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Heiner Frei

HOMEOPATHY AND ADHD

A New Treatment Concept with Polarity Analysis

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PREFACE

Attention deficit hyperactivity disorder (ADHD) and the associated syndrome without hyperactivity, attention deficit disorder (ADD), constitute one of the major challenges of our time. The affected children and their families often suffer greatly. In conventional medicine, patients are frequently treated with stimulants, i.e. amphetamine derivatives. These substances have a high potential for abuse and are subject to narcotics legislation in many countries. The exponential increase of stimulant treatment in the West is a major cause of concern since the long-term effects are not well understood. Therefore, it is no surprise that there is a search for effective alternative treatments.

In this book we would like to present our extensive experience with homeopathic treatment of hyperactive children, gathered over many years. In the majority of patients homeopathy leads to impressive results and – with continuing treatment – to enduring improvement. The prerequisite is that the doctor and the family observe the child's symptoms closely and have the patience to reach a successful outcome.

The aim of this work is to assist *homeopathic practitioners* in the treatment of hyperactive children, pointing out the potential pitfalls and thereby enabling more affected children to enjoy the benefits of this premium treatment, tailored precisely to their individual needs. The book contains clear guidelines for taking the case effectively as well as hints on the reliability and weighting of symptoms. It describes dosing regimes that lead to stable improvement, and how to fine-tune the treatment. Yet it is not a self-help manual: homeopathy is demanding and the treatment of ADHD/ADD especially so. It requires considerable experience to achieve the results presented here.

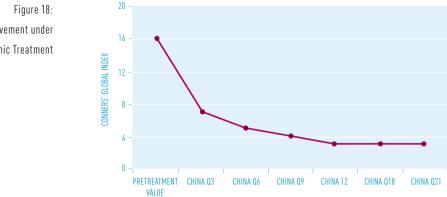
Paediatricians, child psychiatrists and general practitioners who do not currently use homeopathy and who are looking for alternatives to treatment with stimulants will find here details of the scientific work concerning the effects of homeopathy on ADHD/ADD together with the necessary basic knowledge to start using this method of treatment.

For *parents and patients* interested in homeopathy, it is important to appreciate the kind of observation a practitioner requires to achieve successful treatment, how the casetaking proceeds, and the kinds of obstacles that may crop up. At the same time, we would like to encourage you to request homeopathy for your child. The results are well worth it: with ongoing treatment, the child's perception returns to normal. And there is a cumulative effect over the years, which can lead to considerable and long-lasting reduction of the ADHD/ADD symptoms, even after treatment has ceased. It is often a cause of great joy for all concerned to see how children master their difficulties and are able to live a normal life once more.

I would like to extend my warmest thanks to all those who have helped with this work. This includes my friends Dr Klaus-Henning Gypser and Dr Dominik Müller, who have supported me in word and deed, critically appraising the manuscript, correcting the errors and clarifying the weak points. Many thanks also to Dr Franz Kaufmann for the scientific checking of the neuropsychology sections and to Aidan Constable for the careful translation. And a big thank you to all in the team at Narayana Verlag, especially Dr Katrin Sigwart, for the harmonious collaboration resulting in this work.

I would also like to thank my wife and children from the bottom of my heart. It is they who have accompanied me most closely on the long and winding path of the homeopathic treatment of hyperactive patients with all its ups and downs, occasionally suffering from my tenacity to reach the goal of this book. Their patience and empathy have been an invaluable support to me during this work — indeed, without them it would scarcely have been possible.

Laupen, Switzerland, December 2014 Heiner Frei, MD





URBAN H., 10 YEARS OLD

4.2. THE SIGNIF-ICANCE OF CON-TRAINDICATIONS

Urban is a stocky lad who has been noticeably impulsive, restless and fidgety since early childhood. His teachers constantly criticise his poor attentiveness and lack of concentration, slow thinking and weak memory. He therefore finds it hard to learn things. Urban's fine motor function is also impaired, reflected in his poor drawing ability, which is well below average for his age. A treatment attempt with Ritalin[®] was stopped after one year because he reacted by developing severe difficulties in falling asleep.

The child was given a diagnosis of ADHD as the result of a neurological and neuropsychological examination at kindergarten age, and this was confirmed in a follow-up examination before starting homeopathic treatment. When examining him, I notice only his low muscle tone and rough, sensitive skin (but without any actual rash).

In the Questionnaire for Disturbances of Perception and ADHD/ADD, his parents mark the following symptoms:

Reliable symptoms

Looking at something close-up: worse P Uncovering: better P Writing: worse P Understanding difficult P Irritable, aggressive, fits of rage P Muscles: flabby P

Reduced reliability

Smell: hypersensitive **P** Memory weak

On the Questionnaire for Additional Complaints, they only mention nose bleeds with bright red blood, once to twice a month. They have not noticed any modalities for this. They rate his Conners' Global Index before treatment as 15.

REPERTORISATION Once again we proceed step by step:

- 1. The repertorisation of reliable polar symptoms of perception reduces the selection to eight remedies, two of which are discarded due to contraindications.
- 2. By adding the less reliable symptoms smell: hypersensitive and memory weak, only *Lycopodium*, *Sulphur* and *Bryonia* remain.
- 3. If we additionally repertorise the symptom nosebleeds with bright red blood, *Lycopodium* falls out of the differential diagnosis (*Table* 10).

	Calc.	Sulph.	Puls.	Bry.	Lyc.	Sep.	Phos.	Chin
Number of hits	9	9	9	9	8	8	8	8
Sum of grades	26	21	17	14	29	21	19	14
Polarity difference	20	8	1	6	16	5	8	9
< looking, at something close-up (p) [85]	4	2	2	1	4	3	3	1
> uncovering (p) [37]	3	2	2	1	4	1	2	2
< writing (p) [76]	4	2	1	1	3	3	2	2
understanding, difficult (p) [74]	3*	2	1	1	4	4	1	1
irritability (anger, aggression) (p) [64]	2	3	3	3	3	3	3	2*
muscles, flabbiness (p) [53]	4	3	2	1	3			2
smell, hypersensitive (p) [49]	2	3	2	1	4	4	4	3
memory, poor, weak (eP) [60]	2	3	2	3	4	2	1	
nose, bleeding, bright blood (p) [39]	2	1	2	2		1	3	1
> looking, at something close-up (p) [5]								
< uncovering (p) [56]			1	1		2	1	2
> writing (p) [2]								
understanding, easy (p) [17]		1			1	1	1	
mildness (p) [37]		3	4(CI)		3			
muscles, tense (p) [34]		2	2			4/CI	4/CI	1
smell, lost, weak, diminished (p) [46]	4/CI	2	4/CI	2	3	4	3	
nose, bleeding, dark, black blood (p) [41]		2	3/CI	2	2	3/CI	1	2

Repertorisation U. H. eP = extended polarity is an experimental function that does not concern us here.



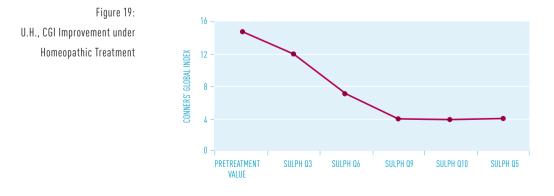
Sulphur crystal

This repertorisation is ambiguous because the two remedies that cover everything without contraindication are noticeably less specific for the patient's symptoms than the remedies with the highest polarity difference, *Calcium carbonicum* and *Lycopodium*. It is therefore very important to ask again about the contraindications of *Calcium carbonicum*. The mother, however, explicitly confirms the symptom *smell hypersensitive*: Urban will immediately protest about some smell or other that everyone else finds inoffensive. The *nose bleeding with bright blood* is confirmed by the mother too, which also makes *Lycopodium* an unlikely remedy.

Definitive Remedy Selection

The final choice of remedy in this case is neither from a materia medica comparison nor from the mind symptoms. By including the finding *rough skin*, which is only covered by *Sulphur*, it is possible to make a decision.

REMEDY AND PROGRESS Urban is given *Sulphur* Q₃, initially every two days and then daily after two weeks. Even with the dose given only every two days, his Conners' Global Index falls from 15 to 12, where it remains two weeks later. At the first checkup, Urban's mother says he is more reasonable and pleasant than before homeopathic treatment. We continue with *Sulphur* Q6 daily for the next four weeks, during which time his CGI falls to 7. Now he is generally doing very well and his performance at school has also improved noticeably. With *Sulphur* Q₉, his CGI twelve weeks after the start of treatment is 4, where it remains on a long-term basis (*Figure 19*).



CALCIUMFrequency: with 14 % of prescriptions, Calcium carbonicum is the mostCARBONICUMfrequently prescribed remedy for hyperactive children.

MAIN SYMPTOMS	Physical restlessness
	Distractedness
SIGHT	Light worse
	Looking at something close-up worse
	Reading worse
HEARING	Hearing hypersensitive
	Hearing keen (sensitive)
	Noises worse
SPEECH	Talking worse
SMELL	Smell hypersensitive
TASTE	Sense of taste diminished
BALANCE	Travelling in car worse
ТОИСН	Touch worse
TEMPERATURE	Warmth worse
	Warm room worse
	Uncovering better
	Cold worse
MOVEMENT	Desire for movement
	Movement better
	Dislike of movement
FINE-MOTOR MOVEMENTS	Writing worse
MUSCLE TONE	Muscles flabby
TIME OF AGGRAVATION	After sleep, while waking up worse
	Before sleep, while falling asleep worse
MIND	Understanding difficult
	Memory weak
MOOD	Sadness
	Irritability

SUMMARY OF THE	PERCEPTION	Light, looking at something close-up,
HIGH-GRADE ADHD/ADD		reading, noises, talking worse
SYMPTOMS FOR		Hearing hypersensitive, sense of taste
CALCIUM CARBONICUM		diminished
GENIUS ACCORDING TO BPB 2000	TEMPERATURE	Uncovering better
	MOVEMENT	Physical restlessness, writing worse,
		muscles flabby
	TIME OF AGGRAVATION	After waking up and while falling
		asleep worse
	MIND	Understanding difficult
	MOOD	

FURTHER Hering

- CHARACTERISTIC

 - CALCIUM
- · Forgetfulness. Misplaces words, and tendency to express himself wrongly. Thinking is difficult.
- MIND SYMPTOMS
- **CARBONICUM** Disinclination for every kind of work.
 - Depression and melancholy; tearfulness.
 - Apprehensive mood; as if some misfortune were about to happen.
 - Shuddering and dread as evening draws near.
 - Great anxiety and palpitation of heart.
 - Irritable without cause; peevishness and obstinacy.
 - Restless mood, with gloominess and anxiety.
 - Excessive obesity of young people.

Lippe

- Easily frightened, or offended. Inclination to weep. Children are self-willed. Apprehensive anxiety about his health, or of some future misfortune.
- Despairing mood with fear of disease and misery. Thinking is difficult.

Guernsey

• Pale skin with a chalky look, and (in infants) open fontanelles.

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