Manfred Mueller
Homeopathic Cancer Drugs: Oncology Materia Medica

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Homeopathic Cancer Drugs: Oncology Materia Medica
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ABOUT THE AUTHOR

Manfred Mueller, MA, DHM, RSHom(NA), CCH, is a German born American homeopath who’s been in fulltime private practice since 1986, with an international phone practice since 2004. Mueller brings to his homeopathic practice a background in psychotherapy combined with university level studies in research methodologies, laboratory sciences, health sciences, philosophy, exegesis, and language translation. Decades of experience in wilderness first aid, and tactical first aid complement his understanding and practice of homeopathic acute prescribing.

In 1989, Mueller founded and taught homeopathy at The Homeopathic College. In 2007, the college began to offer downloadable training in advanced homeopathic topics (i.e. The Mueller Method™) such as how to: treat multiple disorders at once; deal with complex conditions; remove the all-prevalent predisposition to cancer; identify, remove & antidote obstacles to cure; institute gentle mercury/heavy metal chelation; and so much more.

Mueller has lectured on homeopathy at Duke University, Durham, NC, USA, at homeopathic conferences in the US & Canada, and since 1995, he has been a guest lecturer on homeopathy at UNC School of Medicine in Chapel Hill, NC. He was President of the North American Society of Homeopaths (NASH) from 2005-2014. He was awarded a lifetime membership to NASH in 2016 for his years of dedicated service. Mueller has degrees in psychology from the University of Tübingen, Germany, and from the University of West Georgia, Carrollton, GA, USA.

Mueller’s book, *Homeopathic Cancer Drugs: Oncology Materia Medica* (2017), 2 Volume set, is the first of its kind and he hopes to add several more materia medicas to the homeopathic repertoire in the coming years. He is the author of dozens of scholarly articles available at www.TheHomeopathicCollege.org. He is married and enjoys spending time with his family.
Forward to the Second Edition

The Two Volume First Edition has been well received around the world. I am glad to see that many of our fellow homeopaths are realizing the value of our contribution, as evidenced by the need to publish a second edition within less than a year after the book was first published! This new edition has virtually the same content as the previous one. There is a focus on the classical homeopathic cancer drugs that have considerable documentation of use, and a few additions from outside of homeopathy that ought to be in our Materia Medica. When a drug has come from outside of homeopathy, yet has shown efficacy for certain cancers, I have included it for one of the following reasons, (a) through (j), as explained below.

We are honored by the enthusiasm several homeopathic publications have shown to review our new tool for homeopathic cancer treatment, and wish to thank the reviewers for their commentaries and suggestions. Five reviews from homeopathic publications around the world have already been published for the first edition, including one by Fran Treuherz, of England, for the peer-reviewed journal, The Homeopath; and Dr. Joe Rozenwajg, NMD, of New Zealand, for the New Zealand Homoeopathica journal and the Australian Homeopathic Association journal Similia.

Petra Wood, in her review for Homeopathic Links, has expressed her “discomfort” at various sections, including the lack of clarification of the references to myself, with the designation MM. I would like to thank Ms. Wood for her comments, and I would like to take the opportunity to clarify these references here.

Citations

Most of the references to other homeopathic authors in the text, i.e. to particular pathologies, clinical notations, case documentation, etc. come from standard homeopathic sources, i.e. Encyclopedia Homeopathica, Roger van Zandvoort’s Complete Repertory, etc., Reference Works, and hundreds of homeopathic journals, more than two hundred well-known Materia Medicas, and published reports of the use of a drug in many books on homeopathic cancer practice. For a complete list of standard text please see the Bibliography/Abbreviations section.

References to Manfred Mueller

My own citations mostly refer to data about drugs introduced by myself into homeopathy in the, yet to be published, Therapeutic Index. Most citations are derived from outside of homeopathy; many of them are well-documented cancer drugs. And some are changes made as I found mistakes already in our repertories, such as incorrect rubrics, incorrect pathologies, or fixing other omissions in existing texts. While compiling this massive work, I decided that our database of homeopathic oncology drugs should include information from outside of homeopathy and those include the following categories:

a) Reports of well-known homeopathic drugs already in our literature used to treat certain cancers successfully, but used outside of homeopathy. For example: Arsenicum has a listing for promyelocytic leukemia, with reference to MM. This citation refers to my discovery of the successful use in oncology by Dr. Soignet at the Slowen-Kettering Cancer Center in
Manhattan, N.Y., of arsenic trioxide in low doses for this disease. The mention of this drug by Cigliano, Lilenthal, Eizayaga, etc. for other types of leukemia corroborates how this conventional therapy rightfully belongs to homeopathy. Another example is the work of Morgan who concluded that aspirin’s documented anticancer action on colorectal cancer is homeopathic in nature (see Acetyl salicylicum acidum, under Salicylicum acidum).

b) Published and unpublished reports of cases from homeopathic authors, but appearing outside of our standard homeopathic literature, who have used a classical remedy successfully in treatment for a given cancer pathology. Example 1: An unpublished case of glioma brain cancer treated successfully by an unnamed homeopath with Conium maculatum. Example 2: A case I found published on the web, by a physician named Lenard, using Helleborus and Isador™ in successfully treating a case of diffuse pontine glioma.

c) Research showing that specific drugs, already contained in the classical homeopathic materia medicas or case literature, have shown efficacy in treating certain cancer pathologies, demonstrating that the drug ought to be used for that cancer in homeopathy - even if no previous homeopathic citations for that pathology or other documentation could be found in my search of the homeopathic literature. Numerous examples exist, i.e. Senega has been shown to be effective against lung cancer cells, in a study by Paul et al. (2011); etc.

d) Research studies demonstrating that a drug was shown to be effective in potency in studies, including in case studies, for a certain cancer pathology, even if not previously mentioned for the pathology in the standard homeopathic literature. Example 1: A study found Carcinosinum was effective in treating induced liver cancer. Example 2: Calcarea carbonica has been effective against Ehrlich ascites carcinoma cells in a research study. This and others will hopefully be included in a future edition of this work.

e) Eclectic medicines once widely used for cancer, according to information derived from the Eclectic Materia Medica by Felter, Sayre, etc. and from pharmacopeias of several countries documenting this historical use. While many of these medicines had already been introduced into homeopathy during the 19th century, i.e. by Hale, Jones and others, there are still many more that rightfully belong to homeopathy because they have a proven symptomatology and can be used “homeopathically” for cancer.

f) Alternative cancer therapies found effective, and that could be even more effective if used on homeopathic indications. Example 1: Hydrazine sulfate was found effective for cancer of the thyroid, colon, rectum, prostate, breast, and various forms of lymphoma - when given in low, safe doses. If these were prescribed on proven indications and given in potencies, we likely could expect even better results, as peer-reviewed research is beginning to show. Example 2: Chaparral (Larrea tridentata) was documented to be effective in treating a number of cancer pathologies. If it were administered on homeopathic indications (given the proving by Todd Rowe, MD), it would likely be even more effective. Also, substances containing small amounts of cyanide (B17 or Laetril therapy), found in our Materia Medica, i.e; Amygdala, have been shown by research to be effective in the treatment of cancer.

g) Carcinogenic agents already included in our existing materia medica, that have been shown to induce cancer in general or in specific cancers. Based on research on tautopathy (see my papers of this subject, available on our website http://www.thehomeopathiccollege.org/, and elsewhere, see below), these agents should be tested in homeopathic treatment of cancer, as has been done with our established cancer drugs Methyl blue and X-ray. The carcinogen gasoline (petrol) was included by Boericke under Benzatum in his materia medica, because it causes leukemia.

In this context, regarding the question of “provings” of conventional medical drugs, I would like to point to the work, especially, of O.A. Julian, and recently, of Brazilian
physician Marcus Z. Teixera, MD, PhD, on using side effects, or secondary effects of drugs on pathogenetic indications. These specific carcinogens are by definition homeopathic to the respective cancer pathologies; in potency or low dose, and they ought to be of use in treating these cancers.

Example 1: Cyclophosphamide has been shown to induce cancer in conventional practice, and was found in studies to induce all sorts of cancerous pathologies. Example 2: *Microcystis aeruginosa* causes liver cancer and ought to be of use in such cases if suitable on homeopathic indications derived from pathogenetic trials. There are numerous additional carcinogenic agents I have tested and compiled myself in homeopathic cancer treatment but chose not to include in this book, because I limited the scope to the classical cancer materia medica. Many other new cancer drugs were not included because they have only been used recently. I hope to publish a future work to include these.

h) Documented listings or published cases of folk, herbal, and domestic medicines used for cancers, already included in our materia medica but not yet under any cancer category. My justification of this approach: many drugs already included in our existing classical materia medicas had their original impetus for homeopathic pathogenetic trials and subsequent use from these sources. I especially think Hale’s, Cooper’s, and Grimmer’s contributions to our materia medica ought to be mentioned here, but also many others. Example 1: *Bombenia*, which I identified as *Bauhinia forficata*, was previously mentioned by Grimmer as having “vibrations of cancer”. A Brazilian ethnobotanist, known to me personally, confirmed its use by natives in Brazil for the treatment of various cancers with hemorrhages. Several studies have corroborated this. Grimmer’s use of it in a case of cancer of the uterus with hemorrhage further underscores this. Example 2: A Cherokee medicine man during the late 1970s reported to me at his home in eastern Tennessee his successful use of *Xanthorrhiza* (yellow root) in a few cases of cancer of the lung. The cited pathologies are derived from his report of cases he and a few others treated successfully. (The citation of a squamous cell cancerous ulcer in the text is referring to a case of my own).

i) Well-established use and mention of a proven classical homeopathic drug in traditional medicine, including Chinese, Ayurvedic, Egyptian, European, and other texts. Example: *Hydrocotyle asiatica*, a homeopathic medicine for cancer, was long used in India and China for cancer treatment. It has been used in Traditional Chinese medicine for cancer of the liver. There are numerous other examples.

j) Finally, occasional citations from my own cases, including some otherwise unpublished case, or cases only mentioned in classes or lectures. Example: *Lyssinum*, and several other drugs were used in a case of a carcinoma of the forehead. Example 2: *Helleborus* was used in a case I treated of diffuse intrinsic pontine glioma.

**Crude Drugs in Homeopathy**

Incidentally, cures achieved by material doses and very low decimal doses, if given on homeopathic indications, are widely found in our classical literature and are “homeopathic” by definition, provided their proven characteristics resembled the case to be treated. This follows closely the practice of some our more prominent homeopathic cancer pioneers. The work of Dr. R.T. Cooper comes to mind, who insisted on using *arborvital tinctures*, on indications he sometimes derived from his own personal observations and partly even based on the doctrine of signatures. Recent studies have shown that many such homeopathic drugs in their crude form may NOT act by direct cytotoxic or apoptotic
action, as do mainstream chemotherapy drugs, even though they have been shown by research to cause analogous anticancer effects. But instead, they stimulate systemic responses that in turn trigger apoptosis by other pathways. Studies have even found that they sometimes trigger pathways identical to those, and the potentized version of the same drug could be used to induce the same effects as the crude, safely and without side effects.

Furthermore, many drugs derived from herbal sources, when given in very low doses or even in potency, have action on cancer cell lines in vitro while remaining inactive against normal healthy cells, according to several recent studies. This would support the inclusion of many more herbal medicines as mild and gentle homeopathic treatments in unpotentized crude extract form, and in many cases probably also in potency, once proving studies have been conducted with these herbal substances or with their potencies, in cases where they are homeopathically indicated.

Research shows that many such herbs are safe for cancer treatment. For further examples of this new research, please read my research reviews on the homeopathic treatment of cancer. Please also read my interview with Professor Khuda Bukhsh, all available on the web or on my websites http://www.thehomeopathiccollege.org/ and https://homeopathicassociates.com/.

According to Dr. Moshe Frenkel, formerly of the MD Anderson Cancer Center in Houston, Texas, patients are the driving force behind homeopathic cancer treatment. Dr. Frenkel, I myself, and many others, have observed that people are treating themselves for cancer with homeopathy - on their own - even without any training whatsoever, using the hard to find information as best as they could, and sometimes successfully so. However, we are not advocating that the present work should be used by patients to treat themselves. It takes years of experience to acquire the training, knowledge and insights necessary to conduct effective cancer treatment, a task that should be left to expert homeopathic prescribers.

The oncology materia medica has taken 14 years to write. A repertory and therapeutic index with modern medical terms has been in the works since 2005. I expect this to take several more years to complete from the time of this writing April 2019. When it is finished, God willing, it will be in excess of 700 pages in the published book format. I have begun a collaboration with a medical doctor/homeopathic practitioner with military-level computer systems experience work on a computerized version of a repertory to the Oncology Materia Medica.

For a future editions of this text, I would like to invite the homeopathic professional community around the world to point out errors, send me their constructive criticism, suggestions, clinical comments and published case documentation.

Please send them to: Manfred@thehomeopathiccollege.org

While the first edition was a success and sold out within one year, its two-volume format was cumbersome to distribute and use. We are happy to report that a new, one-volume edition has been printed. The present new edition contains the full content of the previous edition, the only relevant changes being corrections of some factual errors. We hope you will enjoy the new format.

Spring 2019,
Manfred Mueller
FOREWORD TO THE FIRST EDITION

“We homeopaths don’t need more information; we need better information.”

-- Frans Vermeulen,
in private conversation at the
Joint American Homeopathic Conference,
Reston, Virginia 2012

With the incidence of cancer on the rise worldwide, an oncology materia medica is long overdue. The present two volume compilation - the first homeopathic materia medica dedicated to oncology - is, of course, a clinical materia medica. In compiling this first edition of *Homeopathic Cancer Drugs*, it was my goal to assemble in a single work references to all the drugs that have been used historically, as well as many new drugs that are used for the homeopathic treatment of cancer.

When I first began this effort, homeopathic practitioners had to search laboriously for the “cancer remedies” through dozens of books, all of them incomplete, and sorely lacking in details. These books usually list the cancer drugs by location of cancer, with a few short remarks as indications. Computerized repertories and materia medicas have greatly improved our access to the information. However, the information the homeopathic oncologist needs is still hard to come by: either a repertory listing (and then only listed by its location in the body, or a listing in one of several dozen materia medicas – listed only by the symptomatology. The present handbook contains the whole information, compiled from more than three hundred homeopathic books, journals & computerized databases, and many sources from outside of our homeopathic literature. The *Oncology Materia Medica* will be available in both bound book form and in digital form with an advanced professional search program.

About *Homeopathic Cancer Drugs*

The format of *Homeopathic Cancer Drugs* goes beyond that of existing “materia medica” databases in existence. It has some 600 chapters -- one for each drug. Each chapter has up to 15 sub-chapters. In designing this scheme, I asked myself what information the practitioner would need to select a suitable drug for each case. The sub-chapters of the book contain the answers to that question and are self-explanatory. The scheme allows the practitioner to choose the best drug by even more criteria, including indications sorted by pathology, patients’ characteristics, etiology, constitutional traits, signs and symptoms, posology, pathogenetic trials, pharmacology, case documentation, as well as citations for where to find the above information. In addition, scientific studies investigating the efficacy of homeopathic potencies of various drugs that were published in peer-reviewed scientific journals are included, wherever available.

Furthermore, since our homeopathic materia medica is a compendium of knowledge from the early 19th century through the present time, the identification of some of the source materials and their pharmacology was outdated and needed to be updated to
current scientific standards. With this volume, I am happy to present a clinical materia medica “retrofitted” with modern scientific and medical research.

**Preservation of Our Legacy**

Another purpose of the present anthology is to preserve our treasure of more than two hundred years of clinical observations and knowledge that still, to this day, have the potential of making a significant contribution towards the successful treatment of many types of cancer. The current compilation constitutes a historical record that contains the sum of homeopathic oncological drugs, from founder Hahnemann’s first few cancer remedies, to hundreds of newer cancer drugs - all still useful in today’s homeopathic medical practice.

In light of the documented historical fact that homeopathy has been persecuted and marginalized as a medical therapy from its very inception to the present day by the medical, chemical and drug cartels, this book is a kind of “Noah’s Ark” that will save our knowledge from being lost or forgotten. This compendium also serves to counter current and future attempts by the more treacherous members of the medical-industrial complex to eliminate homeopathy altogether. But I digress. If you wish to learn more about the history of this covert endeavor, please read my article “Racketeering in Medicine: The Campaign to Marginalize Natural Therapies.”

Homeopathic medicine is a dynamic clinical science, and yet its database is ever cumulative. In this book I have included every drug I could find, regardless of which school of homeopathy, folk, or alternative medicine introduced it. Many of the early homeopaths in America were trained in the Eclectic School, and many used herbal tinctures they had adopted from traditional European and North American Indian healthcare practices. Pioneer doctors had their favorite drugs, including for various cancers, many of them adopted into homeopathy. Many drugs – especially from natural sources, including snake venoms - came from other regions, such as Central and South America, Asia, Africa, Australia, New Zealand and many other places. Once introduced into homeopathy, they became part of a global Materia Medica, often tested in proving experiments or RCTs, which frequently confirmed the suitability of their traditional uses.

**The Future of Homeopathic Drugs**

A future new source of drugs are those derived from the world’s modern botanical researchers. Thousands of medicinal herbs from traditional therapies are being studied, and they could become incorporated into our practice in the future. I have included some of them because they simply should be in our materia medica and I hope practitioners will both prove and test them, and that their patients will benefit from them. Scientific studies have found that herbal extracts or tinctures are as effective at inducing apoptosis as their synthetic equivalents, with the added benefit that they do not attack healthy cells. This is the case often when using the homeopathic potencies of drugs with anticancer properties. Since the side effects are virtually non-existent, why not give homeopathy a try?
Another major potential source of new drugs is the ever-growing field of “low-dose” drugs in medicine, such as the use of arsenic trioxide treatment for certain types of leukemia. Or perhaps the recent testing of a low-dose copper compound for Lou Gehrig’s Disease (amyotrophic lateral sclerosis or ALS). These approaches rightfully belong to homeopathy; since the homeopathic drug Arsenicum album has long been used by our practitioners to treat various leukemias; and the homeopathic use of low-potency Cuprum metallicum and its compounds have long been used for the treatment of neurological disorders.

Just as exciting is yet another promising category of homeopathic cancer drugs referred to as tautopathic drugs. Tautopathy usually refers to treatment of an artificially-induced disorder with a micro-dose or potency of the drug or toxic agent that caused that disorder. In this edition of Homeopathic Cancer Drugs, I have included tautopathic drugs such as Cortisonum, Mobile phone, Cisplatinum, Cyclophosphamidum and many others. All of these conventional drugs have been proven to cause cancer in their crude dose – which, consequently, is the dose used for conventional treatment of a disorder. You can learn more about tautopathy and its historical use in homeopathy in my 2011 paper “The Practice of Tautopathy During the Classical Era of Homeopathy: A Review of the Literature.”

Conclusions and Thanks

Much more could be said about Homeopathic Cancer Drugs. Having seen remarkable success in this field myself, I wish to encourage newcomers to our therapy from around the world to learn all there is to learn about homeopathy, especially the motto of our founder Hahnemann, “Aude sapere” or “Dare to think.” And please do dare to use these drugs for cancer treatment!

I wish to thank the many late homeopathic physicians and authors from whose work the present information is derived, as well as our contemporary homeopathic colleagues and experts, some of whom had the vision to put much of this information into digital form. I also wish to thank my wife Christina for her continued support and encouragement; my children and friends; the impromptu volunteer proof-reading effort by our colleague and friend, Kristy Lampe, who appeared just in time to help finish the project; Natasha for her expert layout & design help; and all those whose understanding, encouragement, and patience has made this volume possible.

Manfred Mueller
May 2017
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Abies canadensis.


Pathology. Cancer of throat; stomach; cancer of uterus; cervix uteri; cancerous affections.

Indications. Indicated for cancer of the throat, stomach, uterus, cervix, and for cancerous affections; in irritable patients, quiet, careless but easily fretted; aged persons with nutritional deficiencies and with peculiar food cravings, obese men who overeat, women with uterine displacement; and rachitic children; with cold shivering all over as if blood turned to ice-water, chills down back; gaping, drowsy; restless at night, with tossing from side to side; bloated; weak; hands cold, shrunken; lies with legs drawn up; prostrated, wants to lie down all the time; hemolytic anemia, faint, as if top of head were congested; drunken feeling; twitching of the muscles; sensation: as of cold water between the shoulders; as if top of head were congested; as of a light-headed, tipsy feeling; of wet clothes on the back; cold shivering all over as if blood turned to ice-water; as of a light headed, tipsy feeling; gnawing, hungry, faint sinking sensations with craving for indigestibles.

Symptomatology. THROAT: Cancer. Sore, ulcerated throat. Foul breath, tongue coated yellow, body of the tongue a dark red. Difficulty in swallowing; takes only liquid food, reduced appetite. Ulcerated and of a dark reddish appearance; wit sharp, darting pains in the throat. Dryness of the mouth and throat, with thirst. Worse from tea and acids.


FEMALE GENITALIA/UTERUS/CERVIX: Cancer. Sensation as if the womb were soft and feeble; fears it would cause abortion. Sore feeling at the fundus of uterus; better by pressing. Faint sinking sensation in the pelvis in women with uterine displacement. Peculiar cravings and chilly sensations that are very characteristic, esp. for women with uterine displacement, probably due to defective nutrition with debility.

GENERALITIES: Cancerous affections. Cold shivering all over as if blood turned to ice-water. Chills down back. Gaping, drowsy. Great restlessness at night, with tossing from side to side. Bloated. Excessively weak. Hands cold, shrunken. Lies with the legs drawn up. Great prostration, wants to lie down all the time. Hemolytic anemia. Very faint, as if top of head were congested; drunken feeling. Twitching of the muscles. Feeling as of cold water between the shoulders. Sensation as if top of head were congested. Cold shivering all over as if blood turned to ice-water. Sensation as of a light headed, tipsy feeling. Feeling of wet clothes on the back. Gnawing, hungry, faint feeling in the epigastrium. Faint sinking sensation in the pelvis in women with uterine displacement. Sore feeling at fundus of uterus, relieved by pressure. A feeling as if the right lung and liver were small and hard; pain beneath right scapula. Sensation as of a stye in outer canthus of left eye. Sensation as if the liver were small and hard; as if bile were deficient.

MIND: Quiet, careless; but easily fretted. Irritable.

Abies-c.


**Interactions.** Antidoted by: Camphor.

**Etiology.** Abuse of tea and tobacco. Prolonged history of overeating. Defective nutrition.


**Clinical Notations.** (1) The oil of hemlock is very extensively used in liniments. The oleoresin commonly known as Canada pitch is used in plasters very extensively. The tincture is valuable in obstinate cases of leucorrhea; 1 part of specific *Pinus canadensis* to 3 parts of castor oil applied locally to walls of vagina and cervix of uterus every other day is of great value. A little echinacea and tiger lily may be added. Of value locally as an astringent in sore throat.

(2) There are peculiar cravings and chilly sensations that are very characteristic; especially for women with uterine displacement, probably due to defective nutrition with debility.

(3) According to Hale, *Abies canadensis* has cured: A light-headed feeling, attended with a gnawing, hungry and faint feeling at epigastrium. A craving hunger which, if gratified, was followed by distention of the stomach and hard beating of the heart... *Abies canadensis* has been only imperfectly proved; but it has marked symptoms which will serve to indicate it in any case of disease in which they may be prominent: Great appetite, tendency to overeat: gnawing, hungry, faint feeling in epigastrium.

(4) This agent acts upon the mucous membrane of the stomach, producing a catarrhal condition, a depraved appetite, lowered nutrition. There is a prolapsus of the uterus as a result of the defective nutrition.

**Posology.** First to third potency. In cancer of throat, a gargle made from the tincture. Mother tincture and 3X Unofficial Canada Pitch, applied externally. For cancer of the cervix, one part of specific *Pinus canadensis* to 3 parts of castor oil applied locally to walls of vagina and cervix of uterus every other day.

**Pathogenetic Trials.** (1) Gatchell in 1872 conducted an experiment on himself and 1 other prover taking doses of the tincture; details unknown.

**Pharmacology.** *Tsuga canadensis* is an evergreen tree native to Eastern North America, subalpine Alaska, British Columbia, Washington, and Oregon. It grows in marshy areas, and prefers colder temperatures. It grows to more than 100 feet tall, has slender, horizontal branches, toothed, flat needles, and mature trees have a reddish bark. It contains both male and female cones. The oldest Hemlock on record was 554 years old, however it is believed it may reach up 800 years of age.

North American Indian tribes including Iroquois, Micmac, and Chippewa made a tea-like drink from the leaves, which also became popular with lumbermen. Indians also used the tree bark for tanning, a process they taught the early settlers. Hemlock contains tannins and has stimulant and astringent properties. It was used as an astringent in sore throats. A decoction of the bark was used for aphthous and gangrenous ulcerations. The oil of hemlock was once extensively used in liniments. The oleoresin commonly known as Canada pitch was used in plasters for rheumatism. The tincture was widely used in obstinate cases of leucorrhea in castor oil and applied locally to the walls of the vagina and the cervix of the uterus. Snow recommended tampons soaked in
extract of *Pinus canadensis* be held in the vagina for 48 hours after hysterectomies. Whitlaw recommended infusions of the plant for fevers. Folk cancer uses of *T. canadensis* leaf extracts include internal use for carcinoma of the uterus. Ritch-Krc found anti-cancer activity in several traditional pitch preparations, including Canada pitch.

Dead tree trunks of *Tsuga canadensis*, both standing and fallen, may become home to *Ganoderma tsugae*, a beautiful orange-red fungus, that grows on hemlock trees. Often referred to by the Japanese name Reishi (Chinese Ling-zhi) *Ganoderma lucidum*, grows on hardwoods in eastern Asia, although some experts consider the two the same species. For medicinal purposes the two species are interchangeable. Studies have found significant anti-cancer properties for Reishi mushrooms.

**Case Documentation.** (1) Cancer of the Throat: In May, 1891, I treated a lady for cancer in the throat. The glands of the throat were not affected. The breath was foul, tongue coated yellow, body of the tongue a dark red. She had difficulty in swallowing and took liquid food the best, but there was not much appetite and her vitality was low. The throat as far down as it could be seen was ulcerated and of a dark reddish appearance; she complained of sharp, darting pains in the throat. My treatment was as follows. Every other day I painted the diseased surface of the throat with pure lactic acid and had her use the following gargle: R: Ex. White *Pinus Canadensis* (Kennedy's) 3ii.EGJ:178


### Abies nigra


**Pathology.** Cancer of esophagus; stomach with hemorrhage; cancer of lungs; cancer of lymph nodes; cancerous affections; of glands; with hemorrhage. Cancer; JHC of esophagus; MM stomach; MM rectum; MM with hemorrhage; MM cancer; JHC of lungs; MM with hemoptysis; cancer; RMu of lymph nodes; RMu cancerous affections; JTK of glands; RMa with hemorrhage.

**Indications.** For cancer of the esophagus, stomach, rectum, lungs, lymph, and for cancerous affections of the glands, with or without hemorrhages; in sad, dull patient who fear cancer, hypochondriacal, low-spirited, melancholic, nervous, sad, feel mentally aged, blocked, unable to think or study, difficulty ‘digesting’ information, bulimia; dull during day; wakeful at night; old people; abusive persons; old smokers with a sensation as if a hard body, as a hard-boiled egg, had lodged there; in cases with chronic indigestion from habitual tobacco chewing or smoking; indigestion aggravated by tea; tobacco; desires: cucumber; sleepy during day; wakeful and restless at night; bad dreams; wakeful; sleepless at night; with hunger; restless sleep; chronic intermittent, with pain in stomach; chilly; indigestion with heart complaints or dyspnea; hemorrhages; sensation: as if choking; of an undigested hard-boiled egg in stomach; as if everything was knotted up in stomach. In chest, as if something had to be coughed up. rheumatic pain and aching; in bones; alternate heat and cold; constriction; above pit of stomach; sensations of a lump; worse after eating.
**Symptomatology.** ESOPHAGUS/STOMACH: Cancer. Painful sensation as if something were lodged in chest, mostly on right side of sternum, which had to be coughed up, though nothing comes, after taking food that disagreed. Feeling of a lump (egg, stone) or constriction in top of stomach; agg. immediately after eating. Feeling in the epigastrium as if food were lying there. Frequent eructations. Continual distressing sensation about stomach as if everything was knotted up; worse whenever debilitated. Pain in the stomach always comes after eating. Total loss of appetite in morning, but great craving for food at noon and night. Offensive breath. Eructations.

RECTUM: Cancer; with hemorrhage. Constipation with dyspepsia; hungry and wakeful at night. Sensation of constriction, as if there was a hard substance or lump lodged in the rectum and needed to be expelled. Constipation with dull and heavy sensation in the head and hot face. Constipation with indigestion and complete loss of appetite; worse in the morning but great craving for food at noon and night, and pain in small of back.

LUNG: Cancer; of right lung; with hemoptysis. Sensation as if there was a hard substance to be coughed up. Sensation as if something were lodged in chest, mostly on right side of sternum, which had to be coughed up, though nothing comes, after taking food that disagreed. Impaired and difficulty respiration.

LYMPH: Cancer; of lymph nodes; with sensation of lump in nearby organ.

GENERALITIES: Cancerous affections; of glands; with hemorrhages; lymphoma. Dyspepsia, indigestion, aggravated by tea; tobacco. Desires: Cucumber. Sleepy during the day, but wakeful and restless at night. Very bad dreams. Wakeful; sleeplessness at night; with hunger. Restless sleep. Chronic intermittent, with pain in stomach. Chillsiness; especially round stomach. Malarial fevers. Indigestion with heart complaints or dyspepsia, esp. in old people. Hemorrhages. Hypochondriasis. Bulimia. Worse after eating. Pain in the stomach always comes after eating. Sensations: As if choking; of an undigested hard-boiled egg in stomach; as if everything was knotted up in stomach. In chest, as if something had to be coughed up. Pain; in stomach after eating; in small of back. Rheumatic pain and aching; in bones. Alternate heat and cold. Constriction; above pit of stomach. Sensations of a lump (throat, lungs, stomach). Worse after eating.


**Interactions.** Antidoted by: Camph.

**Etiology.** Trauma (hemorrhage). Abuse of Chinese (black) tea. Abuse of tobacco, chewing tobacco, pipes, cigarettes and cigars.

**Constitutions.** Old people. Smokers.

**Clinical Notations.** (1) Sensation in the cardiac end of the stomach, or in the esophagus where it enters the stomach, as if a hard body, as a hard-boiled egg, had lodged there (Puls., Bry.). Where this symptom is present, whether in dyspepsia, lung disease (when the sensation is as if there was a hard substance to be coughed up) with or without hemoptysis, constipation, and cancer, Abies-nigra will be the most likely remedy. The dyspepsias caused by abuse of tea or tobacco have been cured by it.
(2) Powerful and long-acting remedy, in various forms of disease, whenever characteristic stomach symptoms are present. Most of the symptoms are associated with the gastric disturbances. In dyspeptic troubles of the aged, with functional heart symptoms; also after tea or tobacco.

**Posology.** 1st to 30th potency. WB:1-2

**Pathogenetic Trials.** (1) Leaman in 1867 conducted an experiment on 3 provers, 1 man, 2 women, taking 1 drop doses daily of the tincture of the gum; or 2 to 7 drops; or 3 to 6 drops twice a day; both women discontinuing the experiment after a significant sense of illness developed. Leam (2) St. Clair-Smith chewed the gum of *Abies nigra*, details unknown. St.Clair (3) Bell conducted a self-experiment taking repeated doses of 5 to 15 drops of the 18th, and the 9th potency; and from the tincture to the 30th potency. Bell

**Pharmacology.** An evergreen tree found growing to 90 feet tall, in swamps and cold mountain woods in northern United States and Canada and as far south as the North Carolina highlands. Its needles are short, stiff, crowded, six or eight lines long, either dark green or glaucous-whitish. The cones are ovoid, one to one and one-half inches long, mostly recurved, persistent, the scales with a thin, often erosely-dentate edge. The resin is obtained by distilling the volatile oil from the oleo-resin. It forms translucent, pale yellow, angular, brittle, glassy masses; the odor and taste terebinthinate. It is soluble in alcohol, benzene, solvent ether and carbon di-sulfide; partly soluble in petroleum ether; insoluble in water.

North American Indians made poultices of the inner bark and applied them externally to inflamed areas. The inner-bark tea was once used for rheumatism, stomach problems, diarrhea and kidney stones. The resin was applied to sores and ulcers to promote healing. Anti-inflammatory, antioxidant and anti-proliferative effects of *Picea mariana* have been demonstrated in several studies.

**Case Documentation.** (1) Hemorrhage from the Esophagus or Stomach after Trauma: 
A patient of my own, after a fall from a bicycle, vomited blood, and complained of a persistent sensation as if something were sticking in the esophagus, towards its lower end. *Arnica* removed the hematemesis, but did not touch the morbid sensation. Under *Abies nigra* 3x, it yielded immediately. RH


**Abrotanum.**


**Pathology.** Cancerous affections; with cachexia.

**Indications.** Neglected as a cancer drug, *Abrotanum* is indicated for cancerous affections with cachexia beginning in the lower extremities, and for cancer prevention; in anxious, excited patients with a cruel streak, child cross, depressed, very peevish, would like to do something cruel, lack humanity, thinking difficult, feel as if brain softening, excited, loquacious, like shouting, or good-humored, happy; tuberculous, rheumatic, gouty and
cancer diathesis; persons complaining of a weak, sinking feeling in the abdomen and a sensation as if stomach were hanging or swimming in water, and enlarged mesenteric lymph nodes; children, especially boys; after anemia has set in; anemic; emaciated; marasmus, yet with good appetite; tumors; angioma, fungus hematodes, hemangioma, naevi; weak, sickly feeling, when excited, trembling; rheumatism from suddenly checked diarrhea, cannot move head, arms or limbs and suffer much pain, no swelling; lame, sore, weak, prostrated after influenza; unable to move; numb; worse from cold, getting wet, checked secretions, i.e. diarrhea, at night, fog, better from loose stool and motion.

**Symptomatology.** GENERALITIES: Cancerous affections; with cachexia; prevention. Anemia and emaciation. Marasmus, yet with good appetite; in children. Tumors; angioma, fungus hematodes, hemangioma, naevi. Weak, sickly feeling, when excited, trembling. Rheumatism from suddenly checked diarrhea, cannot move her head, arms or limbs and suffers much pain, no swelling. Lame and sore all over. Weak and prostrated after influenza. Inability to move. Numbness.

**MIND:** Great anxiety and depression. Child cross, depressed, very peevish. Feels she would like to do something cruel; no humanity. Thinking difficult. Feels as if brain softening. Excited, loquacious, like shouting, good-humored, happy.

**Differential Diagnosis.** *Agar.; Chin.; Cimic.; Con.; Gels.; Led.; Phos.; Rhus-t.; Scroph-n.; Stell.; Zinc.* Other Compositae: *Absin.; Cham.; Cina; Gnaph.* etc. Chilblains: *Agar.; Nux-v.*


**Clinical Notations.** (1) Meta means change, stasis means place: change of place. That doesn't mean (as many people say) that if there is a cancer which is metastasized from the breast to the lungs, that you give *Abrotanum*. It will be very rare that you will need *Abrotanum* in such a case.

(2) The weakness becomes more and more pronounced. The patient may be unable to stand or cannot hold up his head because of the weakness of the neck. (*Aeth., Calc-p.*) This whole state, which naturally never shows itself in such a marked degree, can accompany many different diseases; for example a chronic tuberculous or cancerous peritonitis with enlarged abdominal glands... You will not give *Abrotanum* in cancer cases where you have metastasis. In *Abrotanum* it means that something stops in one place and then appears in another. This is not so in cancer. Many people give *Abrotanum* for cancer. What can *Abrotanum* do in cancer? Nothing... GV

(3) For the prevention of cancer. Increased circulation. Opens the small arteries and veins (capillaries) This stimulates the metabolism and immune system. Kopf

(4) The most prominent symptom of *Abrotanum* is the wasting it causes, most marked in lower extremities.

**Pathogenetic Trials.** (1) Gatchell conducted an experiment on 2 women; methodology unknown. *Gatch* (2) Cushing in 1866 conducted a self-experiment taking 6 drops of the tincture prepared by maceration from the entire fresh plant; over a period of several days. *Cush* (3) Stockebrand in 1927 conducted a trial on 13 persons, genders not stated, taking doses of the 3x, 2x, 1x potencies and the tincture; methodology not stated. *Stock* (4) Imhäuser in 1927 conducted a trial on 5 children, each taking doses of the 1x and tincture; details omitted. *Imhäu* (5) Swoboda in 1984 conducted a placebo-controlled, partially blinded trial on 11 persons, evaluating protocols of 8 persons, 5 men, 3 women, taking a dose of 1 globule of the 30C potency or placebo 3 times daily; for a period of 4 weeks.
**Posology.** Third to thirtieth potency.\textsuperscript{WB}

**Pharmacology.** A shrub, native to southern Europe and the Levant. It is about three feet (1 m) in height, leaves bi-pinnatifid, the young leaves covered with whitish silky hairs. The taste is burning, sharp and bitter; the odor aromatic mixed with that of lemons. *Artemisia abrotanum* was introduced into North America from Europe in 1548. It was introduced into homeopathic practice by Deventer. It has been used traditionally as a vermifuge, and to treat malaria and, rarely, cancer. An infusion makes a bitter tonic used against cancer, fever, cough, and tumors. The plant contains eucalyptol, camphor, thujone, sesquiterpenes like fenchene, caryophyllene, humulene, artemisinin, and phenolic compounds. Studies have found anti-cancer properties in *A. abrotanum*.\textsuperscript{Sure}

**Case Documentation.** None known.


**Abrus.**


**Pathology.** Cancer,\textsuperscript{JHC} of eye,\textsuperscript{MM} lids,\textsuperscript{MM} epithelioma,\textsuperscript{JHC} nose,\textsuperscript{MM} skin,\textsuperscript{JHC} cancerous affections,\textsuperscript{JHC} cancerous ulcers,\textsuperscript{MM} carcinomatous lupus,\textsuperscript{MM} epithelioma.\textsuperscript{JHC}

**Indications.** For cancer of the eye, lids, nose, skin, and for cancerous affections, cancerous ulcers, carcinomatous lupus, and epithelioma; in irritable, hypersensitive patients, with great cell proliferation, granulations; inflammation, after recent injury or irritation of tissue, and with a tendency to headaches, pain in the limbs, fevers, and high pulse; purulent or diphtheritic affections; and malaise.


**MIND:** None known.

**Differential Diagnosis.** Ophthalmia: *Ip*. Trachoma and pannus to engraft a new purulent inflammation: *Jequiritioilum*.

**Interactions.** Antidoted by: Camphor.
Etiology. Recurrent injury, irritation and resulting inflammation of tissue.

Constitution. Sensitive persons.

Clinical Notations. (1) Great cell proliferation, lupoid conditions, epithelioma, sloughing ulcers… Prepared in this way it is like an emulsion and is applied to the surface to be treated with a large camel hair pencil or mop. The application of this emulsion to ulcerated surfaces is almost painless, but soon (often within an hour) there is much irritation and inflammation, the edges become red and infiltrated, surrounding tissues edematous and shining. In the course of from six to twelve hours a desiccated cuirass-like crust has formed which cracks in twenty four hours more, and the discharge escapes freely. This goes on for five or six days, the quantity of discharge diminishing. The crust then separates or is removed by water dressing and discloses healthy granulations. If any unhealthy granulations are left the application is repeated. Shoemaker says of the result of this treatment, that it exercises a destructive tendency on unhealthy granulated conditions followed by a constructive change, promoting under the protective cover of the exudation which it causes, a rapid development if healthy tissue. But it must be used with caution, for “it may give rise to erysipelatous inflammation, and if used on weak and irritable patients, to great constitutional disturbances.” Shoemaker gives a series of striking cures with the remedy, but the constitutional effects are more important to homeopaths. They are: headache, pain in the limbs, fever, high pulse.

(2) This remedy has been employed in granular lids and ulcers, lupus and in epithelioma. It is used locally in the majority of cases.

(3) Epithelioma, lupus, ulcers, granular lids.

(4) Epithelioma, granular lids, lupus, ophthalmia and ulcers have been cured with this remedy. It acts chiefly on the skin and mucous membranes.

Posology. Mother tincture diluted locally and 3x internally. Trituration of the seeds; applied topically; 3-6 X internally.

Pathogenetic Trials. None known.

Symptoms were derived from clinical reports of cured cases.

Pharmacology. *Abrus precatorius* is a climbing plant, a native of India, but has been introduced to the Western tropics, and its use as an eye remedy was discovered by the natives of Brazil, who gave it the name Jequirity. It has “small nearly globose seeds, which are of a brilliant scarlet color, with a black scar indicating where they were attached to the pods” (Trees of Bot.). These are used for necklaces, and as a standard of weight under the name of Raté. The roots are used in the same manner as liquorice roots. The method of its employment in eye affections is as follows: Thirty two grains of the powdered seeds are allowed to soak for twenty four hours in a thousand grams of water. The preparation Shoemaker used is made as follows: Two hundred grains of the beans are decorticated by being slightly bruised and crushed in a mortar, the red hulls being carefully picked from the cotyledons, the latter are put in a bottle and covered with distilled water. They are thus macerated twenty four hours, then transferred to a mortar and thoroughly triturated to a smooth paste. Sufficient water is then added to make the whole weight 800 grains.

The protein poisons contained in Jequirity seeds are almost identical in their physiological and toxic properties with the similar principle found in snake venom. *Abrus precatorius* was the plant employed by Professor Nowack to determine meteorological and telluric forecast owing to the extreme sensitiveness of its leaves to atmospheric disturbance.

Case Documentation. (1) Carcinomatous Lupus: In a case of ulcerative lupus of both sides of the nose which was cured by five applications, the first was followed by: an
enormous amount of inflammation, accompanied by malaise, febrile exacerbation (103°), which lasted till the crust began to dry. 


**Absinthium.**


Note: Not to be confounded with *Artemisia vulgaris*, also called Wormwood.

**Pathology.** Cancer;*Matt* of prostate;*Matt* cancerous affections;*Matt*

**Indications.** *Absinthium* is indicated for cancer of the prostate and for cancerous affections; in nervous, over-excitatable patients, sleepless, exalted, addictive personality, kleptomania, wants nothing to do with anybody, brutal insanity; dull, hallucinating, fear of killing, being murdered, assassination, soothed, as if going into a beautiful dream, frightful visions: sees animals, rats of all colors; is pursued by enemies, by soldiers, imaginary enemies, naked women; weak memory, for what has recently happened, after and before convulsions, confusion with headache, loquacious, insane; idiotic, stupid, dangerously violent, insensible with convulsions, desires death, during convalescence; elderly or young people; and persons with psychotic or epileptic manifestations, with a characteristic vertigo, nausea in the gallbladder region, a swollen feeling in liver and spleen areas, inactivity of the bowels, and presence of parasitic infections; anemic, prostrated; affections of brain; dizzy, nauseous; hyperemia of CNS; worse from alcohol; small ecchymoses; paralysis of inner organs; intoxication; alcoholism; mushroom poisoning; epileptic seizures; preceded by trembling and nervous tremors; sudden severe giddiness, delirium with hallucinations and loss of consciousness; fall down, as in epilepsy, unconscious, with distortion of features, then spasms; bloody foam at mouth; biting of tongue; stupidity; loss of memory; opisthotonos; grinding teeth; stupor; tremor; swollen sensations; enlarged liver and spleen; ascarides; cold feet very; horrible dreams; excited and sleepless.

**Symptomatology.** MALE GENITALIA/PROSTATE: Cancer. Spermatorrhea with relaxed and enfeebled parts.

GENERALITIES: Cancerous affections; in young people and in elderly patients. Anemia. Very rapid prostration. Affections of brain. Vertigo, nausea. Hyperemia of brain, medulla and spine, more intense when combined with alcohol. Occasionally stomach, more frequently endocardium and pericardium show small ecchymoses. Paralysis of inner organs. Intoxication. Alcoholism. Mushroom poisoning. Epilepsy. Convulsions preceded by trembling. Nervous tremors precede attack. Sudden and severe giddiness, delirium with hallucinations and loss of consciousness. Falling down, as in epilepsy, unconscious, with distortion of features, then spasms; bloody foam at mouth; biting of the tongue; stupidity; loss of memory; opisthotonos; grinding teeth; stupor; tremor; swollen sensations; enlarged liver and spleen; ascarides. Feet very cold. Horrible dreams. Nervous excitement and sleeplessness.

Manfred Mueller

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