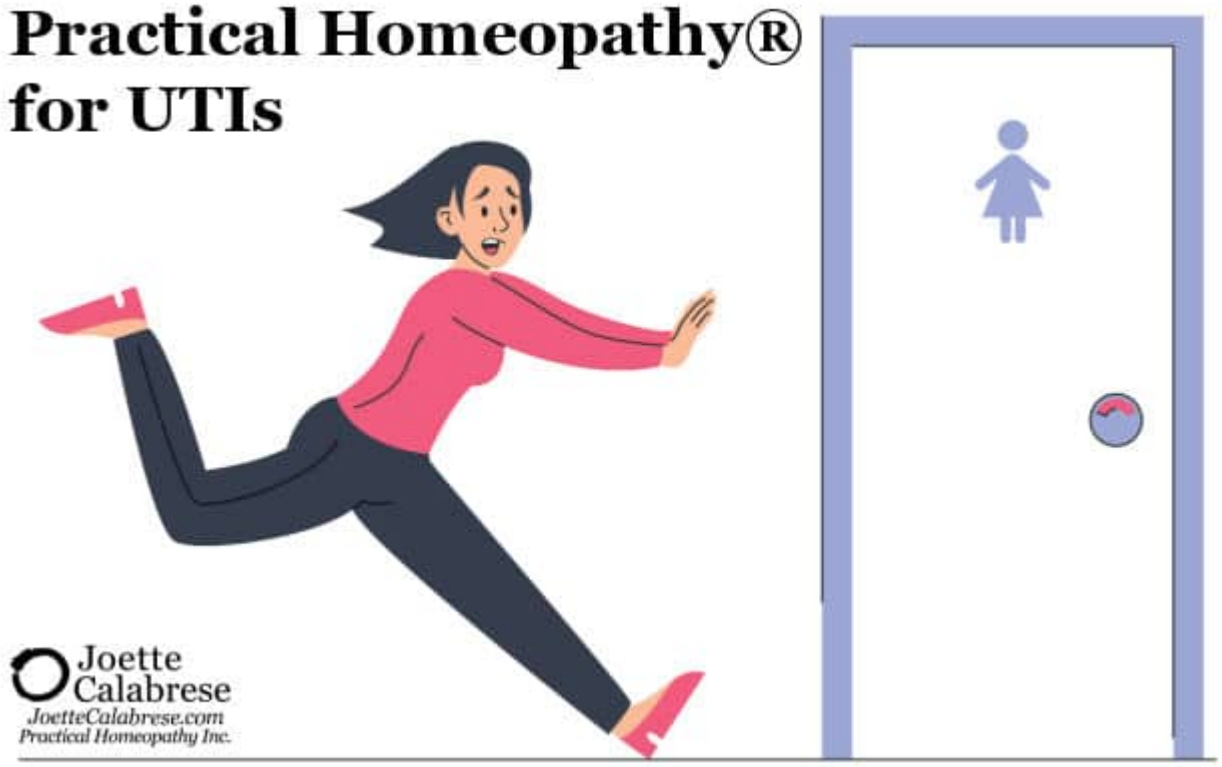
# Practical Homeopathy® for UTIs




Years ago (eleven of them, to be precise), I wrote a newsletter on homeopathy for UTIs entitled When It's Hard to Go. Readers who've found it through web searches have contacted my team because there were no potencies included in the article.

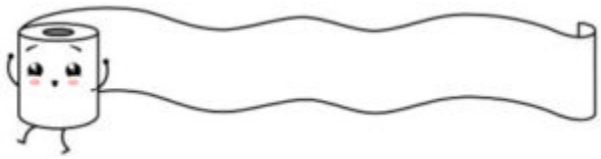
Well, I have an easy explanation for why I was seemingly vague in that post: Classical homeopathy is vague!

You see, back in 2013, when I wrote that newsletter, I still practiced classical homeopathy. But over the years, after developing my own extensive clinical practice as well as my fellowship with the Drs. Banerji in India, I veered away from the esoteric and embraced the practical by utilizing proven, condition-specific protocols for common conditions. Because of this change in my philosophy, the success rate in

my practice soared, and my teachings became more digestable.

Why? Because the brand of homeopathy I developed over time – my Practical Homeopathy® – is not vague. It contains precise, reproducible protocols gathered from top-notch homeopaths all over the world as well as from my decades of case-taking and teaching. I'm no longer handcuffed to the esoteric, enigmatic and dogmatic ideology of classical thinking.

So, it's time to update that old newsletter by putting my Practical Homeopathy® spin on it.



The very first change I want to make is that outside of the Banerji Protocol for UTIs (which I discussed in my 2017 blog post, Recurring UTIs and Antibiotics: Stop the Cycle, where you can download the Remedy Card), my current go-to medicine for general UTIs is *Cantharis* 30, twice daily (or every few hours, depending on severity), until very much better.

As I mentioned in 2013, *Cantharis* is for those who experience a strong sense of urgency, yet very little is voided upon reaching the bathroom. The sufferer may be compelled to rush to the toilet and may even lose urine on the way. Sometimes, a sense of frenzied desperation accompanies an infection, and accompanying pain may make this symptom worse. Burning pain is also a strong indication for *Cantharis*. But it's not necessary – nor is an infection – in order to employ *Cantharis.*

Here's an example of what I hear regularly: One of my team members who was afflicted with at least one or two UTIs a year – not unlike what my hundreds of clients and students

report – told me that she hasn't had one in ages thanks to *Cantharis 30*. A few little pillules employed years ago have given her lasting freedom, peace of mind and empowerment.

But despite that success story, there is often more than one way to bake a cake in homeopathy – even in Practical Homeopathy®. So, let's look at the first few medicines in my 2013 newsletter that may be considered for UTIs.

As you read, remember that all of these medicines – as with every homeopathic medicine – should only be employed until the condition is very much better. Then, halt. Observe. If symptoms recommence, the medicine may be started again as before.

These are listed in what I consider to be the order of importance as of this writing. If a chosen medicine provides absolutely no improvement in due time, then one might consider another medicine:

*Staphysagria 30*, every 3-12 hours, depending on severity, until very much better – This remedy was initially further down the list, but it has proved so efficacious that I'm moving it up! *Staphysagria* has a reputation for aiding girls who suffer UTIs after being abused, either physically or emotionally, or after a recent embarrassment. So common is *Staphysagria* in this malady that it should be considered if no other remedy seems to fit the "picture" of the symptoms. It's also a capital choice for honeymoon cystitis.

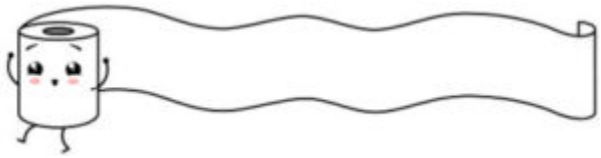
*Natrum phosphoricum 6X (Nat phos)*, twice daily, until very much better – This little gem of a remedy was my previous go-to medicine (before I recognized even more effective protocols). However, *Nat phos* can be used in conjunction with any of the other listed remedies for urinary problems. *Nat phos* 6X is indicated whenever there is an acidic and alkaline imbalance. There is a strong urge to urinate, yet the person must wait for the urine to flow. Watch for

symptoms such as nervous weakness, burning pain and albuminous urine. These signs are made worse after relations and in the evening.

*Ferrum phosphoricum* 6X (*Ferr phos*), twice daily, until very much better – This little cell salt is excellent for any inflammatory state, especially when the inflammation is accompanied by throbbing. Consider this when a fever accompanies the UTI. The sufferer may be nervous, anemic and sensitive. Along with *Nat phos* 6X, it may be alternated with any of the other listed remedies.

*Aconitum napellus* 200 (*Aconite*), twice daily, at the immediate onset of the condition – When I teach students about this remedy, I call it "quick shock" because *Aconitum* is a useful medicine when the body experiences a shock of any sort and has a quick reaction to it. Think of a hot day swimming in warm water and then hopping into a cold, air-conditioned car while still wet. If a urinary tract infection ensues, one might immediately consider this remedy. A fright, such as after an accident, can also be a call for *Aconitum*. Burning before urination and a sense of pressure in the bladder could also point to this choice. As I mentioned, this medicine is generally utilized only at the beginning of the condition – the sudden onset. Another of these potential medicines may be chosen to alternate with *Aconite* during those first few days after onset. After halting the *Aconite*, the other medicine may also be continued, until very much better.

While my original list contained six additional candidates for consideration, there are actually *many* medicines to choose from for a urinary tract infection. But remember, we only move to the others if the top considerations (the Banerji Protocol or *Cantharis*) don't act. We certainly would not throw *all* of these at one condition. Instead, we prudently choose the top match or matches.



Whew! That's a lot of information for one post. So, I'll follow up with the remaining six medicines in my next Memo to Mighty Members later in the week. (If you're not a Mighty Member yet, what are you waiting for?)

For now, readers, I want you to take note: By looking through my older blog posts, you can see the progression of my thinking from 2013 to 2024. Sure, I started out as a classical homeopath because that's all that was available then. It's different now. I'm no longer over-egging the pudding. Instead, I teach what I have gleaned over my almost 40 years of study and practice. However, judging from the responses from my current readers, students and clients, I'm convinced that Practical Homeopathy® has made the homeopathic medical paradigm more accessible to everyone – mothers, grandmothers, dads, nurses, pharmacists and M.D.s.

More and more individuals have garnered the competence and confidence to treat themselves, their families, loved ones and even clients or patients because of the straightforward clarity of my Practical Homeopathy®.

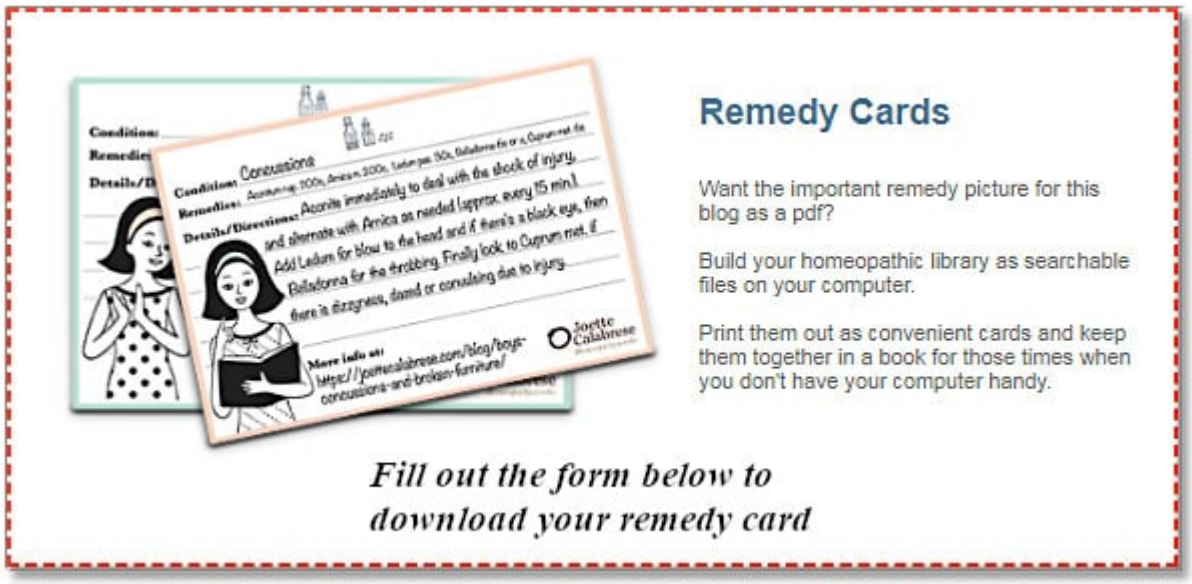
So, when I say, "Pass on the good news of homeopathy," I more specifically mean my *Practical* Homeopathy®!

Warmly,



P.S. If you want to take a deep dive into this subject and learn how to avoid the use of antibiotics for UTIs and other similar common infections, I urge you to consider my course, [The Antibiotic Alternative: Balance your Bugs Without the Drugs: How Homeopathy Can Help You Avoid Antibiotic Fallout and Strengthen Immunity in Everyday Family Life](). Learn many more practical, proven homeopathic protocols as alternatives to side-effect-ridden antibiotics.

And don't forget, my Mighties [(Joette's Mighty Members)]() qualify for a 10% discount on course purchases.




4-14-24 Practical Homeopathy® for UTIs
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