

# Homeopathy in Dementia

Materia medica and case  
studies

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## **Contents**

Preface .....	5
Homeopathy in dementia .....	7
Homeopathic materia medica .....	9
Cases .....	18
Perspectives .....	73
Authors .....	74
Index of homeopathic medicines .....	80

## Preface

The demographic change in Germany goes hand in hand with a steady increase in the elderly population. Today's figure of 1.4 million fellow citizens with dementia is expected to double by 2050. By then, every seventh citizen will be at least 80 years of age. Caring for someone with dementia at home or in a care facility is a challenge. Not only the loss of memory and orientation, but also behavioural issues such as anxiety, aggression, apathy and other problems are difficult to cope with. The options in terms of social therapy are often limited due to a lack of qualified personnel or exhaustion on the part of the individual's family. Pharmacological options such as anti-dementia drugs and neuroleptic agents are effective to a limited degree and may have significant side effects. Causal therapeutic concepts are seldom available (secondary dementia, e.g. from nutrient deficiency).

This collection of case reports has been compiled and prepared for publication based on cases of homeopathic treatment identified retrospectively by homeopathic doctors and health practitioners. The aim of this collection is to document how homeopathy is applied, and to illustrate the analysis and decision processes involved. Other therapists and also family members should thus be encouraged to give homeopathy a try – a method that has few side effects and is clinically established since more than 200 years.

Naturally, scientific evidence of the efficacy of a homeopathic treatment cannot be derived from a retrospective collection of case studies. We regard this collection rather as an accumulation of experience, a means of didactic support, and a foundation stone upon which further knowledge and research can be built.

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Michael Teut would like to thank personally Dr Johannes Wilkens above all for the many years of constructive dialogue and numerous valuable therapeutic ideas.

We both wish to thank Dr Jens Ahlbrecht of the Ahlbrecht publishing company who published this case collection first in German with us and allowed us to publish this booklet now also in English.

We thank Emryss Publisher for their professional support and interest in our book and to include "Homeopathy in dementia" in their homeopathic portfolio.

Michael Teut and Christine Doppler  
Berlin, August 2019

## Homeopathy in dementia

Michael Teut

Individual attempts at using homeopathy to treat people with memory disorders can be found again and again in the homeopathic literature.

The most detailed study of this clinical discipline to date was undertaken in the 19th century by G. H. G. Jahr: In *Die Therapie nach den Grundsätzen der Homöopathie – Dritter Band – Die Geisteskrankheiten* (Leipzig 1866), Jahr uses a very innovative – for that period – approach to elaborate the materia medica of drugs for treating memory disorders. Dementia is addressed in chapter 4, “Aphronesis or weakness of understanding”. Jahr emboldens homeopaths: “However complicated and hopeless a given case of confusion may appear, the physician and least of all the homeopathic practitioner should still never despair a priori, as there are several effective remedies available to us for this disturbance of spirit which, in most cases at least, shall certainly prove helpful.”

Jahr judges the following to be the safest and most commonly applied homeopathic remedies: Anacardium, Belladonna, Helleborus, Hyoscyamus, Lachesis, Nux moschata, Opium, Stramonium and Sulphur.

The following can also be considered: Alumina, Ammonium carbonicum, Arsenicum album, Chamomilla, Ignatia, Lycopodium, Mercurius, Natrium carbonicum, Natrium muriaticum, Phosphoricum acidum, Pulsatilla, Staphysagria.

Less frequently used remedies are Agaricus, Antimonium crudum, Barium carbonicum, Bryonia, Calcium carbonicum, China, Cuprum, Kalium carbonicum, Nux vomica, Plumbum, Secale, Thuja, Veratrum. He also mentions Ambra grisea, Arnica, Aurum, Camphora, Capsicum, Carbolicum acidum, Carbo vegetabilis, Crocus sativus, Lactuca virosa, Laurocerasus, Oleander, Petroleum, Phosphorus, Ruta graveolens, Sabadilla, Sepia, Silicea terra and Zincum metallicum.

Jahr adds, moreover, a repertory that permits differentiated analysis and is structured according to the main symptoms as well as the causes and secondary complaints.

In another chapter, he specifically addresses senile dementia (infantile confusion, senile dementia, leresis). In this context he recommends lifestyle changes (country life, moderate physical exercise, appropriate diet) and, above all, *Ambra grisea*, *Aurum metallicum*, *Barium carbonicum*, *Conium*, *Opium*, *Secale as* medication.

*G. H. G. Jahr: Die Therapie nach den Grundsätzen der Homöopathie – Dritter Band – Die Geisteskrankheiten. Bearbeitet von Dr. Bernhard Bähr. T. O. Weigl; Leipzig 1866.*

## **Homeopathic materia medica**

Michael Teut

In principle, homeopathic treatment should be accompanied by non-pharmacological measures wherever possible. A particular successful concept is exercise therapy in the form of regular walks, physical exercise, or even training on an exercise bike. Today special ergometers are available that offer increased comfort and a simple design for patients who have dementia. Exercise alone can help to lessen many behavioural irregularities such as agitation and aggression, thereby improving quality of life.

In terms of nutrition, attention should be paid to a whole-food diet containing a large proportion of fresh fruit and vegetables. Freshly squeezed fruit/vegetable juices, shakes and smoothies, along with fingerfood (fruit, veg), are an easy way to improve the diet accordingly.

Permanent social contacts and dependable, loving companionship and care are essential. By surveying/taking a medical history from relatives, favourite activities or hobbies can be identified which may also help improve quality of life when reapplied.

Reducing conventional medicines in case of excessive use can often help to improve the situation.

In Western herbal tradition, *Ginkgo biloba*, *Melissa officinalis*, *Salvia officinalis* and *Rosmarinus officinalis* are the main therapeutic options for which limited scientific evidence is available from clinical studies.

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Note: As always, homeopathic medicines should be selected individually. The medicines listed below have frequently proven therapeutically beneficial; depending on the individual case history and characteristics, however, other medicines can of course be considered in addition.

Homeopathic treatment is inexpensive and has a low risk for adverse effects. In its practical application, and also based on practical experience, it frequently helps to improve behavioural problems, lessens agitation and aggression, increases quality of life and helps to reduce allopathic medication, e.g. neuroleptics for agitation or aggression.

The most important and most commonly used homeopathic remedies are presented in the material medica below. Both single doses in high potencies and also frequent administration (e.g. daily) as Q-potencies or low potencies (1-3 times daily, e.g. D6 or D12) have shown beneficial results in practice.

### **Hyoscyamus niger**

The most important homeopathic medicine for patients with dementia.

Scopolamine, which is found in varying concentrations in all types of nightshade (Solanaceae), impairs cognition and memory at toxicological doses. *Hyoscyamus niger* has repeatedly demonstrated in practical application that abnormal behaviour above all, but also cognition, is improved.

Guiding symptoms are abnormal behaviour such as agitation, hyperactivity, fiddling, carphologia, floccillation, smearing excrement, ranting, punching, obscene conduct, playing with genitalia, undressing, insomnia, lack of sleep-wake rhythm. Patients wanting to escape "back home", feeling persecuted. *Hyoscyamus* may also help exhausted and quiet patients with dementia, who exhibit apathy and weakness instead of agitation.

Concomitant symptoms: Trembling, twitching of the limbs, dry mouth and tongue, dilated pupils, dry cough.

Aggravations: From fright, touch, emotions, in sleep, lying down.

Ameliorations: From sitting up.

*Hyoscyamus niger* can also be used as clinical indication, for homeopathic treatment of patients in whom the choice of individualized medicine is unclear given to the lack of characteristic



symptoms. In practice, *Hyoscyamus niger* has repeatedly shown a good response. Historical literature also supports this experience:

In the *Journal Deutsche Zeitschrift für Homöopathie* (Volume 4, 1931, p. 102) Rudolph F. Rabe from Millburn, USA, described in 1931 the case of a 77-year-old female patient with senile dementia who was bedridden and behaved childlike. She refused medication, was wary of food and restless and sleepless at night.

In the night, she would attempt to descend the stairs either naked or half-undressed. With faecal incontinence she would frequently soil the bed. The agitation was reduced under *Hyoscyamus* 200; treatment was continued after two weeks with *Barium carbonicum* 41M, under which she continued to improve very clearly. Rabe argues here in favour of very high potencies, even in the elderly.

*Rabe RF: Bestätigung einiger Arzneimittel in hohen Potenzen. Deutsche Zeitschrift für Homöopathie; 1931; 4: 102*

In 1987, Eichler published four cases in *Deutsches Journal für Homöopathie* related to elderly patients with dementia exhibiting agitation, aggression and tendencies to run away, who all improved clinically relevant under *Hyoscyamus* at C200 or M-potencies.

*Eichler K: 4 Fälle von seniler Demenz. Deutsches Journal für Homöopathie 1987; 3: 237-238.*

### **Opium (*Papaver somniferum*)**

The guiding symptoms for homeopathic treatment with opium are dementia patients with severe apathy, lack of reaction, stupor, drowsiness and depression. Respiratory disorders during sleep (e.g. sleep apnoea, snoring, irregular breathing or rattling). Vascular dementia after apoplectic insults with permanent stupor, conditions following head injuries or other trauma. Post-coma. Opium may also be indicated in states of delirium. Says "there's nothing wrong with him". Sweaty and sleepy. Fixed, contracted or dilated pupils. *Carphologia* in bed.

Concomitant symptoms: stubborn constipation, recurrent bowel obstruction.

## Authors

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General practitioner focusing on homeopathy; own accredited medical office since 1986.

Quality circle moderation since 1993, licensed further education trainer for homeopathy since 1997.

1997 to 2003: Second Chairman of the German Central Association of Homeopathic Doctors ("Deutscher Zentralverein homöopathischer Ärzte" – DZVhÄ).

2001: Co-founder of the European Institute of Homeopathy (InHom) and the Homeopathy Foundation ("Homöopathie-Stiftung") in Koethen (Anhalt).

2010: Founding member of the Scientific Society for Homeopathy ("Wissenschaftliche Gesellschaft für Homöopathie" – WissHom) and speaker for the section "Further Education, Continuing Education and Teaching". Involvement in the working groups "Educational aims and objectives" and "E-Learning".

Since 2002, co-editor of the General Homeopathic Journal (AHZ). Editor of a textbook series of the DZVhÄ on continuing homeopathic education and a collection of different methods for "Homeopathic case analysis".

Leadership of continuing education courses, case seminars and supervision in homeopathy.

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Freelance translator and language trainer (Italian). Academic assistant in Career services at Bielefeld University (corporate contacts, public relations and fundraising). Design and execution of collaborative projects in "Doctor-patient-communication" (including the "Communication in homeopathy").

Since 1985, intensive occupation with homeopathy and since 2005 with the topic of "Homeopathy and old age".

Since 2005, freelance and mostly honorary activities in the fields of editing and public relations, as well as the design and maintenance of websites, including the subject of homeopathy: activity from 2005–2010 for the Homeopathy Foundation of the DZVhÄ and the European Institute of Homeopathy in Koethen (Anhalt), and since 2010 for its successor organisation, the Scientific Society for Homeopathy (website, PR materials and congress publications).

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Homeopathic training while studying medicine and diploma from the International Academy of Classic Homeopathy (Prof. Georgos Vithoukias) in 2013.

Further advanced training, scientific work and homeopathic assistant to Prof. Michael Frass (Vienna), assistant at general homeopathic practice with Dr Dagmar Kaufmann (Bern) and in India. Since 2013: Institute of Complementary Medicine at Bern University.

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2009–2011: Employed at the "House under the Rainbow" ("*Haus unter dem Regenbogen*") residential care facility (Techau near Bad Schwartau)

2011: Talk on the subject of "Homeopathy in residential care facilities – an economic analysis" at the annual congress of the DZvHÄ in Aachen.

2011–2015: Development of the homeopathy department at the "Lucia House" ("*Haus Lucia*") residential care facility in Lübeck, Germany for residents and staff, and coordinator of homeopathy for the entire Michael Bethke group of companies (Berlin)

Co-founder of the "DNL" Dementia Network Lübeck

Since 2014: Executive employee for company health management

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Co-founder and lecturer at the "Similia" School of Homeopathy in Hamburg

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Since 2006: First publications on homeopathic topics related to "geriatric medicine" (including homeopathy specifically)

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Interest in homeopathy during medical studies as part of the student-run study team at the university, national advanced training and networking via the Carstens Foundation and the DZVhÄ

2009–2011: Speaker for the Wilseder Forum (German national student organisation for homeopathy of the Carstens Foundation)

2012–2013: Ward doctor in paediatrics and internal medicine in Neuruppin

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Homeopathic treatment and healing of cancer (Dr Jens Wurster)

Symptom lexicon and symbol homeopathy (Michael Kohl)

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## Index of homeopathic medicines

- Acetic acid 34  
Acidum aceticum 34  
Aconitum 56  
Agaricus 6  
Alumina 6, 13  
Ambra grisea 7  
Ammonium carbonicum 6  
Anacardium 6, 12, 16  
Antimonium crudum 6  
Arnica 7, 21  
Arsenicum album 6, 15, 23  
Aurum 7  
Barium carbonicum 7, 10,  
12, 16, 26, 27, 73  
Belladonna 6, 13, 47, 73  
Bryonia 7  
Calcium carbonicum 7  
Calcium phosphoricum 35,  
36, 38  
Camphora 7  
Cannabis indica 56  
Capsicum 7  
Carbo vegetabilis 7  
Carbolicum acidum 7  
Carboneum sulfuratum 48,  
49  
Chamomilla 6  
China 7  
Conium 7  
Crocus sativus 7  
Cuprum 7  
Ginkgo biloba 8  
Helleborus 6, 11, 16, 18,  
21, 73  
Hyoscyamus 6, 9, 10, 14,  
16, 19, 20, 28, 29, 35, 36,  
48, 49, 71, 72, 73  
Ignatia 6, 54, 73  
Kalium carbonicum 7  
Lachesis 6, 14  
Lactuca virosa 7  
Laurocerasus 7  
Lycopodium 6, 23  
Mandragora 24, 73  
Melissa officinalis 8  
Mercurius 6  
Moschus 45, 73  
Natrium carbonicum 6  
Natrium muriaticum 6, 38,  
56, 65  
Nux moschata 6, 11  
Nux vomica 7  
Oleander 7  
Opium 6, 7, 10, 21, 22, 23,  
48, 57, 58, 73  
Petroleum 7  
Phosphoricum acidum 6, 11  
Phosphorus 7  
Piper methysticum 23  
Plumbum 7, 15, 52, 53, 54,  
65, 66, 73  
Pulsatilla 6, 23, 38, 56  
Rhus toxicodendron 38  
Rosmarinus officinalis 8  
Ruta graveolens 7  
Sabadilla 7  
Salvia officinalis 8  
Secale 7  
Sepia 7, 38  
Silicea 7  
Staphisagria 38, 40  
Staphysagria 6, 73  
Stramonium 6, 13, 16, 46,  
47, 60, 61, 73  
Sulphur 6, 30, 31, 41, 42,  
73  
Symphytum 36  
Syphilinum 14  
Thuja 7  
Tuberculinum 37, 73  
Valeriana 23  
Veratrum 7, 14, 65, 66, 68,  
73  
Zincum metallicum 7