# Experience of a homeopathic geriatric doctor in EHPAD (nursing home)



Interests of using homeopathy in nursing home

- Nursing home residents are very old people who have often heavy poly pathologies and several allopathic treatments.
- Homeopathy will present several interests for this type of fragile population.

## Interests of using homeopathy in nursing home

- Decrease and reduce allopathic prescriptions wich cause many side effects.
- Treat all acute pathologies that may occur during the year among those fragile people such as bronchitis, diarrhea, rhinopharyngitis, various types of pain, etc.

## Interests of using homeopathy in nursing home

- Homeopathy was unknown until I arrived
- Advantage: Sole doctor, freedom of prescription
- Helps in interviewing patients with cognitive impairment.
- Collective work
- "training" in homeopathic observation of caregivers and personnel
- Homeopathy mainly used in acute ailments

# Des résultats chiffrés sur les prescriptions :

Number of drug boxes	Moyenne 2017/2018	2019	%
Anti-acid medications	540	408	25%
Dig. Functional treatment	176	67	61%
Constipation	1400	1300	id
Diarrhea	100	44	56%
Diabetes	220	186	15%
Skin cortico-steroids	1250	864	31%
Urologyy	250	145	42%
Cortico-steroids	165	45	72%
Anti-bacterian	232	183	20%
Pain killers grade 1	4718	2461	47%

## most useful drugs for acute cases

- ANTIMONIUM TARTARICUM
- ARNICA
- SYMPHYTUM
- IGNATIA
- EUPHRASIA
- Apis, Bryonia, Arsenicum, Hyoscyamus, Stramonium etc

#### CARBONEUM OXYGENISATUM

a very useful remedy during the Sars Cov 2 epidemy

- Thanks to a close collaboration with Dr. André Saine (Canada)
- Immediate result on Mr V. that was kept alive for more than fifteen days under 8I/mn of O2 with different remedies
- Carbon monoxide (CO) is an odourless and colourless gas produced whenever a fossil fuel is burned.
- Inhaled CO binds to hemoglobin, forming carboxyhemoglobin (COHb), because it has a binding affinity with hemoglobin 200 to 300 times higher than oxygen.
- The continuous displacement and loss of oxygen from hemoglobin eventually leads to tissue hypoxia.

- COVID-19 and the acute and chronic states of CO poisoning are both similar to an influenza syndrome with chills, chattering teeth, fever, body aches and hallucinations, delusions.
- Many COVID-19 patients initially experience dyspnea with a mild cough and great weakness during mild exertion, such as in cases of slow CO intoxication.

- In both cases, the sputum may be bloody.
- Both are marked by hypoxia.
- Both may have tremors and fainting. (unconsciousness)
- - Both may experience nausea, lack of appetite, anorectic feeling, anorexia, vomiting, diarrhea with abdominal pain, dehydration and weight loss

- COVID-19 and CO patients want to lie down while feeling extreme fatigue and prolonged drowsiness for several days ("I have never slept so much in my life").
- Both may experience a burning sore throat and runny nose.
- - Both may experience burning chest pain with pronounced shortness of breath, wheezing and chest congestion.

- Both may experience severe or persistent headaches.
- Both have cytokine storms.
- - Both develop pneumonia.
- - Both may develop acute respiratory distress syndrome.
- - Both typically have constriction and oppression of the chest with palpitation, tachycardia and tachypnea.

- auscultation shows in both cases a decrease in respiratory noises and scattered rasps and snores.
- Both have apnea and Cheynes-Stokes respiration.
- Regular alternation of apnea and hyperpnea
- Both develop pronounced noncardiogenic pulmonary and intraalveolar oedema.
- On macroscopic examination, in the case of COVID-19 and CO intoxication, the lungs are oedematous and bright red (described as carmine red for CO intoxication), without mucous secretion or hemorrhage

- During both cases, the lungs have an x-ray frosted glass appearance.
- Both may evolve into respiratory failure.
- Both can develop multiple organ failure.
- Both develop vascular blood clots, which can lead to pulmonary embolism, venous sinus thrombosis, ischemic stroke, heart attacks, intestinal necrosis and deep vein thrombosis for CO poisoning

- Both pathologies are characterized by arrhythmias, angina pectoris, myocarditis, vasculitis, infarction, cardiac scarring and heart failure.
- Both conditions can result in kidney damage and kidney failure.
- Both pathologies are marked by an increase in CK and myopathies.
  In other corona virus infections, such as CO poisoning,
  rhabdomyolysis has been reported.
- Both have chilblains

 Both may develop neuropsychiatric disorders involving the central and peripheral nervous systems, including encephalitis, meningitis, hemorrhagic encephalopathy, short- and long-term cognitive impairment, headache and dizziness, tinnitus, extreme lethargy, altered consciousness, agitation, anxiety, depression, mood swings, confusion, delusions, delirium, insomnia, rapid mood changes, memory gaps, word hunting while speaking, inattention, difficulty in concentrating, thinking and focusing on simple tasks, disorientation, unorganized movements, ataxia, seizures, eating disorders, problems with smell, taste and vision, polyneuropathies, all types of paresthesia throughout the body, including tingling, tingling and vibrational sensations, and nerve pain.

- Both may develop impaired liver function.
- Both develop reflux and heartburn.
- Both suffer from conjunctivitis.
- Both develop hyperthermia at first and hypothermia as they get deeper.

- Both COVID-19 and CO patients develop erythematous eruptions, vesicular eruptions, and advanced gangrene.
- The multisystemic inflammatory syndrome associated with SARS-CoV-2 (PIMS-TS) and CO poisoning shares many symptoms such as vasculitis, arrhythmias and cardiomyopathy, elevated cardiac enzymes, conjunctivitis, skin rash, erythema, hands and feet oedema, vomiting and diarrhea with abdominal pain, low lymphocyte and platelet counts, elevated CRP, ferritin, D-dimers, pro-calcitonin and interleukin-6, and diffuse oedema.
- the hyperbaric chamber therapy that has been shown to be beneficial in CO-addicted patients could potentially be helpful in COVID patients with ARDS. (acute respiratory distress syndrome)

- based on Farrington , Clarke and Boerick
- Based on observation of carbon monoxide poisoning
- Based on the Canadian proving directed by Dr. Klaus Habich during summer 2020 involving 8 women aged 44 to 72

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- GREAT FATIGUE
- < by effort, at the slightest exercise</li>
- < by warm weather
- >At rest, desire to lie down,
- by sleep
- by fresh air
- Prolonged and deep sleep

- based on Farrington, Clarke and Boerick
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- Disorientation in time and space
- Clumsiness, coordination disorders
- Confusion
- Visual, auditory and sensory hallucinations
- Coma
- convulsion
- Paralysis
- Stroke

- Heavy head
- Headache with feeling of pressure
- Dizziness
- Tight jaws, Trismus. Desire to clench teeth
- Face shingles (zona)
- Conjunctivitis

- Shingles (zona) or herpes especially of the face with skin anesthesia
- Loss of sensation to touch
- Eruptions of red purple vesicles or macules
- Cold skin, cold hands
- Chilliness ++ with desire for fresh air.

- Breathlessness with desire for deep breathing
- Dry cough following of throat tickling, aggravated by movements, inspiration and talking.
- Dry throat and mouth with no desire to drink
- Expiration longer than inspiration
- Exhale cold air
- chest pain and cramps
- Pneumonia

- · Feeling of weakness in the heart region
- Fever with numbness

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- The whole body is sore
- Myalgies
- Cramps
- Pain and stiffness of the cervical spine with restriction of movement
- Broken back sensation

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- Loss of taste and smell
- Nausea
- Abdominal cramps

### CONCLUSION

CARBONEUM OXYGENISATUM is very useful during acute phase of COVID, often after BRYONIA but also to treat patients with long covid who show muscle pain and great fatigue forcing them to lie down