

Homeopathic Educational Services

Mailing Address: 812 Camelia St., Berkeley, CA. 94710

Phone: 510-649-0294 • fax: 510-649-1955

Email: email@homeopathic.com • Website: <http://www.homeopathic.com>

E-course: <http://www.HomeopathicFamilyMedicine.com>

The Homeopathic Approach to the Treatment of Anxiety and Depression: A Review of the History and Present Status Dana Ullman, MPH, CCH

Most health and medical professionals today seem to know about St. Johns wort as a potentially valuable “natural” remedy for depression, but like many effective treatments, it is not always effective for everyone. And further, even when it is effective, it is not always adequately effective. What then do you do if you’ve tried it and it doesn’t work for you or your patients? Or what happens if you or your patients are taking a conventional drug that has been known to interact poorly with St. Johns wort?

Homeopathy may provide a viable alternative. Homeopathy has an impressive history of success in treating people for a wide variety of ailments, including mental health complaints.

Charles Frederick Menninger, MD, the founder of the famous mental health facility named after him, the Menninger Clinic, was actually a homeopathic physician. In 1894 he joined the American Institute of Homeopathy, and he became the head of his local homeopathic medical society shortly after that. Dr. Menninger was such an advocate of homeopathy, he once said, “Homeopathy is wholly capable of satisfying the therapeutic demands of this age better than any other system of medicine (Menninger, 1897).”

By the turn of the 20th century, there were 22 homeopathic medical schools (including Boston University, University of Michigan, and New York Medical College), over 100 homeopathic hospitals, and dozens of “insane asylums” (mental health facilities)(Coulter, 1975). When comparing the recovery and death rates in homeopathic asylums with that in conventional asylums, there was often a 40-50% higher recovery rate and 50% to 400% lower mortality rate in the homeopathic health centers (Coulter, 1975; Bradford, 1900).

Samuel Hahnemann, MD, the founder of homeopathic medicine, is not referred to in texts on the history of psychology/psychiatry nor is his name recognized in mental health care today. And yet, even before Hahnemann developed the homeopathic science, he made important contributions to mental health care. In the late 1700s insanity was considered the possession of demons. The insane were regarded as wild animals, and treatment was primarily punishment. Hahnemann was one of the few physicians who perceived mental illness as a disease that required humane treatment. He opposed the practice of chaining mental patients, granted respect to them, and recommended simple rest and relaxation. Although this type of care may seem obviously important, it was revolutionary at its time.

Historians and psychiatrists today recognize that in the past the treatment of the insane was often barbaric. These experts are not just recalling the past of the 1700s or 1800s; mental health care of just several decades ago was filled with serious abuses. The mentally ill were injected with malaria in hopes that the fever would burn out their

insanity. Insulin was given to schizophrenics, even though it seemed to diminish symptoms only when given in very high, sometimes lethal, doses. In the 1950s approximately 50,000 pre-frontal lobotomies were performed (Robitscher, 1980). Neuroleptic drugs, such as Thorazine (chlorpromazine), Haldol (haloperidol), and Prolixin (fluphenazine) were frequently given to psychotic patients. These drugs were known to cause severe acute muscular spasms, bizarre posturing, and eventually to Parkinsonian syndrome.

These various treatments are either outdated or have been moderated, and yet, it remains questionable if modern psychiatric care is optimally safe or effective.

Conventional medicine today is considered much safer and more effective than that at mid-20th century. However, the safety profile of conventional drugs for depression still has many “blemishes” (diplomatically speaking), depending upon the type of drug the person is taking, ranging from insomnia, irritability, and headaches for Wellbutrin users, to nausea, headaches, and reduced sex drive in Prozac users. However, the long-term effects of these drugs are still largely unknown, and their interactions with other drugs are at best uncertain. Another problem with common antidepressant and anxiolytic (anti-anxiety) drugs is the dependency and withdrawal problems, making it difficult for many patients to slow down or get off these drugs.

The additional problem with these conventional drugs is that because they do not cure the person, the individual is generally expected to stay on the drugs for long periods of time, sometimes even for the rest of their lives.

In contrast, homeopathic medicines are considerably safer, though it should not be assumed that homeopathic medicines are completely safe. One should not take homeopathic medicines repeatedly over several weeks unless under homeopathic supervision because you risk experiencing a “proving,” that is, the creation of the symptoms that a substance actually causes in overdose.

There are 10 trillion nerve cells in the brain that govern sensing, thinking, and feeling. Despite the varying functions of different groups of nerve cells, their interdependent and synergistic nature creates a highly complex working whole which is literally impossible to comprehend fully. Predictably, psychiatrists have had limited success trying to alter certain improperly functioning parts without directly disturbing brain chemistry and physiological processes.

Author Lyall Watson noted, "If the brain were so simple that we could understand it, we would be so simple that we couldn't understand it." And acknowledging the complexity of the brain and of human behavior, Albert Einstein once said, "How difficult it is! How much more difficult psychology is than physics."

Despite the fact that psychiatric drugs often have serious side effects, especially when given over long periods of time, and the additional fact that they do not actually cure mental illness, these drugs still serve an important function. Since approximately 15% of people with severe depression commit suicide, methods to alleviate depression and thereby reduce the chances of suicide are certainly needed. If, however, there are alternatives to them, it is certainly prudent to consider them. **Dr. Charles Frederick Menninger reminds us, "It is imperative that we exhaust the homeopathic healing art before resorting to any other mode of treatment, if we wish to accomplish the greatest success possible" (Menninger, 1897).**

Homeopathic Understanding of Mental Illness

The homeopathic understanding of health is intimately connected to its understanding of the mind in general. Homeopaths don't separate the mind and body in the usual way; they generally assume that body and mind are dynamically interconnected and that both directly influence each other. This acknowledgement of the interconnectedness of body and mind is not simply a vague, impractical concept.

Homeopaths base virtually every homeopathic prescription on the physical and psychological symptoms of the sick person. Psychological symptoms often play a primary role in the selection of the correct medicine.

It is rarely helpful in determining which homeopathic medicine to use by assessing if a person's mental state was caused by his/her physical disease or vice versa. Most of the time, this determination to the homeopath is moot. Instead, the homeopath seeks to find a medicine that matches the totality of the person's physical and psychological symptoms, irrespective of "which came first."

Even the "which came first" issue is much more complex and deceptive than one might initially presume. Most of us may have said at one time or another that we got a headache or some other symptom after getting angry, being depressed, or becoming fearful and that this emotion "caused" the headache. The emotional stress, however, may be only the veritable "straw on the camel's back" that results in the collapse of the camel (or in the development of the headache). This collapse wasn't necessarily "caused" by a straw, but may have resulted because the camel was already carrying a load of 500 pounds, i.e., because we were concomitantly experiencing various physical, environmental, and other stresses in our life.

Too often we assume that something that happens close to the time we develop symptoms is "the cause" of our problem. It is however always easier to look for the effects of causes than for the causes of effects. In actuality, what we assume to be the "cause" is probably but another effect or another stress. The "cause" of a phenomenon is not so simple and may not ever be known. The Greek philosopher Democritus understood this paradox when he said that he would rather understand one cause than be the King of Persia.

Contemporary psychologist Lawrence LeShan also questioned the value of finding the "original cause" of a mental disorder. He noted, "One does not put out a forest fire by extinguishing the match that started it."

The homeopathic alternative to treating psychological and physical diseases is to assume that mind and body are undeniably connected and that a microdose must be individually prescribed based on the totality of the sick person's symptoms.

From a homeopathic point of view, the prevalence of mental illness in our society is not simply the result of living in a fast-paced, stressful society, but also because our medical care system has effectively suppressed various physical illnesses. Homeopaths assert that by treating symptoms as "causes" rather than as "effects," conventional medicine masks the symptoms without curing the underlying disease process. Homeopaths theorize that, worse still, the treatment and suppression of symptoms forces the disease process deeper into the organism so that it then manifests in more severe physical pathology and more serious psychological disorders. Homeopaths further assert that the increase in mental illness today is the result of symptom and disease suppression from the use and overuse of conventional drugs (iatrogenesis).

Homeopaths and biologists alike acknowledge that living organisms respond to stresses in ways that primarily allow for survival. Organisms will protect their most vital processes first. Homeopaths therefore assume that the person's mental state is vital for survival insofar as it governs the state of awareness that makes decisions on how to respond to stressful or life-threatening situations. The organism will protect the most deep psychological level most strongly and will first externalize various superficial emotions. Likewise on a physical level, certain vital organs, especially the brain and the heart, will be protected before other organs.

Homeopaths operate on the assumption that the organism creates the best possible response, based on its present abilities, to whatever stresses it is experiencing. Because homeopaths view symptoms as adaptive efforts of the organism to respond to stress or infection, they assume that efforts to control or suppress these defensive reactions can lead only to more serious symptoms. The evidence supporting this assumption is in any pharmacology text that lists the side effects of drugs. It becomes immediately apparent

that the side effects of drugs are often more serious than the condition they are treating. And predictably, these side effects include various acute and chronic mental symptoms.

A classic example of this phenomena is witnessed in the use of corticosteroids (cortisone and prednisone) used to suppress skin eruptions and asthmatic attacks. In addition to the various side effects of these drugs, corticosteroids are also known to suppress the immune system and induce depression and even psychosis, which diminish when the drug dosage is reduced or stopped.

Psychological symptoms, too, are thought of as ways in which a person is trying to adapt to biological and psychosocial stresses. Such symptoms should not be suppressed, unless medically necessary. Instead, a homeopathic medicine should be individually prescribed based on the totality of the person's symptoms. The correct homeopathic medicine will catalyze a healing process that will raise the person's overall level of health. To complement the prescription, good homeopaths will provide some psychotherapeutic support based on homeopathic principles (See section on "Psychotherapy--Homeopathic Style"). And of course, homeopaths will, when appropriate, refer clients to various other health practitioners.

The Homeopathic Treatment of Psychological Problems

Several schools of psychologists categorize people in certain psychological or characterological types. Others in medicine, genetics, and sports categorize various "body types." Homeopaths, in contrast, acknowledge certain "bodymind" types. They determine their medicines based on the constellation of physical and psychological symptoms.

Choosing the correct homeopathic medicine is at once a highly systematic and an artful process. Edward C. Whitmont, M.D., one of the founders of the New York Jungian Training Center and a homeopath since the 1940s, has written eloquently about the homeopathic bodymind types. In his book *Psyche and Substance: Essays on [Homeopathy in the Light of Jungian Psychology](#)* (1981), Dr. Whitmont describes a dozen key medicines that homeopaths use, the role that each of these substances play in nature, the chemistry of each substance and how it acts the way it does, the symptoms that it is known to cause in human beings when given in toxic dose, and the bodymind type it is known to treat and cure.

In a similar fashion, Philip Bailey, M.D., an Australian homeopath, has written *[Homeopathic Psychology](#)* (1995) in which he describes the bodymind types in light of well-known characters in literature, in history, and even in the movies. Liz Lalor has likewise provided insights into the bodymind syndromes in her clever book, *[The Homeopathic Guide to Partnership and Compatibility](#)* (2003).

In order to give a sense of some specifics of these homeopathic typologies, it is instructive to describe two homeopathic medicines, Arsenicum album (arsenic) and Nux vomica (poison nut). The following descriptions are brief summaries. For more detailed information about them, consult the books by Whitmont, Bailey, and various materia medicas (Gibson, 1987; Reichenberg-Ullman and Ullman, 2002; Tyler, 1942, Vermeulen, 2004)

The person who needs Arsenicum is an overanxious, restless, fearful, perfectionist type of person. He or she has a driven nature; an anxious state over anything specific or just things in general; and suffers from a fussy meticulousness, all of which create a high strung and nervous individual. In general, people needing Arsenicum tend to assume that there are hostile forces at work in the world and that they must work vigilantly against them. They have a deep-seated insecurity, from which develops a dependency on others, a possessiveness of objects and people, a tendency towards fastidiousness, and deeply-felt anxieties and fears. They may have various anxieties and fears, especially about their health, their future, and their financial status, all of which are heightened when they are alone, and then diminished when they are with others. To reduce the chances of things

going wrong, they become over-conscientious. They over-prepare for everything and are inordinately fastidious.

Physically, the person who needs Arsenicum is usually thin, fine-haired, delicate-skinned, with pale or alabaster complexion. They perspire easily and profusely and are extremely sensitive to factors in the external environment. They are particularly sensitive to any exposure to cold and feel better from most forms of heat. They tend to experience burning pains that are relieved by warm applications, and if they have those pains in the stomach, they experience relief by warm drinks. Milk, fruit, ice cream, and alcohol may aggravate digestive or other symptoms. Most commonly, their physical and psychological symptoms will be particularly apparent at midnight and shortly after.

The symptoms that typify the Arsenicum type are often seen in insomniacs. Because the symptoms of Arsenicum are worse late at night and because these people tend to be perfectionistic, they usually require things to be "just right" in order to fall asleep. Part of their hypersensitivity to the environment lies in a sensitivity to noise--any noise.

Their over-conscientious nature also includes an anxiety about health. People who need Arsenicum are often hypochondriacs. They have many, many symptoms, and even though they may have had them for a long time, they still want the practitioner to get rid of them immediately. As the result of this anxiety, they tend to go to a variety of doctors and usually try many types of alternative therapies. These people also tend to become addicted to various pain relievers or other medications that temporarily diminish their pain. Also, because of their anxious and restless nature, they may use drugs or alcohol to slow them down and help them relax.

Arsenicum is also a common medicine given to people with anorexic tendencies. People who need Arsenicum tend to have anxieties about the food they eat, sometimes thinking that all food is toxic and that they shouldn't eat at all. Another part of their personality that fosters anorexia is their perfectionist nature that tends to encourage a thinner and thinner waistline.

Nux vomica has several similarities to Arsenicum but more distinct differences. People who need "Nux" are hurried and impulsive, like those who need Arsenicum, though Nux people are more prone to irritability, anger, and maliciousness. Even those Nux people who have learned to control their rage tend to feel a hyperirritability and anger inside themselves struggling to be expressed. They are dissatisfied, rarely content, hypercritical of others, impatient, and jealous. They are very competitive. They will compulsively compete, even in certain games or job situations where competition isn't appropriate.

Like people who need Arsenicum, Nux people will be fastidious. Whereas Arsenicum people will usually become anxious and nervous as they try to hold in their disgust for messes, Nux people will often get irritated and visibly angered by lack of order and cleanliness.*

[* It must be noted that homeopaths recognize that a person can be neat, orderly, and fastidious in a healthy way. However, whenever homeopaths refer to fastidiousness as a symptom, they are referring to a state where the individual is overly concerned about cleanliness and order.]

People who need Nux tend to be extremely self-reliant, a distinct difference from those who need Arsenicum and their dependence upon others. Nux people will overemphasize achievement, to such a degree that their life will become dominated by their work. They will take on greater responsibility than they are capable of, becoming increasingly irritable and demanding.

Classically, people who need Nux represent what is called in psychology the "authoritarian personality" (Adorno, 1950). They want to force things their own way. To achieve security they adopt a powerful authority and demand that those in inferior

positions submit to it. Whitmont describes them as perfect bureaucrats. They are rigidly moralistic and will condemn others who violate Nux's moral code. And finally, they repress socially disapproved tendencies and project them onto others.

Nux people also have a soft side. They are sentimental and may cry from listening to certain music or seeing beautiful things. And despite a rough exterior, they cannot stand the least pain. They may cry even after a bout of anger. Since they can't stand the least opposition, they may cry from frustration. Despite this occasional tendency to weep, it has been consistently observed that, though they may be sad at times, it is often impossible for some people who need Nux to cry.

Physically, people who require Nux may be husky, solid, and muscular, or they may be lean, bent forward, and withered. They are physically and emotionally irritated by exposure to cold, drafts, noise, and light. Their worst time of day is upon waking, and it usually takes an hour or so to wake up. They sometimes feel an urge to take a nap. If they are accidentally awakened from this nap, they become highly irritated. They may suffer from insomnia because of their very active mind which constantly ruminates about the many irons they have in the fire.

They tend to overeat, with cravings for fats, spicy foods, and milk. They may experience various digestive and nervous symptoms that are aggravated by foods that they tend to crave, especially milk, meat, fats, and coffee. Commonly, they will be constipated and have much gas.

Typically, people who need Nux to sustain their hyperactive nature by drinking coffee, imbibing alcohol, and taking various stimulants. They are therefore prone to alcoholism, drug abuse, and malnutrition. They may be friendly when they are sober; however, when they are drunk or high, they tend to be abusive, cruel and violent. They will ridicule and scorn others. They thus have tendencies to wife and child abuse. They also have strong sexual desires, and they tend to demand much from their sexual partner. Their strong sexual desires may also lead them to raping others. However, if they have drunk too much or taken too many drugs, they may become impotent, even after the effects of these substances has worn off.

People who need Nux also have classic "Type A" behavior. They are prone to being workaholics and will often demand a similar level of commitment to work from others. As the result of this hyperactivity, they tend to become hypertensive and are therefore prone to heart disease.

Arsenicum and Nux are two of the many homeopathic medicines used to treat people suffering from psychological and physical problems. Homeopaths commonly treat people with acute and chronic psychological disorders, including depression, anxieties and phobias, and emotional and mental states of confusion. Homeopaths also commonly treat people with substance abuse problems.

The late Dr. Jack Cooper was the Chief Psychiatrist for 17 years at New York's Westchester County Prison and Jail. Although he didn't initially use homeopathic medicines at his work in the prison, he was very impressed with the results he received when he finally began to do so. He found that the prisoners he was treating with homeopathic medicines were becoming more able to cope with the withdrawal of drugs and alcohol. Of particular importance, Dr. Cooper also noted that for several years there were no suicides in the prison, whereas both before he began using the medicines and after he left, there were several suicides every year. Dr. Cooper found that the homeopathic medicines were having dramatic effects on the prisoners' physical and mental health. And of personal significance to Dr. Cooper, he found that his work was no longer frustrating, but rewarding and worthwhile.

Dr. Cooper's practice outside the prison included the treatment of many alcoholics. He conducted an informal study of alcoholics treated with homeopathic medicines. As a way to measure the effects of these medicines and to diminish the possible effects that his own presence may have created, he didn't actually see the patients himself in most cases. Instead, he talked to a loved one or relative who

intimately knew the alcoholic's physical and psychological symptoms. Of the approximately 30 patients in the study, Dr. Cooper found a 50% cure rate, which he defined as a significantly decreased desire for alcohol and the ability to drink socially without excessive physical or psychological symptoms (Cooper, 1982).

J.P. Gallavardin, a French homeopath in the 1800s, experienced a similar 50% cure rate of alcoholism with the use of homeopathic medicine (Gallavardin, 1890).

Homeopathy actually has a history of successful treatment of various psychological disorders. In 1874 the first public institution for the homeopathic treatment of the insane was opened in New York--the Middletown Asylum for the Insane (later called the State Homeopathic Hospital, at Middletown). Comparing the rate of discharge from conventional vs. homeopathic mental hospitals in New York between 1883 and 1890, we find that approximately 30% of patients were discharged from conventional hospitals every year, while 50% of patients in homeopathic hospitals were discharged. Although one can quibble about these statistics for one reason or another, it is less possible to question the fact that the death rate in conventional mental hospitals was 33% higher than that at homeopathic mental hospitals (Talcott, 1891).

By 1899 seven states in the United States had public mental hospitals under homeopathic supervision, and two of these states had more than one (Keith, 1899).

In the 1950s, two British homeopaths evaluated 120 cases of various neurotic disorders in 1953. Their overall improvement rate was 79% after six months, an impressive statistic when one considers that most of their patients had been ill for at least a year, and many for several years (Gibson and Lond, 1953).

Psychotherapy: Homeopathic Style

Too often people assume that psychological problems require psychological solutions. Since some psychological symptoms arise from physiological processes (and vice versa), it is of value to treat the psychologically sick person holistically. A holistic approach is inherent in homeopathic care.

A homeopath prescribes the individually chosen medicine for the sick person, but he or she may do more than this. When appropriate, a homeopath will provide basic information on nutrition, exercise, stress management, and social and environmental determinants to health and disease. A homeopath may also counsel the person to help him or her deal with the emotional and mental state he/she is experiencing.

Today, many modern psychoanalysts utilize homeopathic-like perspectives and practices. In contrast to some philosophical theories that assume that human nature is essentially destructive and perverted, integral to homeopathy and many psychoanalytic practices is the assumption that human nature is basically creative and that the organism has implicit self-healing capabilities. Symptoms, including psychological ones, are presumed to be ways that the bodymind is trying to adapt to and to deal creatively with various internal and external stresses.

Some very simple psychotherapeutic processes that might be considered "homeopathic" in their approach are "paradoxical intention" (Frankl, 1960, 1975) and therapeutic double-bind (Bateson, Jackson, Haley, et al., 1972; Haley, 1976; Watzlawick, Weakland, and Fisch, 1974), which try to dislodge the symptom and thus to set a curative process in motion. In these systems the therapist actually encourages the patient to pretend to experience the problematic emotional state. For instance, if a person has a phobia of snakes, he or she is asked to pretend to see a snake and to pretend to feel afraid. This method is effective insofar as the person is sometimes not able to produce the fear at will and then not as susceptible to have the phobia at other times.

In another form of paradoxical intention, the therapist encourages the patient to exaggerate the emotional or behavioral problem. Milton Erickson gave a classic example

of this strategy when he described the case of a boy who sucked his thumb. Rather than discourage the child from this behavior, Erickson expressed unmistakable concern that the child was not giving equal attention to his other fingers. Erickson asked the child to begin sucking them. Shortly after this suggestion, the child stopped sucking his thumb altogether (Rogers, 1961).

Psychotherapies that recognize the importance of accepting rather than denying one's emotions are an obvious first step toward a "homeopathic" cure (Haley, 1973). Engaging with and expressing those emotions is the second step. The energy block by habituated responses and long-term traumas is thus freed cathartically. The symptoms are transformed in an overall revitalization of the individual's healing capacities.

This approach is certainly more in line with homeopathic thinking than shortcut methods that define an ideal way of being and that encourage patients to act in a specific, prescribed way. Simple rational analysis of emotional processes is likewise an inadequate way of dealing with structures and energies that are unconscious and go to the root of the organism. Behavior modification strategies that primarily change the way one acts but don't affect the underlying tendencies that led to that behavior in the first place are another clearly "unhomeopathic therapy." And therapeutic measures that palliate extreme symptoms may only temporarily compensate for problems, not cure them.*

[* Just because a psychotherapeutic intervention is "unhomeopathic" does not mean it doesn't have an equal value or efficacy in specific cases.]

Some principles of gestalt therapy are also quite homeopathic. Gestalt therapy, as the name itself implies (gestalt means a unified whole), is a way of looking at a specific problem in the context of the whole person. Rather than treating the problem as extraneous to the person and simply trying to change it, the gestalt therapist (and therapists from various similar schools of thought as well) encourages the person to become more aware of him/herself in toto and to transform one's whole being. If a person had a sexual problem, the gestalt therapist, like the homeopath, would not understand the problem as only a "sexual problem" but as "a problem of the whole person."

Modern psychoanalysts, like homeopaths, have understood that symptoms are not "the problem" but only manifestations of the problem. Sigmund Freud laid the groundwork for this perspective by uncovering the sublimated and unconscious nature of psychological disorders and the manner in which they are expressed. Carl Jung extended this perspective by showing how those sublimated psychological patterns contain also symbolic representations of transpersonal unconscious materials. Wilhelm Reich showed how they were locked into actual physical states. In general, the psychoanalytic process involves the patient in re-experiencing those unconscious dynamic elements that lie at the basis of the pathology. This re-creating or mimicking of an original submerged experience is clearly homeopathic-like in the largest sense.

The awareness of the dynamic complexity of symptoms is shared by homeopathy and psychoanalysis. Although most classic homeopathic texts contain an outdated psychological terminology, the very basis of homeopathic medicine comprises a sophisticated psychoanalytic framework. More recent homeopathic texts (Bailey, 1995; Herscu, 1991; Reichenberg-Ullman and Ullman, 2002; Whitmont, 1981) correct this problem, and the best homeopaths are often excellent psychotherapists.

Still, homeopaths have much to learn from the field of psychology. Too often homeopaths try to obtain information about a person's psyche by asking such direct questions as "What fears do you have? What makes you angry? What types of things make you cry?" Homeopaths obviously have to learn more sophisticated means not only getting but of interpreting this information and distinguishing real character from affect and ego-oriented character.

And of course, the field of psychology has much to learn from homeopathy. Hering's Law of Cure is an invaluable assessment tool for the progress of treatment. The emphasis in homeopathy on the minimum dose will encourage therapists to find the deepest-acting, individualized treatment that doesn't require obsessive re-application, but is powerful enough to have a significant effect. It is interesting to surmise how this might be done in a sophisticated psychotherapy, both with and without actual homeopathic remedies. Ultimately, when homeopathy's law of similars is more fully understood and utilized, psychologists and psychiatrists will automatically recognize symptoms as the organism's adaptive responses and will seek to aid patients in efforts to go with, rather than against, this self-defensive, self-healing process.

Medical Science and Controlled Clinical Studies

A team of German and American physicians and scientists published in *The Lancet* a review of 89 clinical studies (Linde, 1997). They found that on average those patients given a homeopathic medicine were 2.45 times more likely to experience a positive result than those given a placebo. This review of research evaluated various experiments that tested the efficacy of homeopathic remedies in the treatment of hay fever, asthma, migraine headache, ear infection, upper respiratory infection, rheumatoid arthritis, diarrhea, indigestion, influenza, childbirth, post-surgical complications, varicose veins, sprains and strains, amongst many others.

Even a skeptic of homeopathy who responded in *The Lancet* to this research admitted that this review of research was "completely state of the art."

For the most up-to-date review of clinical research using homeopathic medicines, readers are encouraged to access an e-book, *Evidence Based Homeopathic Family Medicine* (Ullman, 2016, and updated regularly at www.homeopathic.com; this e-book is an integral part of the e-course at www.HomeopathicFamilyMedicine.com).

There have been, however, few studies conducted on the homeopathic treatment of people with anxiety and/or depression.

An impressive randomized, double-dummy, double-blind, and placebo-controlled trial was conducted with 133 women over a six-week period in which subjects were either prescribed an individually-chosen homeopathic remedy, Fluoxetine (a well-known and commonly prescribed antidepressant), or a placebo (Macías-Cortés, Llanes-González, Aguilar-Faisal, et al, 2015). The study was conducted at academic and research hospital in Mexico City that belongs to the Ministry of Health.

Double-dummy refers to the process by which subjects were given two drugs concurrently (a homeopathic Rx and an antidepressant), and subjects were given placebos of one and/or the other depending on what group they were selected to be in. Those subjects given homeopathic treatment were prescribed a 30C or 200C to be taken in a 60ml bottle of 30% alcohol-distilled water, with 10 drops two times per day followed by agitation. The severity of symptoms was evaluated by a blinded clinical psychologist from the hospital.

Ultimately, this high-quality study found that individualized homeopathic treatment was found to be as effective as Fluoxetine in the treatment of depressed women during the menopause, and this individualized homeopathic treatment was more effective than Fluoxetine and placebo in treating the variety of menopause symptoms. The specifics of these results are described below.

Subjects given individualized homeopathic treatment (IHT) decreased in the Hamilton Rating Scale of Depression (HRSD) from 21.2 to 9.9 points ($P < 0.082$) vs. the Fluoxetine subject group that decreased from 25 to 14.2, vs. the Placebo group that decreased from 20.7 to 15.0 ($P = 0.001$).

54.5% of the IHT subjects had a 50% or greater response to treatment. 41.3% of the Fluoxetine subjects had a 50% or greater response to treatment. 11.6% of the Placebo subjects had a 50% or greater response to treatment.

Ultimately, only two IHT patients needed to be treated for one to benefit.

The individualized homeopathic treatment was deemed to be protective for depression ($P=0.0001$). Homeopathic treatment was found to decrease the Hamilton Scale by FIVE points, and a previous meta-analysis found that a 3-point difference in HRSD scores was deemed to be “clinically significant.” Also, originally, this study was expecting to require a larger number of subjects. However, because the researchers discovered a higher “effect size” from the homeopathic treatment than they had expected, they realized that they didn’t need to add more subjects to the study.

The study also evaluated a wide variety of peri- and postmenopausal symptoms as has been validated by the Greene Climacteric Scale. The Homeopathic treatment group had -8.65 points after 6 weeks, while the Fluoxetine had 3.62 points higher than IHT ($P=0.005$), and the Placebo group had 3.28 points higher than IHT ($P=0.03$).

A study at Duke Medical Center found that 62% of depressed patients experienced favorable results with homeopathic medicines (Davidson, et al., 1997). As for dosage, it is common for a patient to be given a single dose of a medicine that may be repeated once or twice every 30, 60, or 180 days.

Another study evaluated 91 outpatients with moderate to severe depression who received an individualized homeopathic medicine (in Q potencies¹) or fluoxetine (Prozac) 20 mg/day (up to 40 mg/day) in a prospective, randomized, double-blind double-dummy 8 week trial (Adler, Paiva, Cesar, 2009).

The researchers found that there were no significant differences between the percentages of response or remission rates in both groups. The study also found a higher percentage of patients treated with fluoxetine reported troublesome side effects, and there was a trend toward greater treatment interruption for adverse effects in the fluoxetine group. This study shows individualized homeopathic treatment was equally effective as compared to fluoxetine in acute treatment of outpatients with moderate to severe depression.

In 2016, a study compared results from the utilization of conventional psychotropic drugs among patients seeking care for anxiety and depression disorders (ADDs) from general practitioners (GPs) who strictly prescribe conventional medicines (GP-CM), regularly prescribe homeopathy in a mixed practice (GP-Mx), or are certified homeopathic GPs (GP-Ho)(Grimaldi-Bensouda, Abenhaim, Massol, et al, 2016). Patients were admitted into this study if they scored 9 or more in the Hospital Anxiety and Depression Scale, HADS). Information on all medication utilization was obtained by a standardized telephone interview at inclusion, 1, 3 and 12 months.

Of 1,562 eligible patients consulting for ADDs, 710 (45.5 %) agreed to participate. Adjusted multivariate analyses showed that GP-Ho and GP-Mx patients were less likely to use psychotropic drugs over 12 months, with Odds ratio (OR) = 0.29; 95 % confidence interval (CI): 0.19 to 0.44, and OR = 0.62; 95 % CI: 0.41 to 0.94 respectively, compared to GP-CM patients. The rate of clinical improvement (HADS <9) was marginally superior for the GP-Ho group as compared to the GP-CM group (OR = 1.70; 95 % CI: 1.00 to 2.87), but not for the GP-Mx group (OR = 1.49; 95 % CI: 0.89 to 2.50).

Ultimately what the results of this study suggest is that homeopathic treatment is not just as effective conventional medical treatment, but actually with slightly better results. When one considers the known safety of homeopathic medicines and the many side effects of conventional drugs and the challenges/problems inherent in stopping the use of such medications, the benefits of homeopathic treatment are understood in a larger context.

¹ “Q potency” is also called “LM potency,” though Q potency is the more linguistically accurate term.

Homeopathic Medicines for Acute Anxiety and Minor Depression

Mental health clinicians can learn how to use homeopathic medicines to treat minor or acute states of anxiety or depression, though serious or recurring psychological distress requires the attention of a professional homeopath. Some of the medicines listed below are for more serious psychological problems than just minor or acute states of anxiety or depression; information is provided for instructional, not therapeutic, reasons. The precise dosing regimens require additional training than can be provided in an introductory article such as this.

ACUTE ANXIETY

- *Ignatia* (St. Ignatius bean) is the leading remedy in homeopathy for acute stages of anxiety and depression, especially after the break-up of a relationship or the death of a loved one. People who need this remedy tend to try to hold back their emotions, but ultimately they can't which results in uncontrollable sobbing, or sometimes, intercurrent crying and laughing. These people are unable to catch their breath, and this manifests in frequent sighing or a lump in the throat.
- *Aconitum* (monkshood) is a useful remedy for acute anxiety as a result of a sudden stress such as a car accident or natural disaster. Aconitum is particularly helpful for those states of shock in which the person thinks (or knows) that they are severely injured and become panicky as a result. Aconitum not only has the capacity to calm them but also to help begin the healing so that the severity of the injury is reduced. This remedy is also beneficial for the anxiety or panic state after an earthquake, tornado, fire, or other natural disaster.
- *Gelsemium* (yellow jessamine) is useful for performance anxiety, whether one is about to perform or simply take an examination. It is particularly indicated when the person feels unable to face any challenge ("I can't cope"), feels or acts cowardly ("I give up"), and feels "paralyzed" from anticipation and fear. Physically, these people tend to feel weak and may tremble. This remedy is a leading medicine for influenza, and people who need it may suffer from a state of anxiety and anticipation that mimics a viral infection (weakness, sleepiness, mental dullness, and apathy).
- *Staphysagria* (stavesacre, an herb) is usually indicated during or after an abusive relationship, especially when the person experiences much humiliation, which then results in anger and indignation. The people who benefit from this remedy may have held in their emotions at first, but now they explode in rage. They may tremble, throw things, lose their voice, or suffer from various physical ailments, especially headaches, indigestion, urinary problems, or skin disorders.
- *Argentum nitricum* (silver nitrate) is also for performance anxiety. Their greatest fear is that they don't know what will happen. They become restless and impulsive and may do rash things. Physically, they tend to experience diarrhea or flatulence. These people may crave sweet foods, and they sometimes aggravate them.
- *Lycopodium* (club moss), like *Argentum nitricum*, is useful for bloating from anticipatory anxiety and a craving for sweets, but this remedy is more known for having a lack of self-confidence that is compensated for by a haughtiness and frequent boasting. Being alone aggravates their anxiety, and they experience some relief from warm drinks.
- *Arnica* (mountain daisy) should be considered when a person's anxiety is the result of financial loss or a business failure, and the person feels emotionally "bruised" from the experience (this medicine is the leading remedy for bruises). The person may be in a state of shock, a condition in which the person denies that anything is wrong, even though the person's behavior and persistent thoughts suggest otherwise.
- *Kali phosphoricum* (phosphate of potassium): This is one of homeopathy's great "nerve" remedies. It is a remedy for people who may need more "nerve" or more of a backbone. People who need this remedy experience various physical ailments from worry, from overwork, and from getting overexcited. This is a remedy for people who think that everything becomes a major task. They are nervous and are easily startled and frightened. They are easily stressed, and they fear that they may have a nervous breakdown.

MINOR DEPRESSION

- *Ignatia* (St. Ignatius bean): This is the leading remedy in homeopathy for acute stages of depression, especially after the break-up of a relationship or the death of a loved one, the loss of a job, or an experience of abuse. People who need this remedy tend to try to hold back their emotions, but ultimately can't. This temporary emotional suppression ultimately leads to uncontrollable sobbing, or sometimes intercurrent crying and laughing, with a higher than average degree of intensity. They tend to be on an emotional roller-coaster with their alternating moods. These people are unable to catch their breath, and this manifests in frequent sighing or a lump in the throat. Their depression is sometimes worse prior to menstruation.
- *Staphysagria* (stavesacre): People who need this remedy tend to have experienced great humiliation, insult, or loss of pride. They experience low self-esteem, and they are no longer able to hold in their emotions. In this process, they experience depression and anger, or they feel depressed after a bout of anger. They blame themselves and lash out at whoever hurt them. This remedy is usually indicated during or after an abusive relationship. The people who benefit from it may have held in their emotions at first, but now explode in rage. They tend to have strong sexual desires but try to keep them in control (may lead them to think more about sexual matters). They may tremble, throw things, lose their voice, or suffer from various physical ailments, especially headaches, indigestion, urinary problems, or skin disorders.
- *Pulsatilla* (windflower): This remedy is for people who weep easily, who feel better after crying, who are openly emotional, are extremely clingy, strongly desire sympathy and consolation, tend to be dependent upon others, and feel forsaken. People who need this remedy do not sob but instead experience a type of sweet crying that inspires others to hold and hug them, which is exactly what these people want and need. They sometimes become childlike and may want their mommy. They have a tendency to become very indecisive about many things, continually want to please others and have difficulty figuring out what they want themselves. They dislike arguments and go out of their way to avoid them. For women, depression tends to be worse prior to or during menstruation, and it is also worse in stuffy rooms and is somewhat relieved when walking in the open air. These people tend to have little thirst and crave fats and rich foods.
- *Natrum muriaticum* (salt): People who benefit from this remedy tend to be stoic, holding in and not showing their emotions. They rarely cry in front of others, and they hate to receive sympathy or consolation from others. When alone, however, they can and will sob uncontrollably. These people hold grudges for a long time. They have a tendency to feel betrayed or disappointed by the person s/he trusts, have sometimes had an inadequate bonding with mother or father (or both), and dwell on past grievances or disagreeable situations. Music can make them depressed due to the memories it evokes. Symptoms of depression tend to be worse prior to or during menstruation, and these people usually have a desire for salt and bread.
- *Calcarea carbonica* (calcium carbonate): People who benefit from this remedy tend to have a fleshy body type with lax muscle tone. These people don't go out much (they're home-bodies), except to specific "regular" places. They handle depression by doing chores or simple jobs or by being "responsible." They feel overwhelmed and burdened by bad news, and don't like to try new things or take any risks. People who need this remedy tend to be more concerned about others' needs than their own. Physically, they are worse from exertion, experience profuse perspiration, and crave eggs and milk products.
- *Sepia* (cuttlefish): People who feel better emotionally after exercise and have some of the symptoms listed below should consider this remedy. Usually, they are physically exhausted, except when they exercise. They believe that they are unattractive (and tend to dwell on this). They experience tension between their relationship and their work,

usually spending more time and energy at work. They have a tendency to experience depression prior to or during menstruation and during menopause. They tend to be chilly, constipated, and have little sexual energy.

- *Aurum metallicum* (gold): When a previously ambitious, competent person begins performing poorly and then becomes depressed, or even suicidal, consider this remedy (and consider referring this person to a mental health professional). People who benefit from this remedy tend to be extremely serious, aloof, hard driving, intimidating, and arrogant, until something goes wrong in their lives and they begin to feel worthless and despondent about everything. They feel easily offended and may feel humiliated when criticized. They may also experience high blood pressure and possibly have heart disease. They have various physical and emotional symptoms that are worse at night.
- *Phosphoricum acidum* (phosphoric acid): When emotional depression leads to physical depression and when some of the symptoms below are also experienced, consider this remedy. These people have no interest in things that previously interested them most. They experience emotional neutrality (lack of feeling) and a sense of emptiness inside. They become mental dull and are averse to business. Exercise causes greater fatigue and depression. They tend to brood over disappointments and experience unrequited love. They usually experience great weakness that is worse in the morning, and their hair turns gray or falls out earlier than expected. They tend to experience despair due to long-term depressive state.

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BIO:

[DANA ULLMAN, MPH, CCH](#), is one of America's leading advocates for homeopathy. He has authored 10 books, including [The Homeopathic Revolution: Why Famous People and Cultural Heroes Choose Homeopathy](#), [Homeopathy A-Z](#), [Homeopathic Medicines for Children and Infants](#), [Discovering Homeopathy](#), and (the best-selling) [Everybody's Guide to Homeopathic Medicines \(with Stephen Cummings, MD\)](#). Dana also authored an ebook that is a continually growing resource to 200+ clinical studies published in peer-review medical journals testing homeopathic medicines. This ebook combines the descriptions of these studies with practical clinical information on how to use homeopathic medicines for 100+ common ailments. This ebook is entitled [Evidence Based Homeopathic Family Medicine](#), and it is an invaluable resource. Dana has been certified in classical homeopathy by the leading organization in the U.S. for professional homeopaths.

Dana Ullman, MPH, CCH, is also the producer and teacher of the new e-course in [“Learn how to use a homeopathic medicine kit.”](#)

Dana is the founder of [Homeopathic Educational Services](#), America's leading resource center for homeopathic books, tapes, medicines, software, and correspondence courses. Homeopathic Educational Services has co-published over 35 books on homeopathy with North Atlantic Books.

Dana has served in an advisory and/or teaching capacity at alternative medicine institutes at Harvard, Columbia, University of Arizona, and University of Alaska schools of medicine. He has developed the curriculum in homeopathy for Dr. Andrew Weil's Program in Integrative Medicine at the University of Arizona. Also, Dana Ullman co-taught a ten-week course on homeopathy at the University of California at San Francisco School of Medicine for many years.