

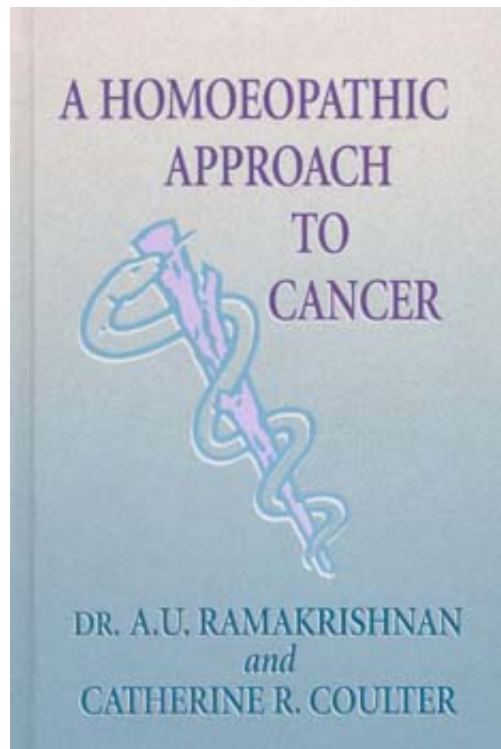
# Ramakrishnan / Coulter

## A Homoeopathic Approach to Cancer

Reading excerpt

[A Homoeopathic Approach to Cancer](#)  
of [Ramakrishnan / Coulter](#)

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## Chapter 2

# Principal Remedies Used for Cancer

Fortunately for the homoeopath confronted with the formidable task of prescribing for cancer, there exists a small number of "cancer" remedies of tried and proven effectiveness.\* These can be divided into three groups: the cancer nosodes, the wide-spectrum cancer specifics, and the organ-specific remedies.

### *The Cancer Nosodes*

The homoeopathic nosodes (or medicines made of potentized extractions of diseased matter) are traditionally regarded as cutting deeper than most of the other remedies, in that they are able to affect a patient's inherited susceptibility or predisposition to specific diseases. The homoeopathic method being based on the Law of Similars, it follows that the two sovereign remedies in the treatment of cancer are those prepared from cancer cells. One or the other will be needed in virtually every case.

\*In presenting the *materia medica*, the authors have judged it most expedient to concentrate on the more specific "cancer remedies"—rather than offer description of the better-known and more widely used medicines, such as *Sulphur*, *Calcarea carbonica*, *Natrum muriaticum*, *Silica*, *Medorrhinum*, and others. Even though these polychrests (as they are called) are regularly employed when treating cancer, they will only be described insofar as they relate to specific cases.

The most frequently used remedy is *Carcinosin*, prepared from the diseased tissue of a cancer of the breast (and sometimes, depending on the different manufacturers, with added cells from some other types of cancer, such as lung). The British doctors J. Compton Burnett and John Henry Clarke were among the earliest homoeopaths to treat cancer with *Carcinosin*. To Dr. Donald Foubister's clinical experience with children, homoeopathy is indebted for a fuller understanding of the remedy. And Dr. Ramakrishnan, with his extensive treatment of cancer with *Carcinosin*, has carried our appreciation of the remedy's extraordinary healing powers still further. Most notably, this is the preferred nosode when there is a family history of cancer.

The second nosode, *Scirrhinum*, is prepared from a cancer of the liver. As was established by Dr. Margery Blackie and others before her, this remedy is used in preference to *Carcinosin* when the affected gland, lump, or tumor is *stony hard*—especially in cancers of the *breast, lungs, liver, rectum, and prostate*, and sometimes in cancers of the uterus (as in Cases 51 and 52) or leukemia (as in Cases 60 and 61). One can also switch to *Scirrhinum* if the patient is not responding sufficiently well to *Carcinosin* or if, during the course of treatment, the tumor or affected organ becomes hard or the liver is affected. By the same token, one can switch to *Carcinosin* when *Scirrhinum* is not working sufficiently well (see Case 76) or one can alternate back and forth between the two (see Cases 40 and 67). These two cancer remedies, remarkably versatile in action, are prescribed:

1. Alternately with an organ-specific or constitutional remedy to combat and heal the existing cancer;
2. To prevent relapses and recurrences;
3. As palliative remedies in the more advanced stages of the disease, together with other palliative medicines (*see Chapters 5 and 6*); and
4. As prevention when there is a family history of cancer or in pre-cancerous conditions (*see Chapter 9*).

### *The Wide-Spectrum Cancer Specifics*

Other remedies that figure prominently in a large number of cancer cases are *Conium*, *Thuja*, and *Arsenicum album*.

1. Like *Scirrhinum*, *Conium* presents the picture of a *stony hard* tumor or gland and has proven of inestimable value in cancers of the *oesophagus, breast, stomach, liver, and prostate*. In this last, if the prostate-specific antigen (PSA) count is high (above 7), then *Conium* plays the role of a specific organ remedy. It also plays an important role in cancer metastasized to the bones.

2. *Thuja*, a remedy that displays the picture of a variety of fungoid and skin growths (including warts, moles, tags, cauliflower excrescences, etc.), has likewise proven to be of great benefit in cancerous growths—particularly those of the *stomach, colon, rectum, bladder, ovaries, uterus*, and, once again, *prostate*, when the PSA count is moderately high (between 4 and 7).

3. The importance of *Arsenicum album* in the treatment of cancer is indicated in Boericke's *Repertory and Materia Medica*, where, in his introduction to the remedy, the author states that *Arsenicum album* "maintains the system under the stress of malignancy *regardless of location*" (emphasis added). Indeed, apart from its healing properties during the earlier stages, the majority of advanced cases of cancer under systematic homoeopathic treatment will, at some point, require *Arsenicum album* for relief of pain or discomfort, especially during the terminal stage (*see Chapter 6*).

### *The Organ-Specific Remedies*

Through clinical experience and the homoeopathic provings,\* it has been ascertained that certain remedies have a strong affinity with some particular organ or with the site of the primary tumor. These have been

\*Provings are a method of ascertaining the curative properties of the homoeopathic remedies by means of administering small doses of a medicinal substance to healthy human beings and then observing and recording the symptoms elicited by this procedure.

## *Cervix*

The principal remedies for cervical cancer, listed in order of frequency of use, are *Aurum muriaticum natronatum*, *Pulsatilla*, *Sepia*, and *Lilium tigrinum*.

CASE 53

*June, 1995*

Female, 39 years, reported with a leucorrhoea of many years standing, which was now accompanied by severe pulling pains all over the hypogastrium and lumbosacral region. These would come on suddenly, but decrease only gradually—and were more pronounced in the evening.

*Examination showed ulcer on cervix and biopsy report confirmed squamous cell carcinoma,*

*Stage II.*

The patient was gentle, soft spoken, sensitive, affectionate; worse from rich, fatty foods; better from a breeze and gentle (rather than vigorous) exercise—in a word, a classic *Pulsatilla*.

### PRESCRIPTION

- Week 1:           *Pulsatilla* 200c - daily, Plussing Method
- Week 2:           *Carcinosin* 200C - daily, Plussing Method
- Weeks 3-8:       Same as Weeks 1-2  
Leucorrhoea stopped.
- Months 3-4:      Same as Weeks 1-2, but in the IM potency  
The ulcer was healing, with less bleeding and pain.
- Months 5-6:      Same as Months 3-4  
Cervical lesion 90% cured.
- Months 7-8:      Same as Months 3-4  
The patient was clear of all symptoms.

*AH tests and examinations showed normal.*

After this, for twelve months, the woman received *Pulsatilla* 10M and *Carcinosin* 10M, alternating monthly, Split Dose Method.

End of treatment.

#### REMARKS

As can be observed from the ovarian, uterine, and cervical cancer cases cited, when prescribing for the female reproductive organs, one tends to individualize more—employing the classical "female" constitutional remedies, such as *Sepia*, *Pulsatilla*, *Lilium tigrinum*, and *Lachesis*.

#### CASE 54

November, 1995

Female, 63 years, fifteen years after menopause, was experiencing vaginal bleeding.

*Examination revealed an ulcer on cervix and biopsy reported squamous cell carcinoma, Stage lib.*

The woman, Septa-like, was strong-willed, hardworking; often feeling injured or depressed and wanting to be left alone. During her entire married life, she had had little or no inclination for marital relations.

#### PRESCRIPTION

- Week 1: *Sepia* 200 ct - daily, Plussing Method
- Week 2: *Carcinosin* 200c - daily, Plussing Method
- Weeks 3-8: Same as Weeks 1-2  
Ulcer looked only marginally better, but patient felt much healthier and more cheerful.
- Months 3-4: Same as Weeks 1-2  
Ulcer had shrunk 30% to 40%. No bleeding, no discharge.

should be repeated shortly before and again soon after the procedure. Thereafter, it can be taken on an as-needed basis, for as long as there is pain.

2. For bone biopsies and harvesting of bone marrow, *Symphytum* 200c or 30c should be prescribed in the same way as *Bellis perennis*.

3. For all other needle biopsies, such as of the liver or lymph nodes, *Arnica* 200c is used in the same way as *Bellis perennis*.

### *Chemotherapy*

Generally speaking, chemotherapy is not viewed by homoeopaths as favorably as is surgery. Especially during the later stages of cancer it is not recommended, because it weakens the vital force and undermines the body's self-healing powers, which the homoeopathic remedies try to strengthen. Moreover, the homoeopathic remedies are often antidoted by chemotherapy. As a rule, the two therapies should not be used simultaneously.

- Ideally, the patient should, with the cooperation and approval of his oncologist, discontinue chemotherapy as soon as possible and begin the homoeopathic treatment according to the Plussing Method.

- If the patient seeking homoeopathic treatment must remain on chemotherapy, but the chemotherapy is given intermittently in short-term courses, homoeopathy can be given on the days or weeks between the rounds of chemotherapy—here again, using the Plussing Method.

#### CASE 115

*January, 1996*

Male, 53 years, sought homoeopathic treatment for weakness, exhaustion, and emaciation following a pancreatic cancer operation. He was diagnosed as being in Stage III.

*The removal of a mass at the head of the pancreas had been followed by chemotherapy, which completely exhausted him.*

## PRESCRIPTION

Week 1: *Ceanothus americanus* 200c - daily, Plussing Method

Week 2: *Carcinosin* 200c - daily, Plussing Method  
The patient felt much better.

Weeks 3-4: Same as Weeks 1-2  
Improvement was dramatic.

Months 2-7: Chemotherapy resumed, but in short rounds. In between, the patient would go on homoeopathic remedies using the daily, Plussing Method—until the next round of chemotherapy.

At the end of seven months, the patient had gained 30 lb. and was feeling healthy. He continued the chemotherapy (in short rounds) for a total of twelve months.

Months 8-19: Same as Weeks 1-2

The patient continues to this day on the same two remedies, but alternating monthly, Split Dose Method. Almost five years later, he is still doing well.

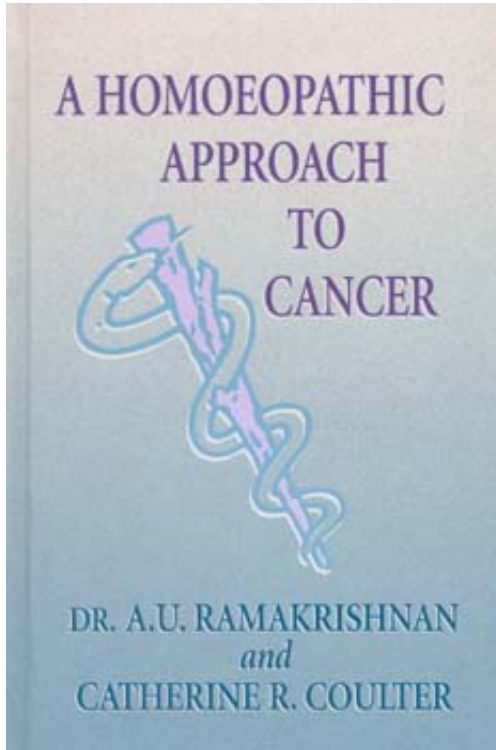
## REMARKS

This case is an illustration of how homoeopathy can (if need be) work alongside chemotherapy.

For the selection of *Ceanothus americanus*, see Chapter 2.

- Sometimes a patient after a mastectomy will be put on a long-term (perhaps five-year) course of an antineoplastic/antiestrogen drug such as tamoxifen, or a patient with multiple myeloma will be put on methotrexate, an antimetabolite/folic acid antagonist, for an indefinite period of time. Although this chemotherapy might to a certain extent interfere with the homoeopathic treatment, by employing the intensive Plussing Method the patient could still benefit from the homoeopathic medicines. And, with time, he or she may decide to discontinue the chemotherapy.





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