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

Reading excerpt
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of Kate Birch

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Rabies is a viral disease of mammals. Rabies is an RNA virus belonging to the genera *Lyssavirus*, of the order of *Mononegavirales*. Rabies is most often transmitted through the bite of a rabid animal. The vast majority of rabies cases reported to the Centers for Disease Control and Prevention (CDC) annually occur in wild animals like raccoons, skunks, bats, and foxes. Domestic animals account for less than 10% of the reported rabies cases, with cats, cattle, and dogs most often reported rabid.

Although all species of mammals are susceptible to rabies virus infection, only a few species are carriers for the disease. In the United States, rabies virus variants have been identified in bats, raccoons, skunks, foxes, and coyotes.

Routes of transmission include contamination of mucous membranes (i.e., eyes, nose, and mouth), aerosol transmission, and corneal transplantations (through contact with the eye). The most common mode of rabies virus transmission is through the bite and virus-containing saliva of an infected host.

Humans can be exposed to rabies if they have been attacked or bitten by a rabid animal. Following primary exposure, the virus enters an eclipse phase (dormant phase) in which it cannot be easily detected within the host. This incubation period may vary from a few days to several years, but is typically one to three months. During the eclipse phase, the host’s immune defenses may confer cell-mediated immunity against viral infection because rabies virus is an easily recognizable antigen. If immunity is developed, the disease will not progress.

In cases where the disease does progress, the virus can enter directly into peripheral nerves at the site of infection and indirectly after viral replication in the surrounding muscle cells. It is transported into the central nervous system (CNS) via the peripheral nerves. Dissemination of the virus within the CNS is rapid, and includes early involvement of the limbic system, the part of the brain that controls emotions. Active cerebral infection is
followed by passive centrifugal spread of the virus to the peripheral nerves. The amplification of infection within the CNS occurs through cycles of viral replication and cell-to-cell transfer of progeny virus. Centrifugal spread of virus leads to the invasion of various tissues that are rich in nerves, and the salivary glands. During this period of cerebral infection, the classic behavioral changes associated with rabies develop.

The first symptoms of rabies may be nonspecific flu-like signs such as malaise, fever, or headache, which may last for days. There may be discomfort, tingling, or numbness at the site of exposure (bite). As the disease progresses, neurological symptoms appear and may include insomnia, anxiety, confusion, delirium, abnormal behavior, slight or partial paralysis, excitation, hallucinations, agitation, hyper-sexuality, hyper-salivation, frothing at the mouth, convulsions, difficulty swallowing, sensation of suffocation, and hydrophobia (fear of water). Death usually occurs within two to ten days of the onset of symptoms. In humans, the outcome is almost always fatal.

Several factors may affect the outcome of rabies exposure. These include the virus variant, the dose of virus (i.e., how much saliva was contacted), the route and location of exposure, (i.e., whether the bite was in the foot or head), as well as individual host factors, (i.e., age and host immune defenses). Susceptibility to rabies is increased if the wound does not bleed freely. Free bleeding of the wounds helps to clear out the wound. The ability to develop an exonerative discharge will also prevent the development of the disease. Different remedies are indicated for the treatment of rabies depending on which discharge was suppressed (i.e., blood, sweat, urine, stool, and other bodily excretions). Promotion of these discharges will lessen the susceptibility to developing the disease.

Of those bitten, 40-50% will become infected with rabies. The suspected animal should be captured and observed for ten days after the incident to determine if it is in fact a rabies host.

The direct fluorescent antibody test (dFA) is most frequently used to diagnose rabies. This test requires brain tissue from the animal suspected of being rabid. The test can only be performed post-mortem (after the animal is dead). This is not very helpful in determining if an animal is infected while it is still alive. Several tests are necessary to diagnose rabies ante-mortem (before death) in humans; no single test is sufficient. Tests are performed on samples of saliva, serum, spinal fluid, and skin biopsies of hair follicles at the nape of the neck.
Vaccination and Treatment

Conventional prevention of rabies and includes both passive antibody (immune globulin) injections and vaccination.

There is no conventional treatment for rabies after symptoms of the disease appear. However, two decades ago scientists developed an extremely effective new rabies vaccine regimen that provides immunity to rabies when administered after an exposure (post-exposure prophylaxis) or for protection before an exposure occurs (pre-exposure prophylaxis). Although rabies among humans is rare in the United States, every year an estimated 18,000 people receive rabies pre-exposure prophylaxis and an additional 40,000 receive post-exposure prophylaxis.18

Pre-exposure vaccination is recommended for persons in high-risk groups such as animal handlers, veterinarians, and certain laboratory workers. Other persons whose activities bring them into frequent contact with rabies virus or potentially rabid bats, raccoons, skunks, cats, dogs, or other species should also be considered for pre-exposure prophylaxis. In addition, international travelers likely to come in contact with animals in areas of endemic dog rabies that lack immediate access to appropriate medical care should consider pre-exposure prophylaxis.

If rabies is suspected, consult state or local health departments, veterinarians, or animal control officers to make an informed assessment of the incident and to request assistance if needed. After exposure to a potentially rabid animal, wash the wound thoroughly with soap and water, and seek medical attention immediately.

Homeopathic Prevention and Treatment

Rabies was quite common during Hahnemann’s day and he recommended using **Belladonna** 200C every third or fourth day for several doses and then spreading the doses out to every week and then every month for several months to not only cure the imminent infection but to ward off the possibility of progressive disease. Louis Pasteur was the first to develop a vaccine for rabies but it took several years to fine-tune the vaccine as many of the first individuals who received the vaccine ended up dying of rabies. In light of fine tuning the vaccine, Constantine Hering developed the nosode of rabies from the saliva of a rabid dog as an attempt to administer the disease in a way that would not be toxic to the individual. He was the first to prove **Lyssin**, also known as **Hydropobinum**. The
symptoms developed from the proving were much like those of hydrophobia, so he introduced it into practice for the prevention and treatment of rabies. He recommended using it in the same manner as Hahnemann had recommended Belladonna.

Dr. Boenninghausen, a contemporary to Hahnemann, advised preventing rabies with the following alternation of remedies over five days: Belladonna 200C, Hyoscyamus 200C, Belladonna 200C, Stramonium 200C, and then again Belladonna 200C. As this disease is rapid and fatal, this multiple remedy approach is more likely to affect a positive result than a single remedy, and waiting to see if it takes action.

The mere act of being bitten by a wild and aggressive animal can instill a level of fear and defense in the victim whether or not the animal is infected with rabies. This reactive state of being marks the hydrophobic miasm, or acute miasm. The main feeling is one of acute threat and the reaction is strong and instinctive. The main remedy for this miasm is Lyssin.

I have treated several individuals and animals (see Tetanus) who have been bitten by either a cat or a dog who can concur that the feeling that enters them as a result of the attack is one of fear, defense, and threatening aggression. It is a poisoned feeling in their blood separate from the degree of infection in their wounds. More often Lyssin is the remedy that addresses not only the wound infection but also the marked mental and emotional accompaniment. This feeling of fear and defense can also occur after attack from another human if the condition of the attack is like that of a wild animal. Some instances of child abuse fall in this category. The main feeling in Lyssin is that of being dependent and tortured. There is a desire to attack the aggressor but it is followed by quick repentance because the victim is fearful and/or dependent on the aggressor. Much like the dog being dependent on yet fearful of his master.

Depending on the susceptibility of the person, other states of being may be induced by an animal bite. Accordingly, one or other of the remedies listed below may be more indicated. In some situations, the state of the person provokes attack. Consideration of this is relevant for homeopathic remedy selection.

A nine-year-old boy was brought into my clinic because of violent and threatening behavior. His adoptive mother said he would run after her and threaten her with a knife. His case history revealed that a rabid dog had bitten him at the age of four, but he had also been the victim of child abuse as his drunken father had beaten him many times. He was eventually taken into custody by the authorities and adopted out. The adoptive mother described his
state as if he were a wild animal. He did not trust anyone and was prone to violent outbursts after which he would beg for forgiveness. **Lyssin** matched his symptoms. The attack of the dog must have induced a hydrophobic state in the boy despite not developing active rabies. This case brings up the question of whether he was more susceptible to the attack of the dog because he had been a victim of child abuse and/or if he was more susceptible to becoming afflicted with the state of hydrophobia because of this history. Unfortunately, we do not have the results of the case as the mother did not understand the reasoning in homeopathy and was hesitant to give him the remedy.

Rabies vaccination is required for all dogs. Pet owners have concern over the impact of this vaccine on their animal’s health. **Lyssin** 30C along with the other remedies listed above can be alternated in the days preceding and following vaccination in order to help clear the miasmatic tendency the vaccine will create.

Several other remedies match the intensity of this state and accordingly can treat rabies. Following are descriptions of remedies indicated for rabies. Many are either derived from poisonous animals, are poisons which threaten the existence of life, or they are alkaloids from plants which can produce a violent animal-like state of mind.

Curative action of the remedy depends on the degree of neurological involvement. Remedies given at the time of the bite will act preventatively for the condition. If the mental state is strong, the appropriate remedy will help resolve it in the days following administration. If the disease has progressed to the point of advanced neurological symptoms, curative action will be demonstrated by an increase in discharges, perspiration, saliva, and urine. If the disease has progressed too far, the chances of recovery are lessened. Constitutional remedies may be needed to facilitate complete recovery.


**Aconite**: The *rapidity of action* of Aconite, as it is a deadly poison, determines its appropriateness for conditions in which the symptoms set in with great intensity. *Anxiety, fright, and shock*. Fears death and believes that he will soon die. Predicts the day.
Someone who sees something very frightening and panics and goes into a shock. Does not want to be touched. Restlessness; physical and mental. Sudden fever. Worse from checked perspiration. Numbness and tingling, shooting pains, icy coldness in the limbs, burning in internal parts. Loud, labored breathing. Trembling and temporary stammering. Chokes on swallowing. Tingling sensation of strangling.

**Apis**: Indicated in cases of bites of poisonous animals. Is indicated when nature of the wound is marked by burning, stinging, sharp pains, and excessive swelling. Apis produces serous inflammation with effusion; membranes of the brain, heart, and pleuritic effusion. Sudden shrill cries in hydrocephalus. Great anxiety, restlessness, and fidgety. Awkward; drops things readily. Listless, cannot think clearly. Sexual mania alternating with stupor. Jealousy. Panting breath, feels every breath would be his last. Sudden involuntary biting teeth together. Throat constricted. Thirstless.

**Arsenicum**: This mineral poison is indicated in states of great restlessness, anxiety, and prostration. Fears death will ensue. Fears he had been poisoned. Despair of recovery. Thinks it useless to take medicine. Fear of death and disease. Chilliness with burning pains. Speech rapid, lisping. Bites tumbler while drinking. Sips water often. Trembling, jerking, convulsions and chorea, twitching. Epilepsy; suddenly becomes unconscious with convulsions.

**Belladonna**: Acts upon nerve centers producing twitching, convulsions, and pain. Changeable moods. Hallucination; see monsters, and hideous faces. Biting, striking, tearing mania. Stammering speech. On being spoken to flies into a violent rage. Excited mental state, hyperesthesia of all senses, delirium, restless sleep, convulsive movements, dryness of mouth and throat with aversion to water. Cheeks and ear-tips brilliant scarlet, other parts of face, especially around mouth are white as snow, eyes brilliant, staring, pupils dilated. Skin dry and hot like fire. Fullness and congestion of parts, especially the head.

**Cantharis**: Sphere of action is in exciting the animal passions. Burning, stitches, shooting pains, and exudation are the indications. Violent inflammation causing frenzied delirium. Moaning and violent cries interspersed with barking. Paroxysms of rage with crying, barking, biting, and worse by bright objects, by touching the larynx, and drinking cold water. Sexual excitement during pains. Anxious restlessness ending in rage. Acute mania, sudden loss of consciousness with red face. The mucus is profuse, tenacious, and ropy. Saliva disgustingly sweet.
**Cuprum:** Affecting the nerves of the cerebro-spinal axis and muscles, causing *spasmodic effects, convulsions, and cramps of violent form.* Striking inward of diseases (disease rapidly go in towards the nervous system). Chorea from fright. Confusion, afraid of everybody who approaches him. Loquacious, then melancholy with fear of death. **Attacks of rage, wants to bite the bystanders.** Strong metallic, slimy taste with flow of saliva. **Grinds the teeth. Froth from mouth.** Stammering speech. Loss of speech. Blue in the face. **Better from cold drinks.**

**Hydrocyanic acid:** *Convulsions and paralysis* are the leading keynotes of the medicine’s action. *Effects are sudden; spasms, collapse, strokes.* The body is stiffened and thrown back during convulsions. Unconsciousness. Wild delirium. Loud involuntary screams just before the convulsions. **Spasmodic constriction in larynx, feeling of suffocation, pain and tightness in chest, palpitation, pulse weak and irregular. The breathing comes in paroxysms, jaws set, foaming at mouth, face flushed, bluish tint.** Noisy swallowing drink, rumbles through throat and stomach. **Icy coldness.**

**Hyoscyamus:** Disturbs the *mind, brain, and nervous system* profoundly. **Diabolical force seems to take possession** of the brain preventing its functions. **Hyos.** causes a *mania of a quarrelsome and lascivious nature.* Inclined to be unseemly and immodest in acts, gestures, and expressions. Jealousy. **Very talkative and persists in stripping herself or uncovering genitals.** Afraid of being poisoned. Muscular twitching, spasmodic affections. **Active mania or convulsions alternates with/or ends in deep stupor.** Falls suddenly to the ground with cries. Foams at the mouth. Tongue protruded with difficulty, can hardly draw it in. Speech impaired. Bites the tongue while talking. **Constriction of throat, inability to swallow liquids;** solid and warm food better. Fluids come out through the nose.

**Lachesis:** Fever with *tossing delirium and mania,* low forms of disease when the system is thoroughly poisoned and the prostration is profound. Intensively rapid onset. Nerves become very sensitive, especially cutaneous and vasomotor nerves. Delusions; she is under super-human control; thinks she is dead and preparations are being made for her funeral; **thinks herself pursued, hated, and despised.** Mocks. Crawls on the floor, spits often, hides, laughs, or is angry during spasms. Insane jealousy and suspicion. **Sudden forcible protrusion and retraction of tongue.** Thick blundering speech. Cannot open mouth wide. Symptoms appear on *left side.* **Sensation of constriction in the throat.** Worse from sleep. **Septic conditions and hemorrhage.**

**Lyssin:** Heightened sensations, *exquisite sensitiveness to breath of air, to bright objects, especially the surface of water, to sounds, and most of all to the sound of running water.* Headache from bite of dog, whether rabid or not. Worse by **noise of running water, bright light.** Cannot bear heat of sun.
Copious thick saliva. Constant spitting. Thirst with inability to swallow. Severe twitching in arms and legs. Better from excessive sweating, and steam baths. Rapid speech and impatience are very noticeable. Dangerously violent temper followed by quick repentance. Desire to kill with a knife. Rude, abusive, bites, and strikes. Feels he cannot physically endure his fears any more.


Stramonium: A marked and persistent disorder of the mental faculties. Nymphomania. Religious mania; an exaggerated and ridiculous scruple of conscience. Fixed notions; that some unpardonable sin has been committed, which the patient is nevertheless unable to remember; that he is possessed of the devil. Hallucinations. Dread of darkness and a horror of shining objects. Fear and anxiety on hearing water run. Sight of water or anything glittering brings on spasms. Stammering. Hallucinations which terrify the patient; sees ghosts, vividly brilliant or hideous phantoms, animal, jumping sideways out of ground or running to him. Worse from looking at shining objects, water. Increases the mobility of the muscles of expression and of locomotion, the motions may be graceful, rhythmic, or disorderly. Allays spasmodic movements and restores suppressed excretions in which absence of pain is a prominent symptom. Passes neither urine nor stool. Dry, dribbling, or viscid saliva. Cannot swallow on account of spasm. Worse on swallowing.

Tarentula hispanica: Symptoms appear suddenly and with violence. Affects the nerves which are highly strung; producing remarkable nervous symptoms, hysteria, and chorea. Extreme restlessness; must keep in constant motion even though walking aggravates. Moral depravity. Crafty, cunning. Selfish. Palliates the agony of death pains. Nymphomania. Music causes excitement. Violent pains, neuralgias, as if thousands of needles were pricking. As of insects creeping and crawling. Thirst for cold water. Tongue drawn backward preventing speech. Alternate chills and heat. Dyspnea and complains, signs of suffocation, vomiting, agitation and convulsions. All symptoms ameliorated by music.

Xanthium spinosum: Spiny cocklebur is said to be specific for hydrophobia. Hemorrhagic tendency; blood does not clot. Diarrhea. Waking from suffocation. Sensation of walking on wool. Pain in the back, thighs, and lower limbs.

Notes: