Homeopathy and Influenza
- the Spanish Flu Experience

Stephen Malthouse, MD
The Immunity Challenge Conference

Spanish Influenza 1918-1919

- The Spanish flu was first reported in Canton, China in February, 1918 and spread with amazing rapidity across the world - to Asia, Europe, North and South America, Africa, India, Australia and New Zealand - spurred on by the movement of military troops in WWI.

- Where did it start? China, Tibet, France, Ft. Riley (US)?

- It was called the Spanish flu (the Spanish Lady; "The Naples Soldier" by the Spanish) because it was first officially recognized in Spain in May 1918. Spain was neutral in the First World War and had no need to censor the illness from its population in order to maintain focus on the war effort.

- It went on to kill an estimated eight million people in Spain alone.

Spanish Influenza 1918-1919

- The first wave was relatively mild - symptoms sufficient to incapacitate a person but not kill everyone. It is referred to in some accounts as the Three Day Flu.

- The epidemic seemed to subside over the summer months.

- It was not until late August 1918 that the second wave appeared, after a probable mutation of the virus, beginning in Freetown (Sierra Leone), Brest (France) and Boston (USA).

- The onset of the second wave was different. Symptoms included sudden onset of high fever, severe incapacitating aches and pains, severe headaches, sudden suffocation and then rapidly advancing, leading to the heliotrope hue of air hunger, cyanosis and death.
“Twenty-two year old Joseph Alexander traveled from St. George’s to St. John’s to enlist in the Royal Newfoundland Regiment on October 14, 1918. Two days later, he went on sick parade and was admitted to the Barrack Hospital – diagnosis: “Influenza”. The next day, he was transferred to the General Hospital. He died on October 20, 1918. His name appeared in the Casualty List in the Daily News on October 22, 1918, a military career of 6 days.”

Spanish Influenza 1918-1919

- The epidemic reached its peak in September and October 1918, slowly decreasing in November and December. This was followed by a Third Wave in February, March, and April of 1919.
- The previous Flu Epidemic of 1889–90 had high morbidity (40% of world’s population) but a low mortality rate, affecting mainly the young, old, and frail.
- For that reason, the prospect of another flu epidemic was not viewed seriously except for the decrease in the manpower and industrial facilities of the Home Front because of sickness in the general population.
- Spanish influenza was unusual in that it struck down many young, healthy adults. More than 50 per cent of all influenza victims were between 20 and 40 years old. Millions of children were orphaned. The “manpower” that ran the economy was decimated.

Spanish Influenza 1918-1919

- So fast did the 1918 strain overwhelm the body’s natural defenses, that the usual cause of death in influenza patients—a secondary pneumonia—never had a chance to establish itself. Instead, the virus caused a primary viral pneumonia with an uncontrollable hemorrhaging.
- 50% of pneumonia cases died.
- Some died within 6 hours of exhibiting symptoms. Dr. D.G. Stine: “I saw one patient die within 18 hours of the onset of the disease.”
- “As their lungs filled ... the patients became short of breath and increasingly cyanotic. After gasping for several hours they became delirious and incontinent, and finally died rather than arrange for a blood-stained froth that sometimes gushed from their nose and mouth. It was a dreadful business.”
  — Isaac Starr, 3rd year medical student, University of Pennsylvania, 1918.
Because of frequent hemoptysis and epistaxis (often shooting more than a foot from the bedside), the doctors, nurses and orderlies walked around the wards covered in blood.

Ominous signs: heliotrope coloring (“as blue as a huckleberry”), bilateral ptosis (drooping of eyelids).

Reports of people falling off their horses dead; dying walking down the street.

Ships returning from WWI were often called “floating caskets”; so many men were sick and dying that body fluids were “running through the corridors.”

In city morgues, “Bodies the color of slate were stacked like cord wood from floor to ceiling.”

A medic’s letter 1918

“Camp Devens is near Boston and has about 50,000 men or did have before this epidemic. Some sense. A new building is being constructed for the use of the N. East. This epidemic started about four weeks ago and has developed so rapidly that the camp is demoralized and all ordinary work is held up till it will pass. All disembarkations of soldiers taken.

“Here are some vivid notes written during the epidemic:

1. "The disease appears to be an extremely acute form of La Grippe or influenza, and spreads through the hospital like a virus. Over the most vicious type of pneumonia that has ever been seen. The patient starts with a headache, fever, and in a few hours loss of appetite. The patient is out of bed and walking by himself. It is simply a struggle for air until they suffocate. It is horrible. One can stand it to see one, two or twenty men die, but to see these poor devils dropping out like flies sort of gets on your nerves. We have been averaging 100 deaths per day, and still keeping it up…”

2. "We have lost outrageous numbers of nurses and Drs. And the little town of Ayers is a sight. It takes special trains to carry away the dead. For several days there were no coffins and the bodies piled up something fierce; we used to go down to the morgue and look at the boys laid out in long rows. It beats any sight they ever had in France after a battle.”

Spanish Influenza 1918-1919

Mortality figures

- Affected 20% of people. Estimated total case fatality 1-3.6% percent
- 5% of the world’s population died. Estimate 20-100 million. (Compare: 11 million deaths in WWI).
- A large numbers of flu deaths probably went unreported in less developed countries. (Possibly 20 million people died in India alone.)
- In Canada the death toll exceed 50,000, spreading from east to west on the transcontinental railway.
- In Saskatchewan, the mortality was said to be more than 5,000. The incidence of illness was one in four - virtually every family experienced the disease.
- Some smaller villages in Quebec and Labrador were almost completely wiped out.
Spanish Influenza 1918-1919

“The influenza struck quickly. People were seized by a sudden weakness, headaches, pains, fever, and a chill - like cold water running down the back. Erstwhile healthy people collapsed on the street or at work, “as if struck by lightning”. Some were dead in 24 hours.”

Spanish Influenza 1918-1919

- Medical facilities were swamped. Only the most fortunate flu patients received hospital care. Most influenza deaths occurred at home.
- In San Diego, California city officials imposed the precaution that everyone had to wear gauze masks when within the city of San Diego. Masks of four-ply surgical gauze which were tied around the mouth and nose were given out to all residents of the city.
- This law was less than popular with the local citizenry. Holes would be cut in the masks to enable people to smoke. Women would wear the masks as a veil, letting them hang loose around their necks. Civil libertarians fought the law on the grounds that it was unconstitutional. The penalty for disregarding the law was a fine of one hundred dollars and thirty days in jail.

Proposed causes of the mysterious epidemic

- Cholera
- Typhoid fever
- Food poisoning
- Appendicitis
- Chlorine gas poisoning
- Mustard gas in the atmosphere
- Scarlet fever
- Sandfly fever in India
- Typhus in Ireland
- Pneumonic plague
- An entirely new disease
- “It looked like influenza, it talked like influenza, it walked like influenza, but it really didn’t act like influenza”
Charles Lewis of Cape Town boarded a train to his parents’ home in Sea Point only 3 miles away. The conductor signaled the train to depart and suddenly died on the platform. Within minutes, a passenger died; then 4 more were struck down. The train stopped 5 times to unload the bodies. With less than a mile to the destination, the engineer slumped over and died.

Spanish Influenza 1918-1919

- In the course of the epidemic, nearly every known therapy was tried – quinine tablets, bleeding, castor oil, digitalis, morphine, arsenic, strychnine, tobacco, hot baths, cold baths, iron tablets, no. 9 pills, pneumococcus, inoculation of mercury perihelion, brandy, whiskey ($20 a quart) and expectorants of pine tar.
- Tobacco as a germicide (Britain) – autopsies performed in a cloud of tobacco smoke.
- Wear nightcaps (Paris); remove false teeth at bedtime (Rhodesia); don't lick your marbles (Vancouver).

Spanish Influenza 1918-1919

- Little was known about the virus, except that it was contagious. Folk remedies and patent medicines that claimed to prevent or cure influenza abounded.
  - Poultices of goose-grease, bran, lard and turpentine and compresses of fir-tree spills, mutton tallow and mustard.
  - 'Fruit-A-Tatives' purported to give the power to resist the disease; and Eucalyptus oil and Peps tablets claimed to cure it. The most popular tonic by far was alcohol. But prohibition made that remedy difficult to obtain.
  - Druggists sold six-ounce bottles of brandy for two dollars, and then only with a doctor's prescription. The Saskatchewan government gave in to strong public pressure to ease the situation and announced, reluctantly, that a prescription was no longer necessary. There was such a run on medicinal alcohol that the government suspended the order after only seven days.
Spanish Influenza 1918-1919

- People stayed shut up in their homes. There were reports that whole families had succumbed and that their bodies lay unburied for weeks.
- The government was put in the awkward position of attempting to legislate neighbourliness.
- In Saskatchewan, an order-in-council suggested that people check on their neighbors from time to time, to help out with the chores and keep the furnace lit.
- The Provincial Bureau of Public Health closed Saskatchewan theatres, bowling alleys, and billiard halls.
- In Saskatchewan, an order-in-council suggested that people check on their neighbors from time to time, to help out with the chores and keep the furnace lit.
- Traveling salesmen and touring theatre companies were stranded. In some communities, it was a criminal offense to shake hands.
- In the U.S., railways demanded passengers have a document certifying they were free of the flu.
- Ordinances made it illegal to spit, cough, or sneeze in public— with threat of $500 fines in New York City.

Spanish Influenza 1918-1919

"My father, his face somber, said to me: 'We didn't want to tell you of the misfortune that had descended upon us, because we didn't know when you would be home, and we knew the news would make your life there unbearable. The terrible flu epidemic has taken 3 of your brothers and 2 sisters in just nine days.'"

A Reprieve?

- With the approach of Armistice Day, November 11, 1918, there developed a general notion that the grip of the influenza would be broken. Just as the Armistice had ended the Great War, so, it was widely felt, it would end the Great Influenza. A sense of optimism and celebration at this prospect built in the general populace.
- A prominent Saskatoon physician shared the optimism. "The only effect this celebration is going to have on the influenza situation, of course, is to improve it." Quite the opposite was true. The Saskatoon victory parade began at 2 a.m. and lasted throughout the day. Even the northern lights participated by putting on a show. Previously careful people, who had shielded their eyes from the virus and become distance for the eggshell were exposed to the onrushing epidemic.
- It took 20 months before the epidemic finally wound. Northern ones, unshielded by the 1918-19 wave, were struck in the 1920s.
- In the wake of the Spanish flu, encephalitis lethargica, or sleeping sickness, claimed an additional 5 million lives.
The Spanish Influenza virus

- In 1933, the virus that caused influenza (in general) was finally isolated by three English scientists, Smith, Andrews and Laidlaw.
- Spanish flu virus H1N1. Initially found from autopsy tissue from Private Vaughn, 21-year old soldier who died in Sept 1918 at Camp Jackson, S.C.
- 1933 – Alaska “Lucy” – 50 year old Inuit woman – Teller Mission, 83% of village’s pop. died in 3 days - one mass grave.
- 1998 exhumations on Spitsbergen Island (Norway) of 7 miners buried in the permafrost.

Spanish Influenza 1918-1919

- How did patients of homeopathic physicians fare during the Spanish flu?

Homeopathy is …

- A very specific therapeutic method using natural substances in ultra low doses to stimulate the body’s own resources
- Lifestyle, diet & obstacles to cure important
- Differs from naturopathy
A Different Medical Approach

- Stimulation
  - Homeopathy uses dilute substances to trigger the body’s healing response.

- Inhibition/substitution
  - Conventional medicine uses substances to interfere with the disease process

Who uses Homeopathy?

GREAT BRITAIN
- 42% of MD’s refer patients to homeopathic practitioners
- 20% of Scottish GP’s use homeopathy in primary care
- 5 NHS homeopathic hospitals in GB

FRANCE
- 30,000 physicians use homeopathy
- 69% of physicians believe H. to be an effective therapy

GERMANY
- 25% of physicians use homeopathy

INDIA
- 102 homeopathic medical schools
- 125,000 trained and degree-level homeopathic practitioners
- 50% of population uses homeopathy

RUSSIA
- More than 500 homeopathic MD’s

USA
- >2000 homeopathic practitioners

CANADA
- >3000 pharmacies selling homeopathic meds
How it all started ...

• Samuel Hahnemann, MD born in Germany 1755
• Quinine experiment 1790
• “Let Like be cured by likes”

Law of Similars:
A substance that can cause certain symptoms when given in large doses to someone who is healthy can cure those same symptoms when given in smaller doses to someone who is sick.

Principles of Homeopathy

• Like cures like
• Infinitesimal doses
• Holism
• Individualization

“Like cures like” – Law of Similars

A substance that can cause symptoms in a healthy person can, in a smaller dose, cure those same symptoms in a sick person.
Arndt-Schultz Law of Pharmacology

The dose-response curve

Examples in Conventional Medicine...

- Ritalin
- Nitroglycerin
- Digitalis
- Antihistamines
- Atropine
- Scopolomine hydrobromide
- Epinephrine
- Serotonin
- Halothane
- Benzodiazepines
- Barbiturates
- Tricyclic antidepressants
- MAO inhibitors
- Carbamazepine
- Morphine
- Salicylates

Examples in homeopathy...

- Ipecac
- Coffee
- Onion
Principles of Homeopathy

- Like cures like
- Infinitesimal doses
- Holism
- Individualization

2. Infinitesimal doses (ultra low)

- Potentization = dilution & succussion
- Medicines are often diluted beyond Avogadro’s number (6.02 x 10⁻²³)
- Activates medicinal properties
- High level of safety
- Can be selected to best match patient’s requirements
Principles of Homeopathy

- Like cures like
- Infinitesimal doses
- Holism
- Individualization

3. Holism

- Homeopathy treats the whole person
- Views the pattern of symptoms as the body’s defense mechanism reacting to adverse stimuli
- Attempts to treat all of the patient’s mental, emotional and physical symptoms with a single remedy, if possible
Principles of Homeopathy

- Like cures like
- Infinitesimal doses
- Holism
- Individualization

Conventional approach to treatment

Drug 1

Drug 2

Drug 3

Drug 4

4. Individualization in homeopathic prescribing

Not based primarily on diagnostic category
Homeopathy treats people, not diseases

"It is more important to know what sort of patient has the disease than what sort of disease the patient has."
-- Sir William Osler

"The germ is nothing. The terrain is everything."
-- Louis Pasteur

Comparison of conventional vs. homeopathic outcomes in the Spanish Flu

(Recorded in the J of the American Institute of Homeopathy 1921)

- In Philadelphia 26,795 cases of influenza treated by homeopathic physicians had a mortality rate of 1.05% compared with the "average old school mortality of 30%". -- Dr. D.W. Pearson (Philadelphia, Penn)

- Dayton Ohio, 24000 case treated allopathically mortality rate 20.2%; homeopathically, 1%. -- Dr. T.A. McCann (Dayton Ohio)

- In Connecticut, 30 homeopathic physicians reported 6,602 cases with 55 deaths, (<1%).

- In a factory in Chicago, Dr Wieland reported treating influenza in 8000 workers, with one death. Gelsemium was practically the only remedy used. He reports no aspirin was used and no vaccines.

Spanish Influenza 1918-1919

- Dr Williams (Rhode Island) reported no losses from influenza and a 2.1% loss in those that developed pneumonia. He observed that Ds using aspirin as the main treatment were having a 66% mortality in those patients that developed pneumonia.

- Dr Sappington (Pennsylvania) reports that from 1500 influenza cases recorded by the Homeopathic Medical Society of the District of Columbia only 15 died. Recovery in the National Homeopathic Hospital was 100%

- In Ohio, Dr McCann treated 1000 cases of influenza homeopathically and had no losses.

- Raymond Siedel decided to become a homeopathic doctor when he was a 10 year old delivery boy for a local homeopath. He said "I saw that people who were taking Aspirin were dying, about half those who were drinking a lot of whiskey were dying, and those that received homeopathic remedies were living."

- "Through the International Hahnemannian Association, I have collected over 17000 cases of influenza with a mortality of 4%." -- Dr. G.B Stearns (New York, NY)
Spanish Influenza 1918-1919

“...My records show 750 cases with one death. Gelsemium, Bryonia and Eupatorium were the remedies chiefly.” — Dr. F.A. Swartwout (Washington, DC)

“I treated 618 cases and had 5 deaths. Three of these had had allopathic treatment.” — Dr. RS Faris (Richmond, Virginia)

“I treated 455 case of influenza and 26 cases of pneumonia with no deaths. Remedies: Gelsemium, Bryonia, Apis, etc.” — Dr. T.G. Barnhill (Findlay, Ohio)

“In the month of October 1918, I treated in round numbers, 200 cases of influenza without a death.” — Dr. WR Andrews (Mannington, West Virginia)

“I have treated 267 cases of influenza. No deaths.” — Dr. A.B. Hawkes (Bridgewater, S Dakota)

“Seventy six cases developed in the Children’s Home without any complicating pneumonia. Most of the cases were Bryonia and Gelsemium, which seemed to be successful in carrying them through to complete recovery.” — Dr. J.G. Dillon (Fargo, N Dakota)

Spanish Influenza 1918-1919

• Dr. H.A. Roberts was a homeopathic physician on a troop ship. Another boat pulled alongside to get any spare coffins – the mortality rate was so high.

• Dr. Roberts’ ship: 81 cases - all treated homeopathically: 0 deaths.

• “One ship lost 31 on the way.”

Spanish Influenza 1918-1919

“I had 300 cases and one death; one good homeopathic doctor has 275 cases and no deaths. I am health officer of my city.” — Dr. H.H. Crum (Ithaca, NY)

“I attended over one hundred cases without any fatalities. I never deviated from the homeopathic remedy. I never gave Aspirin.” — G.H. Wright (Glen, Maryland)

“Three hundred and fifty cases and lost one, a neglected pneumonia that came to me after she had taken one hundred grains of Aspirin in twenty-four hours.” — Dr. Cora King (Washington, DC)

“I treated approximately 500 cases which included much pneumonia, lost two cases. Never used Aspirin nor permitted it to be used.” — Dr. A.B. Palmer (Seattle WA)

“I can only testify from personal experience to the invaluable help which homeopathic remedies gave me in treating the many case of influenza that came under my care at the time. I treated over 100, nearer 150 cases; both rich and poor, young and old, male and female, and the results were astounding. The cases were not picked ones; some were seriously ill when first seen, with high temperatures and bronchial involvement, some had it milder, and yet the temperatures in nearly all cases came down in twenty-four to forty-eight hours. And there was not a single death in the whole of this series and no subsequent complications.” — Dr. Dorothy Sheppard (England)
An Interview with Elsa Engle
(by Frances Kalfus OMD, LAc)

97 years old at time of interview in 1992.

Were you practicing with Dr. Engle?

Well, I learned about everything. It was like I was a nurse practitioner. I must tell you, during the 1918 flu I did practice medicine without being a licensed doctor for five days, and I did not lose a single, solitary patient.

So the flu hit in California also?

Good grief, they died. Nowadays they say that they killed them off with the medicines that they gave them, and I wouldn’t be a bit surprised, because I know they gave you seven things, but I don’t remember what they were. The homeopaths at Hahnemann Hospital didn’t lose any. Dr. Engle lost two patients. One was a young woman, who had gotten married just before the war started. She was pregnant and had a bad heart. Dr. Engle was worried because of her heart, whether she was going to be able to carry the pregnancy to term. When the flu came, she died. The other was a woman who also had a very bad heart. I forget what they called that heart disease, but they were always blue. It was very serious, she was in a very critical state. Those were the only two patients we lost.

Do you remember how you treated it?

They all had about the same symptoms. You didn’t have to do anything else but give them a bottle of Gelsemium, followed with a bottle of Eupatorium perfoliatum. We told them to go to bed, and to stay out of the bathtub and out of the shower, and to keep themselves clean with alcohol rubs. In those days we could get them to clean with alcohol. And to stay on liquids. In five days practically all of them were well.

The age mystery of the Spanish Influenza

Why age 20-40?

• In Connecticut, 56% of the deaths aged 20-40.
  • Military base camps a hotbed for influenza activity
  • ASA, TB, immunological memory, cytokine storm, fear-induced susceptibility

• It was generally observed by homeopaths in the US at the time that the use of Aspirin was a major cause of deaths during the influenza epidemic. Its indirect action came through the fact that aspirin was taken until prostration resulted and the patient developed pneumonia.

“‘The mortality in camp for pneumonia was 25.8%. The lieutenant in charge was persuaded to discontinue Aspirin, Digitalis, and Quinine and the mortality rate dropped speedily to 15% with no medicine whatever.’” — (Dr. W.A Pearson, Philadelphia, Penn)

• In Kentucky Dr Huff wrote “I almost invariably gave (homeopathic medicines) Gelsemium or Bryonia. I hardly ever lost a case if I got there first, unless the patient had been sent to a drug store and bought Aspirin, in which event I was likely to have a case of pneumonia on my hands.”

The age mystery of the Spanish Influenza

“It is a rare thing for pneumonia to develop if a good homeopathic physician is called during the first 24 hours of an attack of influenza. An appalling death rate comes from the beneficial use of large doses of Aspirin, salicylates and opium preparations.” — Dr. AH Grimmer (Chicago, Ill)

“The reason why children fared better than adults in the influenza epidemic was, first they were seen earlier by the physician; second, they were not drenched with “sure cures” — third, they were not filled up with Aspirin; fourth, they were put to bed; and fifth, they were given the proper remedy and had a fine chance.” — J.P. Cobb (Chicago, Ill)

“We treated over 300 cases of influenza among the members of the Student Army Training Corps with no deaths. Gelsemium, Bryonia and Ferrum phosphoricum were the leading remedies. Only in those cases having had Aspirin was convalescence delayed and pneumonia produced.” — Dr. C.B. Stouffer (Ann Arbor, Michigan)
Questions about Influenza + Homeopathy

• Is homeopathy available?
• Is homeopathy safe?
• Is homeopathy inexpensive?
  • In France, research on cost-effectiveness has shown that the annual cost to the social security system for a homeopathic physician is 15% less than that of a conventional physician and the price of the average homeopathic medicine is one third that of standard drugs. (Healthcare professionals in private practice in 1990. Paris, France: Social Security Statistics; CNAM publication 61).
  • The cost of one vial of homeopathic medicine (30c or 200c potency) containing 40 doses (80 pellets) is $3.99 - 7.99 retail and $3.55 wholesale. The frequency of repetition of the dose is dependent upon the type of illness and speed of onset of symptoms/signs, but is commonly 2 pillules three times daily.

Questions about Influenza + Homeopathy

• Is homeopathy effective?
  • Can homeopathy lower the risk of getting infected?
  • Can homeopathy treat or reduce the risk of complications of the infection?
  • Can homeopathy reduce the costs of other prescribed treatments, including vaccination?
  • Can homeopathy speed recovery once the infection is over?
  • Can homeopathy treat related, non-infectious illnesses, e.g., concurrent chronic diseases, grief, emotional shock, anger, depression, anxiety, fear?

Influenza + Homeopathy

1. Prevention
2. Treatment
3. Recovery
4. Concomitant illness
The History of Homeopathy in Epidemics

Homeopathic prophylaxis

- Samuel Hahnemann during an outbreak of Scarlet Fever observed that 3 out of 4 children in a family became ill. The fourth, usually the sickest, remained free of the disease. She was being treated with homeopathic Belladonna for an affection of the finger joints. He deduced that this might have provided protection.
- In a family of 8 children, with 3 already infected with Scarlet Fever, Hahnemann gave the remaining 5 children Belladonna. These children remained disease-free despite continued exposure to their siblings.
- Homeopathic Belladonna adopted by the old-school physicians – 1646 children with only 123 cases (7.5% vs. 90% attack rate at that time).
- In 1838, the Prussian government made homeopathic Belladonna use obligatory during Scarlet Fever epidemics.

The History of Homeopathy in Epidemics

Homeopathic treatment

- 1813 – Typhus fever – an epidemic that followed Napoleon’s army to Russia and back. When the epidemic came through Leipzig, as the army retreated, Samuel Hahnemann treated 180 cases of Typhus, losing 2 patients. Conventional mortality was greater than 30%.
- 1830 – Cholera – Hahnemann identified the stages of the illness from reports coming from the east and was able to predict the remedies needed for each stage of the disease. In Europe in 1831 the mortality rate under conventional Tx was 40% (Imperial council of Russia) – 80% (Osler’s Practice of Medicine). 2-4 out of 5 people died.
  - Dr. Quin in London, reported mortality in 10 homeopathic hospitals as 9% (1931-32).
  - Dr. Roth, Bavaria, reported a mortality rate of 7% (homeopathy).
  - Admiral Mordoinow of the Imperial Russian Council – 10% mortality (homeopathy).
  - Austria: conventional mortality 66%, homeopathic mortality 33% (the law interdicting homeopathy was repealed).
- 1849 Cholera – Europe – conventional mortality 54-90%; homeopathy 5-16%
- 1854 – Cholera – London epidemic. The House of Commons report did not include homeopathic figures. The House of Lords asked for an explanation – might “skew” the results. Conventional mortality 59.2%; homeopathic mortality 9%.
- 1892 – Cholera – Hamburg – Conventional mortality 42%; homeopathy 15.5%.
The History of Homeopathy in Epidemics

Homeopathic treatment

- 1850's Yellow fever (southern US).
  - Usual mortality 15-85% (Sir Wm. Osler)
  - Dr. Holcome (Natchez, Mississippi): mortality rate 6.43% (homeopathy)
  - Dr. Davis reported 5.73% mortality rate (homeopathy).

- 1878 Yellow fever New Orleans -- mortality 50% (conventional) and 5.6% (in 1,945 cases - homeopathy)

- 1862-64 -- Diphtheria – Broome County NY – conventional 83.6% mortality; homeopathy 16.4% mortality

- 1957 -- Polio epidemic in Buenos Aires, Argentina – the symptoms of the epidemic resembled those of the remedy Lathyrus sativa. Homeopathic doctors prescribed “thousands of doses” prophylactically. No cases of polio were registered by these physicians during the epidemic.

Homeopathic Remedies used in Prophylaxis/Treatment (historically)

<table>
<thead>
<tr>
<th>Disease</th>
<th>Remedies</th>
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<tbody>
<tr>
<td>Diphtheria</td>
<td>Apis, Dephik, Kalon, Lac-ve, Marr, Must-ve, Phto</td>
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<tr>
<td>Pertussis</td>
<td>Carbo-c, Cep, Drex, Forma-c, Phto</td>
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<td>Tetanus</td>
<td>Ars, Choral, Tet, Hypos, Lsd, Phys, Tet Ten, Thaga</td>
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<tr>
<td>Pneumonia</td>
<td>Bell, Caus, Car-ve, Catt, Physac, Phto</td>
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<td>Meningitis</td>
<td>Ars-c, Catt, Drex, Kabey, Mallat, Sar, Thaga, Yac, Vaca, St</td>
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<td>Anas, An, Jarry, Merctal, Pdcen, Pldpe</td>
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<td>Mumps</td>
<td>Pntal, Pno, Tlfpe</td>
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<td>Rabies</td>
<td>Y1l, Yubil</td>
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<tr>
<td>chickenpox</td>
<td>Ars, Catt, Cholar, Ceq, Cop-r-e, Ap, Sulph, Vesta</td>
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<tr>
<td>Yellow Fever</td>
<td>Ars, Catt, Ceq-ve, Baral</td>
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Homeopathic Remedies used in Prophylaxis/Treatment (historically)

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<tr>
<th>Disease/Tuberculosis</th>
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<tbody>
<tr>
<td>Plague/Cholera</td>
<td>Bapt, Hyos, Ars, Pest, Rhus</td>
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<tr>
<td>Malaria</td>
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<tr>
<td>Typhoid Fever</td>
<td>Audrin, Sepulch, Lycophy</td>
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<tr>
<td>Tuberculosis</td>
<td>Bic, BOC, Car, Gels, Sulph, Tar</td>
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<td>Rabies</td>
<td>Bell, Curd, Carph, Rhus, Lys, Sulf, Strain</td>
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<td>Tuberculosis Fever</td>
<td>All, Acon, Apis, Bac, Bell, Camph, Eucal, Pity, Rhus, Septum, Sulph</td>
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<td>Influenza</td>
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<td>Chickenpox</td>
<td>Acon, Bell, Chris, Nutling</td>
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<tr>
<td>Hepatitis B</td>
<td>Acon, Hep B</td>
</tr>
</tbody>
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Homeopathic Approaches in an Epidemic

1. Nosodes
2. Genus epidemicus
3. Individualized remedies

Nosodes are

Homeopathic attenuations (dilution and succussion) of
- Pathological organs or tissues
- Causative agents such as bacteria, fungi, ova, parasites, virus particles and yeast
- Disease products
- Excretions or secretions
Nosodes – do they work to prevent disease?

- 1958 influenza epidemic in England, 1100 workers were given Influenzinum and 500 workers were given no treatment. No statistical difference in attack rate.

- 1974 Brazil during a Meningococcus outbreak, 18,640 patients were given Meningococcinum prophylaxis while 6,430 received no treatment.
  - Treatment group had 4 cases; no treatment group had 32 cases.

- 1932 Diphtherinum nosode converted 45 children to Schick test negative (antibodies to diphtheria) (Cavanon).
  - Repeated in 1941- 23 of 33 children converted (Patterson and Boyd)
  - Repeated again in 1946 (Roux) with similar results.
  - Serum antibodies seemed to last up to 5 years with one dose.

- 1999 (Wayne Jonas) – Tularemia nosode compared to placebo vs allopathic vaccination in 142 mice that were subsequently infected with tularemia.
  - Results: Vaccination 100% protection; homoeopathic nosode 22% protection compared to placebo.

Homeopathic Approaches in an Epidemic

1. Nosodes
2. Genus epidemicus
3. Individualized remedies

Genus Epidemicus remedy

- The remedy that fits the majority of patients in an epidemic
- 10-20 patients with the epidemic disease must be individualized for the Genus Epidemicus remedy
- The GE works as a preventive and as the remedy of choice in that epidemic
- The treatment of the epidemic disease is the only instance where a remedy is used to treat many patients
Genus Epidemicus remedy

- The role of the homeopathic community will be to coordinate prescribers to find the remedy or group of remedies that best fit the nature of the epidemic (i.e. the genus epidemicus)
- This may vary by region/province/country
- "The selection of the prophylactic remedy must, to some extent, be governed by the nature of the epidemic, and therefore the best preventive cannot always be determined until the epidemic has appeared, and its peculiar nature has been ascertained" (Dr. Carol Dunham)
- In smallpox, at least 12 different remedies found historically for prevention

In the Spanish flu:
- Four main remedies for genus epidemicus:
  - Gelsemium
  - Bryonia
  - Eupatorium perfoliatum
  - Rhus toxicodendron

Gelsemium (Yellow Jasmine)

- Aching and sore
- Muscular weakness and trembling - tongue, limbs, entire body
- Lack of muscular coordination
- Can hardly keep eyes open, heavy
- Dull and drowsy
- Dizzy (vertigo)
- Chill running up and down the back
- Unusual symptoms:
  - Headache better with profuse urination
  - Fears heart will stop if patient stops moving
  - Children fear of falling -- grasp the nurse or crib

I felt as if I was in hell, says bird flu survivor

By Sebastien Berger in Srisomboon ©The Telegraph (Filed: 22/10/2005)

First her chickens died. Then her niece, coughing blood as she expired in her mother's arms.

A few days later her niece, the gift's mother, was dead and Pranom Thongchan was "in hell", lying in a hospital bed. Her fever raging, she was so weak she could not move and was having difficulty breathing. She was hovering between life and death.

Mrs Thongchan is one of the few people in the world who can describe the devastation that the H5N1 bird flu virus wreaks on a human being.

She lives in the village of Srisomboon at the edge of Thailand's central plains, where a sea of lush green rice paddies begins to give way to the forested hills of the north.

The H5N1 virus, now endemic in southeast Asia, swept through the province's poultry last year, killing the 10 or so chickens Mrs. Thongchan kept to supplement the family's meagre income as tenant tapioca farmers.

A few days later her niece Sakuntala, one of five children in the house, fell ill. "She came back from school and suddenly she got a high fever," said 35-year-old Mrs. Thongchan. "It was just like a normal fever that all children get so we just gave her paracetamol." The village doctor prescribed medicine for a suspected flu infection, and Sakuntala went to school for another five days as her temperature fell and rose again. On the sixth day she had stomach ache and nausea.
"I wasn't steady at the time but the symptoms developed into something quite serious," Mrs Thongchan said. "I was sweating profusely, and felt hot and unwell. I felt as if my body was melting. After being assessed at the district hospital, she was given anti-virals and sent home. That evening she started coughing.

"I knew inside myself it was getting worse, and that night I heard my sister had died in Bangkok. I was thinking I would never see my elder sister again, but I couldn't believe it. The next day I felt worse. I felt like my body was going up in flames. I felt as if I would suffocate. The next night I was very weak, and said she 'imagined' until my sometimes were moving. It really hurt." Alerts by her sister testing positive for H5N1 and fearing the possibility of human-to-human infection, her mother, Pranee Sodchoen, Sakuntala's mother, travelled from Bangkok, where she works, to look after her sister.

"I wasn't worried at the time but then the symptoms developed into something quite serious," Mrs Thongchan said. "I was sweating profusely, and felt hot and unwell. I felt as if my body was melting. After being assessed at the district hospital, she was given anti-virals and sent home. That evening she started coughing.

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Individualized remedies

- Availability of trained, experienced homeopathic practitioners
- Transportation vs. telephone consultations
- Needed to find the genus epidemicus

Do we need homeopathy in view of a possible Avian Influenza (H5N1) pandemic?

Avian Influenza H5N1

- In many patients, the disease caused by the H5N1 virus follows an unusually aggressive clinical course, with rapid deterioration and high fatality.
- The current clinical picture of infection could change.
- Incubation period ranging from two to eight days and possibly as long as 17 days.
- High fever, usually with a temperature higher than 38°C.
- Diarrhea, vomiting, abdominal pain, chest pain, and bleeding from the nose and gums have also been reported as early symptoms in some patients.
Avian Influenza H5N1

- In two patients from southern Vietnam, the clinical diagnosis was acute encephalitis; neither patient had respiratory symptoms at presentation.
- In Thailand, one patient presented with fever and diarrhoea, but no respiratory symptoms.
- Lower respiratory tract symptoms early in the illness.
- Difficulty in breathing at five days following the first symptoms: Respiratory distress, a hoarse voice, and a crackling sound when inhaling are commonly seen. Sputum production is variable and sometimes bloody. Almost all patients develop pneumonia.
- Primary viral pneumonia, which does not respond to antibiotics.
- Clinical deterioration is rapid – multi-organ involvement.

Available conventional drug therapy
Tamiflu (WHO website)

- Limited evidence suggests that some neuraminidase inhibitors, notably oseltamivir (commercially known as Tamiflu), can reduce the duration of viral replication and improve prospects of survival, provided they are administered within 48 hours following symptom onset.
- However, given the significant mortality currently associated with H5N1 infection and evidence of prolonged viral replication in this disease, administration of the drug should also be considered in patients presenting later in the course of illness.
- The recommended dose of oseltamivir for the treatment of influenza, in adults and adolescents 13 years of age and older, is 150 mg per day, given as 75 mg twice a day for five days. Oseltamivir is not indicated for the treatment of children younger than one year of age.
- As the duration of viral replication may be prolonged in cases of H5N1 infection, clinicians should consider increasing the duration of treatment to seven to ten days in patients who are not showing a clinical response. In cases of severe infection with the H5N1 virus, clinicians may need to consider increasing the recommended daily dose to the maximum of 300 mg per day.

Available conventional drug therapy
Tamiflu (WHO website)

- In severely ill H5N1 patients or in H5N1 patients with severe gastrointestinal symptoms, drug absorption may be impaired.
- There have been cases in Southeast Asia where patients were treated with Tamiflu early in the course of the disease but still died. Much is still unknown about the correct dosages, duration of treatment, and eventual resistance levels to these drugs.
- No medication, either prescription or non-prescription, has been tested in a clinical trial for efficacy against H5N1 infection in humans, mainly because of the small number of identified patients to date.
- Cochrane collaboration: In seasonal influenza, Tamiflu reduces symptoms. Return to work by 0.16 days. It does reduce viral shedding from the nose in seasonal influenza (during a pandemic with higher viral loads), but continues to allow transmission. At double dose, Tamiflu prevented lower respiratory tract complications.
Available conventional drug therapy

Tamiflu
- Cochrane collaboration: In seasonal influenza, Tamiflu reduces symptoms. Return to work by 0.16 days. It does reduce viral shedding from the nose in seasonal influenza (during a pandemic with higher viral loads), but continues to allow transmission. At double dose, Tamiflu prevented lower respiratory tract complications.
- “Current evidence from seasonal influenza trials led us to urge caution in making forecasts of possible impact of neuraminidase inhibitor use in any other epidemiological context.”

Available conventional drug therapy

Vaccination
- 4-6 month lag period using current production methods, limited supply, essential people first, delivery problems
- Effectiveness (elderly, healthy, infants, other diseases present), safety issues, side-effects

Available homeopathic drug therapy

1. Oscillococcinum
2. Influenzinum
3. Genus epidemicus
Available homeopathic drug therapy

1. Oscillococcinum
2. Influenzinum
3. Genus epidemicus

Oscillococcinum®

Oscillococcinum is made from wild duck heart and liver, which are said to be reservoirs for influenza virus. Potentized by standard method to 200 CH.

Cochrane Collaboration -- a meta-analysis of the data from seven controlled trials

- The authors concluded that when used in treatment, Oscillococcinum and similar homeopathic remedies reduced the duration of illness by 0.28 days. (Note: anti-virals only reduce illness duration by about 1 day and return to work in ½ day)
- The medicine also increased the chance that the patient considered the treatment effective, compared to the patients treated with a placebo.
- The authors found no evidence, however, that homeopathic remedies are effective in preventing influenza illness.
Oscillococcinum®

Summary

• "Though promising, the data were not strong enough to make a general recommendation to use Oscillococcinum for first-line treatment of influenza and influenza-like syndromes. Further research is warranted but the required sample sizes are large."

Oscillococcinum® RESEARCH

1. Double-blind, randomized, placebo-controlled, multi-center trial of 100 patients Casanova et al, Centre de Recherche et de Documentation Technique, University of Marseilles, France; 1983

   Results
   - Chills: 87.7% reduction vs. 57.1% with placebo
   - Stiffness: 72.5% reduction vs. 41.9% with placebo
   - Fever: 78.1% reduction vs. 60.0% with placebo
   - Nasal discharge unaffected
   - 80.0% of patients treated with Oscillococcinum reported a successful outcome vs. 38.0%, p<0.001

2. Double-blind, randomized, placebo-controlled, multi-center trial of 300 patients Casanova et al, Centre de Recherche et de Documentation Technique, University of Marseilles, France; 1985

   Results at day 2
   - Fever was significantly lower in the Oscillococcinum group than in the placebo group (P<0.05)
   - Results at day 4
   - 55.0% of patients treated with Oscillo reported no chills vs. 26.5% with placebo (P<0.001)
   - 70.0% of treated patients reported no aches and pains vs. 48.8% with placebo (p<0.001)


   Results
   - Full recovery from the symptoms within 48 hours was 66.0% greater in the Oscillococcinum group than in the placebo group (p=0.03)
   - 61.2% of patients in the active drug group had favorable impression on the efficacy of treatment vs. 49.3% in placebo group. (p=0.02)


   Results
   - The clinical trial showed that Oscillococcinum has a positive effect on the decline of symptoms and on the duration of the disease.
   - 40.8% of patients treated with Oscillococcinum showed "clear improvement" vs. 26.3% in placebo group (p=0.03).
Available homeopathic drug therapy

1. Oscillococcinum
2. Influenzinum
3. Genus epidemicus

Influenzinum

- A homeopathic preparation formulated out of a re-updated influenza vaccine
- Each year the WHO information for the upcoming vaccine is used to reformulate the new potentized remedy.
- One dose weekly for four doses, then another dose in 1 month’s time (total 5 doses)

Influenzinum

**RESEARCH** (source unspecified)

- 100 patients, 60% women, average age 47
- **Before treatment:** 82% subjects had flu or similar infection each winter
- **After treatment** (one dose per week x 4, plus one dose one month later)
  - First winter: 11% had flu or cold; 11% rhinitis
  - Second winter: 6% flu or cold; 9% rhinitis

In 1998, the French Society of Homeopathy conducted a survey of 23 homeopathic doctors concerning their use of homeopathic medicine Influenzinum as flu preventive.

- In approximately 90% of the cases no instances of the flu occurred when Influenzinum was used preventively.
- Physicians deemed its effectiveness good to very good in 90% of the cases, and not effective in 5% of the cases.
Available homeopathic drug therapy

1. Oscillococcinum
2. Influenzinum
3. Genus epidemicus

Genus epidemicus

Validity is dependent upon history of use in epidemics and efficacy of individual remedies in general treatment, i.e. does homeopathy really work?

BRITISH MEDICAL JOURNAL 1991

- 25 years of studies reviewed
- 81 of 107 studies showed significant benefits with homeopathy

Positive results in homeopathic trials …


- Respiratory infections .... 13 of 19 trials
- Other infections -- 6 of 7
- Digestive system diseases -- 5 of 7
- Hayfever -- 5 of 5
- Faster recovery after abdominal surgery 5 of 7
- Rheumatological disease -- 4 of 6
- Pain of trauma -- ......... 18 of 20
- Mental or psychological symptoms 8 of 10
- Various diagnoses - 13 of 15
**PEDIATRICS 1994**


**PED INFECT DIS J. 2003**


**Conclusion:** Individualized homeopathic treatment decreases the duration of acute childhood diarrhea

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**LANCET 1997**


Meta-analysis of 89 high-quality (only) double-blind randomized placebo-controlled trials of 24 clinical conditions

- 13 countries, 4 languages, 10,523 patients.
- 50 different medicines

**Conclusion:** Homeopathy is not placebo and further research is warranted.

- Double-blinded study demonstrated the antiviral effects of homeopathic remedies.
- Eight out of ten remedies tested inhibited viruses in chicken embryos from 50 to 100 percent depending on the potencies used.

Summary

1. Research supporting the use of Oscillococcinum and Influenzinum in an epidemic is very limited.
2. Based on this lack of evidence, neither can be relied upon as first line prevention or treatment.
3. Research and clinical experience support the use of homeopathy as a therapeutic modality.
4. Historical evidence supports the use of homeopathy in epidemic situations.
5. The Genus epidemicus and individually prescribed homeopathic remedies should be considered among the first line of prevention/treatment methods during an epidemic.