

Vital Support

A woman wearing a pink jacket and an orange helmet is climbing a rope on a wooden structure. She is looking towards the camera with a slight smile. The background is a clear blue sky. The wooden structure consists of several beams and ropes, suggesting a climbing or rappelling activity.

by AMY ROTHENBERG, ND

**How to use
homeopathy and
why it matters**



for People in Conventional Cancer Care

One in three people in America will get cancer at some point in their lifetime. That's a lot of people! As a survivor/thriver of both breast and ovarian cancer, I've been very public about my 2014 diagnosis and treatments, which included surgery, chemotherapy, and radiation, because I want to demystify the whole experience of cancer.** Yes, many people get cancer, but many will go on to live productive, healthy lives after treatment. I am thrilled to be alive, thriving, and just as active as ever.

I also want to spread the message: *Homeopathy has much to offer people going through conventional cancer treatment!* As a homeopath and naturopathic physician for over 30 years, I've seen this demonstrated again and again in my practice, but there is nothing like firsthand experience as a patient to shed further light on the subject.

Partners in health

Naturopathic and integrative medicines also have much to offer the cancer patient, including nutritional approaches, botanical medicine, mindfulness-based practices, exercise, and acupuncture. I availed myself of these supportive measures and encourage my cancer patients to do the same. Caution is advised, however, because some of these approaches can interfere with chemotherapy, radiation, or anesthesia. On top of that, the plethora of information on natural approaches to cancer treatment—some accurate, some misinformed, and some downright dangerous—makes it extremely difficult for

Homeopathy can be used safely alongside any other treatment without hesitation.

most people to determine what is best for a particular case. That's why I advise patients to seek guidance from a naturopathic physician who specializes in this area, as I did during my treatment. (Find them through the Oncology Association of Naturopathic Physicians at www.oncanp.org.)

Thankfully, with homeopathy we don't have to worry about interfering with other therapies; it can be used safely alongside any other treatment without hesitation. Homeopathy is both vitalistic and holistic—it works with the person's innate healing ability and affects the whole person on a deep level. Add to that, it is cost-effective and easily tolerated, whether a patient is young, old, or debilitated. And homeopathy, even in the hands of those less skilled in its use, can be a powerful asset to the patient going through cancer treatment, helping them through the inevitable bumps in the road. So keep studying

and improving your practice of homeopathy—many people can benefit from your knowledge and care!

Tools at our fingertips

Even so, it is not unusual to feel overwhelmed at the prospect of treating a patient undergoing conventional cancer care; but you need not be. The same careful homeopathic case-taking and analysis methods we use in treating any patient will serve us well in these cases, too. Please note that we are focusing exclusively on using homeopathy *alongside conventional cancer treatment* rather than on treating the cancer itself.

Our main treatment goals for cancer patients are to:

- enhance the efficacy of conventional treatment
- decrease the side effects of conventional treatment
- address side effects that arise

Receiving Radiation?

Read this!

The goal of radiation treatment in conventional cancer care is to kill any cancer cells that remain in the area being radiated. It is also used to shrink tumors in some inoperable cases or to shrink tumors before surgery. Recent research shows that brisk exercise *immediately* before a radiation treatment will make cancer cells more sensitive to radiation and treatment more effective. So I advise my patients who are getting radiation to exercise for at least 20 minutes *just before* getting on the treatment table, whether that means walking or riding a bike in the neighborhood near the treatment center or climbing stairs in the hospital or dancing around the waiting room—whatever gets the blood really pumping throughout the body.

I also advise my patients to bring along aloe vera gel and to slather the radiated area immediately after a treatment. I suggest doing that in the changing room rather than waiting to get home. Later on in the day and in the evening, moisturizing the radiated area is also recommended.

About once a week during radiation treatment, I have my patients take a "Clorox bath" to decrease the inflammation response, which helps to keep the irradiated skin healthy. This involves adding one-half cup of Clorox bleach to a tall bathtub of water and immersing in it for 15 minutes, then rinsing off thoroughly. While it sounds counter-intuitive, animal studies have shown it to be helpful, and it has proven useful in clinical experience.

For those receiving radiation to the chest area, once treatments are completed and once the area has healed, I recommend swimming as a helpful way to maintain range of motion, especially the backstroke. The tissues of radiated areas tend to pull inwards, so this is a way to work against that tendency and open up the area.

For more ways to use natural medicine to support patients in conventional cancer treatment, I strongly suggest consulting with a naturopathic physician who is a member of the Oncology Association of Naturopathic Physicians at www.oncanp.org.

- address specific physical issues related to cancer
- address acute illnesses that arise during cancer treatment, and
- help with mental and emotional symptoms.

To illustrate, here are some examples from my practice.

Physical issues related to cancer: A lovely gentleman with metastatic pancreatic cancer visited me for help. His complaint was shortness of breath and difficulty breathing because a large tumor was exerting pressure upward onto his lungs. He came in holding a small hand-fan and used it throughout our interview. Those who know only the rudiments of homeopathic *materia medica* would recognize the indications for the remedy *Carbo vegetabilis* (i.e., air hunger and desire to be fanned in a debilitated person). This remedy gave him great comfort in his last days by restoring his ability to get a good-enough breath.

Acute illnesses: People with cancer get run-of-the-mill acute illnesses such as colds, sore throats, and bladder infections, too. Using indicated homeopathic remedies enables them to avoid unnecessary antibiotics or other medications and their side effects. I recently treated a woman undergoing chemotherapy, whose white blood cell count was in the normal range but who nonetheless developed an earache with a high fever and headache. The remedy *Belladonna* took care of the earache in quick order.

Side effects of conventional treatment: Whether it's helping people recover faster and better from surgery, addressing GI complaints associated with chemotherapy, or helping skin issues during radiation, homeopathy alongside other natural medicine approaches has our patients better able to handle the onslaught that is conventional cancer care. And this *matters* because it's generally understood that outcomes improve if patients take all recommended chemotherapy or radiation in a specified amount of time. Mounting or worsening side effects can delay or halt treatments. So, while most patients do develop side effects, we want to prolong the amount of time *before* side effects set in; we also want to reduce their severity, so our patients can complete conventional care

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in a timely and recommended fashion. For example, one patient with inoperable throat cancer was getting daily radiation treatments for six straight weeks. Using homeopathic treatment, we were able to keep side effects at bay until the fifth week of his intense radiation regimen.

Mental/emotional issues: For most people, it's a shock to receive a cancer diagnosis; for some, it's devastating. Those with a history of anxiety or depression will often be triggered, as will some without such a history. A homeopathic remedy can be directed specifically at how the patient experiences their anxiety, depression, or irritability. I recall a cancer patient in my care who felt that the anxiety was actually the worst part of his cancer experience. The inability to make plans, the sheer number of doctor appointments, the labwork, the scans—each step of the way, there was ample opportunity to become anxious, and he did! Add to that his intractable insomnia and chronic loose stools, and we were led to the remedy *Arsenicum album*, which helped him face his treatments with renewed energy and optimism, and got him away from his “what if?” ledge.

The usual careful method

The homeopathic interview process for a cancer patient is no different than for a patient with any other condition. I want to know what is most bothersome or limiting to the person at the time of the visit in order to get a clear sense of what I am trying to help. I want to understand the physical manifestations and whether there are any clear modalities (i.e., things that make the symptoms better or worse). I try to understand the quality of discomfort and if there are any accompanying symptoms. I always ask for *examples* of symptoms reported and try not to take anything at face value. I am observant and let my observations inform my intake questions. I work to understand symptoms in context of the patient's life. I aim to get a sense of the person I am working with, not just their symptoms, so that I might find a remedy that best fits the whole person.

Understanding possible pitfalls

What can go wrong? One of the biggest reasons homeopathic treatment can fall short of expectations is if the prescriber does not differentiate between a seemingly acute situation or one where the patient needs their constitutional remedy instead. For even when a patient seems to be experiencing new, acute symptoms, they don't necessarily need a new remedy aimed narrowly at those acute symptoms; instead, they may need a dose of their constitutional remedy aimed globally at their entire state of being—physical, mental, and emotional.

Stress, strain, susceptibility

As background: Paul Herscu, ND, MPH, my longtime husband and collaborator, has articulated a helpful way to view our patients that also helps us understand the difference between acute and constitutional prescribing. The underlying concept of stress and strain pertains. We are each susceptible to events and exposures in our environment, based on our genetic inheritance and the lifestyle choices made through a lifetime. The same kind of emotional or environmental insult does not have the same impact on every person.

There are typically many stressors to which we are responding at any given time. Also, we respond to stressors in predictable and patterned ways according to our underlying homeopathic constitutional state.

So for some patients, the stress of chemotherapy, and by that I mean the overall impact not just the emotional stress, will push the person in a way they are accustomed to being pushed. I recall a patient of mine who was a migraine sufferer. During radiation treatments for breast cancer, her migraines were triggered. Her constitutional remedy, which had been helpful before to reduce the number, severity, and duration of migraines, was once again helpful. Another patient with a long history of insomnia found sleep almost impossible during chemotherapy for colon cancer. He was offered many pharmaceutical sleeping aides but instead

The Importance of Prehab

Get moving!



Prehab (taking part in a pre-surgery conditioning program) has long been accepted as essential before orthopedic or cardiovascular procedures. Getting in better shape helps patients recover more quickly and thoroughly, reducing suffering and saving health care dollars. Increasingly, prehab is now being studied and recommended in the world of oncology, too. Most cancer patients have some weeks post-diagnosis before conventional treatments begin, and this is when they can start improving their overall conditioning. Prehab may include physical therapy, general exercise, offerings or referrals for smoking cessation programs, psychosocial assessment/counseling, stress reduction techniques, and nutrition counseling.

In my clinical experience, one of the best things you can do before undergoing conventional cancer treatment is to *get moving!* In fact, I think all cancer patients should be training like Olympic athletes, if possible, because physical activity makes you healthier and amplifies whatever other treatments you are taking or will be taking. It is also excellent for mitigating the effects of stress, an essential component of staying healthy.

A lot of people never learned skills to effectively handle stress, anxiety, worry, and fear, which are all part and parcel of a cancer diagnosis and treatment. So along with suggesting they stay physically active, I encourage my patients to get their brains in gear by using whatever methods work best for them, such as prayer, meditation, relaxation techniques, and guided imagery. It's best to begin practicing before the going gets tougher, so the skills will become second nature. Relaxation and meditation resources are easy to find online: just search for "best meditation apps for 2016." [Also, visit www.healthjourneys.com for guided imagery and self-hypnosis CDs or MP3s specific to cancer and other health conditions—Ed.]

Whenever I have a patient scheduled for breast surgery, I send them in advance for an appointment with a physical therapist that specializes in treating lymphedema (fluid retention due to a compromised lymph system, a common effect of surgery). In this way, the patient gets helpful advice in advance of surgery and easy access to the therapist afterwards, since they have already established a relationship.

I also use prehab with homeopathy for all patients, by offering them a constitutional remedy. This helps them to be in as good a shape as possible in advance of treatment.

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remembered that homeopathy had helped him sleep. So while we worked with many naturopathic approaches to prevent typical side effects from chemotherapy, he also got essential help for his sleep with his homeopathic constitutional remedy.

That said, sometimes, when the stress is strong enough or different enough for a particular patient, or the stress takes place over a long time period, the patient is pushed out of their constitutional state and into an acute state; so they need an *acute remedy* to address the *acute situation* that has arisen. For example, during radiation treatment for breast cancer, one of my patients began to experience a skin breakdown in the treated area. The kind of pain and discomfort experienced was not covered by the patient's usual constitutional remedy. She also had a notable shift in her temperament. In this case, I looked for an acute remedy to help.

Later in this article I describe acute remedies for common issues that arise during conventional cancer care, but first and foremost it is important to underscore that sometimes a patient will respond best to their constitutional remedy *even if the presenting symptom/side effect/issue seems to be acute.*

Shifting to an acute state

How can you tell that a patient has shifted from needing a constitutional remedy to needing an acute one? There are three things to watch for: 1) The person's temperament will shift in a way that is inconsistent with the constitutional remedy. (For example, a young man who benefits from *Sulphur* constitutionally and is messy around the house will get an acute sinus infection and suddenly become orderly, picking up after himself; he may need *Arsenicum*.) 2) Changes in physical general symptoms will occur, such as marked differences in body temperature, food cravings, or sleep position from their usual. 3) The nature of the pain will change.

We often see a relationship between constitutional and acute remedies. A person needing the constitutional remedy

Natrum muriaticum may shift into *Bryonia* acute illnesses. Similarly, someone needing *Calcarea carbonica* constitutionally may need *Belladonna* acutely, a person needing *Sulphur* constitutionally may need *Arsenicum album* acutely, and someone needing *Nux vomica* constitutionally may need *Ignatia* acutely.

It's also good to think outside the box. Some remedies, such as *Aconite* and *Arnica*, that are commonly thought of for treating acute conditions can be given as constitutional remedies; and other remedies that are usually thought of more constitutionally, such as *Tuberculinum* and *Medorrhinum*, can be used to treat acute conditions.

What follows is a survey of common issues that arise during conventional cancer care along with the remedies that I have found most helpful for addressing them in my own practice. To reiterate, these are some remedies to consider *if the patient does not need their constitutional remedy*. Studying these lists will help you learn and differentiate among the various types of pain or discomfort, modalities, and etiologies (triggering factors) associated with acute illness and the relevant remedies to help. With regard to potency selection, I generally give a 30c and repeat when needed. I will work up to a 200c or 1M as indicated.

Anxiety before surgery

I do not routinely offer a remedy unless my patient is especially anxious. The remedies I think about for the very anxious are:

- *Aconite* – Waves of panic with sudden, intense fear. The patient is agitated and restless, and may believe they are about to die *due to the surgery*. They have dry skin, a dry mouth with strong thirst, and a pounding heart.

- *Arsenicum album* – Anxiety or nausea with loose stools. Chilliness. The patient needs a lot of attention and encouragement.

- *Gelsemium* – The patient feels paralyzed by the anxiety and cannot get anything done; they may have weakness and trembling.



After-effects of surgery (pain & more)

- *Arnica* – I give a dose of *Arnica* 1M immediately after surgery to reduce swelling and promote healing, unless symptoms indicate another remedy. I often suggest that a family member give it as soon as the patient is wheeled into recovery and then ask the patient to take it once a day for the next two days.

- *Aconite* – Shock and fright after surgery; panic attacks that began post-surgery, even many months later.

- *Bryonia* – The patient has strong pain and is dry, thirsty, irritable, and worse from any movement.

- *Nux vomica* – Those needing this remedy tend to be bossy and controlling of their environment. They are usually constipated with an ineffectual urge; also, chilly and cannot get warm. They often have abdominal cramps after surgery, regardless of the type of operation.

- *Magnesium phosphoricum* – Strong cramping pains that are better with heat.

- *Staphysagria* – This patient feels like they are getting stabbed at the area of the incision; the wound is sensitive and angry looking. Pain lasts long after the surgery, even months.

- *Opium* (homeopathically prepared and therefore highly diluted and safe*) – Pain with sleepiness, dullness, snoring respiration, and stupor; the patient does not wake well from anesthesia. Paralysis of bladder after surgery. The patient may also have ongoing fright a long time afterwards, whenever they think of the surgery.

- *Chamomilla* – Tremendous irritability and oversensitivity after surgery. The person cannot bear to be examined and, in general, is difficult to please.

- *Causticum* – Use when the patient is unable to urinate after surgery; also rule

out the need for the homeopathic remedy *Opium* (mentioned earlier).

- *Calendula* – This remedy—homeopathically prepared in pill form and taken by mouth rather than used topically as a tincture—can be employed when the surgical wound does not close well or if there is ongoing drainage that may lead to infection. (Rule out the possibility of other remedies also useful for wounds, such as *Ledum*, *Pyrogen*, *Staphysagria*, *Tarentula cubensis*.)

Gastrointestinal Pain after Surgery

- *Arsenicum album* – Inflamed intestines, burning pain with excoriating loose stool, worse in the middle of the night; possibly vomiting with diarrhea. The patient is generally anxious and emotionally needy.

- *Lycopodium* – Patients will benefit from this remedy if they have gas and bloating, worse in the morning and again as the day goes along. They will often be irritable and chilly with discomfort in the upper right abdominal quadrant and excessive distension. Copious flatus, which does not relieve the patient.

- *Nux vomica* – Patient complains of cramping pain, better warm applications; the pain can be extreme. The patient is irritable and bossy; we can see this in children as well as adults.

- *Opium** – Constipation in the days after surgery, often caused by opiate medication. The patient is generally dull and sleepy.

- *Bryonia* – This remedy is sometimes needed after *Arnica*. The person

has marked pain that is worse from any motion; they must lie perfectly still. Cough worse from jarring. Better lying on the painful side.

Diarrhea after surgery

- *Arsenicum album* – Diarrhea in a patient who also has nausea or vomiting and anxiety. Look for burning and acid stool, with prostration and restlessness.

- *Sulphur* – Offensive diarrhea that irritates the anus. Stool wakes the patient from sleep in the early morning. Burning or soreness at the anus.

- *Nux moschata* – For those who are cognitively dull after surgery; they may have diarrhea with excessive bloating as well.

- *Aloe* – The patient cannot differentiate their ample flatulence and air from stool. Lots of gurgling and rumbling, involuntary stool, mushy stool with jelly-like lumps of mucus; diarrhea drives the person out of bed in the morning,

- *Natrum muriaticum* – Watery stool with undigested food visible. While passing stool, it may feel like many little cuts at the anus. There may be mucus or blood in the stool.

- *Veratrum album* – Odorless “rice water stools,” often with vomiting; the person will be cold and clammy in the head and abdomen.

Anesthesia after-effects

- *Nux moschata* – Excessive drowsiness after surgery, cannot wake up; dry lips and dry mouth where the tongue adheres to the roof of the mouth.

- *Phosphorus* – Exhausted patients who cannot get up and may have irritating, incessant cough regardless of the diagnosis. Fatigue may stem from loss of blood.

- *Opium** – Patients who do not come out of anesthesia well; they spend too many hours in recovery and may have tremendous difficulty breathing with noisy, labored breathing.

Chemotherapy, mouth sores

- *Borax* – Deep, painful ulcers with vesicles around the mouth or on any surface in the mouth.

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- *Natrum muriaticum* – Transparent vesicles that may be pearly white. These painful lesions can be found inside the mouth or on the lips, which may be cracked at the center line.

- *Mercury* – Copious discharges, often offensive smelling, with excess salivation. The patient is often shaky and has a difficult time controlling their body temperature.

Chemotherapy, nausea & GI upset

Patients are typically given drugs that control nausea during and after chemotherapy, so GI upset is often less problematic than it once was. It's interesting to note that, in your brain, the nausea center and the anxiety center are very close to each other, so if you affect one, the other can also be affected. That's why getting anxiety under control can have a positive effect on nausea, and vice versa. Conventional caregivers often successfully give the anti-anxiety drug Ativan® for this reason, but if we can help the patient avoid that potentially habit-forming drug with homeopathy, all the better. Some remedies to consider (many of which have already been mentioned) are: *Arsenicum*, *Chamomilla*, *Cocculus* (vertigo, balance issues, and spaciness are prominent), *Ipecacuanha*, *Nux vomica*, *Phosphorus*, *Sepia* (often with queasiness where food doesn't look or smell good and constipation), and *Veratrum album*.

Chemotherapy, fever

- *Aconite* – Used for sudden onset of fever followed by chills, worse in a warm room, worse in the evening, with strong thirst, contracted pupils, one cheek red, the other pale, great anxiety, fear and restlessness, with fear of impending death.

- *Arsenicum album* – These patients are often worse around midnight; they are especially anxious and restless and usually better with company and encouragement. They can have a prolonged chill and be better with warm covers and warm drinks.

- *Belladonna* – Use for patients with sudden and intense burning heat, no chills, hot face and head, cold hands, throbbing headache, and glassy eyes.

- *Bryonia* – Slow onset of fever, followed by chills; often patient feels one-sided heat. Very thirsty, worse motion, irritable.

- *Gelsemium* – The fever comes with tremendous fatigue and tremulousness, chills up and down the back, sleepiness, and weakness.

- *Opium** – High fever and stupor, with the desire to uncover; the heat is intense especially during sleep. The patient is usually somewhat “checked out” cognitively, and may be unbothered by the fever.

Chemotherapy, pain from Neulasta® shot

Patients receiving chemotherapy often get a Neulasta® shot afterwards to help keep the white blood cell counts from plummeting. For many, the deep pain that develops after the shot is the worst part of the whole ordeal; they develop flu-like symptoms and/or excruciating bone pain throughout the body. I have found the following remedies to be useful.

- *Gelsemium* – For the ongoing, debilitating flu-like symptoms, this remedy often helps.

- *Symphytum* – If the main issue is bone pain, this remedy often works.

Also consider other remedies that fit these flu-like symptoms, such as *Bryonia* and *Eupatorium*. In my experience, some patients who address these symptoms with homeopathic remedies no longer develop such side effects with subsequent Neulasta® shots.

Radiation burns

- *Belladonna* – Use this remedy when infection is near or around the burn; skin

breaking down, redness with streaking, with fever.

- *Apis* – Use when there is a small area of burn, marked pain, redness and swelling, better ice application or cold wraps, with excess restlessness.

- *Rhus toxicodendron* – Will be helpful when the burn has an accompanying rash nearby, often with itching and restlessness.

- *Causticum* – Useful with burns that crack or ulcerate or fail to heal in a timely fashion. Easy scarring or contraction may occur in area of the burn.

An invaluable tool

I always make sure to prescribe for patients after cancer treatment as well, in order to optimize health and to address residual impacts of conventional care, whether psychological, cognitive, and/or physical, and, most of all, to prevent recurrence.

As a practicing homeopath who has also been a patient, I can say unequivocally that homeopathy is safe and effective to use during conventional cancer care. It's also excellent to use alongside other integrative therapies. I hope this information has empowered you to help others going through cancer treatment.

** During my own year of cancer treatment in 2014, I often wrote for the *Huffington Post* on using naturopathic medicine alongside conventional care. You can find that writing here: www.huffingtonpost.com/amy-rothenberg-nd/

*The remedy *Opium* is homeopathically prepared and thus very diluted and safe. Because its source is a controlled substance, it is available in the U.S. only to Drug Enforcement Agency (DEA)-licensed physicians from the company, Remedy Makers, www.remedymakers.com. (In homeopathic pharmacies overseas, it is often available to any purchaser.)

ABOUT THE AUTHOR



Amy Rothenberg, ND, practices in Connecticut, www.nhcm.com. She blogs for the *Huffington Post*, www.huffingtonpost.com/amy-rothenberg-nd/. Her book, *The A Cappella Singer Who Lost Her Voice & Other Stories From Natural Medicine*, can be found at www.amyrothenberg.com. She is founder and lead

instructor with Paul Herscu, ND, MPH at New England School of Homeopathy, www.nesh.com. Join the NESH class that began in October 2016. She raised three wonderful children and spends much of her non-working hours in her art studio and on the ballroom dance floor.