

The Waiting Game

Some thoughts on the case management of long-standing chronic complaints.

by Mary Aspinwall

How long should one wait on a remedy? I know it is part of my pathology to want everything to happen instantly, if not sooner. I am sure I have often changed my prescription too hastily and messed things up. At other times I have had to make a conscious effort to sit on my hands. Once again, this question has come to the fore because of a case of asthma / eczema, that I have been treating.

Roisin's Case Age: 13

History of eczema and asthma since the age of 3.

Treated with liquid Ventalin from 3 years old. Skin condition improved but asthma worsened. Changed to Becotide and Ventalin inhalers at the age of 6. Skin flared up again at age 11 treated with Betnovate (topical hydrocortisone cream). At the time of her first visit she was taking both inhalers at night and two or three times a day on any physical exertion (sports etc).

Roisin came with her mother. Relations between them seemed tense. Her mother said she was nervous and asked a lot of questions (to reassure herself). I observed she became flushed very easily. She found it very difficult to speak to me or answer any of my questions and gave each one a lot of thought before answering. She said she wanted to be sure to give the correct answers. I found the initial case-taking session fairly excruciating...like getting blood from the proverbial stone. I had the sense that she was very disconnected from her own emotions. Her most common response was: "I don't know" and I believed her. At times she seemed on the verge of tears and her eyes watered. At other times she appeared almost zombified. She was afraid of the dark, tunnels and cows. Her skin had recently become very itchy again and had a piercing sensation after swimming. She had red bleeding blotches in the crook of her elbows, at her wrists and behind her knees. Her sleep was so restless that she always ended up sleeping on the floor, which she found cooler (it was then February). The heat of the bed was very irritating to her skin. Her skin was also much worse for eating tomatoes.

Her main grievance, the only one she was really able to articulate, was that she was not allowed to do things that her sister (who was 3 years older than her) was allowed to do. Yet her other sister who was eighteen months younger than her was allowed to do everything that she was allowed to do. She was jealous of her younger sister who was generally considered more able than her. Her mother felt this gave Roisin a low sense of self-esteem. She had a stutter, which was worse reading aloud. Her main refrain was: "It's not fair". She had a great strange, rare and peculiar symptom, whenever she got chesty she felt as if she had a fan engine turning around in her stomach. Sadly I never managed to track that down, so I stuck with what I felt was the core of the case. For me, this was her preoccupation with her status within the family.

I prescribed Veratrum LM1 (one drop daily).

A month later there was an improvement in her asthma, she didn't need her inhalers at night. She still relied on them for sports. Her skin had got worse, with a rare outbreak on her face and neck, then better by about 5%. The eruptions still bled. I had explained from the start that any improvement in her asthma would probably mean a

(temporary) worsening of the eczema and that this would be a very good sign that things were moving in the right direction. The main change at the follow-up was that she had been able to stay asleep in her bed and was no longer aggravated by heat. Her mother said she seemed less worried. This was all encouraging, but this follow-up session was, in many ways, as difficult as our first encounter. There was still no real improvement in her ability to connect to her own feelings. A recurrent argument at home was that her mother felt she spent too much time out of the house. Roisin disagreed and felt she was too restricted. She became very angry if she was not allowed to go out, shouting and slamming doors. Close questioning revealed that she was rarely at home unless eating or sleeping. Bearing in mind the respiratory complaint, her bad temper and her desire to be out and about I prescribed a nosode, Tuberculinum 30c. She continued to take Veratrum LM1 daily, until two weeks later when she smashed the bottle. Two weeks after that she was much worse, she was still off inhalers at night, but using them more than ever before during the day and her skin was very bad. On the plus side, she was still less worried and the "fan engine" had gone. Her desire to go out had eased a little. I gave her a fresh bottle of LM1 and told her to increase to 5 drops daily.

A month later her asthma was better and she hadn't used her inhalers at all for two days and "didn't get puffed out". Her skin was worse, but the eruption had moved to her feet and between her finger (this was new). I suppose I should have been happy with this and it's hard to put into words why I wasn't. I just couldn't sense any deep change in her being. Her lack of energy and confidence was still much in evidence. I found her inability to communicate with me very frustrating. I was itchy to do something more to push the case. Throughout this I felt sure that Veratrum was still the most appropriate remedy and she continued to take it, 5 drops daily, but I felt I had to do something more. Bearing in mind the long history of suppressive medication and the almost palpable atmosphere of suppression that I still sensed during our sessions, I decided to give Carcinosis 30c as an intercurrent. A month later things on the inhaler front were much the same, she had managed two completely free days. She had eczema all over her body (for the first time) and a chesty cold with coryza and blueness around the lips. Once again the session was heavy-going. I didn't feel the Carcinosis had done much and still felt disheartened by her progress, despite the physical shift. Then, just a few weeks ago her mother came to tell me that Roisin was away on holiday and would I mind if she took her appointment? I was very happy to treat her as I subscribe heartily to the Chinese saying: "If the child is sick, treat the mother". Before we began with her case I asked after Roisin. To my astonishment she had been off both her inhalers for weeks. Her eczema, not surprisingly, was worse, but she was fairly stoical about it.

So after five months there was a significant improvement. The changes I was hoping for on a deeper level have still not happened, although I was rewarded with an amazing smile last visit. Perhaps the key to those deep changes will be stopping the inhalers. An end to ten years of systematic suppression. Looking back, it's hard to know if the nosodes were necessary or not. Veratrum could have done all the work and maybe I was tinkering to make myself feel better, rather than Roisin. After this case, I hope I would have the confidence to stick with a soundly-prescribed remedy longer, particularly if there was a history of long-term, suppressive medication. Perhaps it is easy to under-estimate the damage that this persistent squashing of the vital force can do. The miracle is that given sufficient time the vital force will start to

return things to order. If these cases are tough on homoeopaths they are tougher still on the poor souls they treat. Homoeopathy is not an easy therapy in these situations. It follows that what has been pushed in, given the right remedy, will re-emerge. I have always found it helpful to point this out at the outset by explaining the likely direction of cure and indicating that the process of treatment may be a long one.

I was speaking to one colleague recently. She has been a homoeopath for many years and has a very busy practice. She now screens her clients. Prior to the initial case-taking session, she has a short interview with them and points out the probable level of commitment they will need. They can then make an informed choice about whether to go ahead or not. She says she has been getting much better results since introducing this system and does not get frustrated by clients dropping out, feeling disillusioned, in the middle of their treatment.

Once a well-informed client has made a decision to stick with the healing process through thick and thin they can be little short of heroic, as this next case shows:

Hannah's case Hannah came to see me almost two years ago. She had suffered from appalling eczema on her hands and feet for the past twenty years, which had been controlled by steroid-based creams. However these had gradually become less effective and the eczema was returning. Her hands were swollen and puffy. The skin was desquamating and very itchy and much worse for water. She could have got a higher strength cream, but was reluctant to do so because she had noticed her skin was becoming very thin and papery (a side effect of conventional treatment with topical steroids). In addition her energy had been poor since her child's birth two years before and she was prone to severe piercing pre-menstrual headaches with nausea, lasting up to four days. I felt it only fair to warn Hannah that with an accurate homoeopathic prescription her severe skin symptoms were almost certain to return. Also, because of the long history of the complaint and the suppressive nature of the conventional medication she had used her homoeopathic treatment would need to continue over a long period. She decided she would still like to go ahead.

In Hannah's case a recurrent dream of being abandoned; a love of company; her sweet nature; a desire to defer decision-making to others and to be generally looked after; all led me to prescribe Pulsatilla. As I had expected her energy and mood improved; her headaches stopped and all hell broke loose in her hands. Doing a passable imitation of a creature from a Hammer Horror movie, she wandered around town, wearing fresh dressings that were very soon oozing with pus. I winced when she recounted to me that a check-out woman at the supermarket had been so concerned about her state she had said she should get treatment; at which Hannah had beamed and reassured her she was having treatment...homoeopathy.

This terrible state of affairs went on for nearly five months. She couldn't do any housework; drive a car (her hands were too swollen to hold the wheel); pick up her young child or wash her own hair. Friends and family rallied round to help her and she enjoyed the company and the attention. Every time she came for a follow-up her hands were (literally) a sickening, swollen, putrid mess. The skin seemed to shed itself in waves. I would not have blamed her if she had given up and it shames me to think I cannot honestly say I would have stuck it out in her place. Vega Rosenberg said on a recent visit to Dublin that he had had to give up treating homoeopathic students in the States (and now had to be actively persuaded to treat them elsewhere) because

they never stayed the course and would commit sabotage by taking self-prescribed remedies to suppress curative responses. He made the point that homoeopaths, of all people, should be able to understand and honour the process of cure, but they seemed somehow less able than the public at large.

What shone through in Hannah's case was the amazing improvement in her energy and her sense of mental and emotional well-being. She seemed completely unphased by her helplessness and intense discomfort. I felt confident that the prescription was correct and that she would be rewarded for her immense patience. The Pulsatilla was repeated, when indicated, at intervals and the skin very gradually improved until after five months she was able to shower every other day without aggravation. At the end of the sixth month she came with beautifully manicured, immaculate hands. The new skin was fresh and soft as a baby's. She joined the local pool-cum-gym and went regularly, losing quite a lot of weight (she had been two stone heavier since the birth of her child). She looked fit and well. I can only hope that the woman at the supermarket check-out got to see the horror story's happy ending. When I feel a case is progressing too slowly and I'm getting jumpy, I try to remind myself of cases like these. There are often great rewards to be had from being patient and giving clients sufficient information so that they can choose to be "patient patients". After all, the impossible homoeopathy can do...but miracles may take a little longer. Mary Aspinwall practices in Clonakilty Co. Cork Republic of Ireland.

"I've been saying for a thousand years that there must be something somewhere on the earth to cure everyone if we could find it".

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