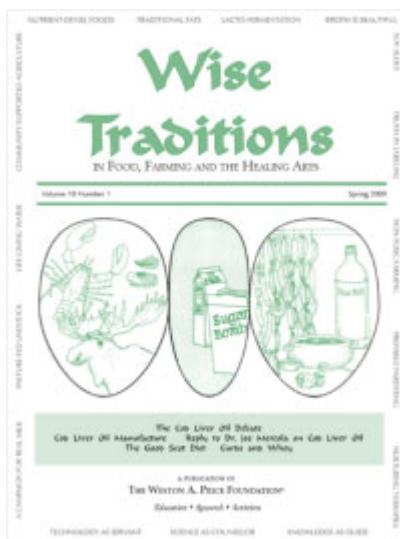


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Joette Calabrese describes treatments for pain and injury

Joette Calabrese, HMC, CCH, RSHom

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No one could blame Angie and Arnold for their parental strictness. In fact most wished they'd kick it up a notch. To say that one of their offspring was hyper stimulated is a turn of phrase reserved for gracious company. Neighbors, teachers and relatives used more graphic terms to describe the Reynes' fourteen-year-old Maria.

Maria kicked at the boundaries of convention. She was primal and plucky. She was gutsy and experimental. Her personality was nothing the Reynes had ever witnessed.

Maria's worn out mother soothed her maternal heart with the thought that her daughter's "spirited" disposition might eventually serve her well in the harsh world of adulthood. Her father knew better, however. So did the neighbors.

Maria's behavior was never quite right. Well, perhaps she had actually been a rather normal child before that first ear infection at age four. Yes, thought her mother, she started having temper tantrums shortly after those illnesses. What was it about those infections that would make her daughter turn into such a...? But she couldn't say the word. After all, Maria is her child.

But it was easy for others to say. Maria was a brat. She was demanding, embarrassing, overtly rude and even promiscuous, if one could say that about a fourteen-year-old. The way she dressed reminded the neighbors of women from a different part of town. Maria's father had to police her clothing and whereabouts daily. Sometimes he was successful. Sometimes not. When he was not attentive, Maria would wear a bustier under her sweater that later became her outer wear and other shenanigans would ensue.

To say that the Reynes were heartbroken and exhausted is underreporting the effect this child had on the family. Maria was an alarming problem.

Once, a cousin who is a psychiatrist suggested that Maria might have a chemical imbalance and that a drug could be prescribed. The thought of resorting to drugs rang like a distant bell that warned the Reynes of danger. Mr. Reyne had been suspicious of drugs used to alter behavior after reading *The Myth of Mental Illness* by Thomas Szasz, MD.

Besides, the Reynes shunned drugs of commerce in general, ever since Mr. Reyne suffered persistent leg cramps and loss of libido as a result of taking prescribed statins a few years earlier. And their nineteen-year-old son developed asthma after steroid use for fatigue from exams. Their youngest was left with diarrhea from an antibiotic about the same time. They were especially suspicious of drugs that could alter behavior, although that certainly would've been welcome about now, but not at the cost of worsening Maria's symptoms in the future.

The Reynes investigated the side effects of Wellbutrin on drugs.com to appease their relative and found this gruesome listing: "Bizarre behavior; confusion; decreased concentration and coordination; exaggerated reflexes; fainting; hallucinations; memory loss; new or worsening agitation, panic attacks, aggressiveness, impulsiveness, irritability,

hostility.”

The same site showed the makers of Cymbalta reporting that “new or worsening mental or mood changes including concentration problems, depression, panic attacks, aggressiveness, agitation and anxiety” were reported as side effects of their product.

MAKING A CHOICE

Besides the fact that conventional medicine often leaves a wake of long-term side effects and homeopathy does not, modern medicine places behavioral problems into diagnostic categories. That is, a large number of people are placed into the same small diagnostic class. For example, if Maria was considered manic depressive, she would share this diagnosis with children who were inactive or suicidal. That didn't fit. If instead she was analyzed as ADD, she would have been bundled in with restless children who bite, but Maria wasn't a restless biter. Regardless of the differences between the personalities within the diagnostic categories, all of those in it would be given the same drugs, often in the same frequency. Despite the diagnosis, the prognosis would have been the same: psychotropic drugs for many months, maybe years.

Even more important, conventional medicine has little or no interest in the etiology of an illness. “Idiopathic” is a common term in allopathy. It means “we have no idea how you got sick.” Homeopathy considers the exciting cause to be a critical factor. In light of these factors, Maria's family sought the aid of a homeopath. True to form, the appointment with the homeopath had to be rescheduled twice before Maria was ready to cooperate without a tantrum. When they finally met, the interview was comforting. Even Maria seemed less agitated.

They learned that homeopathy is a distinctive treatment for

distinctive people. The homeopath was interested in what made Maria tick. Her fears, pleasures, food interests and aversions. Even her sleep positions would be useful to a homeopath sniffing out the cause and remedy choice for such an individual. The homeopath appeared curious, like a detective seeking clues, in spite of Maria's spicy language, as she looked for pieces of the puzzle as to what may have sparked the original changes in Maria. That's when her mother relayed the string of ear infections "treated" by antibiotics. The homeopath was interested in this information and focused in on which antibiotics were administered.

One antibiotic had been used for the first and second ear infections. By the time the fifth infection presented, Maria was put on a daily dose of another, more powerful antibiotic for close to a year. What followed was a series of stomach pains, alternating diarrhea and constipation, and impressive temper tantrums. Maria's parents relayed how she would slam her legs against the wall sometimes for hours, when she was supposed to be sleeping. They also awkwardly confessed that Maria began using curse words, even though they couldn't figure out where she had learned them; particularly the pungent, sexually explicit ones she spewed when she entered kindergarten.

One of the more disturbing symptoms was that at the age of ten Maria became fearful of dying. This was no run of the mill fear, but sometimes terrorizing panic. She blamed her parents for bringing her into this wretched world; words that seared Mrs. Reyne's heart.

Based on this symptom portrait, the remedy chosen for Maria was *Nitric acidum*, a remedy shown to antidote the ill effects in certain people who have chronic ailments from antibiotic use, even as long as decades ago. It also matched her nihilist attitude, her proclivity for cursing, and an appetite for flagrant behavior.

Maria took the remedy one day every two weeks for a period of two months. Within a few weeks herpetic eruptions returned to the corner of her mouth, as she had had a few years previous. Mrs. Reyne knew that this could be a good sign in that it was something that had been suppressed by an over-the-counter medication numerous times. The cold sores lasted a few weeks and then obligingly departed. What also vanished were the nightly arguments in the Reyne household. Maria even started to dress more modestly and the pierced earrings in multiple orifices began to disappear.

Others noticed the changes in Maria, too. Her grandparents beamed when they saw Maria engaged in making the family Sunday dinner. And her parents? Well, you can imagine their delight when she walked into church with her brothers and sisters, sitting together like close-set stones of a building foundation. Their family had a structure and calm for the first time in many years.

Liars Don't Play Chess

No one can lie to us and get away with it if we're not disposed to being vulnerable. I caution my student-clients that stepping into the conventional medical arena needs to be played like a game of chess. You wouldn't place your precious queen on the middle of the board, pull your hands away, and simply hope for the best. A seasoned chess player would imagine what the other player may do with his bishop or knight. Then he'd visualize his next set of options based on those potential moves.

Maria was the Reynes' queen. Initially, they unwittingly relied on that first antibiotic to remove the early ear infections. Now they know they should have done their homework and asked what the long term effects of antibiotics could represent. They also agree that they should have asked what would happen if they had refused antibiotics. Now they wish

they had known of the later manifestations of suppressed ear infections and the dangers of the drugs used to treat them. Today the Reynes admit that they had not learned to play the game well enough. This doesn't mean that a doctor is necessarily an opponent. Yet it must be acknowledged that no one will consider our queen as valuable as we do. And unfortunately in our litigious world, doctors are required to practice defensive medicine. That is, superfluous drugs and tests are often ordered because the attending doctor could be legally responsible for not having followed the standard of practice, regardless of his private opinion.

Equally important, pediatricians and family practitioners are not educated as to the long-term effects of drugs because there are no double blind tests done on children, nor are they tested on adults for more than a few months. The only way for a doctor to recognize future issues is to have stepped outside the box and observed it clinically. He'd have to be aware of the time line and connect the dots on his own. This often doesn't happen unless some adverse effects happen to members of his own family.

Interestingly, in England, childhood otitis media is usually treated with nothing but a good dose of rest and perhaps an analgesic

(<http://www.nhs.uk/Conditions/Otitis-media/Pages/Treatment.aspx>). If and when the ear drum ruptures, as it is allowed to do, the pediatrician expects that it will subsequently heal satisfactorily on its own, often allowing the events to end permanently.

As parents, it is up to us to learn the moves to make on the chess board. If we don't do our homework, we're easy prey to an alliance that has already memorized a sequence of moves designed to direct the parent seamlessly onto their side of the chess board. If we've done our groundwork, we will recognize the patterns and block the offense.

LONG-TERM DANGERS

Does a pharmaceutical company have the right to sell its products? Certainly! But we're not obliged to buy them. Now Maria's mother has made a point of learning enough homeopathy to treat her children herself, so that she is not subject to a paradigm that doesn't suit her family's needs. She recognizes now that the remedy that would have met Maria's otitis media without side effects and in relatively short order was probably *Chamomilla* 30. The remedy would have cost about twelve dollars, and certainly less than a co-pay.

Sometimes when Mrs. Reyne thinks of this, it unnerves her. Yet Mr. Reyne reminds her that it is because of their mistakes that the family was put on the path of using homeopathy for their acute problems—and that this has enabled them to avoid superfluous medical visits for their brood for the last several years. Well, except for the time when their son broke his arm. They were grateful for the x-rays and re-setting of the bone. That's the kind of medicine they've become comfortable with.

Are your drugs telling you the truth? In Maria's case, her parents trusted that the antibiotics given to their baby daughter were "indicated." But for what? To cure the problem of ear infections? Were the ear infections cured? Not if the drug had to be repeated for years. It simply thrust the pathology to a later date only to be approached again by another antibiotic. Furthermore, Maria was left with a more sobering illness. To the Reynes, it originally appeared that each ear infection was an isolated incident. Not until many months into the third or fourth antibiotic did they begin to question whether it was the same infection knocked down to a lower level, only to return with a vengeance. At that time, it certainly would not have occurred to them that they were trading the short-term and manageable pain of an ear infection for years of overwhelming behavior problems.

It's not as a result of double blind tests that we learn of behavior problems in children after antibiotic use. It's not our family doctors who warn of the seriousness of using such products. Instead we learn through a neighbor, WAPF, or a GAPS practitioners. We learn by doing our homework and eschewing the advice of drug enthusiasts.

Any substance that annihilates microorganisms in the digestive factory of the body (the stomach and intestines), including the beneficial ones, can only result in a chronic gut disorder and even a personality lobotomy of sorts. The Reynes certainly would not have acquiesced to such tinkering had they been able to consider all of the facts.

The bank has to advise us that our interest rate could go up in a few months. The fabric store warns that silk draperies will fade in the sun. It's good business to tell the truth, to warn customers, to protect them simply because it's the right thing to do. Yet when it comes to the long-term dangers of drugs (not merely the side effects, which are bad enough, but of effects to come years later) conventional medical fundamentalists skirt the discussion.

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