect**

Take three pellets of your chosen homeopathic remedy in the 30c concentration every four hours until you see an improvement. If you are no better after three doses, change medicines. After you first notice you have improved, take another dose only if your symptoms begin to return. If the vaginitis is very severe, you may need to give the remedy more often (e.g., every one or two hours), as needed. Acute episodes of vaginitis can respond within 24 to 48 hours but may take a week or two to completely resolve.

*The information above is adapted from my book, Whole Woman Homeopathy, The Comprehensive Guide to Treating PMS, Menopause, Cystitis, and Other Problems—Naturally and Effectively.*

See bio for Dr. Reichenberg-Ullman on page 42.

hardly believe it—the burning and heat in the whole area are completely *gone!*” This *slight* aggravation followed by great improvement showed me that the correct remedy had been given. While the discharge had lessened considerably, she still had some mild itching that worsened if she perspired or became overheated. But she noticed less perspiration overall, especially during hot flashes.

Kendra added: “I was in close contact with a cat a week ago, and I only got a little itchy-eyed—way better than past encounters.” She reported normal bowel movements instead of her usual tendency for diarrhea. And she remarked on a general uplift in her mood: “I am feeling much better than I have in years. This is fantastic!” Since all was going so well, I asked her to continue the daily dose of *Sulphur 6c*.

#### **What a difference!**

One month later, Kendra was still doing well, with less itching and very little discharge. However, a slight increase in the vaginal heat and some worsening from perspiration, led me to increase the potency and prescribe a daily dose of *Sulphur 30c*. Shortly afterwards, those symptoms were relieved. The next time I spoke to Kendra, she happily told me she had no more itching, no more pain or irritation with sex, and hot flashes that were barely noticeable. “I had tried *so* many things that didn’t make one difference. Now I can finally relax and feel normal again. My relationship is better now, too.”

Over several more months, Kendra continued to improve. She would come in for occasional “tune-ups” when she had slight relapses, and I would often increase the potency of her daily dose of *Sulphur*. Eventually, she improved enough so that she was taking the remedy only occasionally, as needed. And when her troubling vaginal symptoms were long gone, she stopped taking *Sulphur* completely. It has been almost a year now since Kendra has needed my help, and she remains symptom free.

**It has been almost a year now since Kendra has needed my help, and she remains symptom free.**

## **She knew fluconazole was not good for the liver, so she could not simply live on a constant dose ...**

### **EMMA: Five Years of Desperation**

Emma, a 32-year-old doctor, entered my office in tears, almost unable to tell her story. “I’m at my wit’s end,” she cried. For five years, she had been dealing with frequent yeast infections; they occurred whenever she had sex with her husband. Although she and her husband were hoping to start a family, her propensity for yeast infections made this a difficult prospect. Emma reported that she’d had this issue with prior partners before meeting her husband, so she knew it did not have anything to do with his body chemistry.

She had already been to the top vulvar health clinics and specialists, and had every possible test and treatment. Each time she was tested, a yeast infection was found,

so Emma took the prescription oral antifungal drug, fluconazole, many times. After treatment, she could have sex no more than once or twice before another infection started. She knew fluconazole was not good for the liver, so she could not simply live on a constant dose, and she was starting to worry about the many doses she had already had.

Emma’s yeast infec-

tions would start with a white, thick, copious discharge that caused burning and sensitivity of the vaginal tissues, along with intense itching in the vulva. The burning was worse from any pressure. The only thing that helped the intense itching and burning was hot water (as hot as she could get it). After sex, she often took a hot bath or shower to help alleviate the itching and burning.

Emma guessed that she also had endometriosis, as she had stabbing pain in the right ovary as well as in the rectum during her menstrual cycle, which are common signs. She would also have similar pain when using tampons and during sex, and a stabbing, needle-like vaginal pain after sex.

Emma reported a history of chronic bacterial vaginal infections (treated with antibiotics) prior to the chronic yeast infections. As a child, she had taken frequent antibiotics for other kinds of infections, and she guessed she’d had at least 25 rounds of antibiotics in her life.

#### **Anxious and overwhelmed**

Anxiety had been a problem for Emma since medical school. She held herself to high standards and often felt that she was letting her patients down. This snowballed into feeling like a failure as a wife. She would be at her office and suddenly become overwhelmed that she was never going to make it as a doctor and that her husband and family would be disappointed in her. She also feared that her husband would leave her for someone “more normal” who didn’t get yeast infections; she worried that she would never get better. When she was most anxious, she would get irritable at everyone; but she felt relief from the anxiety when her husband was by her side. Emma was initially anxious that her probable endometriosis was rectal can-

**She guessed she’d had at least 25 rounds of antibiotics in her life.**



cer, but later chalked this up to “medical school syndrome, where you know too much about what can go wrong, so you assume the worst.”

Emma’s husband was out of town for an extended business trip at the time of our office visit, and she was more anxious because of it—feeling less safe and worrying that someone might break into their home. She was also uncomfortable in the dark.

Emma would get cold sores on a regular basis and used very hot water to effectively alleviate any discomfort. She was generally chilly and occasionally woke at 2 a.m. feeling clammy. She was very thirsty for cold drinks and considered herself a restless person. “I always need to be cleaning or moving around,” she said. “If the house is cluttered, I can’t sleep until I get it back in order.”

### **Burning pain, relieved by heat**

In analyzing Emma’s case, the symptoms that struck me as most remarkable were the alleviation of her vaginal burning and itching pain with very hot water, as well as the alleviation of her cold sore pain with hot water. These symptoms made me think of the remedy *Arsenicum*, with its well-known indication: burning pain, relieved by heat. *Arsenicum* also has an affinity for the vaginal tissues and itching skin in general. It fit the vaginal stitching pain, the rectal stitching pain during the menstrual cycle, and the stitching right-sided ovarian pain. Thick, white, copious, acrid discharge was also consistent with this remedy. Emma’s symptoms of self-reproach; fears of cancer, the dark, and robbers; anxiety when alone; despair of recovery; chilly nature; waking at 2 a.m.; thirst for cold drinks; restlessness; and a fastidious nature helped confirm this prescription.

I also briefly considered the remedies *Petroleum*, *Rhus tox*, *Rhus venenata*, and *Phosphorus* for Emma. *Petroleum*, *Rhus tox*, and *Rhus venenata* matched the symptom of itching that is better with warm water. *Petroleum* and *Rhus tox* can also help herpetic eruptions (cold sores). However, the rectal pain during her cycle,

the ovarian pain, and her fears did not fit these latter three remedies that well. On the other hand, *Phosphorus* fit Emma’s fears and rectal pain very well, but not the itching and burning symptoms that were better with heat. So I prescribed a daily dose of *Arsenicum album* 6c.

Emma returned one month later, saying: “Well, I didn’t have any yeast infections but my husband is still out of town, so I wouldn’t expect to have one. The stabbing pains during my cycle were much milder though, and I was surprised that using a tampon was pain-free, for the first time in years. I didn’t have any rectal pain as I usually do either.

“A cold sore erupted a couple days after I saw you ... but it was smaller than usual,” she reported. “I also felt a lot more anxious for the first week or so, but now I feel much better. ... I decided to go back to yoga because that always helped me feel calmer in the past ... My husband and I had a good talk. I told him about my fears, he listened, and that really helped. He reassured me that we are in this together. Before, I felt that if I didn’t fix the problem myself, I was letting him down.” She also said she felt less anxious about her health, possibly because her symptoms had improved.

The following month, Emma returned to see me, still on the daily dose of *Arsenicum* 6c. Smiling shyly, she reported that her husband had come home and they had had sex “many more times than twice,” which was her previous threshold. “And no yeast infections!” She still had some mild pains during her cycle and minor stitching vaginal pains after sex, but they were nowhere near as severe as before. She continued to have fewer bouts of anxiety, and she used yoga breathing techniques to deal with them when they did come up.

### **Infection-free!**

One month later, Emma came into my office beaming: “My husband has been home almost three months now, and I have not had one yeast infection. Not one! Thank you! This is just what we needed to feel confident about focusing on conceiving.” Because she also reported

## **She was infection-free for the first time (and for the longest stretch of time) in five years.**

a mild return of the stabbing vaginal pain lately, I increased the potency of her daily dose to *Arsenicum* 30c.

One month later was Emma’s four-month anniversary of starting homeopathic treatment, and she was infection-free for the first time (and for the longest stretch of time) in five years. She was also free of the (suspected) endometriosis pains and felt much more relaxed overall. Because Emma was so much better, she decided she didn’t need to return for further consultation and treatment. That was almost a year ago. I do not know for certain that Emma never got another yeast infection, but I am assuming she did not.

### **Whole woman healing**

I hope you are inspired by the stories of these three women. They had all exhausted conventional treatments (and some alternative treatments) before courageously finding their way to homeopathy, which helped them get their health back in balance. There are other ways to treat such troublesome infections, but in my experience, homeopathy is a very effective means of healing both the vaginal tissue—and the whole woman.

#### **FOOTNOTE:**

**A note on dosing:** In chronic cases, such as these, I typically start with a low potency like 6c or 30c every day, and expect slow, steady improvement over an extended course of treatment. When improvement plateaus, I tend to increase the potency—as long as the symptoms have not changed substantially. This posology method is rooted in the work of Samuel Hahnemann (*Organon of Medicine*, 6th edition, especially paragraph 246, footnote a), Francisco Eizayaga (*Treatise on Homeopathic Medicine*), and Douglas M. Borland (*Pneumonias*), and was introduced to me by Stephen Messer, ND, DHANP, at Southwest College of Naturopathic Medicine.

#### **ABOUT THE AUTHOR**



Natalie Ham, ND, practices naturopathic medicine at Nourish Natural Medical Center in Tempe, Arizona, with a special focus on women’s health. Following graduation from Southwest College of Naturopathic Medicine, she was selected to be the first homeopathy specialty resident.

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**“I decided to go back to yoga because that always helped me feel calmer in the past ...”**



# Go With

by LIA BELLO, RN, FNP, CCH

Cramps at “that time of the month” are no fun! The medical term for pain with menstruation is dysmenorrhea, and nearly every woman has experienced it to some degree. Estimates of prevalence vary widely (from about 20 to 80%) but have been recorded as high as 90%.<sup>(1)</sup> That’s nearly half the population!

While some women breeze through their menstrual periods with mild to no discomfort, others suffer severe, debilitating, labor-like pains in the abdomen or back, often accompanied by weakness, headache, dizziness, nausea, or diarrhea. These are the girls and women who gulp down over-the-counter painkillers in order to try to maintain their normal schedules ... or if that doesn’t do the trick, they skip school or work, curl into a ball with a heating pad, and wait it out for the one to three days that such pain usually lasts.

Menstrual pain seems to hit teenagers the hardest (it’s the leading cause of school absenteeism in girls) followed

by women in their 20s. Symptoms tend to improve as women get older or after they’ve had a child. Why? Researchers aren’t really sure.

## Cramps and more cramps

In women of childbearing age, the uterus normally contracts each month to expel its lining, if no fertilization of an egg has taken place. Prostaglandins (hormone-like substances in the body) trigger the uterus to contract, and higher levels are linked to stronger contractions/stronger cramps.

Menstrual cramps can usually be diagnosed as “primary dysmenorrhea” (i.e., common, recurring pain not due to other diseases) based on the symptoms alone, which tend to come on within a year or two of a girl’s first menstrual period. However, when pelvic pain appears out of the blue or later in life (e.g., in the late 20s, 30s, or 40s) or is accompanied by abnormally heavy bleeding, a more complex condition is usually suspected.

## Nurses Earn 1 Contact Hour Free

The goal of this continuing education program is to enhance nurses’ knowledge about homeopathy. After studying the information presented here, you will be able to:

1. Define dysmenorrhea and menorrhagia.
2. Compare holistic and conventional approaches to dysmenorrhea.
3. State two homeopathic remedies known to help menstrual pain in women who feel better when pressure is applied to the abdomen or when they bend doubled-over.

The planner and author have declared no relevant conflicts of interest or bias that relate to this educational activity.



## Every woman's guide to healthy, pain-free periods —naturally

# the Flow

Endometriosis (where endometrial tissue that normally lines the uterus grows outside the uterus), uterine fibroids (where benign tumors cause pain or bleeding), and adenomyosis (where uterine lining breaks through the muscle wall of the uterus) are a few examples. When cramps are caused by other conditions, they are diagnosed as “secondary dysmenorrhea.”


### Say goodbye to periods?

We've already mentioned pain relievers as the first thing many women reach for when in the throes of menstrual cramps—and that's what conventional practitioners recommend, too, starting with over-the-counter non-steroidal anti-inflammatories such as acetaminophen, aspirin, ibuprofen, or naproxen, and moving on to prescription painkillers if needed. But did you know that when a woman or even a girl as young as 10 tells her conventional health practitioner that she has menstrual cramps or irregular periods or premenstrual mood swings,

acne, water retention, or headaches, she is also often offered hormonal contraceptives? This is regardless of whether or not the girl or woman needs contraception. Modern medicine considers birth control pills a cure for those problems, and conventional practitioners have no qualms about keeping a woman on “the pill” for her whole reproductive life, if she consents to it.

The use of birth control pills or other hormonal contraceptives (e.g., skin patches, vaginal rings, implants, some IUDs, and shots) is called “menstrual suppression” by conventional medicine. The contraceptives turn off the woman's own hormones and superimpose a pseudo (synthetic) set of hormones. The monthly bleeding while on the pill is not a real “period”—it is simply a reaction to the withdrawal of the hormone pills for one week per month. So to say that this is a cure for menstrual cramps when actual menstruation is suppressed is inaccurate. When a woman who has been taking

**I encourage girls and women to tune into their monthly cycles and honor their natural body wisdom.**



hormonal contraceptives to reduce menstrual pain goes off the pill, patch, or ring for an extended time, her cramps come back. So suppression of symptoms, not cure, has taken place.

In recent years, pharmaceutical companies and many gynecologists have been promoting newer forms of “continuous birth control” that reduce the number of periods to only four per year—or even none at all—so women will not have to “cope with the pain and inconvenience of menstruation.” David Grimes MD, FACOG, FACPM, and many other gynecologists have asserted that monthly bleeding is not required for good health. (2,3,4,5) And since the bleeding that occurs when taking hormonal contraceptives is not a “real” period caused by the woman’s own hormones, the logic is that there is no need to have those periods at all. They say that the reason the classic form of birth control pills first appeared on the market in 1960 with 21 days of hormone pills and 7 days of placebo (when bleeding occurs) was to mimic a woman’s normal cycle so that she would feel more comfortable about taking the pills; the timing of the bleeding, or even allowing for bleeding at all, is completely arbitrary.

### Honoring the body’s wisdom

As a family nurse practitioner with 43 years’ experience using homeopathy, I take a different view. A woman’s own, *real* menstrual pattern should be considered one of the body’s “vital signs”—just like blood pressure, temperature, heart rate, and so on. The individual health balance of each woman’s hormone system and reproductive organs speaks out through her menstrual regularity, flow, and comfort level. From the onset of menstruation to its cessation, her body communicates her individual health story.

**A woman’s own, *real* menstrual pattern should be considered one of the body’s “vital signs”—just like blood pressure ...**

While it can certainly be tempting and convenient to use hormonal contraceptives for birth control or to reduce cramps or periods altogether, I believe that we interfere with our body’s delicate hormonal balance at our own risk. This is especially true for girls and teens whose bodies and brains are still maturing—we don’t really know the long-term effects of powerful contraceptive hormones on their overall systems during critical adolescent growth phases because research studies have only focused on adult women. Yet thousands upon thousands of girls from age 9 to 19 are taking them every day, as prescribed by their doctors to reduce cramps or to “regulate periods.”(6)

I encourage girls and women to tune in to their monthly cycles and honor their natural body wisdom, rather than to try to manipulate their hormones chemically. I recommend that Natural Fertility Awareness methods be taught to every young woman, and that homeopathy be used first for any ailments or irregularities that arise in her monthly cycle. In this way, we might make it easier for women to “have it all”—but safely and naturally!

### Sweet relief

Thankfully, homeopathy has much to offer girls and women suffering with menstrual cramps. A 2009 research study conducted in Europe tracked 57 homeopathic physicians who treated 139 women and girls suffering with dysmenorrhea, some who’d had it for 11 years. About half of the sufferers experienced more than 50% improvement in their symptoms, along with significant improvements in their quality of life, thanks to homeopathic treatment.(7)

No doubt about it, when you’re in pain and you take the correct homeopathic remedy in the appropriate potency, you feel the relief—almost as if a pain-relieving, muscle-relaxant drug has just gone into effect. So why not just take a pain-relieving, muscle-relaxant drug? Actually, that is not such a bad idea if one or two tablets of Motrin® or Tylenol® will do the trick (although certainly a gentle, non-toxic homeopathic remedy is preferable). But many women have cramps so severe

## Some people even refer to it as “homeopathic aspirin” because it is known for relieving muscle spasm, neuralgia, and cramping anywhere in the body.

that they need large doses of strong pain relievers every few hours for several days each month, and they are incapacitated during this time as well. Then, drug toxicity is a real concern.

If your symptoms are mild or infrequent, treating yourself occasionally with over-the-counter or homeopathic remedies is fine. But if you have troublesome menstrual cramps or ovulation pain every month, it is time for a homeopathic constitutional remedy prescribed by a professional homeopath who will take all your individual symptoms into account and choose a remedy that addresses them—and you. If headaches are a predictable part of your month, or irregularity (never knowing if the period will come very early or late or at all), or pain-

ful breast tenderness, pronounced mental irritability, bloating or food cravings before the flow—again, prevention by getting homeopathic constitutional treatment before the next cycle is your best bet. When a problem recurs monthly, it has become chronic and needs a more deep-acting treatment approach than self-care can typically offer.

### Remedies tailored to you

There are many different remedies from which to choose for a woman with menstrual difficulties, and we’ll explore some of those most frequently used here. Many fit the classic or typical picture of crampy, spasmodic, and neuralgic abdominal pains that may radiate to the low back or thighs with heavy, profuse, or clotted

menstrual flow—so how do we differentiate? Each woman will have different pain sensations and different areas affected, different times of the day or month when they feel better or worse, different body positions or movement patterns that make them feel better or worse, and different moods. Tuning in to these individualizing details, and especially to any unusual or peculiar symptoms, will ensure that you have collected the symptoms needed to find the best (i.e., most similar) remedy.

### Incredible cramp remedy

The remedy I have found most useful for my patients during an acute case of menstrual cramps is *Magnesium phosphorica*, one of the 12 cell salts or bio-

## Help Yourself! From cramps to comfort, naturally

In addition to homeopathic self-care and constitutional treatment, here are a few more self-help ideas:

- **Walk/Exercise** – For women with recurrent acute menstrual pain, I always recommend daily exercise and walking during the three non-menstrual weeks. This in itself has helped many women become cramp free.
- **Detoxify** – Making sure that the bowels are clear and non-constipated is also a good practice in the days leading up to the monthly flow.
- **Tonify with Herbs** – Vitex, also known as chasteberry, is a good female herbal tonic in use for centuries and very popular in Europe. It can regulate irregular cycles, ease PMS, and reduce cyclical breast discomfort. Typical doses are 40 drops of tincture daily, or 20 mg of dry extract 1 to 3 times daily.

Motherwort is another good choice. Herbalist Susun Weed says: “Motherwort is fast relief for those with menstrual cramps. A 5-10 drop dose, taken at the first twinge of pain and repeated every 10-15 minutes, or as needed, will do the trick for most women. ...What makes motherwort special is her tonic effect in addition to the pain relief. Motherwort tones the uterine muscle

and eventually—usually within four months—eliminates those menstrual cramps for good.” [[www.susunweed.com/herbal\\_ezine/July08/wisewoman.htm](http://www.susunweed.com/herbal_ezine/July08/wisewoman.htm)]

- **Supplement with Oil** – Evening Primrose Oil, derived from the seeds of the evening primrose plant, helps many women with PMS and cyclic breast discomfort. It is high in omega-6 fatty acids, especially gamma linolenic acid. Typical dose is 2 to 4 mg per day, taken with food. Benefits may take more than 6 months to develop.
- **Consider a Weed?** – Here’s something new. In early 2016, comedian/actress Whoopi Goldberg cofounded a company, *Whoopi and Maya*, to create medical cannabis products that relieve women’s menstrual discomfort. She was moved to create the product line because of her own history of severe cramps (which she says were only relieved with cannabis tea). Two of her products are analgesic but not psychoactive—an Epsom salt soak and a topical rub. The other two, an edible cacao butter and a tincture, can be psychoactive. Currently, they are only available in California to those with a medical cannabis card.

## Charla yelled that the heat made her cramps worse and threw the hot water bottle on the floor.

chemic remedies of Dr. Schussler. Some people even refer to it as “homeopathic aspirin” because it is known for relieving muscle spasm, neuralgia, and cramping anywhere in the body, including earache, toothache, stomachache and cramps in the legs and feet. (Aside: *Cuprum metallicum* is the foremost remedy to consider in cases of foot and leg cramps.)

My patient Lisa experienced the uterine cramping relief of *Magnesium phosphorica* firsthand when she tried it acutely, instead of resorting to her usual OTC pain relievers. She wanted to lie still with a hot water bottle on her abdomen—which was impossible while caring for her two-year-old baby. After taking three doses of *Magnesium phosphorica* 30c from her home remedy kit over a span of 20 minutes, she realized that her cramps were simply over for that month. She could go on with her day without being incapacitated, and she was incredulous.

Anecdotal evidence shows that all potencies of *Magnesium phosphorica* from the lowest to the highest have worked well. In my practice, I have found high potency (e.g., *Mag phos 1M*) to be of greatest and speediest help in painful menstrual cramps, with only one to three doses needed, instead of the multiple doses over hours that are often required when I’ve used lower potencies. Trying different potencies may be necessary to find the most effective one for you. Dr. Schussler advised that dissolving the dose of *Magnesium phosphorica* in warm water and sipping it enhanced its effect (he used the 6X potency), and many authors agree.<sup>(8)</sup>

People needing *Magnesium phosphorica* have cramps that feel better from warmth and warm applications, from bending over double (*Colocynthis* is another prominent remedy with this symptom), and from applying pressure

on the painful area. A menstrual flow that is stringy or membranous is also associated with *Magnesium phosphorica*.

### Dramatic and angry

Homeopathically prepared *Chamomilla* is known to relieve severe acute dysmenorrhea. My 16-year-old patient Charla had terrible monthly cramps that would be labor-like and so distressing that she would roll around restlessly in bed, moaning. She would get angry easily, and she could not stand noises, touch, or anyone “interfering” during the pain. Her abdomen was tender, and the pain felt like a spasm, even radiating down to her thighs! When her mother brought her a hot water bottle to try, Charla yelled that the heat just made her cramps worse as she threw it on the floor. Charla seemed to be hypersensitive to pain and angrily dramatic. After a few doses of *Chamomilla* 200c, she calmed down and felt a lot better.

Over the next three menstrual cycles, Charla took *Chamomilla* 200c at the first sign of cramps and got significant relief each time. She was able to stop taking the multiple doses of over-the-counter pain relievers that had upset her stomach and not provided much relief anyway. And Charla (and her family!) were especially happy to have a break from the angry mood that she had been experiencing each month around her period. By the fourth cycle, Charla was surprised to discover that when her period arrived, the cramps were very mild and her mood was reasonably good—even though she had not taken a dose of *Chamomilla*! I had chosen this remedy initially for acute symptom relief during her episodes of pain, but it appeared that it had acted more deeply, on a constitutional level, to help Charla overall.

Some pointers to choosing *Chamomilla* for a woman with menstrual pain include: an angry and irritable mood,

hypersensitivity to pain with reactions that seem out of proportion or overly dramatic, feeling worse when touched, severe labor-like pains that may extend down the inner thighs, profuse and dark clotted blood flow with occasional gushes of bright red blood, capricious and changeable behavior (demands things and then rejects them), intolerant of noise and pain, better from cold applications, and better from being rocked.

### Irritable and in pain

*Nux vomica* should be discussed here as it is also useful for menstrual cramps—and the irritable mood and hypersensitive behavior associated with this remedy might lead you to compare it with *Chamomilla*. *Nux vomica* can be differentiated by its pelvic pain that radiates to the lower back or to the whole body; also by menstrual pain accompanied by urging for a bowel movement, constipation, nausea, or bladder irritation. A woman needing *Nux vomica* would be more chilly than one needing *Chamomilla* and would seek warm applications (whereas one needing *Chamomilla* would be aggravated by heat). With their typically competitive, hard-driving, Type-A outlook, women needing *Nux vomica* might be impatient to get back to work. They may desire spicy foods, stimulants, and alcohol.

*Colocynthis* is a remedy to consider for menstrual cramps whenever severe cutting abdominal pain is the main symptom. It can be differentiated from the other remedies by the strong symptom of needing to bend over double, or to bring the knees up to create hard pressure on the abdomen, or to lie on the abdomen—all of which help to ameliorate the pain. A woman needing *Colocynthis* might feel angry or indignant during her violent cutting pains, as she is easily offended or humiliated; likewise, her pains could be triggered or exacerbated by a bout of

## After a few doses, she calmed down and felt a lot better.

anger. Severe pains that are better from heat and from firm pressure on the abdomen are the key symptoms pointing to *Colocynthis*.

### Go with the flow

*Pulsatilla* is a remedy to keep at the top of the list when a woman's cramps or other menstrual difficulties have been occurring ever since the onset of her periods in adolescence (consider the remedy *Sepia*, too). The emotional symptoms usually clinch the choice of *Pulsatilla*—a soft, affectionate, yielding female temperament, prone to crying easily and desiring support, attention, and sympathy. Women needing *Pulsatilla* often have a vaginal discharge that is creamy and thick in between periods. *Pulsatilla* women can begin to feel bad *before* starting to bleed—with bloating, fatigue, headaches, and emotional upsets—and then feel better once the flow starts. The periods can be irregular; the flow can be light with a clotted and changeable discharge, and accompanied by cramps. *Pulsatilla* is also known to bring back the menstrual periods if they have stopped (known as amenorrhea) or if a girl is very late in starting her monthly period. The desire for open air, lack of thirst, aversion to stuffy rooms, and aggravation from rich, fatty foods round out the *Pulsatilla* picture. This remedy is probably given more often as a constitutional prescription rather than for an acute bout of menstrual cramps.

*Viburnum* is another remedy to consider. The common name of the plant from which it's made is crampbark as it was used herbally by Native Americans to relieve cramps. Homeopathic indications include cramping and drawing pain in the pelvis that radiates to the thighs and small of the back; this generally occurs before or at the start of the flow and (like *Pulsatilla*) improves once the flow is established. The cramps can come

and go suddenly and are often accompanied by burping and abdominal gas. The woman may be nervous, irritable, and chilly during her period.

### Sick in bed

Cynthia, a 36-year-old mother of two, was in bed in distress when she called me for help with her sudden, severe, bearing down and throbbing pelvic pains accompanied by an excessive flow of bright red blood with many clots. Her mother, who was staying with her to help Cynthia and the kids, also got on the phone and shared with me that Cynthia looked flushed and her skin felt hot. I asked the mom whether she noticed anything else unusual, and asked if she had noticed how Cynthia responded if anyone jarred the bed. "Actually, one of the boys jumped up to give her a hug a little while ago, and she yelled out in pain!" Cynthia's mother replied.

*Belladonna* is the remedy that fit Cynthia's acute distress. The typical *Belladonna* indications for menstrual cramps include throbbing pains that are worse on the right side; sudden onset of violent pain with a feeling of fullness in the uterus from congestion; and profuse, bright red, clotted, and sometimes gushing menstrual flow with a bearing down sensation. Her classic *Belladonna* appearance with hot, flushed skin and the fact that she felt worse from being jarred just clinched the prescription. (See first repertorization chart on page 40, created with *MacRepertory* software.) Cynthia took a dose of *Belladonna* 200c every 30 minutes for three doses and experienced a great easing of her pain. The flow became less strong as well, and soon she was out of bed and making dinner for her family.

Cynthia's bleeding was profuse and clotted. Some call this "flooding" but the medical name is menorrhagia—when the flow is so strong that the woman cannot get up and go about her normal activities. It can be caused by hormone imbal-

**Conventional medicine offers various surgical resolutions, which my experience *and* the homeopathic literature show could be prevented ...**

## Retreat to the Moon Lodge?

Or ... at least take a spa day!



A leading women's health teacher and herbalist, Susun Weed, teaches that female menstrual difficulties can be caused or exacerbated by our non-stop lifestyles. She encourages women to take the cue from their bodies and retreat, if possible, during the menstrual period—or at least to slow down the pace. Women from Native American cultures historically retreated to the "moon lodge" each month, as humans have long observed a connection between the monthly phases of the moon and women's monthly cycles.

When we run the body like a machine, the vital force is sure to feel the stress. Christiane Northrup, MD, the well-known gynecologist turned women's therapist and coach, suggests that our busy lifestyles as well as "undealt with emotions" may be a contributing factor in women's illnesses. She notes that the moon has influence on ocean tides as well as individual body fluids, and that the ebb and flow of our menstrual cycles connect us to the macrocosmic cycles of nature. In her article, "Wisdom of the Menstrual Cycle," at [drnorthrup.com](http://drnorthrup.com), she writes: "We need not be afraid or think we are sick if our energies and moods naturally ebb for a few days each month. In many parts of India, it's perfectly acceptable for women to slow down during their periods and rest more. I have come to see that all kinds of stress-related disease, ranging from PMS to osteoporosis, could be lessened a great deal if we simply followed our body's wisdom once per month."

Stress is a major cause in the derangement of the vital force, and even the right homeopathic remedy cannot cure if the emotions and intuitions are continually suppressed or ignored as we plow forward with our busy lives—when our bodies are suggesting that we slow down.



## Hit the Spice Rack!

A pinch of this,  
a pinch of that

A small research study found that women with dysmenorrhea got significant improvement in pain and heavy bleeding when they took two 420-mg capsules of cinnamon, three times a day, during the first three days of their menstrual cycles.

Interesting! I have found that a pinch of cinnamon from the spice rack can reduce hemorrhagic menstrual bleeding (or any type of bleeding), especially if cinnamon is homeopathically potentized by hand. That is, dilute a pinch in a small bottle, shake vigorously, then pour out all but a few drops, and dilute again—then repeat the process six or more times. Then have the person sip the final dilution every five minutes or so, to stop bleeding. I learned this trick from homeopath David Wember, MD, many years ago, who learned it from an old homeopath many years earlier.

Another study found that women with dysmenorrhea got significant reduction in pain after taking 500 mg of ginger, three times a day for three days, beginning two days before the expected menstrual period.

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—Jaafarpour M, et al. The effect of cinnamon on menstrual bleeding and systemic symptoms with primary dysmenorrhea. *Iran Red Crescent Med J*. 2015;17(4):e27032.

## Best of all, she no longer worries about having to undergo a hysterectomy.

ances, fibroids, endometriosis, or pelvic infection, and it tends to be most common in adolescent girls and in women approaching menopause. Consistently heavy periods can lead to weakness and iron-deficiency anemia from blood loss. To stop acute and chronic heavy bleeding, conventional medicine offers hormonal treatments and various surgical resolutions—from D&C (dilation and curettage) to hysterectomy—which my experience *and* the homeopathic literature show could be prevented if a woman is treated with homeopathy and other alternative measures for this problem. (Other homeopathic remedies to consider for acute incidents of extremely heavy menstrual bleeding are *China*, *Ipecac*, *Phosphorus*, *Sabina*, *Crocus*, *Cinnamonum*, and *Secale*.)

### No hysterectomy for Cynthia

So Cynthia and I got together for an in-depth consultation soon after this episode to find a constitutional remedy for her chronic health issues. Our goal was that she not have any more cycles like the last one. Her conventional gynecolo-

gist had already mentioned to her that a hysterectomy at some point in the future when she knew she didn't want any more children might be a "simple way" to stop the heavy flow—but Cynthia wanted to avoid the surgeon's knife!

Over two hours, Cynthia told me her story so I could gather the details needed to find an appropriate remedy. Her monthly menstrual cramps and heavy bleeding had started with the onset of her menstrual periods as an early teen, along with monthly headaches and premenstrual irritability, food cravings, and tender breasts. However, the heavy bleeding had gotten much worse in recent months. Cynthia had experienced depression after giving birth the first time and occasionally had sensations of bearing down or a "ball" in the uterine area, similar to prolapse symptoms. Cynthia's teary story included her dislike of sexual relations and wishing that she could get out more to jog, dance, exercise, and get away from all her family duties a bit. Over her childbearing years, Cynthia had developed many brownish spots on her face and neck.

So many of Cynthia's symptoms fit

### Repertorization 1: Cynthia's acute case

### Repertorization 2: Cynthia's chronic case

the classic indications for the remedy *Sepia*—such as premenstrual syndrome, menstrual headaches, amelioration from vigorous exercise, desire to dance, aversion to sex, uterine prolapse, post-partum depression, empty stomach not satisfied by eating, and facial skin discolorations around pregnancies. (See second chart on page 40.) *Sepia* is more likely to be used on a constitutional basis than in an acute situation for menstrual cramps.

I gave Cynthia *Sepia* 1M, and we waited to see what her next menstrual cycle would be like. While Cynthia was not pain-free, she felt perhaps a 30 to 50 percent improvement in the pain and the flow, as well as having a better outlook overall, so it seemed that we were on the right track. We kept in touch in the following months to monitor her progress, and she continued to improve. I prescribed several more doses of *Sepia* 1M over the next year, when indicated (e.g., if her overall improvements in health and menstrual symptoms seemed to backslide a bit). I also incorporated a teaching of Dr. Farokh Master of India and had Cynthia take *Oophorinum* 8c twice daily for the two weeks before the menstrual flow each month. (This is a homeopathic preparation of healthy human ovary, which is also called *Folliculinum*. Dr. Master recommends it in repeated doses in low potency for women with premenstrual symptoms as well as menopausal symptoms.)

Now, one year later, Cynthia still gets occasional menstrual cramps but they are very mild by comparison to the predictably severe pain she had had for decades. While her flow still tends to be on the heavy side, it is in the normal range, and she can easily carry on with her work both outside and inside her home during her menstrual periods. She admits to getting somewhat irritable around the time of her periods, but her mood at other times is better than she can ever remember it. She has made time in her life to take a few dance/exercise classes at her local YMCA and is generally more satisfied with her family life. As far as headaches or other premenstrual troubles, she is symptom-free. Best of all, she no longer worries about having to undergo a hysterectomy.

## Homeopathy can offer relief and healing to women with menstrual cramps and related complaints...

### Excellent care for every woman

We have seen here how homeopathy can offer relief and healing to women with menstrual cramps and related complaints, such as excessive bleeding and PMS. But the truth is that homeopathy treats the whole person, so it can be useful for *all* female complaints—infertility, miscarriages, pregnancy complications, herpes, pelvic inflammatory disease, menopausal symptoms, salpingitis, endometriosis, fibroids, ovarian cysts, warts, HPV, and cancer, to name a few!

A woman should not feel limited solely to living with these problems and imbalances—or immediately agreeing to the suppressive prescriptions or surgeries that her OB/GYN frequently recommends. It takes assertiveness, confidence, and a good team of supportive health professionals, both conventional and alternative, for a woman to navigate her way through a gynecological medical problem. But the results are worth it!

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4. To complete the course, each nurse must complete an evaluation. Email it back and then your certificate will be emailed to you.

#### ACCREDITED

This Continuing Nursing Education activity was approved by New Mexico Nurses Association AAU, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. Approval Code Number: #1503-03-PDPPA/LDPPA

# Mirror, Mirror on the Wall...

by JUDITH ACOSTA, LISW, CCH

“Jane is doing poorly in school because of *self-esteem* issues.”

“You really need to work on your *self-esteem*.”

“The best thing I ever did for my *self-esteem* was to divorce John.”

Self-esteem. It’s a buzzword as ubiquitous as the presence of Oprah in the media. Since the early 1980s when mental health services and programs became integrated into our public educational system, the concept of self-esteem has become a part of our cultural language. There are self-esteem classes and curricula in elementary schools across the country, self-esteem workbooks you can buy on Amazon, and self-esteem support groups. It’s become almost a national preoccupation to “work on building self-esteem.”

But what does self-esteem mean? And is it something we really need to be “working on”?

## Self-Esteem and homeopathy



**I'm not so sure about the gung-ho pursuit of self-approval we've been embracing with our widespread and institutionalized programs in "self-esteem building."**



## Everyone has some issue with their self-image, whether they lean towards self-satisfaction or self-deprecation.

At face-value, self-esteem means your subjective evaluation of your own worth. And it stands to reason that individuals view their own worth differently at various times in their lives; this may run the gamut from low to high and may encompass anything from pathological insecurity and neediness to overbearing conceit. Indeed, there are times when we behave so badly that our esteem for ourselves *should* be low.

### The praise craze

But in many circles, self-esteem has come to mean only the *positive* side of the esteem spectrum, synonymous with self-importance and self-approval. And over the decades, this type of self-esteem has come to be viewed as almost a “right” that is built out of unceasing (and often unmerited) praise. Consider the conscientious, well-meaning parent who takes great pains to praise a child’s every move so as not to “damage” that child’s self-esteem. In psychological terms, self-esteem acquired primarily in this way is actually an *introjection* of perceived value. In other words, if other people think I’m “all that,” then I come to believe that I am indeed “all that.” In fact, this type of self-esteem is not necessarily very healthy because it is artificially inflated and, as such, very fragile—able to fall apart at the first breeze of disapproval.

Of course, honest praise for real accomplishments is always a good idea, as is love and compassion for our fellows. But I’m not so sure about the gung-ho pursuit of self-approval we’ve been embracing with our widespread and institutionalized programs in “self-esteem building.”

### Another path

In prior generations, healthy self-esteem (although it probably wasn’t called that) was a derivative of one’s contribution to others, to one’s environment. It was a function of purposefulness, productivity, and, in many cases, selflessness

and humility—definitely not a product of praise. In my clinical experience as a social worker/homeopath working with hundreds of clients for the past 30 years, I can say unequivocally that a sense of worth born of contribution and purpose is as stable and wind-proof as an aircraft carrier; conversely, a sense of worth born of “how many gold stars you received from your teacher or your boss today” is as fragile as a house of cards.

So when people come to me wanting to work on their self-esteem, I generally try to help them realize a sense of purpose in their lives so they can make a true contribution, rather than encourage them to recite endless affirmations of the qualities they desire in themselves, as urged by some self-esteem programs. In fact, one of the most effective ways I have found to help people with these issues is via homeopathic treatment.

### The homeopathic perspective

In the course of our conversations together, clients frequently bring up the issue of self-esteem, and I always have to ask them: “What does that mean?” Everyone has some issue with their self-image, whether they lean towards self-satisfaction or self-deprecation, but understanding what the person really means and what we as homeopaths are looking for when working with a client—and what true health is—is paramount if we’re to approach any case rationally. Homeopathy is, if anything, an art of the specific and the peculiar (meaning peculiar to the individual). If a homeopathic remedy is to be given, the trick is finding out what that *precise* “self-esteem issue” is and from whence it comes.

In Schroyen’s *Synthesis Repertory*, there are 1,912 pages of rubrics/symptoms. In it, we see *self-control*, *self-denial*, *self-deception*, and a few other “self” rubrics (all of which refer us to other rubrics), but not one rubric is titled *self-esteem*. Why? Because self-esteem, *per se*, doesn’t really mean anything to the homeopath.

**I can say unequivocally that a sense of worth born of contribution and purpose is as stable and wind-proof as an aircraft carrier.**

A recent case comes to mind in which feathering out meaning and self-perception was critical to finding a curative remedy:

### A story of emotional homelessness

Laurie, a 30-year-old single woman (whose name and identifying details have been changed to protect identity), came to see me because, in her words, “I have self-esteem issues.” I asked her in what way, and she said, “I feel depressed and can’t snap out of it. I usually snap out of it, but this time I’m not.”

The term “depressed” needs a lot of clarification, too. When I questioned her further, she explained: “I feel sad . . . I feel like I’m no good. Like I’m detached, like cold winds are blowing across a barren field inside me.”

Laurie’s sleep was disturbed by anxiety, and she wanted to cry all the time. Although the current episode had started when several friends and a boyfriend cut her off with little or no explanation, her feelings of being unworthy had started in early childhood with a mother who was emotionally unavailable and a father who physically abandoned her repeatedly. He would show up at their home for a short time, encourage her affection and attachment, then leave unexpectedly and stay away for long periods. Laurie’s parents divorced when she was five years old, and she didn’t see her father again. Her memories of early childhood were fragments of abandonments, frights, deep sadness, and aloneness.

### A myriad of fears

Laurie described herself as having been a fearful, yet very self-contained little girl—qualities she said she still had. “No one paid any attention anyway, so I learned not to reach out. But I have a terror in my heart.”

Laurie’s first fear, she recalled, was of being exiled and of being alone forever. “Exiled” was her exact word. And it certainly got my attention, because it points to an emotional state that is even deeper and emptier than abandonment. When I asked her to explain it further, she said that it was a sense of banishment, as if she

were standing at the edge of a community, not within it. She could see everyone else, but she was not included in the life they shared. She had gotten good at being alone, but she did not like it and was often afraid of it.

Her second big fear was of fire. Lastly, she had a terrible fear of dogs, especially black ones, because one had bitten her when she was a child.

Although Laurie complained of almost no notable physical symptoms, at the last moment she remembered, “Oh, and I’ve been grinding my teeth.”

### Spacey and detached

Laurie described her current state of mind as “spacey.” She wanted this feeling of detachment to “be over.” (I thought it was particularly interesting that her interior symptoms mirrored the disconnect she felt between herself and others.) She was anxious and lethargic simultaneously. She complained of a sense of being in shock: “My physical body feels alien to me.” In discussing this “spaciness,” Laurie spontaneously recalled an early experience of being suffocated by her father when she was about three years of age. Although he eventually stopped and said, “just kidding,” she described it as “frightening beyond words. It felt like I was going to die.” Even in evoking the memory of it, she began to feel clammy and breathe more rapidly.

### Two layers

I began to see two primary aspects to Laurie’s case: the first was a layer of shock and pervasive fright that resulted in depersonalization (the “spacey” feeling of not being in one’s body, similar to what

psychotropic drugs can create) and a loss of control over herself, because she wasn’t “really in there.” Her manner of dealing with that fright was to cling to those she was able to get close to, particularly the men she dated.

The second aspect of her case was the sense of being an exile, an outsider, which reflected a much deeper loss that had affected all her relationships and her self-worth. Both “layers” existed simultaneously and both figured prominently in Laurie’s current difficulties. Both had their origins in her childhood and were repeatedly validated throughout her life in painful relationships and emotional losses. Given this history, it’s no wonder her self-worth had taken a beating.

### Focusing on shock, terror

In analyzing Laurie’s case, I knew I needed to address this layer of fright first, since that was what was most intense and pronounced at the moment. To repertorize, I chose symptoms related to her feelings of spaciness or depersonalization, her many fears and frights, her sense of being in exile (alone), and her teeth grinding.

Looking at the top remedies that resulted from the repertory analysis in the chart below, I was not surprised by what I saw. With the major themes of

**She had gotten good at being alone, but she did not like it and was often afraid of it.**

	Stram.	capr.	ars.	bell.	lys.	ars.	china	haibor.	calc.	carb.	cha.
1	2	3	4	5	6	7	8	9	10	11	
8	4	3	3	3	3	3	3	3	3	3	
11	6	6	6	6	5	5	5	4	4	4	

	1	2	3	4	5	6	7	8	9	10	11
1											
2											
3											
4											
5											
6											
7											
8											

Prepared with Radar 10.5 Synthesis software.

**Laurie's focus was different enough from our first meeting that you might think we were talking about two different people here!**

	all-imp- all.	nat. m. nat. c.	phos. phos. c.	ars.	osun.	argem. argem. c.	fluor. s. fluor. c.	nat. c.	nausea. nausea. c.	thirst. thirst. c.	calc.
Clipboard 1											
1 MIND - AILMENTS FROM - friendship, deceiv. (10) 1											
2 MIND - DEATH - thoughts of (81) 1											
3 MIND - DELUSIONS - friend - affection of, has. (9) 1											
4 MIND - DELUSIONS - succeed, he does ever (23) 1											
5 MIND - DELUSIONS - unfit - world, he is unfit. (4) 1											
6 MIND - FEAR - opinion of others, of (13) 1											
7 MIND - SADNESS - right (26) 1											
8 MIND - COMPANY - aversion to (252) 1											
9 GENERALS - FOOD and DRINKS - salt - de... (115) 1											
10 MOUTH - TASTE - metallic (187) 1											

Prepared with Radar 10.5 Synthesis software.

fright and disconnectedness in Laurie’s case, I expected to see the “usual suspect” remedies of *Aconitum*, *Belladonna*, and *Stramonium*. *Stramonium* was the remedy with the highest ranking, and given the extent of Laurie’s fright and the way she clung to people she loved, *Stramonium*’s indications fit her well—terrified, yet timid; forsaken, yet clingy. This remedy is often helpful for those who remain in the grasp of terrorizing or violent experiences for a long time after the events, which is why it is often indicated for those with post-traumatic stress symptoms. Night terrors, fear of dogs, and fear of being alone are typical symptoms pointing to this remedy. I gave Laurie one dose of *Stramonium* 1M.

Over the next four weeks, I checked in with Laurie on occasion and learned that her sleep was improving, with far fewer disturbances from anxiety. Her dissociative sensations were also dissipating, with only an occasional feeling of being “spacey” or “out-of-body.” These steady improvements made her feel less frantic in general, and she reported at one point, “I no longer have the terror in my heart.”

### A “different person”?

We met again approximately one month after the dose of *Stramonium*, and I noted that, overall, Laurie’s focus had shifted. She was not talking as much about the fear (which I saw as a good sign) as she was about the friends who had cut her off. She complained about a loss of ambition or indifference to things she usually liked and a feeling that she couldn’t do anything right and could never succeed at relationships or at work. She felt that she

didn’t fit in anywhere and worried that others didn’t like her; these feelings were all worse at night. She wanted to be alone. She craved salty foods and complained about a metallic taste in her mouth.

Laurie’s focus was different enough from our first meeting that you might think we were talking about two different people here! Yet this kind of change or unfolding is a very common process in people with complex, chronic pathologies who are successfully treated with homeopathy. The person’s vital force repairs the organism in layers and stages, so that the healing is gentle and long-lasting. The first layer—the shock and fright that had resulted in a dissociation from herself and her surroundings (“spaciness”)—had to be addressed first, and *Stramonium* took care of that. Once her shock was relieved, the remaining complaints, including what Laurie referred to as “self-esteem issues,” could be properly addressed, most likely with a different remedy.

### Self-esteem and feeling loved

As Laurie described her relationships, it occurred to me that what she meant by “self-esteem” was her ability to feel loved and lovable. She noted that she had never felt really loved and, as a result, found her relationships very disappointing. She stated that when the relationships ended, she felt even more unlovable and often thought about dying as a way of ending the suffering. It was clear to me that even before the friends and lovers had done anything hurtful, Laurie was *expecting* disappointment and loss. Thus, a pillar

of the next round of analysis to find a remedy for Laurie would be the repertory rubric: “Mind, Delusions, friend, has lost the affection of.”

In repertorizing her case, I also used rubrics reflecting other aspects of her mental/emotional state such as her thoughts of death, desire to be alone, and feeling unable to succeed or





# Self-Help for Self-Esteem

In addition to seeking help from a trained homeopathic professional, here are some commonsense measures that you can employ:

## • TALK TO SOMEONE SENSIBLE

Low self-esteem issues often have a great deal to do with negative feedback loops or circles of cognitions that undermine joy, vitality, and love. These thoughts or negative cognitions feed on isolation. The antidote is having someone sensible and attentive to talk to. That can be anyone: a religious leader, a relative or friend, or a professional counselor. Negative thoughts of the kind that plague people with low self-worth issues are particularly vulnerable to examination because, in most cases, they are not true.

## • TRY BACH FLOWER REMEDIES

There are several Bach Flower Remedies that can be very helpful to mitigate some of the suffering, depending on your individual complaints. For instance, Gorse is for hopelessness, Mimulus is for trepidation and fear, and Larch is for lack of confidence and feelings of inferiority. There are 38 Bach Flower Remedies, which are diluted tinctures of wild flowers (and not homeopathic remedies). In my experience, Bach Flower Remedies do not act as deeply as classically delivered homeopathic remedies do, but they can be quite helpful for self-care and are very gentle. Developed by Dr. Edward Bach in the 1930s, flower remedies aim to bring the mind and body into balance by addressing negative emotions. The most well-known Bach product, Rescue Remedy, is actually a blend of five Bach Flower Remedies, used to calm the emotions in times of crisis, stress, or emergency. Learn more at [bachflower.com](http://bachflower.com).

## • EAT RIGHT

There is mounting evidence that we really are what we eat and drink. Sugar, in particular, is the single biggest inflammatory, toxic agent in our diet, affecting cardiovascular health, increasing cancer risk, impeding liver function, and confounding pancreatic function. It also destabilizes our emotional and mental state in ways we are just beginning to understand. The highs and lows of sugar loading (and then depriving) affect the way we feel and respond to events in our lives. We may feel more lethargic, less resilient, more easily offended and hurt, and more quick to anger; we may also suffer from memory weakness. If we want to change how we feel, cutting out sugary food and drink in our diets is an easy and sure place to start.

## This kind of unfolding is a very common process in people with complex, chronic pathologies who are successfully treated with homeopathy.

to fit in with others. I included her new desire for salty foods as well as the metallic taste in her mouth, as shown in the repertory chart on page 36.

The remedy that stood out in the repertorization was *Aurum muriaticum natronatum*. And interestingly, the next remedies in line were closely related ones: *Aurum metallicum* and *Natrum muriaticum*. Each of these three remedies is a good match for people with embedded grief and chronic sadness or the feeling of being forsaken. People who need these remedies are not often approachable when they are unhappy or hurt; even though they crave connection, they are tentative about opening themselves to receiving it, as was true for Laurie.

In deciding upon one of these remedies, I noted that *Aurum muriaticum natronatum* was the only one of the three remedies in the rubric, “Fear, opinion of others, of.” This rubric described Laurie’s hypervigilance about what others felt or thought, and it was such an important element in Laurie’s case that I weighted it strongly. In differentiating between *Aurum muriaticum natronatum* and *Aurum metallicum*, I also noted that only the former matched her new desire for salty foods.

### Stepping back in...

So Laurie received one dose of *Aurum muriaticum natronatum* 1M. After two weeks, she called and reported that within eight hours of taking the remedy, things had begun to change for her. “I don’t know, I just got back into myself,” she said. I asked her what she meant, imagining in my mind her stepping into a new dress. “As a child I had to make sure everyone was okay all the time or I wouldn’t feel safe...I had to check the emotional climate

all the time. If mom was unstable or unhappy, I had to walk on eggshells or I’d be exiled...I had to be good but it was never good enough because she’d get mad at things I couldn’t control,” she related.

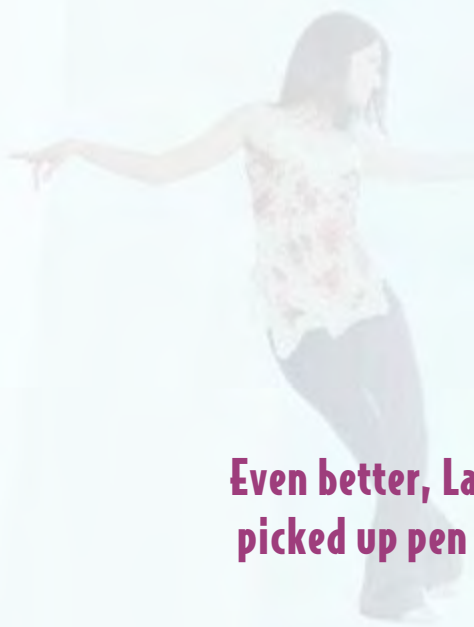
Laurie had spent years “out of herself,” not always in a dissociative way necessarily (although there were elements of that before she got the *Stramonium*) but “in other people’s heads” trying to stay one step ahead of them. If she could anticipate their needs, they wouldn’t get angry at her or leave her. Now, she was getting “back into herself” for the first time in nearly 30 years—a very good result from this homeopathic remedy!

### Healing and Hering’s Law

Laurie also mentioned that she had uncharacteristically broken out in pimples on her face and back, but that the outbreak had disappeared within a few days. This was another indication that *Aurum muriaticum natronatum* was the right choice because the outbreak followed Hering’s Law of Cure, which dictates that pathology heals from the inside out and from the top down. So it is always a good sign to see a benign discharge at a physical level (such as a mild rash or a few pimples) after, or in conjunction with, a clearing up of higher-level, mental/emotional pathology. In many cases, such physical discharges are a “return of symptoms” from long ago; but even when these discharges are not “old symptoms,” the vital force is acting in accordance with natural laws of healing.

Laurie also told me that she had started dreaming vividly and frequently, which

**What she meant by “self-esteem” was her ability to feel loved and lovable.**



was new for her, and which also was a good sign. So we let the remedy continue its action and made an appointment to speak again in a month.

### Integration and awareness

One month later, Laurie told me she had recently “started leaking again”—crying more easily and feeling more vulnera-

**Even better, Laurie has started dancing, she has picked up pen and brush to create artwork, and she has taken up pottery.**

ble to the moods and needs of others. Memories were surfacing. One memory in particular helped her realize that she was never consoled by anyone, no matter what was happening to her. She began to understand why she had clung to people who had not given her what she needed. While such realizations were not easy for her, this awareness was a fundamental part of her healing and growth; it was a function of the cognitive control that was being restored to her. So I still believed she was on the healing path, but because she complained of an increase in moodiness, I asked her to take another dose of *Aurum muriaticum natronatum* 1M.

## On the Path to Sound Self-Worth 7 remedies in the homeopath's toolbox

A well-trained, classical homeopath can often help a client improve or even overcome their issues of low self-worth or chronic self-criticism. The homeopath always takes the whole person into account—their mental, emotional, and physical symptoms—before choosing a remedy or series of remedies specially tailored to that individual. Improvement usually takes place over time (not overnight), with the homeopath monitoring the healing process and fine-tuning the treatment as needed. Because great skill and objectivity are required by the homeopathic practitioner, self-esteem issues are not appropriate for homeopathic self-treatment.

There are hundreds of possible remedies that a professional will choose from, depending on the person's unique symptoms. What follows are seven of the more commonly used remedies for people suffering with low self-worth and a thumbnail sketch of key indications

*Aurum metallicum*. Derived from the Latin word for “shining light,” *Aurum* means gold and the people who seem to respond best to the homeopathic remedy prepared from metallic gold are those who feel the most darkness. They often appear to be highly capable, ambitious, and dutiful, and they feel it acutely when they do not live up to their own expectations. They can be self-reproaching and suffer with the delusion that they are failures. They are not emotionally expressive and tend to internalize their longings and their pain.

*Natrum muriaticum*. This homeopathic remedy, made from table salt, is indicated in people who are terribly worried about hurting others and being hurt emotionally. They are reserved even to the point of aloofness and tend to hold resentments when they have been offended or wounded. Indeed, *Natrum muriaticum* is almost all about retention; just as salt retains water, the person needing *Natrum muriaticum* retains suffering and bristles when someone tries to console them, even though they may quietly crave consolation. Because people needing this remedy are so self-contained, it may be hard for others to see the *Natrum muriaticum* person's sadness, loss, or shame.



*Lac caninum*. The state of a person needing this remedy (prepared from dog's milk) can be one of sadness and self-loathing. They are disgusted with themselves in many ways, such as the way they look, the way their bodies' function, or the way they have or don't have friends. They suffer from pains and inflammatory affections that travel from side to side, back and forth. They are full of the worst imaginings; they fear being left alone, worry about becoming insane, and feel themselves to be hopeless, friendless, and incurable.

*Thuja*. While mostly known as the great anti-sycotic (miasm), post-vaccination remedy, *Thuja* has a multitude of applications at the most profound intra-psyche level. People needing this remedy are The Great Pretenders, able to compensate for a litany of insecurities by projecting an image of competence. They are chameleons, so sensitive to the opinions of others that they can anticipate not only what others need, but who they themselves need to be in order to secure that good opinion. This is driven by an abiding feeling of worthlessness and fear of failure.

*Sulphur*. This greatest of polychrest and anti-psoric (miasm) remedies, *Sulphur*, is an element at the heart of the earth itself. This may be a perfect metaphor for people needing this remedy, who may believe that the world revolves around them. Of course, this is a very disappointing world view. The individual who needs *Sulphur* may seem quite a bit like the one needing *Aurum* in that he holds very high expectations for himself. The person needing *Sulphur*, however, believes himself to be destined for greatness and though he has a reputation for disorganization and physical laziness, he can be a tremendously hard worker. He is a philosopher, a dreamer, an inventor of great things, but the world often fails to cooperate with his dreams. When that happens, he falls into a chasm of self-reproach, longing for the good opinion of others.

*Baryta carbonica*. Timid, full of anxiety and anticipation, clinging to those who provide her with security or reassurance, very worried about what others think, and fearing that they may see all the things that are wrong with her, the person needing *Baryta carbonica* lacks confidence, is forgetful, easily overwhelmed, and quick to feel like a failure when things go wrong.

*Anacardium*. Some people see *Anacardium* as the Jekyll-Hyde of remedies. The person needing it is highly antagonistic with himself, having what feels like two wills in one person. He wants this, but then, on the other hand...wants that. He is cowardly in some ways yet can be enraged and aggressive from even the slightest offense. His deep insecurity gives vent in delusions of offense, persecution, and despair.

## When we last spoke, she was putting the final touches on a pottery collection that, in her words, looked absolutely wonderful—so much so that she has plans to bring it to art galleries.

Over the next nine months, Laurie continued to progress. She occasionally took another dose of *Aurum muriaticum natronatum* 1M when it seemed that a bit of her old feelings of being “moody” or “unlovable” were beginning to creep back, and each time, she bounced back onto the path to healing.

Eventually, the effects of a dose of the remedy seemed to last for shorter and shorter periods (e.g., two or three weeks instead of a month), which led me to increase the potency and have Laurie take a dose of *Aurum muriaticum natronatum* 10M. Within three hours of taking that dose, Laurie started to expectorate mucus and develop strong symptoms of an upper respiratory infection—yet she did not feel “sick.” She had no inflammation or fever either and, in fact, she felt emotionally better than ever throughout this two-week “illness.” Because Laurie had suffered with pneumonia and many bouts of upper respiratory infections as a child, her “new illness” was actually an excellent sign of healing, with its return of old symptoms and discharges, along with improvement in the mental/emotional spheres.

About four weeks after Laurie took the dose of *Aurum muriaticum natronatum* 10M, she came into the office looking notably brighter. She sat down and said firmly: “I can be myself and not give it all up to someone else.” In fact, she had recently experienced the loss of a friendship she had come to really enjoy, but this time she said, “It’s not me. It’s him. I didn’t do anything wrong. I know I was a good friend to him. He’s just got issues of his own.”

### Unfolding and blossoming

What a difference in demeanor and cognition between the young woman who

now sat confidently in front of me, rationally assessing her healthy social life, and the one who had fearfully dragged herself into my office about a year earlier, afraid of her own shadow and out of touch with herself and others!

It has now been five months since that one dose of *Aurum muriaticum natronatum* 10M, and Laurie has needed no further doses. Happily, she is no longer plagued by night terrors, deep fears, or strong feelings of being unlovable. She is not afraid to be alone but, with a newfound confidence, she gravitates towards others—seeking out and forming true friendships for the first time in her adult life. She no longer worries about “self-esteem issues” either. Her taste for salty foods is still there but has moderated, and the metallic taste in her mouth is long gone.

Even better, Laurie has started dancing, she has picked up pen and brush to create artwork, and she has taken up pottery. When we last spoke, she was putting the final touches on a pottery collection that, in her words, looked absolutely wonderful—so much so that she has plans to bring it to art galleries.

### Building real self-esteem

When Laurie first walked into my office, I quickly learned that what she described as “self-esteem issues” were much deeper than anything a self-esteem program at school or a self-help book could address. For this young woman, self-esteem issues really meant a lonely, fear-filled childhood that had never been resolved. And for her, classical homeopathy—careful homeopathic case-taking and remedies tailored to her individual needs—was the answer. Homeopathic treatment allowed Laurie’s real potential to unfold, so that she began to feel that she mattered in the

world. Once she felt that she mattered, she could start giving of herself with her artwork and more. This is the kind of “self-esteem building” that rests firmly on a solid foundation.

Of course, there are other ways to address feelings of low self-worth and related emotional concerns. You may benefit from reading a self-help book or taking a class on building self-esteem if your issues are relatively superficial. But if they are more deep-seated and longstanding, you will derive the most benefit from seeking out another attentive human being who is either a trained therapist or a trusted, kind, and good listener—*along with* getting help from a trained, attentive homeopathic practitioner. (See “Self-Help for Self-Esteem” on page 37.) Before I added homeopathy to my social work/therapy practice 20 years ago, I got good results with clients—but not the kind I get now. With the addition of homeopathy, stories of complete transformation like Laurie’s have become the norm rather than the exception.

Using homeopathy to help turn around someone’s life... or, as Hahnemann put it, to allow them “to pursue the lofty goals of human existence,” is a privilege and an honor.

### ABOUT THE AUTHOR



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# Perimenopause & Unpredictable Periods

## Sweet Solution: How one Pilates instructor avoided a hysterectomy

by ALICIA GONZÁLEZ, ND, DHANP, CCH

**They tell me my only options are to go on hormones or have a hysterectomy.**

**I** don't know what to do. I've always had issues with heavy periods, but this is too much. I am a Pilates instructor, and I can't risk problems during a class. I can't easily run out to take care of a situation while I'm teaching, if you catch my drift. Once I was shopping at a second-hand store, and I started bleeding so heavily I had to buy new clothes and change there."

Victoria was 51 years old but appeared younger. She was tall, slender, and physically fit, with a stylish haircut and youthful clothing. "For the last year, my periods have been irregular, not every 28 days like before," she told me. "And when they arrive, they're heavier and last longer. Sometimes 10 days or more. Like this month... right now, I've been bleeding for *20 straight days*."

"The gynecologists say this is the start of menopause. They tell me my only options to control the bleeding are to go on hormones or have a hysterectomy. And I'm not comfortable with either of those choices! But I'm getting desperate ... that's why I'm hoping you might be able to help."

### High-energy instructor

Victoria described her menstrual bleeding as very heavy, watery, bright red, and filled with clots. The flow increased with exercise, which was especially problematic for her as a movement instructor. An unusual aspect of her bleeding was that despite the heaviness and clotting, she rarely experienced any pain or discomfort. And in spite of all the blood loss, she did not become anemic. "I'm a very high-energy person," she said. "I haven't really felt tired during these bleeding episodes."

Victoria seemed restless during the consultation and kept looking at her watch as if she had somewhere else to be. "I am an active person," she told me. "I enjoy skiing, jogging, Zumba, and Pilates. I tend to

be involved in a lot of projects all at once. My husband gets upset with me because he says I don't spend enough time with him.

"I have been feeling down lately. I tend towards people pleasing. I do things to please others, but I do not stay true to my own needs and feelings. I stay busy all the time, meeting with people for fun or for work," she said. In addition to teaching Pilates, Victoria had recently started a non-profit organization. "While I find it fulfilling, it can be too much. At times I don't pay attention to my own needs or feelings, and I get burned out. I get to the point where I need no conversation and no demands on my time. I try to say 'no,' but then I feel like I'm letting everyone down because I can't be there for everyone. Friendships are important to me. Issues with relationships can make me anxious. I am not good at setting boundaries, so I can end up feeling abused or taken advantage of."

### Family issues

"Lately I don't have the capacity I usually have to work at night, or during the day for that matter, on the business of the organization, so I am falling behind. My husband is needy when I'm home, so I feel guilty working when he is up. When he goes to sleep, I want to work, but I don't want to work. I want to do nothing—numb out. So I feel guilty about that," Victoria continued.

"I have a son, Joshua, with cerebral palsy. He was diagnosed soon after birth. I had trouble bonding with him initially. He is now an adult and can't care for himself. I love him very much but feel trapped by him at times. His father, my ex-husband, is very protective of him. We share custody, but the reality is that I do most of the caretaking. My ex-husband and I have been talking lately about his desire to move back east and take Josh with him. A part of me feels that it is his turn to



take care of our son. I am limited to how, where, and when I can travel, due to my son's needs, my ex-husband's protectiveness of him, and my current husband's needs for my time. I lived overseas before my first marriage and have always had a desire to do more traveling. I am looking for more freedom," she said.

### Canker sores, chocolate, cheese, wine

Victoria's only other health complaint was canker sores in her mouth and throat. "I usually get a canker sore when I bite my cheek or eat bad. I love chocolate, cheese, and wine, but they all tend to make the sores worse. The canker sores used to heal up after I finished my period, but now they seem to be there all the time. As soon as one goes away, another pops up. The canker sores all started when I went on birth control pills when I was in my early 20s."

### Trial... and error

In analyzing and repertorizing Victoria's case, I first chose the remedy *Phosphorus*. Her heavy, uncontrolled bleeding, lack of boundaries, socially outgoing personality, and anxiety when she felt a friendship was being threatened seemed like classic *Phosphorus* symptoms. (See repertorization chart at right.) So I was very surprised when, after a trial of *Phosphorus*, Victoria experienced no changes at all.

When varying potencies of *Phosphorus* didn't work either, I decided to consider the more classic "heavy menses at menopause" remedies. I tried *Kali ferrocyanatum*, which is indicated for heavy menses with profuse hemorrhage that is remarkably painless; but it did not help. Next I tried *Erigeron* for hemorrhage that is worse from least motion—but to no avail. Then I tried *Ustilago* and later *Sabina*, both useful remedies for excessive menses especially when approach-

## The flow increased with exercise, which was especially problematic for her as a movement instructor.

ing menopause, but Victoria's troubling symptoms remained.

The irregularity of Victoria's menstrual cycle made it extra difficult to judge whether the trials of these various remedies were helping or not. Right when it seemed we were making progress, she would end up having another heavy period. After repeatedly "striking out," I knew I had to rethink how I was approaching Victoria's case.

### A different strategy

So I stopped thinking about remedies for heavy bleeding and began thinking about Victoria and what aspects of her character really stood out for me. One remarkable thing was Victoria's incredible energy level. Even after 20 days of bleeding, she was not anemic and reported an energy level of 9 out of 10! This made me remember a course I took from one of my mentors, Krista Heron, ND, on "stimulant remedies"—homeopathic remedies made from

substances that are stimulants, such as *Coffea cruda* sourced from coffee and *Thea* from tea. I recalled learning that people needing stimulant remedies often have excessive energy levels. After finding and rereading my notes from the course, I realized that the remedy Victoria needed was *Chocolate*. Yes, that's right—a homeopathic remedy made from dark Belgian chocolate!

### Chocolate!

Chocolate comes from the edible seeds of the *Theobroma cacao* tree, which is native to the tropical regions of the Americas. In the 1500s, the Spanish explorer Hernán Cortés brought the hot chocolate drink to Europe from Mexico, and it quickly spread around the world. Because of chocolate's immense popularity, homeopath Jeremy Sherr decided it would make a good subject for a homeopathic proving (i.e., pathogenetic trial) to determine its usefulness as a homeopathic remedy. Sherr's 1993 proving of pure dark Belgian

	Total Rubrics	Choc.	Phos.	Sep.	Lach.	Calc.	Merc.	Nux-m	Irr.	Ign.
GENERALITIES; RESTLESSNESS, physical (128)	1	1								
MIND; AVERSION; husband, to (12)	1	1								
MIND; CHEERFULNESS, gaiety, happiness; tendency (290)	1	1								
MIND; COMMUNICATIVE, expansive (9)	1	1								
MIND; COMPANY; desire for (104)	1	1								
MIND; EXCITEMENT, excitable; tendency (373)	1	1								
MIND; IMPULSIVE (37)	1	1								
MIND; INDIFFERENCE, apathy, children, to her (7)	1	1								
MIND; INDUSTRIOUS, mania for work (117)	1	1								
MIND; LAUGHING; tendency (166)	1	1								
MIND; LIGHT; desire for (20)	1	1								
MIND; OPTIMISM (21)	1	1								
MIND; POSITIVENESS (14)	1	1								
MIND; SOCIAL; inhibition, lack of (5)	1	1								
MIND; TRAVEL; desire to (34)	1	1								
MOUTH; ULCERS (172)	1	1								
FEMALE; MENSES; frequent, too early, too soon (298)	1	1								
FEMALE; MENSES; profuse (311)	1	1								
FEMALE; MENSES; protracted, prolonged (160)	1	1								

Repertorization using MacRepertory software

## Yes, that's right—a homeopathic remedy made from dark Belgian chocolate!



chocolate showed that homeopathically prepared *Chocolate* has an affinity for conditions of the circulatory and hormonal systems. The menstrual cycle is often affected, with heavier and longer menses. Other symptoms are often tied to the menstrual cycle, becoming worse during the menstrual period or after starting birth control. People who need this remedy may crave chocolate but feel worse after they eat it.<sup>1</sup>

Victoria's heavy, prolonged menstrual cycle fit this homeopathic *Chocolate* profile. So did her canker sores, because they were associated with her cycle and had appeared after she started birth control pills. Her craving for chocolate, which made her feel worse from canker sores, also fit the profile for this remedy.

### Psycho-emotional profile

Victoria's mental and emotional aspects fit the homeopathic *Chocolate* profile as well. As Krista Heron, ND, notes: people who need homeopathic *Chocolate* “are overactive and restless with a desire for activity and an inability to keep still. Mentally, they are easily distracted. They are productive, but their work is a means to escape depression. ... They complain about their full life, yet they are their own worst enemy.

“They can feel encaged, a kind of prisoner doing something they don't want to do. They are like a hamster on a wheel, running for someone else. They can complain about their loss of freedom. They use the excuse of needing freedom as a defense. They may or may not like children but don't like looking after them. They don't like to nourish them any longer than necessary.

“Once they have finished their work, they must face their lack of satisfaction and that now there is nothing left to do. [A person needing] *Chocolate* can finish a project, but all their successful and efficient over-activity leaves them unsatisfied. ... It is then they must face their depression. This is what they want to avoid at all

costs ... feeling their emotions. They have to constantly look active, joyful, and smiling in company. ... they avoid feeling and reflecting by staying active. They cannot stand solitude because it means being with their painful feelings.”<sup>2</sup>

People needing homeopathic *Chocolate* can have an aversion to loved ones, especially their husband and children. They have a desire to flee from them and abandon them. Once they have reached a burned-out stage, they can be mentally dull and inactive, with a desire to sit and stare, with considerable confusion and inability to concentrate.<sup>1</sup>

This description of *Chocolate's* indications fit Victoria well. Her need to stay active was her way of avoiding thinking about the stresses in her life, including her son, husband, and ex-husband. She desired more freedom but felt trapped by her circumstances. The busier she stayed, the better she was able to keep her mind off her troubles and keep from feeling down. But the more she worked, the more burned out she got, and then depression started setting in. At that point, she desired solitude as a means of rebooting, so that she could start all over again.

### Sweet success

I prescribed homeopathic *Chocolate* for Victoria in the LM1 potency, eight drops twice daily. She noticed an effect almost immediately. Her next menstrual period arrived on schedule, 28 days after the previous one, and this time it was 6 days of normal bleeding—the first “normal” period she'd had in over year! Victoria was thrilled with this outcome as she'd been suffering and worrying through heavy periods for the entire previous year. In addition, Victoria experienced a flare-up of canker sores that was worse than usual for her. In the eyes of a homeopath, such an aggravation of symptoms when starting a remedy can be a sign that the person is responding well to the remedy, especially if improvement soon follows.

I was encouraged by these results but

knew we would need to monitor Victoria over a number of menstrual cycles before we could be certain homeopathic treatment was helping. I continued to see Victoria for the next year, and her periods continued to arrive more regularly, last for a shorter time, and flow in more normal amounts than in the previous, very difficult year. On two occasions when her bleeding was slightly heavier than normal, I chose to increase the dose of *Chocolate* to LM3 and then to LM5, and the menstrual periods that followed were back to being within more normal ranges of flow.

Now, more than a year later, Victoria is feeling much better than she was before homeopathic treatment. She no longer has heavy menstrual periods. Recently, they have started becoming lighter and less frequent (probably a prelude to actual menopause) but they are not causing her any problems. She is able to continue her work as a Pilates instructor without worrying about having to rush out in the middle of class to change her clothes.

Victoria says her relationships with her husband and her ex-husband are less stressful than there were, too. She still has a tendency to be very active in her organizational work, to “overdo it and crash and burn,” as she puts it, “but I'm working on that,” she says. “I am finding that I am able to say ‘no’ more often in order to take care of myself. ... And I'm especially glad I didn't need to get that hysterectomy my doctors were recommending!”

<sup>1</sup> Vermeulen, Frans. *Synoptic Materia Medica 2*, pgs 262-265.  
<sup>2</sup> Heron, Krista. *The Amphetamine-like Remedies*, pg 38.

### ABOUT THE AUTHOR



Alicia González, ND, DHANP, CCH is a naturopathic physician who has a specialty interest in brain health. She is the medical director/owner of Serene Natural Health in Edmonds, WA. The doctors at her clinic specialize in brain health disorders including mental and behavioral issues, the autistic spectrum, and neurological disorders. She is board certified in homeopathy and has also received Level 4 training in craniosacral therapy.

# How I Eliminate



Manage your  
menopause,  
naturally!

# ed Hot Flashes in 3 Weeks...

*without diet or exercise*

by CRISTINA CANTU, ND

**I**f you are going through perimenopause or menopause, pay attention. I want to show you how to leverage natural medicine to get relief from your hot flashes and other menopause symptoms.

In these pages, I've outlined the strategy I used for one of my clients. Thanks to natural medicine, her hot flashes were gone in three weeks. And the best part is—they have not come back!

For 10 years, I've been using natural therapies to help women get relief from troubling menopause symptoms. I want to share the most powerful things I've discovered to help you decrease your own hot flashes. And there is no better way to do that than to show you a real-life example.

### **The client: Belinda**

Belinda, age 52, had been suffering with extreme menopausal symptoms for *five years* before coming to me for help. She had never used natural medicine before and was skeptical it would work.

However, her intense hot flashes and night sweats had been going on for so long that they were taking a toll on her career, her relationships, and almost every other aspect of her life. At this point, she was willing to try just about anything to see if it would help her.

### **The symptoms**

Belinda had hot flashes, night sweats, anxiety, and extreme irritability. Here are some more details:

*Hot flashes:* Belinda would have a hot flash every 10 minutes ... *waking and sleeping.* It would start from below and move up to her face. The heat was intense, and she said it felt "like someone has poured hot water all over me." She felt faint and weak during a hot flash, and it would last two to three minutes.

Just beforehand, she would get a strange feeling as if something really horrible was going to happen. When the hot flash was over, she was drenched in sweat all over her body, and her face was bright red.



## Belinda would have a hot flash every 10 minutes ... waking and sleeping.

With the hot flashes happening so often and for so many years, Belinda was feeling exhausted and weak most of the time.

*Anxiety:* Belinda's hot flashes had been going on for so long that she had developed anxiety about them. She felt that she would never be able to escape from them and that her life would never be enjoyable again.

And because the hot flashes would strike so often, she was anxious about where she might be when they happened. She was very conscious of being embarrassingly sweaty, red-faced, and annoyed in front of people. During a hot flash, she wished she were alone, and she did not want others around her.

*Night sweats:* Belinda's night sweats were just like her daytime hot flashes. Of course, the distinct difference to her was that they were happening at night, so she would feel the sweat more profoundly since she was surrounded by bedding and bedcovers.

Not only that, they were waking her so often that she was not getting a good night's sleep, and she hadn't ever

in the five years since the hot flashes began. This, of course, was making her anxiety even worse.

*Irritability:* Belinda used a choice word for this emotion that I cannot share here, but I can tell you it rhymes with "witch." Needless to say, five years of scalding hot flashes and waking multiple times a night, combined with exhaustion and weakness, had taken a toll. Belinda no longer wanted to be around people, even her husband and children. She felt that if she were alone forever, it wouldn't be the worst thing in the world.

### The strategy

I realized that with Belinda, I didn't have time on my side. If she didn't see progress soon, she would lose hope. With that in mind, here is what I did: Belinda's symptoms were so severe and so striking to me, that I decided to focus on homeopathic medicine for helping her overcome them.

In addition to her main menopause symptoms, Belinda brought up a few things that stood out to me because they were so strange or intense. From a homeopathic perspective, they are important and, combined with the main symptoms, they indicate which homeopathic remedy to select:

Belinda was particularly sleepless after 3:00 a.m. Although she would wake all night from the hot flashes, she could never really go back to sleep or feel sleepy after this particular hour.

She was very easily offended by others. If a colleague merely looked at her the wrong way, it was enough to offend her, and she would feel insulted all day by it.

She was *very* sensitive to noise. She didn't even like the sound of a fan running. She had an intense desire to eat pickles every single day. And whenever she could, she would pour pickle juice on her salads.

Based on these symptoms along with her ascending hot flashes, her anxiety that caused an aversion to company, her

intense irritability, and her indifference to her family, I selected the homeopathic remedy *Sepia*. I recommended she take *Sepia* 30c, three pellets once a day, every day for four weeks, and then return for a follow-up visit.

I also encouraged Belinda to change her diet and begin exercising (which is incredibly beneficial to the menopausal woman ... see sidebars on pages 18 and 19), and I was ready with specific recommendations and resources for her—but she wasn't interested. She said she didn't want to invest a whole lot of energy into other things because she simply didn't have it, and she asked if she could work her way up to that. I agreed to that set-up because of her exhaustion. I didn't want to overwhelm her, even though I knew that if she did these things, she would likely see results faster.

I did not recommend any other supplements or herbs for two reasons: I wanted to isolate the agent responsible for improvement, should she experience any, and Belinda had made it very clear she did not want to be on multiple things.

Fair enough. And it is always best to start simple.

### Real results

Even though Belinda was supposed to follow up with me in four weeks, she cancelled her appointment.

Then, three months later, she called and said she wanted to follow up. She told me: "I didn't get back to you for three months because my hot flashes disappeared!"

She had noticed a difference almost immediately. Within the first three days, she stopped having night sweats, and she was actually able to sleep through the night for the first time in years. She still had hot flashes during the daytime but they weren't as severe, and her face wasn't turning red anymore. By the end of a week, the daytime flashes were reduced to about half of what they were, and the night ones were still gone. By the second week, she actually had energy and was feeling "alive again."

The foreboding and anxiety she usually felt before a hot flash decreased

At this point, she was willing to try just about anything to see if it would help her.



during the first week and disappeared by the end of the second week. And her overall anxiety level dropped by about 50 percent after two weeks and declined to zero after three weeks. This was when Belinda started to want people around again. She began calling friends and socializing. This was also when she realized she was no longer irritable.

It was at the end of the third week when Belinda was at dinner with some co-workers on an outdoor patio on a

summer night when she realized she hadn't had a hot flash all day! And things have stayed that way for her ever since.

I followed up with Belinda for two months after this, and she remained free of the hot flashes, night sweats, exhaustion, anxiety, irritability, and indifference to family and friends that had crippled her for so long. At that point, we agreed that she no longer needed to follow up with me anymore but that she would be in touch if any troubling symptoms were to return.

**Belinda's hot flashes had been going on for so long that she had developed anxiety.**

## Homeopathy & Menopause

### Eight great remedies

In my experience, the eight remedies below are the most helpful in addressing menopause symptoms. Approximately 89 percent of my clients seeking help for such symptoms started their homeopathic care on one of these eight remedies, and 94 percent of them experienced significant relief within four weeks.

**Sepia:** Sudden, frequent, hot flushes at menopause preceded by weakness and anxiety, followed by perspiration and tendency to faint. Heat starts low and moves upward. Heat flushes mainly in the face, followed by redness. Dwells on past disagreeable occurrences. Poor memory. Confuses words. Clumsy. Yellow-brownish skin color across the nose and cheeks. Constipation. Urging and involuntary urination, especially at night. Great dryness of the vagina. Wakes with violent beating of heart. Sleepless at night especially after 3:00 a.m.; feels as if hot water was poured on her. Chilly. Worse from cold and in afternoon. Better from vigorous exercise and warmth. Indifferent to loved ones. Irritable, offended easily, critical, intolerant of contradiction. Sensitive to music, noise. Desires vinegar, sweets.

**Sulphur:** Feels too hot; flushes of heat move upward. Very forgetful; thinking is difficult. Top of head hot. Lips dry, bright red, burning. Heat and burning in face with flushing. Hot flushes with hot head, hands, and feet followed by faintness in stomach. Feels suffocated; wants doors and windows open at night. Burning in soles and hands at night. Frequent waking at night with heat, anxiety, restlessness. Difficulty falling asleep, with sweaty, itchy, burning skin, worse from scratching and heat. Worse in morning and from standing. Better in open air and from sweating. Irritable, depressed, quarrelsome, impatient, critical. Sensitive to odors. Thirsty with dry mouth.

**Pulsatilla:** Feels insane during menopause. Puffy, red face with frequent flushes. Feels as if urine were impossible to delay; involuntary urination at night. Heavy blood flow; vaginal discharge and itchiness at menopause. Wakes frequently; sleepless from an anxious sensation of heat; intolerable burning heat at night. Burning hands; internal heat without external heat. One-sided perspiration on head and scalp. Worse from warmth and in evening. Better in cold and open air. Cries easily. Contradictory. Not thirsty. Sensitive; better from consolation. Symptoms change constantly.

**Phosphorus:** Burning sensation as if a flame was passing through her, especially at night. Feeling of intense heat running up the back. Lowness of spirits. Loss of memory. Brain feels tired. Anxious about many things especially for others. Fear something bad will happen. Lacks willpower to undertake anything. Burning heat in face and hands, followed by redness of

cheeks and anxiety; flushes from the least emotion. Tension over the bladder region; burning with frequent urging to urinate. Flushes all over beginning in hands, which causes frequent waking. Profuse perspiration at night on head and hands, followed by chills. Worse from cold and mental exertion. Over-sensitive to noise, light, odors. Sympathetic. Fears thunderstorms. Desires ice cold water, ice cream.

**Conium:** Memory weak; forgetful with excessive difficulty recollecting things, especially dates; unable to sustain any mental effort. Top of head unusually hot; face hot. Soreness in uterus region. Muscular weakness, especially of lower limbs. On dropping to sleep, hot flushes or sweat through the whole body. Great heat internally and externally with nervousness. Most profuse sweat is on head and upper body. Aversion to people. Dwells on past. Sensitive to noise.

**Calcarea carbonica:** Sweats easily and during sleep. Cold perspiration about the head, hands, and feet. Apprehensive. Forgetful with anxiety and palpitation; misplaces words and expresses herself wrongly. Despairing and hopeless of ever getting well. Heavy blood flow during menopause. Restless at night with a dry heat but with cold sweat on the head, neck, and chest. Frequent flushes with anxious palpitation followed by chill and cold hands. Frequent attacks of sudden general heat as if she had been drenched with hot water. Sweats even in a cold room.

**Magnesia carbonica:** Irritable and restless. Burning during urination. Sleepless from anxious uneasiness and internal heat with great dread. Whole body feels tired and painful. Great internal heat at night with night sweats but averse to uncovering. Heat on right side, with burning and redness of head.

**Lachesis:** Flushes of heat and rushes of blood. Weakness of whole body in morning on rising. During heat, must loosen clothes around neck because of suffocating feeling. Weak memory; mistakes in writing and speaking. Violent burning during urination. Menopausal palpitations, hemorrhages, headaches at top of head, fainting spells, persistent bloated feeling, uterine prolapse. Flushes of heat all day; cold flushes, chills, heavy bleeding at night. Nightly burning in palms and soles. Sleepless from anxiety and internal restlessness. Hot flushes on top of head or in hands and feet at night, with headache. Hot perspiration around neck. Profuse sweat wakes her up at night. Worse from sleep, heat, tight clothes. Better in open air, from cold drinks, from loosening clothes. For women who have never felt well since starting menopause, even if it has been years.



Within the first three days, she stopped having night sweats, and she was actually able to sleep through the night ...

## Get Moving!

*Moving through menopause reaps multiple rewards*

Women who exercise regularly experience 65 percent fewer hot flashes than women who don't exercise regularly.\* And the hot flashes that they do get are shorter and less intense! This is enough to get even the most stubborn of my clients to at least take the scenic route to their mailbox.

### More benefits

Exercise can benefit women going through menopause in many other ways, too:

- Makes weight loss easier: reducing that stubborn belly fat so many women going through menopause mention
- Helps you fall asleep faster and stay asleep longer: reducing insomnia and night waking
- Gives you more energy that lasts throughout the day: battling the eternal fatigue that women report can be the bane of their existence
- Boosts short-term memory function and other cognitive abilities: overcoming the brain fog that affects many women in menopause and makes them confused and frightened
- Alleviates anxiety and depression symptoms: lifting these common concerns that often accompany the beginning of menopause
- Boosts good cholesterol while reducing bad cholesterol: protecting menopausal women from heart disease, stroke, and high blood pressure
- Builds bone naturally: protecting women from osteoporosis.

Of course, the benefits don't end there, but these are the most relevant to the woman going through menopause.

### What & how much?

The next question I usually get is a practical one: "What should I do for exercise?" The answer: absolutely anything you want. There is not one form of exercise that's superior to another, and that is the absolute truth. Your body doesn't comprehend the

difference between different forms of exercise, per se. All it perceives are the benefits of increased circulation, toned body parts allowing easier and stronger movements, more oxygen being delivered to the muscles and the tissues, and increased levels of chemicals that benefit brain health.

**Big tip:** Make sure you choose something you actually enjoy. If you hate the elliptical or any other fitness machine, please avoid a gym membership. Pick something you will actually look forward to doing the next time you do it. And if you need several different forms of exercise to prevent you from getting bored, no problem! Dance, walk, run, skate, skip, do tai chi or yoga, take a movement class, or whatever you like! Keep alternating the form of exercise, and to provide maximum benefit, even alternate the days you do them on.

Any form of exercise is going to benefit you physically, but this next bit of information is extra important because it involves the brain: whatever you choose to do, make sure that it provides you both cardiovascular exercise and resistance training. A substantial amount of medical research points to the combination of the two being the best prevention against cognitive decline.

Any exercise is better than no exercise at all, and everyone has different needs, so the frequency of exercise recommended will differ for everyone. For most people, however, 30 to 45 minutes three to four times a week is associated with the best results physically, mentally, and emotionally.

\*<http://www.fhcr.org/content/dam/public/Treatment-Support/survivorship/Healthy-Links/Menopausal%20Symptoms.pdf>

### Analysis

Because there weren't many moving parts to Belinda's health plan, there is no need to break it down and assign agents responsible for specific results. Homeopathic care was, indeed, a success. Not all cases are like this, and the speed with which Belinda improved is extraordinary. After studying her case, I concluded that the strategy of using *only* homeopathy worked well for two reasons:

**Complete honesty:** Belinda shared very uncomfortable feelings, symptoms, and characteristics about herself with straightforward and precise descriptions. (For example, being "witchy," easily offended, and annoyed by her own loved ones.) Such details may be of little interest to the typical medical practitioner or gynecologist. But to a homeopathic practitioner, these details are vital. And these were the details that were most helpful to me as I looked for the remedy most appropriate for Belinda.

**Awareness:** Belinda was very much in tune with her symptoms. Women going through menopause frequently are, since the symptoms can be intense, but Belinda's level of attention was unique. She knew exactly when her symptoms happened and how they happened, in detail. And this was precisely the type of information I needed to find the remedy that helped her. Belinda's case would have been harder to crack if she had not paid attention to the information her body was communicating to her and had just expected some quick fix in a bottle.

So there you have it: how I naturally eliminated hot flashes in three weeks—without diet or exercise.

### Clinical experience

About 50 percent of the clients who seek my help are suffering with intense meno-

By the second week, she actually had energy and was feeling "alive again."

pause symptoms. For each woman, I carefully arrange a plan that is customized for them and their situation; it may include homeopathy, diet and lifestyle recommendations, and other natural medicine suggestions. (Although I made an exception in Belinda's case, I usually encourage my clients to make healthy diet and lifestyle changes that are proven to benefit them.) Within three months of following their individualized plan, most clients feel 85 percent better from their hot flashes, night sweats, anxiety, mood swings, irritability, and insomnia.

In the sidebar "Homeopathy & Menopause: Eight great remedies" on page 17, you'll find short descriptions of homeopathic remedies that I've found most useful in helping clients struggling with menopause symptoms. Approximately 89 percent of my clients seeking help for menopause symptoms started their homeopathic care on one of these remedies, and 94 percent of them had experienced significant relief by their first follow-up appointment four weeks later.

Also, see "Get Moving" on page 18 and "The Power of Food" on page 19 for general ideas on the type of lifestyle advice I often offer my clients.

In these pages, I hope you find some ideas and encouragement for relieving your own hot flashes and bothersome menopause symptoms!

#### ABOUT THE AUTHOR



Cristina Cantu is a graduate of Southwest College of Naturopathic Medicine. Known and highly regarded for her skills as a homeopathic expert, Cristina has earned a reputation for taking on challenging cases, especially in anxiety, depression, and menopause. She shares proven strategies and systems from her 10 years of experience to provide people with true leverage to help them feel better. After successfully helping hundreds of people, it is her utmost hope that she'll be able to help you do the same. Find her at: [Facebook.com/CristinaCantuND](https://www.facebook.com/CristinaCantuND)

\*In full agreement with the Texas Medical Board, Cristina Cantu is required to inform the public that naturopathic doctors are not licensed in Texas at this time. This means they are not able to serve as primary care physicians in Texas, however they can still be seen for consultation regarding health and wellness.



# The Power of Food

*Eat for relief, eat for health*

For some women, diet is the *only* thing they'll ever have to tweak in order to reduce their menopause symptoms. It is *that* powerful.

### Avoid these

Here are the major food culprits that aggravate common menopause symptoms.

- Caffeine
- Sugar: candy, ice cream, baked goods, sodas, cereals
- Spicy Foods
- Alcohol
- Refined/Processed foods: chips, frozen ready-to-eat meals, ready-to-eat meals that come in a box, fast food, breads, cookies, packaged snacks, anything with refined flour
- Saturated Fats: red meats, butter, full-fat cheese, fried foods
- Animal Protein and Animal Related Products: red meat, chicken, cheese, eggs, milk

### Eat more of these

If you focus most of your dietary attention on the foods mentioned below, you will:

- Lower your cardiovascular risk of negative events
- Keep your blood sugar and blood pressure low
- Create a nutrient-rich environment that will preserve your bones, protecting you from osteoporosis and fractures
- Enhance your immunity by boosting your vitamin and mineral status
- Keep your moods even
- Prevent weight gain
- Enhance your brain health, boosting memory and focus.

**Vegetables:** fresh or frozen, as well as cooked, but avoid canned. Feel free to have as many as you like. Eat *lots of* romaine lettuce, carrots, snow peas, cucumbers, tomatoes, kale, collard greens, broccoli, string beans, peas, cauliflower, asparagus, zucchini, radishes, artichokes, Brussels sprouts, bok choy, dandelion greens, spinach, bell peppers, mushrooms, onions, celery, eggplant, and any other greens.

If you struggle with high blood sugar or have trouble losing weight, **avoid:** potatoes (sweet and white), yams, pumpkin, squashes (winter, butternut, and acorn), parsnips, corn, and both regular and water chestnuts.

**Fruits:** fresh or frozen. Enjoy up to three to four servings of fresh fruit (avoiding canned or dried): blueberries, blackberries, raspberries, strawberries, (any berry!), oranges, apples, pears, grapes, lemons, limes, plums, peaches, kiwi, cherries, mangoes, papaya, kumquats, pomegranates, apricots, avocados, dragon fruit, melons, and pineapples. A serving is one cup.

**Beans and Legumes:** pinto beans, black beans, red beans, lentils, split peas, soybeans, garbanzo beans, edamame, black-eyed peas, white beans, and tofu. Enjoy up to one-and-a-half cups of cooked beans or legumes if you need to lose weight; if not, enjoy more.

**Nuts and Seeds:** walnuts, almonds, cashews, pecans, macadamias, pistachios, sesame seeds, sunflower seeds, hemp seeds, flaxseeds, chia seeds, and pumpkin seeds. If you struggle with weight loss, eat only one-quarter cup. Otherwise, enjoy more. Remember to eat them raw.

**Whole Grains (optional):** brown rice, quinoa, and steel cut oats.

**Cold-Water Fish (optional):** salmon, herring, halibut, and sardines. Yes, tuna and mackerel are cold-water fish but these are rather high in mercury, which is toxic, so avoid them.

**Oils (optional):** Olive oil and coconut oil. Enjoy up to two tablespoons per day if you don't need to lose weight.





# 9 Ways to Increase Your Libido

## Just in time for Valentine's Day

by MICHELE BROOKHAUS, RSHom(NA), CCH

**As we age our testosterone levels decrease, and besides decreasing muscle mass, this also decreases sensitivity ...**

Have you lost that loving feeling? Are you finding that you just don't have it in you to respond to your partner's advances, let alone *start* something fun? Do you want to boost your sex drive naturally?

You are not alone. Hormonal shifts and changes have huge impacts on a woman's sex drive. And I don't know about you, but I want to keep my sex drive.

Sex is both a head and body game. Ideally, both have to be in it for sex to be satisfying. I'm going to break this article down into two sections, things you can *do*, and homeopathic remedies you can *take*.

### What's a woman to do?

Keep an open mind about some of these suggestions. Do any resonate enough with you that you'd like to try them out?

**Meditate:** I know this one may seem

a bit odd. Why meditate if you are trying to boost your sex drive? The Centre for Sexual Medicine at the University of British Columbia asked this question in one of their studies about women and libido. They determined that focus was necessary in sexual desire and satisfaction. Bringing yourself back to each moment in meditation is a skill that transfers over to sex. Simply put, it brings you back into the moment.

**Breathe:** Deeply. Bring your breath into your chest and lungs, and then all the way down to your belly. Let that breath out slowly, then breathe in again. Bring that breath down to your pelvic floor and into your yoni (sanskrit for vagina, vulva, womb, or my favorite, source). Notice the sensations in your body as you breathe. Any tingling happening? Breathe in again. Keep your breath slow. Focus on sensations. Focus on and milk the yummy ones.

**Practice your kegels:** Besides doing something good for your body and your pelvic floor, kegels also bring your attention to your pelvic floor. I know that's a bit of a "duh." But again, it's about focus, attention, and sensation. What does it *feel like* to clench your PC muscle? Doing 10 of these three times a day will keep the focus on your vagina and its pleasure potential.

**Exercise:** As we age our testosterone levels decrease, and besides decreasing muscle mass, this also decreases sensitivity in our vaginas and clits. Exercise counters this by boosting testosterone in the body and therefore our libidos. Good choices include yoga because it can also alleviate anxiety and depression (libido downers), as well as weight lifting.

### Homeopathic remedies that help

**Damiana:** Botanical name *Tumera Afronisidiaca*. This remedy is said to "invigorate the system." Its botanical name suggests a strong use in boosting sex





# SAY **GOODBYE** TO **UTIs**

by MICHELE BROOKHAUS, RSHom(NA), CCH

When it hurts to go,  
here's safe, gentle,  
natural relief!



**H**ave you ever had pain when you urinate? Well, you're not alone: 40 percent of women have had at least one urinary tract infection (UTI) in their lifetime. What constitutes urinary tract inflammation or infection? Certainly, sometimes infections go undetected, but the Mayo Clinic lists these symptoms as signs that something just may not be right down there:

- A strong, persistent urge to urinate
- A burning sensation when urinating
- Passing frequent, small amounts of urine
- Urine that appears cloudy
- Urine that appears red, bright pink, or cola colored—a sign of blood in the urine
- Strong-smelling urine
- Pelvic pain (in women)—especially in the center of the pelvis and around the area of the pubic bone

### Why me?

I'm sure you know about some common culprits for the onset of this nasty problem:

- **Sex.** If you've only ever had one infection, it's likely from sex. The best way to avoid a UTI is to urinate within 30 minutes after sex.
- **Dehydration.** Water is so good for so many things in your body. After all, our bodies are at least 60 percent water. Drinking water helps flush out bacteria.
- **Holding it in.** Don't do it! If you have to go, then go. Urinating helps flush out the bad stuff. Nothing good comes from holding in your urine.
- **Birth control.** Sometimes, a change in birth control methods, such as use of a diaphragm or spermicide, can cause issues with your bladder.
- **Hormonal shifts.** Menopause is a big one for hormones shifting in the body. It can make us more susceptible to inflammation and infection.

Conventional treatment for a single UTI is a short course of antibiotics. Treatment for people unlucky enough to get recurrent infections is often long-term, low-dose antibiotics. But, antibiotics can also wreak havoc on your microbiome, not to mention contributing to worldwide bacterial resistance to antibiotics. So, if you want to limit

the use of antibiotics to truly essential situations, what do you do?

### Help yourself

Keeping the body well hydrated (8 to 10 glasses of water a day) and alkaline (lots of veggies and fruit; no sugary, refined foods) can go a long way toward helping you rid yourself of the problem. Drinking unsweetened cranberry juice or taking cranberry extract supplements can help, too. In extreme cases, putting a teaspoon of baking soda in a glass of water and drinking it makes the urine less acidic and can provide some quick, temporary relief.

### 5 UTI fighters

Homeopathic remedies are another great way to help yourself. Here are five remedies to consider if you have a simple UTI. The sooner you address your symptoms, the better your likelihood of success:

- **Cantharis.** Made from the Spanish fly, *Cantharis* is a brilliant remedy in the acute stages of inflammation. If you feel like you are just beginning to get a UTI, this remedy may stop it in its tracks! Your symptoms may come on suddenly: cutting, biting, burning pains, and retention of urine with intolerable urges to go. Restlessness, desire for sex, rage, and weeping are also possible—lots of emotions! You may feel worse drinking cold water or drinking coffee, but being warm and rubbing your belly could make you feel better.
- **Equisetum.** This remedy, made from a plant commonly known as *horsetail*, is useful for an aching, tender bladder that doesn't feel any better after urinating. You may have a constant desire to urinate, and you have lots of urine. Pains can also be cutting and burning with urination, and you may even dribble in between. Pain feels worse at the end of urinating and when sitting; the pain may be better when you lie down. This is a great remedy if you are having urinary difficulties after childbirth.
- **Apis.** This remedy, made from bees, is most often used acutely for bites that are hot, red, and swollen ... just like the bite a bee may give you. But, it's also a great remedy for bladders that are inflamed. Pains are burning and

stinging, and urine is scanty, often with a foul smell and a dark color. This remedy can be used in newborns who are retaining their urine. Women who need this remedy may feel better when they're cool rather than warm. The infection may come on after a period of strong emotions, such as grief, fright, rage, jealousy, or mental shock.

- **Staphysagria.** This remedy, made from a species of the delphinium flower, is probably the best remedy for urinary tract inflammation that begins after sex. You have a frequent desire to urinate, and urination often makes you feel better. Urination can either be scanty or profuse, and the burning pain is felt most often when not urinating. Frustratingly, it can also feel like you have to urinate again, right after you've gone. Arguing with your lover or too much sex can make things worse. Rest, warmth, and breakfast can help!
- **Aconite.** This remedy is prepared from a flower in the *Ranunculaceae* family. Did you get a UTI after being in the cold or after a fright? Did it come on suddenly? Here's your remedy. Urine will be scanty, red, hot, and painful. Urine may be retained or difficult to void. You may feel chilled.

Does one of these types sound like you and your UTI? Go ahead and grab that remedy at your local health food store in a 12c or 30c potency, and take it several times a day for a few days. It may just help! Don't see your remedy here? It's possible that it's one of another 10 or more. Find a homeopathic practitioner to help you. Are your UTIs so frequent that you're always running to the doctor for yet another antibiotic prescription? Definitely find a homeopathic practitioner to get you off that merry-go-round.

*Note:* Most UTIs are in the lower urinary tract and affect the urethra and bladder. If a UTI moves up the ureters into the kidneys, however, it can be serious. Back pain and a high fever are signs that you need immediate professional help.

### Not for women only

Women (because we have shorter urethras) tend to get UTIs more commonly than men

**His history of several previous UTIs made it likely that the current infection was actually indicative of his chronic or constitutional state.**

do, but men are not immune. Take “Stuart,” for example. Stuart came to see me for help with a UTI. He had painful urination—so much so that urinating in a warm tub is what gave him the most relief. He’d had an infection like this a few times before, but this instance was perhaps the most severe.

Stuart also revealed that he was experiencing emotional turmoil. He and his partner had been having difficulty with their sexual relationship. He was feeling rejected because she, for her own reasons, was not responsive to his sexual needs and advances. Stuart was not only frustrated but furious, and he told me that although he tried to keep his feelings under control, their fights about sex often escalated into emotional outbursts. Interestingly, despite his angry outbursts, I could see his romantic nature in the way he wanted to—and did—relate to his partner.

Through further conversation, I learned that Stuart had been severely abused and raped many times as a child. He had lived in fear during his childhood, which set him up for nightmares that he still experienced. It also set him up for uncertainty in his relationships, with some jealousy despite or maybe because of his high sex drive.

Stuart also told me he’d been diagnosed with a form of epilepsy, and he experienced convulsions on occasion. Although he hadn’t had a convulsion lately, the risk of having one kept him from being able to drive a car. His doctor had offered medication aimed at keeping the convulsions at bay, but Stuart had declined.

**A chronic concern**

After hearing Stuart’s story, it was clear to me that this was not a simple, uncomplicated, one-time case of acute UTI, as some cases are. His history of several previous UTIs made it likely that the current infection was actually indicative of his chronic or constitutional state. His history of having been severely abused; his strong anger at his partner, with attempts to suppress his emotions; and his epileptic convulsions were also indicative of his chronic state.

In repertorizing Stuart’s case, I focused especially on the sexual abuse history, nightmares, strong anger and jealousy, urinary symptoms, and convulsions that tended to be triggered by nervousness or excitement. Potential remedies in the repertorization (see chart) included *Nux vomica*, *Lachesis*, *Staphysagria*, and *Arsenicum*.

The symptom profiles of *Nux vomica* and *Lachesis* both have the intensity that I was looking for in Stuart’s case. Although neither remedy is in the sexual abuse rubrics in the repertory, I wouldn’t necessarily rule them out for people with a history of sexual abuse. *Arsenicum* has some intensity, too, and it is in the sexual abuse rubrics, but Stuart didn’t really have the kind anxiety one would tend to see in a person who needed *Arsenicum* (or perhaps his anger was more prevalent than his anxiety).

**A remedy suited to Stuart**

In the end, I kept going back to this romantic feeling that was evident in both

Stuart’s nature and the indications for the remedy *Staphysagria*. “Very romantic; easily disappointed,” is how Frans Vermeulen describes *Staphysagria* in his *Synoptic Materia Medica* as well as “Sexually minded; unsatisfied urge.” Also, suppression of emotions—especially anger—is one of the most notable parts of the *Staphysagria* profile, which was a strong fit for Stuart. In *Desktop Guide to Keynotes and Confirmatory Symptoms*, Roger Morrison says that *Staphysagria* “is an important remedy in patients whose complaints originated from anger or insults which have been swallowed.” He also notes, “*Staphysagria* is one of the main remedies to consider in cases with a history of sexual abuse.” Of course, it is also a remedy frequently indicated in cases of UTI, and Stuart getting some pain relief from warmth fit the *Staphysagria* profile, too.

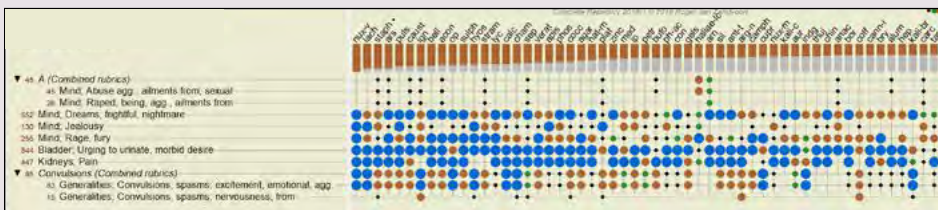
I suggested that Stuart take *Staphysagria* 200c, two doses 8 to 10 hours apart. Within three days, the pain was gone. He was also feeling much better in general, and he wasn’t having as many angry outbursts.

In the six months since his initial consultation, Stuart had two separate instances when he began to feel pain with urination, as if he were about to get a full-blown UTI. Each time, he took *Staphysagria* 200c, and his symptoms resolved quickly. Not only that, he and his partner are communicating in a way that is more productive and enjoyable, and he is not having the same angry outbursts that he used to have. Stuart is pleased with these improvements. He has had no sign of convulsions, either, although he hadn’t had one in some time before he began homeopathic treatment. Time will tell if *Staphysagria* ends up being a good ongoing remedy for him.

**ABOUT THE AUTHOR**



Michele Brookhaus, RSHom(NA), CCH, has practiced homeopathy for 20 years. Her tagline, “Love your sensual body,” comes from her own lifetime of learning to love her life and body into health. She invites you to listen and love yours, too. What does that mean? It’s different for everyone, but essentially it’s listening to the small whispers, the discomfort, the pain, and loving our bodies back to balance again. She particularly loves her work with women and has created a homeopathic lubricating gel called Yoni Bliss (YoniBliss.com).



Prepared with Complete Dynamics software, Practitioner edition, Roger vanZandvoort’s Complete Repertory.

# Raging Red-Eye Bladder Infection

## Another homeopathic miracle!



by JUDYTH REICHENBERG-ULLMAN, ND, MSW

**W**e were on our way from Pucón, Chile, to Prague, the capital of the Czech Republic, where my husband, Bob, and I were scheduled to give a homeopathic seminar. We're talking about an hour flight to Santiago, Chile; then, another 12 to 14 hours (depending on wind fluctuations) to Madrid, Spain; and, finally, a couple of hours to Prague.

I am a real road warrior and veteran air traveler. So, imagine my shock when I hit the bathroom in the Madrid airport and peed bright red! It was painful, too! Definitely one of those, "Oh, s\*\*t" moments.

We usually travel with a 350-remedy black leather homeopathy kit, but we were limited on space and took "only" our famous 50-remedy *Homeopathic Self-Care Home Medicine Kit!* (We've sold thousands of these over the years.) It turned out to be enough.

What to do? Right there, in the airport, I started taking a dose of *Cantharis* 30c every couple of hours. After arriving in Prague, with a little over 24 hours until I was to teach all day, my urine was clear, and the pain was gone. Whew! I'd had visions of having to excuse myself from teaching every 30 to 60 minutes to use the bathroom. To my enormous relief, it wasn't necessary.

I did notice that the uncomfortable sensation in my bladder came back after a couple of cappuccinos (coffee can sometimes interfere with homeopathic treatment), so I took the *Cantharis* again and held off on the coffee. Just for good measure, I asked the students at the seminar if someone could bring me the remedy in a higher potency—a dose of *Cantharis* 200c. They did and I took it, but I was fine by then.

*Cantharis* is not the only remedy for acute urinary tract infections (UTIs), but if an infection comes on quickly, the urethra and bladder are quite painful, and the urine is bloody, *Cantharis* is the remedy of choice. I sure am glad I'm a homeopath!

So, if you think the only answer for a raging UTI is antibiotics, think again!

## Top Choice: SARSAPARILLA

Our top choice for women's acute UTIs is a remedy that may be less familiar to many homeopaths: *Sarsaparilla* (wild licorice). We find it to be even more commonly indicated than the other two homeopathic medicines we use most often for UTIs: *Staphysagria* and *Cantharis*, both of which are much better known (and are described on page 29). The key symptom that a patient may need *Sarsaparilla* is a burning pain in the urethra at the end of urination. The pain may be severe, especially if the infection has gone on for hours or days. The sooner the treatment, the better the response, but we have successfully used *Sarsaparilla* even with UTI cases of some days' duration. We do not tend to see any particular mental or emotional symptoms with people who need this medicine for acute UTI.

An acute UTI is one of our favorite conditions to treat. Why? Because homeopathy invariably works beautifully—as long as you don't wait too long to start treatment.



Native populations of the Americas have used *Sarsaparilla* as a medicinal plant for thousands of years. Homeopathy's founder, Samuel Hahnemann, proved it as a homeopathic medicine and published his results in his *Materia Medica Pura* in the early 1800s. In the late 1800s, patent medicine salesman Dr. James Ayer advertised herbal *Sarsaparilla* as a tonic and cure for many ailments, as shown in this vintage postcard advertisement. *Sarsaparilla* root was also used to make an old-fashioned root-beer type beverage that was popular in the United States.

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### ABOUT THE AUTHOR



Judyth Reichenberg-Ullman, ND, MSW, is co-author with her husband, Robert Ullman, ND, of nine books on homeopathy, including *Ritalin-Free Kids* and *The Savvy Traveler's Guide*. Judyth and Robert are licensed naturopathic physicians who have been practicing homeopathy for nearly 35 years. They treat patients in person, by phone, and by video. Avid travelers, they have visited more than 40 countries and created a handy app called *The Travel Doctor*. They live on Whidbey Island, Washington, and in Pucón, Chile, and can be reached at [www.healthhomeopathy.com](http://www.healthhomeopathy.com) or (425) 774-5599.

Too Young for Menopause?

# GET BACK IN BALANCE!

BY NATALIE HAM, ND



# Balance hormones, boost fertility— safely and naturally

Jasmine, age 33, came to see me in 2018 for help with chronic neck pain. During the intake interview, I discovered she had been diagnosed with a type of early menopause at the age of 25, when she was trying to conceive. She'd had fertility treatments, but they were unsuccessful.

Problems with fertility can be devastating for many women like Jasmine, especially when their families are not complete. According to the CDC, infertility affects 12% of women under age 45. Many of these women turn to conventional fertility treatments for help. While some are happy with the outcome, many find fertility treatments stressful and frustrating, as success rates are relatively low (30%) and treatments can be costly and difficult, from both a financial and emotional perspective.<sup>1</sup>

## Pitfalls of early menopause

Even for women who do not intend to bear children, however, early menopause is problematic. Early loss of estrogen can bring distressing symptoms, such as hot flashes, but it also puts women at increased risk for many illnesses, including cardiovascular disease, dementia, osteoporosis, colon cancer, ovarian cancer, periodontal disease, cataracts, and depression. That's why working to rebalance reproductive health for women with disrupted menstrual cycles is important.

Conventional medicine primarily offers hormone replacement therapy (HRT) with estrogen and progesterone to help alleviate symptoms or reduce the health risks. HRT can help some but not all issues associated with early menopause and will not normally restore a woman's menstrual cycle or her fertility. With homeopathic treatment, however, if started early enough or at a young enough age, there is the possibility of turning some forms of early menopause around, so women can resume their cycles, decrease their health risks, and, possibly, become pregnant. I have had several patients with this diagnosis who are being helped with homeopathy. You'll learn about three of them in this article.

## Ceasing cycles

Women typically reach menopause between 45 and 55 years old, with an average age of 51 to 52. This is when the menstrual cycle ends due to a natural diminishment of estrogen production by the ovaries. After a year of no menstrual cycle, a woman is officially in menopause regardless of her age.

When a woman goes through menopause between the ages of 40 and 45 years old, doctors call it "early menopause." This can occur naturally but may also be caused by surgical removal of the ovaries or uterus, radiation/cancer treatments, or certain medications that may temporarily or permanently disrupt the cycle. Even smoking cigarettes can be a risk factor. Sometimes a woman's menstrual cycle ceases as the result of an underlying condition such as polycystic ovarian syndrome. In such cases, the underlying cause needs to be treated in order to restore normal cycles.

## Primary ovarian insufficiency

Menopause, or the start of menopause, can occur even earlier in some women, however. This is what happened to Jasmine and the other two women whose cases are described below. Women under age 40 who go through menopause or who have perimenopause-like symptoms are considered to have "primary ovarian insufficiency" (POI), also known as "premature ovarian failure." With POI, the ovaries are not functioning properly; they don't produce normal amounts of estrogen or release an egg each month, but they may still function to some degree.

Symptoms of POI, such as spotting, irregular cycles, and loss of cycles, can mimic other conditions, but lab tests help confirm the diagnosis. The most frequent findings are elevated blood levels of follicle stimulating hormone (FSH) and low levels of estradiol (E2 form of estrogen). FSH is a hormone that the brain sends to the ovaries to stimulate the formation of a follicle (which houses an ovum/egg cell). If the FSH is elevated, it means the brain is sending lots of signals, essentially "yelling" at the ovaries to ovulate and then menstruate. An FSH value of less than 10 is optimal for fertility.

Some possible causes of POI include genetic factors, heredity, environmental factors such as pesticides, and autoimmune conditions such as Hashimoto's disease, Crohn's disease, lupus, and rheumatoid arthritis. Many times, unfortunately, the cause of ovarian insufficiency is never determined.

## JASMINE: Chronic pain and POI

When fertility treatments failed for Jasmine in her 20s, she and her husband eventually adopted two children. By the time she consulted me for chronic neck pain at age 33, she felt her family was complete. She did not think it was possible for her menstrual cycles to return, as she had not had a period in over a year, and her doctors had told her the book was closed on that part of her life. The cause of Jasmine's POI was very likely genetic since her grandmother's cycle had stopped when she was in her early 30s. Jasmine's current blood tests revealed poor fertility markers, with high FSH levels (90) and undetectable estradiol.

I explained to Jasmine that with homeopathic treatment, it was possible that her menstrual cycles might be restored. Even though she did not wish to become pregnant and was not super excited about a return of her cycle, she did want to feel better since she was experiencing low libido, hot flashes, mood changes, insomnia, and brain fog. After I explained the additional risk factors of premature menopause, Jasmine decided that having a monthly cycle again did not seem like such a bad trade-off.

I prescribed a daily dose of *Sepia* 6c for Jasmine based on the infertility, her pain, and the way she felt more energized with exercise, as well as *Sepia*'s strong association with menopause. Over the next several months, and with increasing potencies of *Sepia*, her pain and energy were somewhat improved. But she had still not had a cycle.

### Stressed out and angry

It was not until the third follow-up visit that Jasmine mentioned how stressed she felt about a family friend who had upset her. She believed that the source of a lot of her pain was "stress." When I asked her to explain, she revealed that she had a lot of underlying anger. This was surprising to me, since Jasmine was very mild mannered and had always been nothing but polite and kind to my staff and me. Now I realized that maybe I had missed a key symptom by assuming things about her nature and not digging more deeply into her pain symptoms earlier.

Jasmine said that this family friend had triggered her anger so deeply that she "wanted to break things." She explained further that when she was offended, no one would know, but that she would stew on the subject for days. Her neck pain would then flare up, and she could even develop a headache. During these times, she could feel impatient and quicker to snap; she could also feel that her children were taking advantage of her, which felt unfair considering all she did for them. She had even thrown things on the floor in frustration.

Jasmine said she didn't tell me about this tendency towards irritability and anger earlier because she had presumed it was

related to early menopause. However, she recalled that she had felt this way even before she lost her cycle—just not as frequently.

### A change in treatment

Since the *Sepia* prescription had been only marginally effective and I now had additional symptoms to consider, I wondered if changing to a different remedy might give Jasmine better results. Her increase in neck pain and headaches after anger, her tendency to suppress the anger, her indignant and impatient feelings to the point of throwing things, along with her early menopause, all pointed to the remedy *Staphysagria*. (See repertorization chart 1 below.) I prescribed *Staphysagria* 6c, once a day.



	staph.	coloc.	chem.	ign.	acon.	nat-m.	ars.	br.
1. FEMALE GENITALIA/SEX - MENSES - absent (212) 1	2	2	2	2	2	2	2	2
2. MIND - INDIGNATION (63) 1	3	2	1	1	1	2	2	1
3. MIND - IMPATIENCE (250) 1	2	2	3	3	2	2	2	2
4. HEAD - PAIN - vexation; after (22) 1	3	1	2	1	1	2		2
5. MIND - AILMENTS FROM - anger - suppressed (50) 1	3	3	1	2	1	2	1	1
6. MIND - THROWING THINGS AROUND (35) 1	3	1	1	1	1			1

Repertorization 1: Jasmine

All repertorization charts prepared with RadarOpus software.

Six weeks later, Jasmine reported that she'd had vaginal bleeding on and off for three weeks. This seemed promising, but it could also be worrisome. She had not had a cycle in over a year, and, whenever a postmenopausal woman starts to bleed again, it is important to rule out potentially serious conditions, such as endometrial cancer. So we did that: a well woman's exam and a pelvic ultrasound came back normal. Blood tests showed improvement in fertility markers, with lower FSH (35) and higher estradiol (28) levels. These improvements in her hormone levels, along with the bleeding, indicated that her ovaries were waking up. Jasmine was also happy to report that she had not had any of her usual chronic neck pain, nor any headaches at all, since she began taking *Staphysagria*.

### Pain relieved, cycles returned

Over the next several months of homeopathic treatment, Jasmine no longer complained of neck pain or headaches. Her menstrual cycles eventually became fairly regular and normal (every 30 to 40 days). Every once in a while, she would miss a month in her cycle, and this was typically a sign that we needed to increase the potency of *Staphysagria*. She also found herself feeling less angry and irritable, in general, and less focused on the stressful situation with the family friend.

Jasmine has been treated with homeopathy under my care for a year and has been taking *Staphysagria* for the last eight months. She has been almost completely free of chronic neck pain and no longer gets her stress-induced headaches.

Although her FSH levels continue to fluctuate in a higher range than normal for a 33-year-old woman, her estrogen levels have increased from undetectable to age-appropriate numbers. Her menstrual cycles are fairly regular, and she is no longer bothered by hot flashes, insomnia, or other postmenopausal symptoms. She was pleased to find relief for these symptoms with homeopathic treatment, without needing to consider hormone replacement therapy, and pleased to have reduced her risk for more serious illnesses, too.

## CONSTANCE: Longing for a third child

Constance had been seeing me initially for depression, which improved after several months on *Aurum metallicum*. She continued to see me on and off over the next several years for general health maintenance, because she recognized that homeopathic treatment often helped her through more stressful times.

When Constance returned to my office at age 38, it was because she had been trying to conceive her third child for the past year, with no luck. Her periods had recently been getting later and later, and some months she missed them altogether. She also had occasional spotting throughout the month. She was not ovulating regularly, as confirmed by ovulation test kits, and this can make conception difficult. She had had no problems conceiving her first two children.

### Disheartening news

Her gynecologist ordered hormone panels, and Constance was devastated to learn that her FSH was 19 and her estradiol was

undetectable. These values were not favorable for conception. Her gynecologist told her that there was nothing they could do for her except use in vitro fertilization (IVF) with a donor egg and her husband's sperm. The doctor told her, "FSH does not go down," and that she was going into menopause. He also diagnosed her with POI. Constance was resistant to this plan because she had hoped to have her own genetic child. Additionally, she and her husband could not afford both an egg donor and IVF. (This combination treatment averages \$38,000.) She decided to see if I could help, as I had done in the past with her depression.

Although some doctors do not think it is possible for FSH to go down, I have seen it happen frequently. I explained to Constance that it was possible she was in a transient state, triggered by stress. If so, her body might rebalance and her hormone fertility markers might improve with no intervention at all, if her stress diminished. However, based on her age and desire to conceive, it seemed prudent to try everything we could to get her hormones back in balance.

Constance acknowledged that she had been under an enormous amount of pressure lately. She had been a caretaker for the past year for her mother, who had dementia. Her mother had recently passed away, and, since then, Constance had felt apathetic and unmotivated. When she was not occupied with work or household tasks, she felt bored and distant from her family. She reported not feeling connected to her husband currently, although everything was fine between them. Her energy was particularly low in the afternoons around two o'clock when she felt like she could not stay awake unless she went for a walk. In addition to her spotting and irregular cycles, she felt much worse before her menstrual periods. For up to two weeks prior to her period, she would get extremely frustrated and irritable. At these times, she might need to withdraw from family and everyday life in order to emotionally feel relief.

## What is POI?

### Primary Ovarian Insufficiency

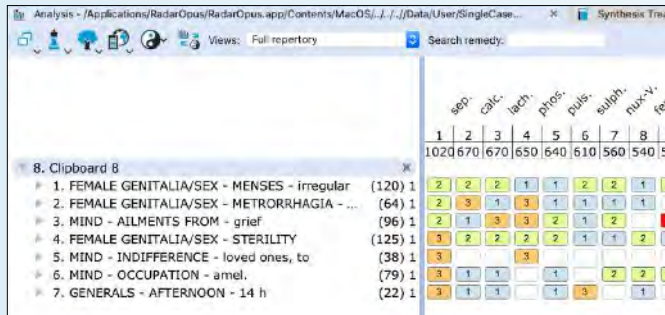
Primary ovarian insufficiency (POI) is diagnosed in a woman younger than age 40 if her ovaries are not producing normal amounts of estrogen or releasing an egg each month. This results in a decrease in fertility. Symptoms may include spotting, irregular cycles, or loss of cycles, as well as night sweats, hot flashes, and low libido. Tests confirm the diagnosis with elevated blood levels of follicle stimulating hormone (FSH) and low levels of estradiol (E2 form of estrogen). Possible causes of POI include genetics, heredity, environmental factors such as pesticides, and autoimmune conditions such as Hashimoto's disease, Crohn's disease, lupus, and rheumatoid arthritis.

### Disconnected and indifferent

I often see this collection of symptoms when patients need *Sepia*. They have indifference to family members, which they may have a hard time describing. I usually hear the word "disconnected" when they are trying to describe the indifference they feel. They will also say that getting away or exercising helps them because it is "something I can do for myself." People who need *Sepia* can feel overwhelmed by any duties, including caretaking. Constance had the classic time of aggravation for *Sepia*, which is normally from 2:00 to 4:00 pm or from 3:00 to 5:00 pm. The fact that *Sepia* is so often useful in cases of hormone imbalance or fertility issues confirmed to me that it was likely a good match for Constance. (See repertorization chart 2 on the next page.)

Constance had actually taken *Sepia* several years earlier, when I treated her for PMS symptoms, and she had done well. She had started at 6c at that time and worked her way up to *Sepia* 10M. So, for her current treatment, I asked her to start

taking a daily dose of the next highest potency, *Sepia* 50M. She had always tolerated high potency remedies very well, so I felt comfortable starting her at this higher potency.



Repertorization 2: Constance

I followed up with her one month later, and she had had no spotting that month at all. Her cycle was still late, but at 35 days, it came sooner than it had previously. She was also sure that she had ovulated because she had seen a positive ovulation test reading mid-cycle. Her energy had picked up, and she had not noted any negative mood changes or PMS symptoms before her period at all. In fact, when her period came, it was a surprise to her for this reason (which I love to hear). She felt much better emotionally and had been taking time for herself to avert feeling burnt out. She also reported feeling more loving to her husband, which made the family flow much better. As I often say, when mom is happy, the rest of the house is much more in sync.

## The Hormone Alphabet

**FSH — Follicle Stimulating Hormone:** The hormone secreted by a woman’s pituitary gland to stimulate the ovaries to release eggs. It also controls the ovaries’ estrogen production. A blood level value lower than 10 is desirable for fertility.

**E2 — Estradiol:** The primary female sex hormone and the form of estrogen that is needed for conception. Blood level values fluctuate throughout a woman’s life and during menstrual cycles, but tend to be below 10 in post-menopausal women.

**HRT — Hormone Replacement Therapy:** Supplementing a woman’s natural hormone production with hormones from other sources; this typically means giving estrogen and/or progesterone to post-menopausal women.

**IVF — In Vitro Fertilization:** A woman’s egg is fertilized outside a woman’s body, before being implanted in a uterus.

## Back in balance

I followed up with Constance once a month for the next three months. If she’d had any backtracking in symptoms in the prior month, such as a return of low energy or feeling a bit moodier (which are often the first symptoms to appear when a change in potency is needed), or any irregularity of her cycle, I would increase the potency of *Sepia*. I only had to increase the potency once in three months, to *Sepia* CM daily. During this time, Constance’s cycles normalized completely, with no spotting. I then decided to retest her hormones. Low and behold, her FSH had gone down, from 19 to 6, and her estradiol had gone up, from undetectable to 56 on day three of her cycle. Constance was thrilled. These numbers were normal for her age and favorable for conception.

Within four months of homeopathic treatment, Constance’s cycles had returned and normalized, and her hormones came back into balance. She and her husband are actively trying for their third child. Constance is very grateful that she now has a chance for this to happen.

## NAOMI:

### Facing challenges with a good attitude

Naomi, a medical doctor, has been a patient of mine since my first year in practice 13 years ago, so being with her on this particular health journey feels like helping a family friend. She originally came to see me for help with Crohn’s disease, an inflammatory bowel condition causing her pain, cramping, bloating, fatigue, and more. Conventional medicine has no known cure for this chronic autoimmune disorder, which can be potentially serious, but offers symptom relief with anti-inflammatory steroids, immune suppressants, and biologic medications. With homeopathic treatment, Naomi was able to stop taking all her conventional medications for Crohn’s.

### Stressors and hormone imbalance

About five years ago, however, when Naomi was 36, her menstrual periods started to slow down. She would sometimes miss a cycle and occasionally have very scanty, short periods. At this time, she was starting at a new hospital and was also going through a breakup. These two things were obviously creating a lot of added stress in her life.

When I ran her blood work, I was disappointed to find that her FSH was 36, in the postmenopausal range. Although she still had some circulating estrogen, it was low at 10. By this time, she had not had a period in over 60 days. The lab work also showed that her thyroid was underactive (hypothyroid). Although it is possible to lose a cycle due to stress and hypothyroidism, this would not explain her extremely high FSH. Naomi, being a physician herself, was very aware of what these values meant, and she was devastated. What was even more

“She told me she had faith that this was temporary, and her body would cycle out of this.”



upsetting to her was that she had just ended a long-term relationship and still desired to have a family. Although the lab results were not to her liking, Naomi had an amazing attitude about them. She told me she had faith that this was temporary, and her body would cycle out of this.

To reduce inflammation in her system, we both decided that she try a paleo-autoimmune diet, which mostly includes non-processed meat and non-inflammatory fruits and vegetables. It eliminates grains, eggs, nuts, seeds, sugar, dairy, nightshade vegetables, and alcohol, as they could possibly worsen the symptoms of people with autoimmune diseases. I also placed her on 30 mg of Armour Thyroid, a naturally derived thyroid hormone, in the hope of inducing a cycle, but this did not have that effect. I rechecked her FSH the following month and, unfortunately, it was 20 points higher, at 56.

Under my care, Naomi had been responding well to daily doses of homeopathic *Silica* for her Crohn’s disease symptoms, but I speculated that all the new stress in her life was a big factor in her current situation, and a new remedy was needed. She had also broken out with a bout of eczema that was not responding to the *Silica*. Now, her story is filled with a lot of twists and turns, as most complicated cases are, and the remedy was not simple and straightforward. She actually needed several remedies to get back on track, so I will summarize the most important points moving forward.

### Troublesome eczema

Since eczema was what was making Naomi the most uncomfortable, I chose a remedy by considering these symptoms along with what her cycle looked like before she lost it. She

said the eruptions, which were all over her abdomen and neck, felt itchy and stinging. They were bright red, and each area of eruption looked slightly swollen. She was also getting new eruptions around her lips and eyes, and the swelling was particularly noticeable around her eyes.

Naomi also noticed that around the time she was supposed to get her period, she would feel dizzy or have a mild headache. Prior to losing her cycle, she had become exceptionally clumsy around the time of her period and dropped things more often. Although it is not unusual for women to feel clumsier at this time, this was new for her. Additionally, prior to her period, she often had an eczema flare-up.

Based on these new symptoms, I prescribed the remedy *Apis* for Naomi. A classic indication for *Apis* is a sensation of “stinging” pain, often with swelling, as Naomi had around her eyes and other areas of eruption. *Apis* also matched her symptoms of an absent cycle and eruptions prior to the menstrual period. Finally, people who need *Apis* can be clumsy and drop things. To capture her symptoms of headaches and mild dizziness before her period, I used the repertory rubrics “head symptoms from suppressed menses” along with “head pain from suppressed menses.” *Apis* is in both rubrics. (See the repertorization chart 3 below.) So I asked Naomi to take *Apis* 30c, once a day.

Search remedy:	apis	belli	haberm	solph	agg	kali-c	phos-t	sk	phos	
Clipboard 1	126d	755	1720	690	680	670	670	660	635	630
1. FEMALE GENITALIA/SEX - MENSES - absent (212) 1	2	2	2	2	2	2	2	2	2	2
2. EXTREMITIES - AWKWARDNESS - Hands - dro... (56) 1	3	1	2	2	1					
3. SKIN - ERUPTIONS - stinging (83) 1	3	2	2	3	3	1	2	3	1	3
4. FACE - ERUPTIONS - Lips (121) 1	1	1	3	1	2	1	3	2	1	1
5. HEAD - MENSES - suppressed menses; from (4) 1	2									
6. HEAD - PAIN - menses - suppressed menses; f... (33) 1	1	1	1	1	1	1	1	1	1	1
7. SKIN - ERUPTIONS - menses - before - agg. (28) 1	1	2	2	2		1	1	1	1	1
8. FACE - SWELLING - Eyes - Around (47) 1	3	1	1		1	3			2	1

Repertorization 3: Naomi

### Skin clears, POI lingers

A month later, Naomi reported that she’d had her period for the first time in three months. She was very excited about this. In addition, her skin was better. Because results from the homeopathic treatment of eczema can be hard to assess after one month, expectations should be tempered to varying degrees of improvement over time, with each flare-up becoming less intense than the last, until it slowly and finally goes away. This was the case with Naomi. It took about four months for the eczema to dissipate completely.

During this time, she had regular monthly cycles, which was a positive sign, but they were shorter and scantier than she was used to. I increased the potency of *Apis* at any signs of backtracking of her improvements, until she was taking *Apis* 10M daily. At this time, her FSH was 40 and estradiol was less than 10. She also reported that, although her skin was clear at this point, her period was a week late. Based on this lack of

significant improvement in her hormone levels and the late period, I felt like it was time to change the remedy.

## A breakup, a remedy change

One of the things that Naomi had been focusing on a lot in the last several months was her breakup with her boyfriend, which had contributed to the stress-induced eczema in the first place. She felt extremely disappointed to have put so much time and energy into a relationship that, in the end, was never going to work. She even started to think about other ex-boyfriends and what had gone wrong in those relationships. She found herself being more irritable towards her friends and family and just wanting to be alone more often.

I had originally considered giving Naomi *Natrum muriaticum* after the breakup because her hypothyroidism had also developed at that time, and this remedy is strongly indicated for ailments that come on after disappointed love, as well as for thyroid disorders. However, her skin symptoms were so prominent at the time and matched *Apis* so well that I had started with that remedy. *Natrum muriaticum* also covers the symptom of dropping things, which was still a symptom Naomi had around her period. This remedy also fit her emotional symptoms of dwelling on past losses and wanting to be alone. (See repertorization chart 4 below.) So I asked her to stop taking *Apis* and instead to start taking *Nat mur* 30c once a day.



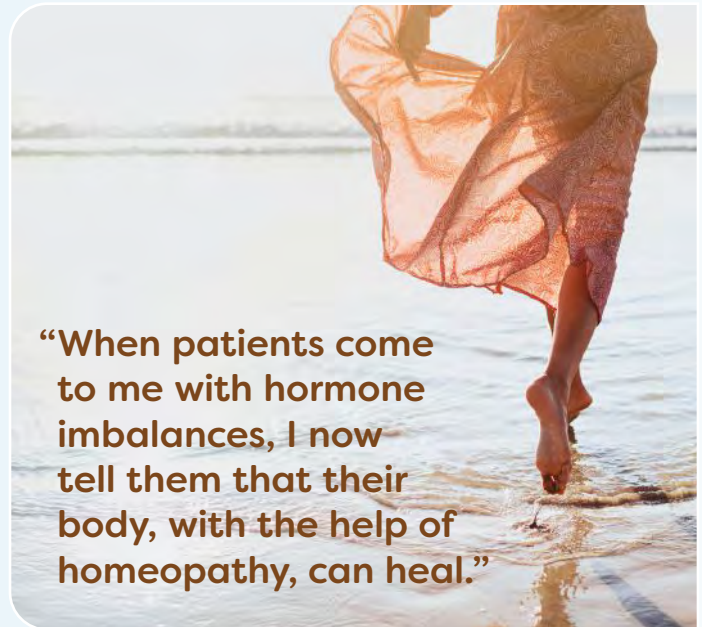
	nat-mu	con	sep	sulphur	ign	hyos	aur-mur	ca
1. FEMALE GENITALIA/SEX - STERILITY (125) 1	3	2	3	1	1	2	1	2
2. MIND - AILMENTS FROM - love; disappointed (57) 1	2	1	1	1	3	2	1	1
3. GENERALIS - HYPOTHYROIDISM (41) 1	2	1	1	1				1
4. EXTREMITIES - AWKWARDNESS - Hands - dro... (56) 1	2	2	1	2		1	1	
5. MIND - DWELLS - past disagreeable occurrenc... (84) 1	2	2	2	3	1	2	1	
6. MIND - COMPANY - aversion to (297) 1	2	3	2	3	2	2	1	

Repertorization 4: Naomi

## The right direction

This turned out to be the correct move. At the next follow-up visit, Naomi was in great spirits. She felt “healed” emotionally and was barely thinking about her ex anymore. Her energy and sleep were great, and her last period was right on time and was the best flow she’d had in a while. This cycle was how her menses had been in the past, four full days and a normal flow, a sign that her estrogen was increasing.

She did well over the next two months; at one point, after a minor backtracking in her mood, I increased the potency of her daily dose to *Nat mur* 200c. When I tested her hormones again, we were both excited to see that her FSH had come down to 14 and her estradiol had risen to 47; the FSH was still a little on the high side but much more desirable, and her estradiol was completely normal. After this, Naomi went on to have several good years of normal menstrual cycles and balanced hormone levels.



## Turning 40

Unfortunately, her periods began to diminish again around the time she turned 40. Naomi had just gotten married and was hoping to conceive as quickly as possible when this old problem reared its head. Time not on our side, I ran her FSH again, which unfortunately had jumped up over 100. At 40 years old, she no longer fit the age category for POI and now was considered to be in early menopause.

Because *Natrum muriaticum* had worked well for her in the past and seemed to fit her current symptom picture, I went right back to this remedy, starting with the next highest potency, 1M, and daily dosing. We were both excited when she slowly started to get her cycle back. However, she would go 40 to 60 days between periods. She was attempting to conceive with these irregular cycles, but it was difficult to determine if or when she ovulated. I decided that because of our time crunch, I needed to search harder in hopes of finding a better homeopathic remedy.

## New symptoms, new remedy

Naomi noticed that in the previous several months, she had felt very tired. She would fall asleep easily at night but wake feeling unrefreshed. She would also wake between 3:00 and 4:00 am and have a hard time falling back to sleep. She had become much more irritable lately, getting offended at little things her husband said. This irritability was specifically worse when her husband or a co-worker asked her a question. Additionally, her old symptom of dropping things around the time of her period had returned. She also felt nauseated with her periods, which was new for her.

Based on these symptoms, I considered the remedies *Nux vomica*, *Sepia*, and *Sulphur*. (See repertorization chart 5 on page 39.) Although *Natrum muriaticum* fit all the symptoms,

too, it was not working as well as I wished. I chose *Nux vomica* because it strongly fit her symptoms of being irritable with interruption or questions, along with the waking time of 3:00 to 4:00 am. She also had the confirmatory symptom of being chilled easily, with an aversion to cold drafts. I prescribed *Nux vomica* 6c once a day.

Symptom	1	2	3	4	5	6	7	8	9	10	11
1. FEMALE GENITALIA/SEX - STERILITY (125) 1	1	3	3	1		2	2	2		2	1
2. FEMALE GENITALIA/SEX - MENSES - late, too (234) 1	1	3	3	1		2	3	3	1	3	
3. SLEEP - UNREFRESHING (327) 1	2	2	2	2	1	3	2	2	3	3	1
4. SLEEP - SLEEPINESS - overpowering (146) 1	3	1	2	1	2	2	2	2	4	3	1
5. SLEEP - WAKING - night - midnight - after - 3 h (90) 1	3	1	1	3	1			1	2	1	2
6. MIND - IMPATIENCE (250) 1	3	2	3	3	2	2	2	3	2	2	2
7. MIND - IRRITABILITY - questioned, when (29) 1	3	1			1		1				
8. STOMACH - NAUSEA - menses - during - egg (60) 1	3	1	1		2	1	2		2	2	2
9. EXTREMITIES - AWKWARDNESS - Hands - dro... (56) 1	1	2	1	2	1	2			1	1	

Repertorization 5: Naomi

## Days of hope

Naomi got her next cycle a little late, at 40 days. Her energy and mood were vastly improved. She felt much better overall and was very appreciative that she could enjoy her new husband and job again without the impatience and irritability she had felt before. I ran her FSH and it was down to 33. Although this was still not a desirable level for conception, it was a big improvement from the last value. Naomi began exploring options for conventional fertility treatments at this time as well, but was told her only option was to use a donor egg, and she and her husband were not interested in that.

Despite my belief that her FSH was too high for conception and despite the fertility doctor's opinion that a donor egg was her only option, Naomi called me the next month to tell me that she had conceived naturally at the age of 41. Although this was very exciting news, it was short lived, as the pregnancy only lasted seven weeks before she miscarried. This was, of

## What's the timing?

After one year of no menstrual cycles, a woman is considered to be in menopause.

- **Natural Menopause** — 51 years is the average age in the U.S., with a range of 45 to 55 years
- **Early Menopause** — the term for menopause that occurs from 40 to 45 years of age
- **Premature Ovarian Insufficiency (POI)** — when a woman younger than age 40 experiences menopause or perimenopause-type symptoms, POI is the usual diagnosis.

course, heartbreaking for her and her family, as well as for me, considering the journey she had been on.

I am continuing to treat Naomi with homeopathy, and we are in the process of getting her back on track after the miscarriage, hoping she will conceive again with a different outcome. Naomi continues to have an amazingly positive attitude, saying, "If it is meant to happen for me, it will."

## Hope with homeopathy

In the conventional medical world, POI and early menopause are often viewed as incurable conditions. But the cases of Jasmine, Constance, and Naomi show that homeopathic treatment can help. I know many women who were told by their doctors that they would not be able to conceive without intervention, or at all, only to have them conceive naturally after just a few months of homeopathic treatment.

My positive experiences using homeopathy to help women rebalance their reproductive health has built my confidence in talking to patients about homeopathy as a treatment option. When patients come to me with hormone imbalances, I now tell them that their body, with the help of homeopathy, can heal. The three women highlighted in this article have not had live births as of this writing, but homeopathic treatment has decreased their overall health risks, improved their quality of life, and given them hope for a possible pregnancy, if they desire one. 💧

\* Names and identifying details have been changed to protect patient privacy.

**A Note on Dosing Methods:** In chronic cases, such as the ones in this article, I typically start with a remedy in low potency, such as 6c or 30c, and ask the patient to take it every day. I expect to see slow, steady improvement over an extended course of treatment. Every 4 to 6 weeks (or as needed), I follow up with the patient. When their improvement plateaus, I tend to increase the potency of the remedy—as long as the person's symptoms have not changed substantially. I continue in this way, climbing up the potency scale, as long as the patient continues to be responding well to the remedy. This method of dosing is rooted in the work of Samuel Hahnemann (*Organon of Medicine*, 6th edition, especially paragraph 246, footnote a), Francisco Eizayaga (*Treatise on Homeopathic Medicine*), and Douglas M. Borland (*Pneumonias*), and was introduced to me by Stephen Messer, ND, DHANP, at Southwest College of Naturopathic Medicine.

## References

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## ABOUT THE AUTHOR



**Natalie Ham, NMD**, practices naturopathic medicine at Nourish Natural Medical Center in Tempe, AZ, with a focus on women's health, especially fertility, pregnancy, and post-partum issues. Following graduation from Southwest College of Naturopathic Medicine, she was selected to be the first homeopathy specialty resident, where she trained under Dr. Stephen Messer for two years and supervised student clinics.

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# The Nightingale's Nest

Florence Nightingale Ward—Homeopath, Physician and Surgeon, Founder of San Francisco's Only Woman-Run Hospital

BY EDI PFEIFFER, CCH

*The following is an excerpt from my novel, The Nightingale's Nest: Florence Nightingale Ward, Homeopath, Physician and Surgeon, Founder of San Francisco's Only Woman-Run Hospital (working title). It is a fictionalized history of a real person and her time. First, let me set the scene:*

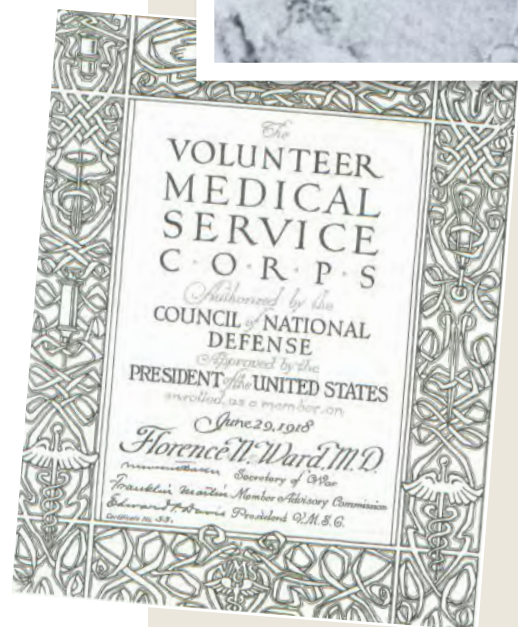
*In 1918, Florence Nightingale Ward (named after the famous founder of modern nursing) is 58 years old and, for the last 10 years, has been working as a homeopathic doctor, surgeon, and gynecologist at the eponymous Florence N. Ward Sanitorium on the corner of Bush and Hyde Streets in her native San Francisco. She has an all-female staff, and sees mainly women and children in both her clinic and hospital. A Fellow of the American College of Surgeons, she is renowned for making discoveries in hygiene and sterilization techniques for surgeries.*

*Dr. Ward is a faculty member of Hahnemann College of the Pacific (a homeopathic medical school) and lectures about gynecology and obstetrics to third-year medical students. She has twice held the office of Vice-President of the American Institute of Homeopathy, and holds offices in various other homeopathic organizations. As a prolific writer and lecturer about health issues of the day, her talks are well received. She joined the United States Medical Corps during WWI and has attended numerous meetings in Washington DC, with other Corps members, few of whom were women.*



**I**t is late summer when we start hearing about the soldiers at the front dying, not so much from their wounds, but from an especially virulent influenza that has spread quickly through the trenches. We also read in the newspapers that many young men are dying suddenly and quickly of some mysterious disease in the army camps before they go to fight in Europe at the front.

By September a few of my patients are very ill with what at first seems like the flu, but, if they are not treated with homeopathic medicine at the arrival of the first symptoms, it can suddenly go into their lungs, and a virulent form of pneumonia takes over. The usual fluids and rest do not help most of them, and homeopathic remedies are called for. My colleagues are also seeing more and more people suffering from this new illness, and soon reports of people dying of this mysterious disease are in the newspapers. Fortunately there is a special meeting of the homeopathic group in San Francisco and the East Bay on Saturday, October 12, 1918, at The Florence Ward Sanatorium, where all of us are wearing the gauze



Dr. Florence Ward's certificate of volunteer service with the U.S. Medical Service Corps during WWI. Photo courtesy of Edi Pfeiffer

**The excerpt from my book (beginning at left) is written from the perspective of Dr. Ward. Based on my extensive research, all of the doctors mentioned, the remedies used, the geographic locations, and the spread of the 1918 flu pandemic are factual.**  
—Edi Pfeiffer, CCH

masks that one of my staff hands out to everyone coming into the hospital. I preside over the meeting. My speech opens the discussion:

“There are so many questions about what we should and can do in the face of this terrible epidemic, but one of them is to stay in contact with each other so we know what remedies and palliative care are working the best for our patients. The great Samuel Hahnemann was an expert at treating populations in epidemics, and we must now look to his example of courage and fortitude to help us in this crisis. I would like for each of us here today to report what symptoms we are seeing and what remedies offer relief. Dr. Boericke, may we start with you?”

“Yes, thank you, Dr. Ward. I am grateful to you for hosting and arranging this meeting at such an important and imperiled time for us and for our patients. To the subject at hand, I agree. It is very good for us to compare our cases and find a pattern to this virulent illness. This is what Dr. Hahnemann did and he had very good success in the cholera, scarlet fever, and yellow fever epidemics of his day. As he said in paragraph 102 in *The Organon*, once we see the symptoms manifested in enough of our patients, we will be able to see the main remedies that are of best use. We also may be able to find a remedy or small group of remedies that could act prophylactically.

“On the other hand, we must remember to take our clients’ cases individually and find the best remedy for them, not just assume that there is one magical pill for this. I have seen this present in a few differing ways, so I think we need to look at a group of remedies and even be open minded to the more unusual remedies for some of these cases, especially when it has progressed beyond the basic flu stage. So far, in the milder cases of fever, exhaustion, and pain in the bones, I have given *Gelsemium*, *Bryonia*, and *Eupatorium perfoliatum* with good

results. For those who wait to come to me and have progressed to more fulminant pneumonia, *Antimonium tartaricum* and *Laurocerasus* have been the two most helpful. But they must be repeated quite often and for many days, or we see a relapse.”

“Thank you, Dr. Boericke. Would Dr. Goss please give us her report?”

“Yes, thank you, Dr. Ward. I would agree with Dr. Boericke, I have given many of my patients *Gelsemium* early on, and have seen them get better within 24 hours from the chills, exhaustion, and dullness they feel.

*“We should be seeing homeopathy hailed from the rooftops right now, with our success rate of treating this terrible influenza.”*

“I have also had a few patients who present with anxiety, fear, restlessness, chills, and burning pains. Many of them respond to *Arsenicum album*. If they have tight, dry, suffocative respiration and desire cold drinks, I would give *Phosphorus*; it is such a good pneumonia remedy.”

“Thank you, Dr. Goss. Dr. Chamberlain, are you seeing any cases of this influenza in the East Bay?”

“Unfortunately, yes I am. In Alameda, where I work, I have a number of families who have come down with this, and it seems to be the healthy young adults who get hit the hardest. I have given *Gelsemium* and *Bryonia* for many of my cases, but when there are complications such as pneumonia, or more unusual symptoms, I have used other remedies. When the fever goes particularly high, I will use *Belladonna*, but if the patient starts to go into sepsis, *Baptisia* and *Pyrogen* are life savers. From what I understand, the allopaths are having a much harder time keeping their patients from dying than we are, so let’s keep up the good work!

“I also must warn you all, this new medicine, this aspirin, that all the regular doctors are prescribing like candy, may be making matters worse for those suffering with this malady. It does bring down the fever, but it seems to make things systemically worse, for the patients’ overall health. People are quickly going into pneumonia and dying.”

“I agree,” Dr. Tomlinson adds. “I have been hearing of people who were told to take large doses of aspirin, but they take even more because they are so desperate, and these poor souls end up dying within hours, coughing up blood from their lungs. I wish we could do more to stop this, when our homeopathic medicines are so curative and gentle. We should be seeing homeopathy hailed from the rooftops right now, with our success rate of treating this terrible influenza. I will be speaking with the mayor tomorrow, so perhaps he can put out a statement that homeopaths have better answers to the illness and are happy to see more patients before the numbers of dead get out of hand, as they have in other cities.”



The Florence Ward Sanatorium, San Francisco, CA, circa 1916.  
Photo courtesy of Edi Pfeiffer

I interject, “Yes Dr. Tomlinson, I am glad you are meeting with Mayor Rolph. Does anyone know Dr. Hassler? As head of the Public Health Department, he would be a good person to work with also. In fact, we should propose a meeting with city and health officials and business owners to strategize ways of keeping this very contagious malady under control. We must get masks out to the public and make it mandatory to wear them. And we have to make certain we wear them and have them to give to everyone in our hospitals and clinics. It seems that if we can treat the illness early enough, we can stop it from getting bad enough to go to hospital. Is that what others are finding?” Everyone nods their heads in agreement.

“It is something we can help with in the home. I’ve been making certain that as many of my patients as possible have a small group of remedies and instructions so they can begin the treatment as soon as they see symptoms. This seems to be the best way, and Dr. Boericke and his pharmacy have been quick to put these particular remedies together for us. Many of our patients already have remedies at home, and the most helpful remedies are already in these family kits. That makes our work much easier.

“It seems from all the clients I’ve seen and from what I’ve heard from colleagues, that *Gelsemium*, *Bryonia*, and *Arsenicum album* are effective in the early stages, and *Phosphorus* and *Antimonium tartaricum* are helping when it gets into the lungs.



Dr. Florence Ward’s handwritten notes, and monogrammed leather homeopathic remedy kit, circa 1890.\*

Of course there are a few other remedies that work well, but these are the main ones for recovery. As Dr. Boericke said, we must bear in mind Dr. Hahnemann’s work in epidemics, and mainly use a small group of remedies because we are treating the virulence of one specific illness that has become very widespread. But yes, we must take our patients’ cases and see what remedy fits their symptoms the best. I see our hour has passed; so let’s close the meeting and schedule another one next week for updates.”

After a bit of back and forth, we take out our calendars and schedule a meeting one week from today. As everyone gathers their papers and begins their leave-taking, a deep feeling of dread and anxiety comes over me. My mind is abuzz with questions. How are we going to control this thing in our city? There are so many people who live cheek by jowl, and there are always crowds forming, if not for entertainment, then for a suffragette parade, or a labor march. Let alone all the soldiers and sailors who parade through on their way to the front. Will people pay attention to preventive measures? Will they wear masks in public? Wash their hands more frequently? Stay home if they can, especially if they are ill? And will we be able to take care of all the people who will be too sick to care for themselves? I must talk with the head porter about moving beds into a secluded ward so that we can at least contain the epidemic here in my hospital.

Once my fellow doctors have left, my dear colleague Dr. Alice Goss and I begin our rounds, tending to patients on the wards. I go first to the regular wards where I have recovering

## ASPIRIN POISONING AND THE SPANISH FLU

With no cure for the flu, many doctors prescribed medication that they felt would alleviate symptoms, including aspirin, which had been trademarked by Bayer in 1899—a patent that expired in 1917, meaning new companies were able to produce the drug during the Spanish Flu epidemic.

Before the spike in deaths attributed to the Spanish Flu in 1918, the U.S. Surgeon General, the Navy, and the *Journal of the American Medical Association* had all recommended the use of aspirin. Medical professionals advised patients to take up to 30 grams per day, a dose now known to be toxic. (The medical consensus today is that doses above four grams are unsafe.) Symptoms of aspirin poisoning include hyperventilation and pulmonary edema, or the buildup of fluid in the lungs, and it’s now believed that many of the deaths were actually caused or hastened by aspirin poisoning.

Source: History.com

\*These are housed at the University of California San Francisco Archives and Special Collections. <https://blogs.library.ucsf.edu/broughttolight/2015/03/17/womens-history-month-dr-florence-nightingale-ward/>

surgery patients. After I've made certain all are doing well, I head for the new influenza ward.

This is where many of the sickest patients are being tended to. The three crisply dressed nurses, with their light blue dresses, starched white aprons, and small nurses' caps pinned to their hair, and now wearing masks over the lower half of their faces, are moving efficiently around the room, taking care of their patients. One of them happens to be my sister Irene.

The sound of deep coughing, gasping, and moaning, and the pale, sickly pallor of many patients are striking. The smell of illness is in the air, sweat mixed with other bodily fluids. There are eight patients in this ward. I ask Irene which one I should tend to first, and she leads me to the bedside of a man in his late 40s, who is very ill.

"This is Philip Jones." His eyes are closed and he has a heavy, dull, almost besotted look to his face, very flushed and hot to the touch.

"Hello, Mr. Jones. Are you able to tell me what you are feeling?"

He slowly opens his eyes partway, and it seems to take a few seconds for him to focus on my face. He finally answers, "I'm sorry I am bone tired. I can barely keep my eyes open. My whole body is sore, like a truck hit me."

*"I have given many of my patients Gelsemium early on, and have seen them get better within 24 hours from the chills, exhaustion, and dullness they feel."*

"I'm sorry to hear that. Are you feeling particularly hot or cold?"

"I am freezing. It's like cold water is going up and down my back. I can't stop shivering and shaking, and when I open my eyes I get dizzy."

"Don't worry Mr. Jones, we will take care of you. Irene, please start Mr. Jones on *Gelsemium*, every 30 minutes. We may be able to stop this from going to pneumonia. Let's give him more blankets, and I will check on him in an hour. Who is next?"

"Bed ten."

"Thank you Irene." I find my way to the bedside of another gentleman, this time in his 30s, with burn scars on his face and hands. He is sitting up with his head against the top of his

## THE SPANISH FLU PANDEMIC

Lasting from February 1918 to April 1920, the Spanish Flu Pandemic infected 500 million people—about a third of the world's population at the time—in four successive waves. In the U.S., where it ultimately killed around 675,000 people, local governments rolled out initiatives to try to stop its spread. These varied by region, and included closing schools and places of public amusement, enforcing "no-spitting" ordinances, encouraging people to use handkerchiefs or disposable tissues, and requiring people to wear masks in public. Mask-wearing ordinances mainly popped up in the western states, and it appears most people complied with them. Sources: Wikipedia and History.com



Workers wearing masks at an information desk in San Francisco in 1918 during the Spanish Flu pandemic. Photo by Hamilton Henry Dobbin from the California State Library.

pillow and opens his eyes in a friendly manner when he hears me approach.

Nurse Ferguson tells me, “This is Lieutenant Sumner. He just returned from the war and has been convalescing from his burns. He was staying with his sister, and all of the adults in the house now have gotten sick. He is the most ill of them.”

“Thank you, Nurse Ferguson. Lieutenant, may I listen to your lungs?”

“Yes, Doctor,” he gasps quietly.

“Your chest sounds like there is quite a bit of fluid in the right lung. Nurse Ferguson, can you start him on a course of *Phosphorus* right away? We need to stop the hepatization immediately.”

“Yes, Doctor, I’ll go fetch it right away. And here is Mr. Grant who has just been admitted, with a sudden onset of great pain in his chest and a hard, dry cough. He’s been spitting out bloody mucus.”

One look at this patient and I know he must need the remedy *Aconite*. His eyes are wide open with a frightened look. His first words to me are, “I know I’m dying, and I know it will be tonight. There isn’t anything you can do to save me. I can hardly breathe with the pain in my chest, it feels like its burning up in there!”

“Mr. Grant, I am so sorry for your pain. I think we can save you. Would you mind sitting up so I can listen to your lungs?” He sits up slowly with my help. I hear rales in his left upper lung. “We must start you on *Aconite*, it will help you sleep and perhaps you’ll have a good sweat, which should help you feel better.”

“I hope so! Right now, I feel like I’m dying.”

“Nurse Anderson will give you your first dose. Now, just tip your head back a bit and let the tablets dissolve.” As he lies back, he seems to relax a bit already. When I look back on him a few minutes later, he is soundly asleep.

I order an oxygen nasal catheter for both Mr. Grant and Lieutenant Sumner, then go along the ward treating the rest of the patients. Most of them have only been sick for a day or two and are very ill, so this flu is hitting people hard and fast.

As I wash my hands carefully before I leave the ward, I catch the eye of one of the nurses and ask, “Nurse Frances, I wonder if we can open the big window at the end of the room for a little while. It is so stuffy in here, and the smell is quite strong. The day is rather warm, and I think it will do everyone good to have a little fresh air.”

I walk down to my office, take off my coat, and put it in the laundry. I am finally able to telephone my daughters to make certain they are okay. I want to emphasize what they should be doing in order to lessen the chance they will get this awful illness. As I pick up the earpiece of the phone, I realize the need to emphasize to everyone that we need their full cooperation to minimize the illness and deaths from this epidemic. Whether we can muster the organization remains to be seen. I have my doubts about whether everyone will be willing to do what is necessary to keep this plague from ravaging the people of our great city.



*Florence Ward continued to work tirelessly from 1918 to 1919 to help her patients recover from influenza. It was noted, at least within the homeopathic profession, that homeopathic patients had far better recovery rates than those treated allopathically. Dr. Ward also maintained her regular surgery and ob/gyn practice, and nursed her pregnant and very ill daughter, Dorothy Erskine, back to health from the flu. When Dorothy went into premature labor, Florence performed a cesarean and was able to save Dorothy and deliver a healthy baby girl. After this difficult and eventful year, Florence, who had been ignoring a breast lump she had discovered a few months earlier, went to New York to have a consultation and subsequent surgery. Unfortunately, the cancer had metastasized to her spine. She died at home in December 1919 at the age of 59. It was a colossal loss for the medical community, her patients, and her beloved family.* 💧

#### ABOUT THE AUTHOR



**Edi Pfeiffer, RSHom**, practices homeopathy in Oakland, California. Edi loves history—especially the history of women homeopaths in California. After learning about Florence Nightingale Ward 15 years ago, she interviewed Florence’s grandson, John Erskine, who gave her access to Ward’s letters, medical bags, and other belongings while she wrote an academic paper about Ward’s life and times. Edi expects

to publish *The Nightingale’s Nest* in late 2022. You can reach Edi at [homeopathyoakland.com](http://homeopathyoakland.com).

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