



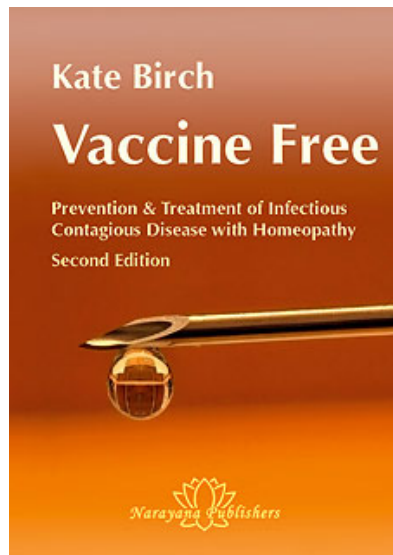
Kate Birch
Vaccine Free Prevention and Treatment of Infectious
Contagious Disease with Homeopathy

Leseprobe

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von [Kate Birch](#)

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Polio

Poliomyelitis, or polio, is an acute contagious viral disease caused by the *poliovirus*, which attacks the central nervous system, injuring or destroying the nerve cells that control the muscles, sometimes causing paralysis or atrophy of the muscles. Symptoms can also include high fever, headache, vomiting, sore throat, pain and stiffness in neck and back and drowsiness. Paralysis most often affects the legs but can involve any muscles including the throat, affecting swallowing; the bladder and bowels affecting elimination; and the diaphragm, affecting breathing. The most serious cases result when the breathing becomes paralyzed, which can result in death even if mechanical ventilation is used.

There are three strains of the virus, called 1, 2, and 3 respectively. Each strain has a different affinity to particular organs and slightly different development of symptoms. Most paralytic cases are due to strain number 1. Poliomyelitis is a serious disease but is usually not fatal. Paralysis develops in about half of those who contract the disease and half of those recover completely in several days to several months. Children under five are most at risk for harm from polio. The vast majority of polio infections (90-95%) are so mild they go unnoticed, undiagnosed and unreported. About 5% of polio cases produce a nonspecific febrile illness similar to common flu symptoms.

The virus is spread either by water droplets expelled from the throat, or by

the fecal-oral route. Incidental contact with contaminated feces and then inadvertent ingestion can lead to infection with polio. Most people unknowingly become exposed. For example, changing the diapers of a child infected with the virus can lead to contraction if your contaminated hand touches your mouth. In travels to foreign countries where polio is endemic, exposure to the virus would be from contaminated water. Water purification and good hygiene practices will lessen exposure. The virus is short-lived and cannot survive long airborne. Family members of the infected person can be carriers.

The incubation period of polio is one to three weeks. During the first few days of the sickness the virus is more commonly found in the throat and later in the large intestines. Polio is contagious in the first seven days of the disease. The initial symptoms are fever, muscle pain, sore throat, stiffness in the back of the neck, drowsiness and headache lasting for two to six days. In non-paralytic polio, the fever usually lasts seven days with the stiffness fading in the next three to five days. In paralytic polio, some weakness or paralysis begins one to seven days after the first symptoms. The paralysis is asymmetrical and usually above the legs, affecting one side more than the other. There is a loss of reflexes. For example, the knee-jerk reflex may disappear. There is also a flaccid paralysis which means that the paralyzed parts are limp rather

than rigid. A key symptom in diagnosing polio is that the sensations of the skin remain normal with the paralysis. The first signs of bulbar polio, which affect the muscles of breathing and swallowing, are difficulty swallowing, speaking and breathing.

In 1-3% of polio cases there can be several symptom-free days, which are then followed by an infection of the spinal fluid, called meningitis. Of these cases, the people with high fever, severe muscle pains and anxiety progress to the feared paralysis. The symptoms of meningitis include fever, headache, rigid spine, neck pain and nausea. Mild cases resolve spontaneously. For more protracted cases, physical rehabilitation through massage, hydrotherapy and therapeutic exercises will help rebuild the muscles and reestablish coordination.

There seems to be a pattern of epidemics every forty years. In the United States, the last epidemic was during the fifties. In temperate climates, polio epidemics usually occur in the summertime. Susceptibility to the virus occurs when there is exposure to cold while perspiring. Eating ice cream in the summer or swimming in cold water when it is hot outside are examples.

Vaccination and Treatment

There were two types of vaccines available for polio: the Salk vaccine, which is made from the killed poliovirus and the Sabine oral polio vaccine, which is a live attenuated version of the virus. Use of the oral live-virus vaccine stopped in the United States in 2000 as it caused about eight cases of paralytic polio a year. The injected, killed-virus vaccine is in use now. This vaccine is recommended to be given

at two, four, six and eighteen months of age in infants and again at four to six years old, prior to school entry.

There are great concerns about the Salk vaccine. In Africa, where the test runs of this vaccine were done, there are now high numbers of AIDS cases.¹¹ It is believed that the monkey kidneys used to incubate the viruses for the vaccine contained a monkey flu virus very similar to HIV. The theory is the monkey flu virus mutated during the polio vaccine production process. The polio vaccines incubated in the monkey kidneys were then injected into over 50,000 Africans to test its efficacy. The population where this vaccine was tested now has the highest incidence of AIDS cases worldwide.

In terms of the effect on the immune system the Sabine oral polio vaccine (without viral contaminants) is safer for the individual vaccinated as it has the potential to initiate a generalized immune response from the initial exposure to the mucous membranes in the mouth before triggering a specific immune response. By initiating this generalized immune response, the polio-specific antigen response becomes more complete. Details into the various levels of immune response are expounded on in **Chapter 3**. However, as the virus can remain in the intestines for up to seventeen days after vaccination, infants who receive the oral polio vaccine can shed the virus in their stool for several weeks, increasing the risk of contagion in non-vaccinated individuals. This method of exposure was most common after the first vaccine and did account for the eight cases of polio in the United States per year when the oral vaccine was used. If infants and children are exposed to contaminated feces, they may contract the disease.

Partial paralysis, Gillian-Barre syndrome, aseptic meningitis, brain tumors and other conditions affecting the nervous system are common vaccine side-effects to the Salk vaccine.³

Homeopathic Prevention and Treatment

Instances of polio in epidemic proportions for the last two centuries have called upon the homeopathic remedy **Lathyrus**.⁶ In the 1957 polio epidemic in San Francisco and Chicago, 300 children were given **Lathyrus** and no cases of polio developed, while many children given the Salk vaccine contracted the disease. In the 1957 Buenos Aires epidemic, the pharmacies distributed **Lathyrus** to 40,000 people and not one case of polio was contracted. Dr. John Bastyr, in 1953, 1956 and 1957, treated polio epidemics and had no polio cases in over 5,000 patients to whom he gave **Lathyrus**.⁶

If you are planning to travel to an area where polio is a problem, **Lathyrus** 200C can be taken before arriving and every seven days if there is continued threat. If an unvaccinated child is exposed in a daycare setting where there are children who have received the oral polio vaccine recently, **Lathyrus** in 30C could be repeated once per month to prevent lateral transmission of the virus.

Dependent on the strain of polio present, different remedies may have a greater affinity for the prophylactic action. For the strain that has a tendency to cause respiratory paralysis, **Cuprum**, **Opium** or **Silica** may be more indicated. **Plumbum** or **Physostigma** would be more indicated when the disease demonstrates itself through lack of control of the muscles and progression towards paralysis.

As the onset of polio may not easily be distinguished from flu, treatment may not be specifically directed towards the actual disease but rather to finding remedies that are homeopathic to the symptoms presented. In this stage it is hard to diagnose polio unless there is an epidemic in progress. Regardless, administering the specific remedy relating to the symptoms will resolve the condition prior to any neurological damage, even if the diagnosis is uncertain. This is the beauty of homeopathic treatment. As always, homeopathic remedies are selected according to the symptom picture rather than the diagnosis. As the early symptoms of polio look much like influenza, you will find many of the same remedies listed for both. Prevention and early treatment is the best option. Once the damage from polio is established, it is difficult to reverse with homeopathy. Below you will find many remedies indicated for polio.

Prominent homeopath George Vithoulkas has speculated that there has been a rise in the incidence of multiple sclerosis (MS) as a result of the mass vaccination campaign for polio.² Accordingly, homeopathic treatment of an individual with MS may involve the use of one of the remedies described.

Reaction to the remedy depends on the potency and the pace of the illness. The goal in treatment is to prevent permanent nerve damage. An initial increase in fever is not necessarily a bad sign. Prolonged fever is not good. However, do not stop the remedy after the fever subsides as the paralysis and nerve damage can still occur after the fever passes. As many cases are mild and look like flu, indications that the remedy is correct will be marked by a general improvement of

comfort and calmness, even if the fever is higher. This calmness is not to be confused with placidity and unresponsiveness. Stiffness and increased loss of reflex indicates the disease is progressing. Monitor and repeat the remedy as needed, or switch to a more indicated remedy. The disease is still contagious in the first seven days even if a remedy is being used, and the virus will still be passed out through the stool. Constitutional remedies may be needed to facilitate complete recovery.

Remedies: *acon.*, *aeth.*, *alum.*, *arg-n.*, *arn.*, *ars.*, *bell.*, *bung.*, *calc.*, *carb-ac.*, *caust.*, *chin-a.*, *chr-s.*, *cupr.*, *cur.*, *dulc.*, *ferr-i.*, *ferr-p.*, **GELS.**, *hydr-ac.*, *hydroph.*, *hyos.*, *kali-i.*, *kali-p.*, *karw-h.*, *kres.*, *lach.*, **LATH.**, *merc.*, *nux-v.*, *op.*, *phos.*, *phys.*, *plb.*, *plb-i.*, *rhus-t.*, *sax.*, *sec.*, *sil.*, *stry-p.*, *sulph.*, *verat.*, *verat-v.*

Aconite: This remedy is indicated during the *initial stages when the fever is high* and there is a marked anxiety and restlessness with tossing and turning at night. *Sensation of suffocation.* When congestion is localized, **Belladonna** or **Gelsemium** should be utilized. The key to this remedy with polio is a *sensation of vertigo* (dizziness with a spinning sensation). The hands and feet are icy cold.

Belladonna: Should be remembered when there is a *sudden onset of symptoms. The face is flushed, pupils dilated, and all the indications of cerebral congestion are present.* Shooting pains in the spine. A sensation of stabbing pains from the inside outward. These pains appear to be hindering any motion. Paralysis of the legs with incontinence of the bladder and bowels. Twitching and spasms of the affected limbs. High fever with localized congestion

and redness. *Stiffness in neck with arching of back.*

Carbolic acid: A languid, painless, foul and destructive remedy. Paralytic prostration with loss of sensation and motion. Discharges are foul and burning. Acts primarily on the central nervous system, mucous membranes, heart and respiration. Feeble pulse, stupor, depressed breathing and death due to paralysis of the respiratory centers.

Causticum: Gradual *ascending paralysis with urinary incontinence.* Sympathetic and sensitive patients.

Cuprum: Pulmonary paralysis. Spasmodic effects, convulsions and cramps of violent form.

Dulcamara: Rheumatic symptoms induced by *cold and damp.* One-sided spasm with speechlessness. Paralysis of single parts. Gripping in the bowels with diarrhea. Dry fever. Chill and icy coldness of paralyzed parts. All symptoms are brought on from the *transition from warm to cold.*

Gelsemium: This remedy is useful in *early treatment with polio paralysis.* The patient will feel *exhausted and weak.* The facial expression is *dull, drowsy and stupid looking.* Partial paralysis of the tongue and throat can result in slurred speech, difficulty swallowing. *Urinary incontinence* is common. Despite the person wanting to move the muscles, they feel bruised and do not obey. Pain is referred to the *spine and the back of the head.* There is a partial loss in vision and the temperature is moderate.

Lathyrus: This remedy affects the anterior and lateral columns of the spinal cord causing many *paralytic*

disorders of the lower limbs. After influenza and wasting diseases. Weakness, with slowness to recover. Reflexes increased. Spastic gait. Excessive rigidity of the legs. The knees knock together when walking, cannot stand erect. Lower limbs become emaciated.

Opium: Absolute unconsciousness, complete muscular relaxation, pupils contracted to a pinpoint aperture. Face is turgid and bloated. Very red or bluish face, stertorous breathing, pulse slow and full. Death takes place by asphyxia, the heart continuing to beat after breathing has ceased. Pulmonary paralysis. Breathing stops on going to sleep, must be shaken to start it again.

Phosphorus: *Burning pains* in the spine accompanied by weakness of vision and episodic dizziness. The person is excessively *thirsty for cold drinks, ice*, desires ice cream, and fears being alone. Paralysis of the diaphragm.

Physostigma: *Speedy general paralysis* with death occurring from failure of respiration. The heart may be affected also through the nerves. The paralysis settles in the spinal cord with flutter-

ing tremors in the muscles; *involuntary muscles are excited to active movements and expulsive efforts*. Intestines are twisted up in knots. All secretions increased. Cannot move the muscles except with tremendous effort.

Plumbum: This should be studied in the *advanced history* of a case when *paralysis and atrophy* are present and the acute symptoms have passed. *Progressive and excessive wasting, sclerotic conditions*, anemia. Fear and paranoia, fear of being assassinated. Taciturn and depressed.

Rhus toxicodendron: For *the initial stages where there is an etiology of getting chilled while perspiring*. Symptoms will present as flu with *aches and pains in the muscles*, restlessness and stiffness if lying for too long. Paralysis after over exertion.

Saxitoxin: Patients appear *comatose and flaccid, unresponsive paralysis* with fixed, dilated pupils. Gradual ascending paralysis. Weakness, prostration. *Sensation of lightness* and floating. Disoriented, *joking mood*, not taking anything seriously. Cold perspiration and chill.

Mumps

Mumps is an infectious contagious disease caused by a virus from the family that causes influenza and Newcastle disease (a highly contagious viral bird disease affecting many domestic and wild avian species). Mumps attacks one or both of the parotid glands, the largest of the three salivary glands. The parotid glands are located in the cheeks in front of and slightly lower than the ears. Occasionally the submaxillary glands (located under the chin) are affected as well. Although older people may contract the disease, it usually strikes children between the ages of five and fifteen. Mumps is usually not serious in children and up to one third of cases go undetected because of lack of symptoms.

Mumps is spread by droplet infection (through coughing and sneezing). The disease is contagious one to two days before symptoms appear and one to two days after they disappear. The incubation period is usually eighteen days although it may vary from twelve to twenty-eight days. Most cases last from three to ten days and are relatively mild. One attack of the mumps gives life-long immunity.

The illness begins with fever of 100° to 104°F, headache and fatigue. Within 24 hours the patient complains of earache and swelling of one or both parotid glands. When swollen, the glands may obliterate the jaw line. Because of the swelling, the ears can be pushed up and out giving the face an extremely swollen look. Pain and tenderness on swallow-

ing accompanies the swelling. Sour foods and drinks increases the pain as it causes the glands to salivate. The duct to the parotid gland is located inside the mouth just above and outside the upper molars. The opening may appear red and secrete a yellow fluid. Other common symptoms include loss of appetite and back pain.

Secondary illnesses such as aseptic meningitis (inflammation of the meninges; the membrane that surrounds the brain and spinal cord), encephalitis (inflammation of the brain), pancreatitis (inflammation of the pancreas) or orchitis or oophoritis (inflammation of the testicles or ovaries respectively) in adolescent patients can occur. The breasts may also be affected. Sterility is a rare problem but may develop if both ovaries or both testicles are affected. There is an increased risk of cancer later in life of the affected gonad. Other less common complications are involvement of the auditory nerve resulting in deafness, myelitis (inflammation of muscles) and facial neuritis.

Vaccination and Treatment

The mumps vaccine is given in combination with measles and rubella in the MMR vaccine (see **Measles** for more information about this vaccine).

Vaccination is not recommended for infants under one year of age or for persons allergic to eggs or neomycin (an antibiotic for gram-negative bacteria).

Mumps-immune globulin may afford some short-term immunity when there is extraordinary need for protection.

Treatment usually includes staying at home, bland diet and rest. Total isolation is not necessary as the mumps virus is short-lived outside of the human body. It is recommended that adolescent boys avoid contact with the infected person.

Homeopathic Prevention and Treatment

Trifolium repens, made from white clover, is the best homeopathic remedy for prophylaxis of the mumps. Because of the long incubation period, mumps is easy to prevent once the person has been exposed. Giving **Trifolium repens** 30C daily for three to four days is usually sufficient. If swelling of the parotid glands has started before a remedy is given, **Trifolium repens** several times a day may abort the illness. **Jaborandi**, also known as **Pilocarpus**, may also be used under the same indications and will prevent any metastasis. Otherwise, treat according to homeopathic principles and select from the remedies below.

Parotidinum, a prescription nosode made from the saliva of a parotid gland infected with mumps, can also be used as a prophylactic remedy for mumps. It can be given in a 6C or 30C two to three times per day for those that have been exposed, until the risk period has passed.

Depending on how the symptoms develop, administration of the correct homeopathic remedy would reduce the swelling of the glands while the fever may initially increase. Over one to two days expect full recovery. With homeopathic treatment, secondary conditions will be reduced. If any of the secondary conditions were to arise, more accurate

prescribing is needed to prevent sterility and/or meningitis.

Remedies: *acon.*, *ail.*, *am-c.*, *ant-t.*, *am-m.*, *anth.*, *anthr.*, *apis*, *arn.*, *ars.*, **ARUM-T.**, *aur.*, *aur-ar.*, *aur-m.*, *aur-s.*, *bapt.*, **BAR-C.**, *bar-i.*, *bar-m.*, *bar-s.*, **BELL.**, **BROM.**, *bry.*, *calc.*, *calc-sil.*, *calc-s.*, *carb-an.*, *carb-v.*, **CHAM.**, *cist.*, *cocc.*, *con.*, *crot-h.*, *dulc.*, *euphr.*, *fago.*, *ferr-p.*, *hep.*, *hippoz.*, *hyos.*, **JAB.**, *kali-ar.*, *kali-bi.*, *kali-c.*, *kali-m.*, *kali-p.*, *kali-sil.*, *lach.*, *lyc.*, *mag-p.*, **MERC.**, *merc-cy.*, *merc-if.*, *merc-ir.*, *nat-m.*, *petr.*, *phos.*, *phyt.*, *piloc.*, *psor.*, **PULS.**, **RHUS-T.**, *sars.*, *sil.*, *stram.*, *sul-ac.*, *sul-i.*, *sulph.*, *trif-p.*, *trif-r.*

Baryta iodata: Glandular enlargement and growths especially of tonsils and breasts. Breast cancer after trauma. Increased leucocytosis. Also consider **Baryta carbonicum**.

Baryta muriaticum: In cases of the elderly and in childhood where the person is *dwarfish, both mentally and physically*. Whizzing and buzzing in the ears. Affects the parotid glands and pancreas. Child goes around with mouth hanging open and talks through the nose. Hard of hearing. Suppuration of tonsils after every cold.

Belladonna: Marked by a *rapid onset*. Right-sided mumps where the glands are *bright red and hot*. Violent shooting pains. Burning in the throat. Pains come and go suddenly. Glands are sensitive to the touch. Glowing redness of the face. *High fever, dazed and delirious, eyes sensitive to the light*.

Bromium: Suited to blue-eyed, fair people, scrofulous constitutions. Children with pale delicate skins. Enlarged *indurated glands*. Especially left-sided with *stony hard glands* that

are warm to the touch. Hoarseness of voice. Onset from *over-heating*, worse damp weather and sensitive to cold and drafts. Slow inflammation of the glands that become hard but seldom suppurate. Metastases to breasts or testicles.

Carbo vegetabilis: Persons who have never fully recovered from a previous illness. *Cold and pale with lack of reaction.* Metastases to the ears, deafness. Sensation as if throat has closed. Swelling of testes and breasts.

Jaborandi: Also known as **Pilocarpus**, seems to surpass all the rest for the treatment of mumps. *It acts very quickly and relieves the pain.* Suitable when there are metastases to the breast or testes. *Rapid swelling of all salivary glands.* When the *swelling of the parotid suddenly subsides as the result of a chill* and worse troubles supervene. Face, ears and neck become deeply flushed and drops of perspiration break out over the body while the mouth waters and saliva pours out in a continuous stream. Great thirst. Tension in the salivary glands. Urea in the saliva. Very nervous and tremulous. Nervous deafness and tinnitus. Mouth dry. Affinity to the thyroid: goiter and hyperthyroidism.

Lachesis: Especially mumps of *the left side.* Parotid enormously swollen; *sensitive to the least touch*, the least possible pressure causes severe pain: shrinks away when approached; can scarcely swallow liquids but better swallowing food. *Purple, livid color* of throat. *Collar must be loosened around neck.* Septic parotiditis. Purple, mottled, bloated face. *Flushes of heat.*

Lycopodium: Mumps that *begins on the right side and moves to the left.* Desires

warm drinks. Urinary or digestive complaints often accompany the other symptoms.

Mercurius: Right-sided inflammation of the parotid and submaxillary glands. *Offensive salivation. Foul tongue and offensive sweat. Profuse salivation with ulceration of mucus membranes.* Gland is swollen and tender but pale. Soft swelling of the glands with *tendency to pus formation* or abscess. *Fluctuations in temperature.* Other mercurial salts may be indicated depending on the particulars.

Parotidinum: Can be used as a preventative for mumps or when complications arise (i.e. *cerebral inflammation or orchitis*). Can be used *post infection* in cases of sterility or chronic enlarged glands.

Phytolacca: Inflammation and stony *hardness of glands where pain shoots into the ear when swallowing.* Metastases to breasts and testes. The greatest affinity to *tumors of the breasts and glands, with pus* and fetid-smelling discharges. A remedy for absorption of growths, fat and cancers. Right-sided mumps, worse from warm drinks and empty swallowing. Bluish-red parts of the throat with sensation of a lump in the throat. Great pain at root of tongue on swallowing. Worse from heat of bed and at night.

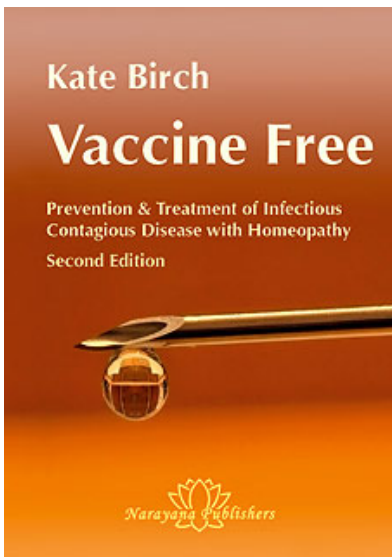
Pulsatilla: Adapted to persons of the phlegmatic temperament. Symptoms *changing with pains that rapidly shift from one place to another. Weeping and whining* behavior. *Thirstlessness* with nearly all complaints. Dry mouth with a thickly coated tongue. Hearing as if the ear was stuffed. Sensation in the ear as if something was being forced outward. Mumps metastases to the

breasts. Erratic temperature in fevers. Lingered fevers. *Better in the open air.*

Rhus toxicodendron: Left sided mumps where the glands are highly inflamed and enlarged. Worse from *catching a chill while perspiring*. Worse from the cold, cold winds, *cold and wet weather*. *Stiff neck and back with restlessness*. Pains are burning and stinging. Accompanied by herpetic sores on the lips.

Trifolium repens: This remedy produces specific action on the salivary

glands. Prophylactic against mumps. **Trifolium pratense** may also be used and is related to this remedy in symptomatology. Discomfort and *pain in the glands followed by copious salivation*. Pain, congestion, and hardening of the glands, especially the submaxillary, worse lying down. Sensation as if heart would stop, with great fear; better sitting up or moving about, worse when alone, with cold sweat on the face.



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