CLINICAL HOMEOPATHY FOR SACRUM AND PELVIC PROBLEMS

Objectives: The participant will be able to:

1. define Homeopathy.
2. describe the principle of “like cures like.”
3. discuss the mechanism of action and current research in Homeopathy.
4. describe how homeopathic medicines are produced.
5. list various factors used in treatment with homeopathic medicines.
6. describe the Hering’s cross.
7. determine proper dosing using dilutions and frequency.
8. list medicines used for various neuromusculoskeletal and genitourinary disorders related to sacral/pelvic pain.

“Absence of Evidence is not Evidence of Absence”

Carl Sagen, PhD.

I. What is Homeopathy?

A. Definition

- A therapeutic system developed over 200 years ago by Christian Samuel Hahnemann, a German physician.
- Based on the principle of similitude or “like cures like”, allowing stimulation of self-healing process.
- Principle that disease can be cured by substance that produces similar symptoms in a healthy person.
- NOT HERBAL MEDICINES! Uses “ultra-molecular” dilutions of substances derived from minerals, plants and animals.

B. Hypothesis of mechanism of action and research

- Mechanism is bio-physical not pharmacological. Information is transferred from diluted substances to the diluting agent as higher dilutions often do not contain one molecule of original substance.
- In Vitro studies have demonstrated cell changes when exposed to homeopathic dilutions or homeopathic medicines.
- A 2008 Nobel Prize for Medicine recipient, Dr. Luc Montagnier of Paris, France, has been working on research dealing with the Memory of Water. Based on the work of Jacques Benveniste, Dr. Montagnier has worked
with the electromagnetic imaging of the structure of water and how it is affected by the structures of additional substances such as viruses. He has discovered that the structure of the fluid is changed by the structure of the additional substance. This structural change can be seen even when the solution has been ultra diluted using the method of succession-dilutions followed by violent agitation. The EMR image or fingerprint is found even when diluted to $10^{-18}$. Montagnier theorizes that it is the STRUCTURE of the solution not the composite that affects the organism!

C. Production of homeopathic medicines.
- Medicines are produced by a strict standard and a standard method which is monitored by governmental regulations and the Homeopathic Pharmacopea US (HPUS) for the US.
- Pure substances are obtained from licensed sources to be used for the medicines. The substances are prepared as the base or "Mother Tincture". This MT is then diluted using the standard process. The Hahnemann process dilutes 1% of the MT into 99% of solvent (70% alcohol). This first dilution is then shaken. This dilution is called 1C. The designation "C" stands for "Centesimal Hahnemannian" which describes the method of dilution. This may also be designated as CH. The 2C dilution is 1% of the 1C diluted into 99% of solvent. Each subsequent dilution is an additional $10^{-2}$ or 1/100th dilution.
- There are other designations of other dilution methods. "K" for the Korsakovian method and "x" for a 1/10 dilutional method.
- All homeopathic medicines in the US are FDA regulated and must meet the strict criteria of the HPUS.

D. Nomenclature
- Clinical v Classical
  - Clinical homeopathic physicians are PHYSICIANS. They may also be NPs or PAs. They have participated in a formal training program with a minimum of eight months of instruction and successfully passed a written certification examination.
  - Classical homeopaths are often physicians, but may be dentists. They may also be other lay persons not fully trained in diagnosis and treatment of human conditions.
- Dilutions not potencies
- Medicines not remedies

II Homeopathic Treatment
A. Treatment – based on multiple factors
- Patient’s symptoms and signs or characteristics
- Corresponding etiologies

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- Patient’s symptoms and signs or characteristics
- Corresponding etiologies
• General Reactive mode
• Sensitive types

Example: *Natrum muriaticum*

- Characteristics
  - Sensations: Sensation of burning and stinging of mucous membranes; easily tired and sensitive to cold
  - Modalities: Aggravation-in morning about 10; at the seaside
    Improvement-in open air
  - Concomitant symptoms: abnormal craving for salt, unquenchable thirst
- Corresponding etiology: therapeutic indications- during convalescence of debilitating diseases or in the after effects of depletion.
- General reactive mode: Alternation, succession or concomitance on different targets of —cutaneous or mucosal signs, internal organs specifically kidney, disturbance of behavior or mood
  - “tuberculinic” reactive mode- subset of psoric group.
- Sensitive type: good responders are children, adolescents or young adults
  - Morphology: thin, pale, cold sensitive
  - Behavior: sad, depressed, anxious but also hurried.

B. Choosing medicine and dilution

The choice of the medicine(s), dilutions and frequencies is dependent on both classic and homeopathic semiology (symptomatology). For the most part, Hering’s cross is used to determine the dilution.

Hering’s cross is composed of 4 quadrants. Depending on the patient’s symptoms and signs, Hering’s cross will help determine the dilution.

- Quadrant I- Objective signs of disease: lesional stage; tissue changes—edema, pain; localization of inflammation—where?
  Example: *Apis* (comes from bees) - for edema 2° allergies.

- Quadrant II- Sensations (felt by the patient as a result of the illness)
  - Spasms, type of pain—burn, throb, cramp, bruising, stabbing
  - Sensory hypersensitivity—paresthesias, pruritis, fever, fatigue
  Example: *Arnica*—contusion or “bruise-like” pain

- Quadrant III- Modalities (characteristics specific to the individual)
  - Improvements/ aggravations of condition from
    - Environment- hot/cold
    - Timetables- after 12 PM, 10 AM
    - Position- stand, sit, lying, doubled over
- Physiological actions - rest/movement, pressure, eliminations, periods

Example: *Apis* - burning pain relieved by cold

- Quadrant IV Concomitant or associated symptoms - symptoms that appear at the same time as the disease, but no obvious connection.
  - May be common to all patients with same complaint.
  - Objective general symptoms
    - secretion characteristics - thick, purulent
    - Sleep disorders
  - Subjective symptoms
    - Dietary likes/dislikes
    - Behavior changes - anger, aggressive

Choose the dilution using Hering’s cross:

- Quad I - 6C
- Quad II - 9C - 15C
- Quad IV - 30C
- Quad III - 9C - 15C

### C. Dosing

- Independent of age or weight
- CAN NOT OVERDOSE
- Acute conditions
  - Use unit doses (small pellets)- use all
  - Use large pellets - 5 pellets/ dose - one-multiple X day
  - Usually 2-4 times/day or more frequent if intense condition - *Apis* with an allergic reaction
- Chronic or sensitive - 10 P weekly - monthly.
  - With chronic medicine (constitutional) - “look for the medicine for that person.”
  - Use of a chronic medicine helps the acute medicine maintain.
- Sublingual administration
  - For infants - dissolve in water
  - “clean mouth” - ½ hr ac or pc; keep in mouth 2-3 minutes
  - NO MINT before or after - will constrict blood vessels sublingual
  - DO NOT TOUCH THE PELLETS WITH YOUR HANDS! - the oil on your hands will interfere with the delivery.
- May use multiple medicines at a time - Ex: 2 acutes, 1 chronic
- Prior to choice of medicine and dosing - need a detailed H & P - especially the history including FMHx.
D. Aggravation of symptoms
   ➢ Medicine is appropriate- Dosage poorly adapted
     o Aggravation of symptoms- increase dilution &/or decrease the frequency of the dose.
     o Occurrence of other symptoms- look for a complementary symptomatic medicine.
     o Fatigue- stop & restart only if symptoms return

III. Medicines for Specific Conditions
A. Neuromusculoskeletal
   1. Acute Trauma- edema
      o *Apis mellifica 15C* (never use lower dilution for *Apis*) 5P q 15 min x 5

   THEN -
   • Post trauma pain/ muscle- soft tissue pain
     o *Arnica Montana* 9C 5P 3-4 x/d
   • Inflammation / painful tendons-ligaments (SPRAINS)/ ↓ with heat
     o *Ruta graveolens* 6C-9C TID
   • Fractures/ microtears muscle insertions/ ↑ with touch
     o *Symphytum* 6C-9C TID
   • Intra-articular effusion/ pain with movement/ ↓ with rest-immobilization
     o *Bryonia alba* 9C TID
   • Periarticular fibroconnective tissue/ painful stiffness with start of movement/ ↑ with cold/ rest, ↓ with warmth
     o *Rhus toxicodendron* 9C TID
   • Nerve trauma- pain along the nerve path
     o *Hypericum perforatum 15C* TID

2. Sacroiliac joint pain
   • Trauma- ↑ with rest, ↓ with rest
     o *Ruta graveolens* 6C-9C TID
   • Arthralgia - ↑ cold/ damp, intellectual exertion
     o *Calcarea phosphorica* 15C q d x 2 mths
   • ↑ with sitting, ↓ with walking/ lying down
     o *Ammonium muriaticum* 6C TID x 1 wk
   • Arthritis, sensation of weakness- ↑ with start of movement and at night but ↓ with continued movement / hot bath
     o *Radium bromatum* 9C-15C BID x 3 mths
3. Lumbosacral pain- acute trauma- muscle pain/ stiff/ “bed too hard”
   o Arnica Montana 9C-15C TID

THEN

- “knees about to give way”
  o Kali carbonicum 9C ac TID x 1 mth
- Pain at bedtime, pain with turning over/ sedentary lifestyle/ sensitive psoas
  o Nux vomica 6C-9C 1-4 x/ d
- Pain that ↑ with rest, ↓ with movement
  o Ruta graveolens 6C-9C TID
- Pain spreading into thighs, knees, heels; stinging/ burning; ↑ with jolts; may have “jock itch”
  o Berberis vulgaris 4-5C AM & HS- use LOW dilution
- Reactive arthritis with history of Reiter’s Syndrome; growths, mucus production- Sycotic Reactive Mode symptoms
  o Medorrhinum 9C-30C 1-4 x / month

4. Pubic symphysis pain during pregnancy- ↑ with cold/ damp
   o Calcarea phosphorica 9C-15C

5. Coccyodynia
   - ↑ with sitting; pain in a small area that can be covered with a fingertip; sensation of the coccyx being too long
     o Kali Bichromicum 9C ac TID
   - Traumatic or not
     o Hypericum perforatum acute- 15-30C q 30-60 min; subacute- 15C BID

6. Sciatica
   - With tearing pains, tugging along nerve path, ↓ with movement, ↑ with rest
     o Rhus toxicodendron 9C-15C 2-4x/d
   - ↑ with sitting, ↓ with lying down
     o Ammonium muriaticum 9C-15C
   - ↓ with sitting and flexing limb; shooting pains with tingling/ numbness of calves/ feet. Also for Meralgia Paresthetica
     o Gnaphalium polycephalum 6C-9C BID-TID
   - Acute tugging/ shooting on Left, numbness,↓ with flexing thigh, heat, pressure; ↑ with movement/ cold
     o Colocynthis 15C-30C q 2-6 hr, ↑ intervals x 2 wks
   - Mainly left pain, on/off, suddenly- moves along leg; ↓ motion and flexion
     o Kali Bichromicum 6C-9C 1-4 x/d
• cramping pain, ↑ with cold air, ↓ with heat and flexing thighs right sided
  o Magnesia phosphorica 15C TID-QID

Chronics to use: Thuja, Nat Sulphuricum, Kali carbonicum, Tuberculinum residuum.

B. Genital-Urinary
   Female
   1. Dysmenorrhea
      • On first day with scant flow, painful discharge of clots.
        o Caulophyllum thalictroides 9C several x/d until gone
      • Cramp type, painful menses; ↓ with fetal position “bent in two”, heat, pressure.
        o Colocynthis 9C- 15C q 30-60 min, ↑ interval
        o Magnesia phosphorica 9C q 10 min, ↑ interval x 48 hr
      • Cramping after Cu IUD insertion.
        o Cuprum metallicum 6C-9C when spasms
      • Short cycles/ black menses, spasmodic cramps, L ovarian pain
        o Platina 15C q d
      • Pelvic heaviness, R ovarian pain
        o Palladium metallicum 9C prn x 3 mths
      • Menometrorrhagia with abundant clots; profuse flow 2° hyperestrogenic syndrome
        o Murex purpurea 9C 1-6 x/d prn x 3 mths
      • Pain proportional to flow
        o Cimicifuga 9C several x/d
      • Pain from sacrum to pubes, “knife in vagina”, pain spreads to thighs, profuse flow with red clots
        o Sabina 5-6C as often as needed x 3 mths
      • “labor-like” pain with brown or black clots
        o Secale cornutum 9C TID x 1 wk repeat next cycle x 6 mths
      • Tearing/ cutting cramping causes “fainting” with vomiting, diarrhea, cold sweats
        o Veratum album 9C daily during menses and with pain x 3 mths
      • “pelvic heaviness” as if “uterus could drop out”; L ovarian pain, L breast pain/ palpitations; menses short, dark red, scanty
        o Lilium tigrinum 9C prn x 3 mths

2. PMS (premenstrual syndrome)- hyperestrogenism: breast swelling, wt. gain, mood swings
START with *Folliculinum* 15C 10P Day 8 & 20 OR 5P q d

THEN ADD

- Dysmenorrhea– pelvic congestion, “heavy legs”, ↓ with flow
  - *Lachesis mutus* 9C-15C BID-TID
- Pelvic congestion, breast swelling, depression
  - *Murex purpurea* 9C-15C q d- BID during 2nd part of cycle.

**MALE**

3. Prostate

- Chronic prostatitis-
  - Congestion, enlarged/ tender
  - *Sulphur* 15C 10P weekly

- Prostatic hypertrophy with
  - HTN 2nd arteriosclerosis
  - *Baryta carbonica* 15C q d x 3 mths
  - Tachycardia with anxiety, PVC’s; ↑ at night, with cold, in winter
  - *Aurum muriaticum* 9C q d x 6 mths

- Urinary lithiasis, flatulence, bloating
  - *Lycopodium clavatum* 6X 20 gtts in pure H2O q d x 6 mths

- Chronic urethritis, genital herpes, warts, chronic urogenital infections
  - *Medorrhinum* 15C 1-4 unit doses/ month

**REFERENCES**