

SARS-CoV-2 Cases Healed with Homeopathy

Clinical Summary

By Paul Richard Saunders, PhD, ND, RHOM, DHANP, CCH

Abstract

COVID-19 is a novel virus that arose in Wuhan, China, and spread affecting humans across the globe since late 2019. It arrived in North America, infecting millions and causing a death rate of two to four percent especially in the elderly and those with immune conditions. Conventional medicine has struggled to find a single protocol that will cure all patients and prevent long COVID. Homeopathy offers an effective, safe, and rapidly acting treatment for SARS-CoV-2 or COVID-19. The cases presented here were all PCR positive, all responded positively to homeopathic medicines, none regressed to long COVID, and all returned to normal in an average of two weeks. The possible genus epidemicus for this patient population is reviewed in a cohort of over thirty consecutive PCR-positive patients many of which received *Bryonia*. However, nine additional homeopathic medicines were required with a change from the initial prescription only twice.



Coronaviruses are members of the subfamily *Coronavirinae* in the family *Coronaviridae*, order *Nidovirales*. The subfamily consists of four genera; alpha-coronavirus, beta-coronavirus, gamma-coronavirus, and delta-coronavirus. Alpha and beta infect only mammals while gamma and delta infect birds but some can also infect mammals. In humans these viruses cause gastroenteritis and respiratory illness with the most pathogenic being SARS-CoV from bats to civets to humans, SARS-CoV-2 from bats to humans, and MERS-CoV from bats to camelids to humans. Four other corona viruses cause milder respiratory infections that can be more severe in infants, children, elderly and the immune compromised. These are HCoV-NK63 from bats to humans, HCoV-229E from bats to camelids to humans, HCoV-OC43 from bats to camelids and cattle to

humans, and HCoVHKU1 from bats and perhaps rodents to humans (Cui, Fang & Shi, 2019). Bats harbour corona viruses without ill effects presumably because of their higher metabolic rate during flight, and shed them via the kidneys in urine and the bowels in feces (guano). The intermediate host can become infected and spread the virus to humans (Cui, et al. 2019).

There is some evidence to suggest that homeopathic remedies induce an antibody response.

SARS-CoV-2 was declared a world pandemic by the World Health Organization in March 2020, but a review of blood donation samples from the American Red Cross in California, Connecticut, Iowa, Massachusetts, Michigan, Oregon, Rhode Island, Washington and Wisconsin from 7389 samples found anti-SARS-CoV-2 reactive antibodies in 106 samples with reactivity in all nine states between December 13, 2019 and January 7, 2020. COVID-19 was definitely present in the United States before the first official case of January 19, 2020 (Basavaraju, Patton, Grim, et al. 2021). Patients were hospitalized in Wuhan, China, in December 2019, some may have been

hospitalized in November 2019 but were not tested, and the USA beginning in January 2020 (Basavaraju et al. 2021)

SARS-CoV-2 or COVID-19 has an incubation period of two to fourteen days, usually two to four days, is transmissible on or after day five, peaks day ten and can be transmitted up to 42 days later. The mutated delta variant has a thousand times time more affinity for the respiratory tract, its D950 mutation helps it to efficiently fuse with human cells, dump its genetic material into those cells, and produce symptoms in two to four days with the ability to be transmitted in four days (Szabo 2021). Common symptoms are cough, sore throat, fatigue, fever and chills, loss of taste and/or smell, shortness of breath, vomiting, diarrhea, and fever (Mei, Li J, Du, Yuan, Li M & Li J. 2020). More severe symptoms are capillary bleeding in the extremities and organs, confusion, pneumonia,

myocarditis, and brain, kidney, and heart inflammation that have the potential to be fatal (Mei et al. 2020).

Symptoms are the essential basis for prescribing homeopathic medicines. This case series will include only PCR-positive cases. All patients were existing or new patients, all were treated according to Ontario Ministry of Health pandemic and confidentiality guidelines, that is over a phone landline, not in person, and all were followed up according to their symptom severity and homeopathic medicine response. Not all cases will be presented, but those presented will demonstrate the power of homeopathic medicines and lead to some conclusions about the genus epidemicus within this patient population.

COVID-19 Clinical Cases

A Burnt-rubber Odor

May 5, 2020, a long-standing patient contacted me in panic because her aunt, a 64-year-old female, with COVID-19 positive, had just been released from hospital with an oxygen of 70 percent, because they needed her bed, but she was still too weak to get out of her own bed at home and function. I agreed to 'see' her as a new patient. She speaks Greek and only a bit of English, so her niece translated for me. The entire family with whom she lives, daughter, son-in-law, granddaughter, and grandson were all COVID-19 positive, but because of her age, severe shortness of breath, vomiting and diarrhea that caused a sudden loss of 10 kg she was hospitalized for eight days, given IV fluids, oxygen, but not ventilated, and then sent home. Her case: "I smell like burnt toxic stuff, like burnt rubber, a chemical smell, it is coming out of me, and it is getting worse! I want oranges, lemons, water, fresh fruit, salad. My throat is sore on the right extending to the ear. No, I have no cough. I have blackish red circles around my eyes. I used to be a vital person, love life, now I cannot get out of bed, can barely go to the bathroom, and get back to bed. I have no energy." She was too exhausted to say anything more.

Rubrics¹:

PERSPIRATION, ODOR BURNT
PERSPIRATION OFFENSIVE
GENERALITIES, FOOD LEMON DESIRE
GENERALITIES, FOOD ORANGE DESIRE
GENERALITIES, SALAD DESIRE
MIND, CHEERFUL

I chose *Pulsatilla* because despite her serious condition she was cheerful. Her niece described her as a person who did much for the family, liked to cook, bake, and liked to hug everyone in the family. I prescribed a 30c plussing method QID. My plussing method is two pellets in a glass jar with lid, add clean water, succuss multiple times (at least 10), take a sip

(one teaspoon full) and repeat succussion and sipping 15-20 minutes apart for four doses each day. New water is added at the start of the next day while the glass is cleaned and dried at the end of a week and new water and new pellets are used to restart the process. Her niece and I couriered her the medicine which she began on May 7.

Follow-up was on May 8, afternoon. "What did you give me?" I asked why, what happened? "The dark patches around my eyes and arms began going away last night after I took the medicine. Today I got up, baked bread and cookies, went for a two km walk, and soon I will go to buy some much needed groceries for the house." Whoa, I said, you were very sick. What is your oxygen level? "The meter shows 96 percent!" I cautioned her that she could still be shedding viruses and should do housework at a reduced level so as to not relapse. I also advised her to continue *Pulsatilla* 30c plussing for two more days. Her last dose was May 10, 2020, the odor took a week to go away, but she felt her old self. In follow-up phone visits on June 23, and October 22, she reported she still felt normal, and her family was also doing well. She said "You gave my life back to me!"

Infected and Pregnant

A 34-year-old female patient in her second trimester, second pregnancy (a surprise) called to say she was COVID-19 positive, pregnant, and high risk because there was only one of the two veins to the fetus. Her husband, 2-year-old daughter, mother-in-law, and father-in-law were also COVID-19 positive; all lived in the same house. Her symptoms were mild fatigue and a sore throat, so she had begun to take *Echinacea-Andrographis-Glycyrrhiza* 30 gtt QID, vitamin C 1500 mg QD, and vitamin D 2000 IU QD. I asked her to describe her symptoms. "I wake about 2 am every morning and think about our unborn son, will he be okay, what will the virus do to him and how will he be with only one vein, he is so small for this stage of my pregnancy. (He was in the 5th percent for growth.)" What else? "I want to be comforted and reassured by my husband. I was afraid to leave the house due to COVID-19, we got everything on-line and my husband did the grocery shopping because I was pregnant, and now he cannot go out either because he is also COVID positive." Do you have a thirst? "I like to sip warm water throughout the day, I cannot drink it fast."

Rubrics

GENERAL WATER WARM AMEL
SLEEPLESSNESS THOUGHTS, ACTIVITY OF
WAKING 2 A.M.
MIND, ANXIETY, MIDNIGHT AFTER

The clear homeopathic medicine choice was *Arsenicum* 200 c, plussing TID daily (Vermeulen 2011). Because it was a high-risk pregnancy, she received an ultrasound every two weeks

1 All rubrics are from Schroyens, 2004.

at the hospital so that the fetus growth could be monitored. Babies with one vein often have kidney and other developmental issues. Baby was born by c-section at 37 weeks weighing 2400 grams (5 lb 4 ounces) and 51 cm (20 inches). His testicles were undescended, something I detected on physical examination when eight days old, that was missed in the hospital. Presently he is growing well and thriving. His mother was fully recovered from COVID-19 by three weeks and the entire family also completely recovered, but each member required a different homeopathic medicine.

Fatigue and Cigars

A 45-year-old female who worked in accounting called and asked if she could be treated because she was COVID-19 positive and had extreme fatigue. I agreed to see her via telephone. How can I help you? “I work 10 to 12 hours per day from home and often part of the weekend. I am exhausted. My sleep is poor and wake up thinking of work, but I am tired, it is tax season and I have to get the accounts done for my boss. I have lost my smell and taste. I get thirsty often and drink water, usually cold. My appetite is poor. I need help.”

Rubrics

NOSE SMELL WANTING
MIND BUSY
SLEEP UNREFRESHING, MORNING
STOMACH THIRST, LARGE QUANTITIES

I prescribed *Bryonia* 30c, plussing method QID. I also encouraged her to tell her boss she had COVID-19, needed time off to recover and recuperate, and even volunteered to give her a note, but she refused the letter. When I had a follow-up five days later she was feeling much better, but still working long hours. She called after four days, but her progression had stagnated. I prescribed *Bryonia* 200c TID, but at five days she had little improved. I asked more questions and I observed over the phone she was too cheerful for *Bryonia* and also learned that at the end of the day she smoked at least one cigar to wind down, but her cigar was not smelling or tasting right, she wanted that symptom fixed.

Rubric

GENERAL TOBACCO

After some thought I prescribed *Pulsatilla* 30c plussing method QID and encouraged her to give up her daily cigar for one week, informing her that it likely exacerbated her COVID-19 symptoms. Her recovery from start to finish took a full four weeks, but now she is doing well. She has avoided the topic of whether she gave up that daily cigar for one week.

Fatigue and Isolation

A 31-year-old male playwright, film maker, and waiter called with severe fatigue, fever and chills that had improved, dry cough, moderated loss of taste and smell and no appetite. At

the beginning of his COVID-19 that he contracted from his female housemate who worked in a different restaurant, he went for a run to try to sweat out what he hoped was a cold. Unfortunately, he got worse and then could not work and had to self-isolate.

Rubrics

NOSE SMELL WANTING
COUGH DRY
GENERAL WEAKNESS EXERTION FROM
FEVER CHILL WITH

I prescribed *Bryonia* 200c plussing method, QID. He felt better for three days, then called to say he had had severe chills the previous evening, his fever had returned (he did not have a thermometer but felt very hot), his voice sounded hoarse, and he was feeling isolated from friends and family.

Rubrics

CHILL EVENING
LARYNX AND TRACHEA VOICE HOARSENESS
MIND FORSAKEN ISOLATION, SENSATION OF

I encouraged him to go to the hospital for chest x-ray, ECG and CBC, but he refused so I prescribed *Camphora* 200c, plussing method QID. He recovered fully within one week. Then he called his family doctor, told her the story, and she ordered a chest x-ray, ECG, echocardiogram, CBC, ferritin, creatinine/eGFR, and troponin. All results were normal and in subsequent visits he has reported no return of symptoms.

Allergies and Asthma

A 52-year-old female who was teaching resource and special needs on-line called to report she had COVID-19. Her 17-year-old son went without permission to visit his friends to work out and brought home COVID-19 to her, her sister, and others in his circle of friends. His case was mild but hers was not because she had a history of asthma. Her medical history was significant for asthma since childhood. She played basketball in high school and received a scholarship to play NCAA USA university basketball. She coached basketball in Canadian high school but at 43 years of age suffered a significant stroke leading to Wallenberg syndrome. Over a subsequent three-year period, she was forced to relearn how to speak, walk and use her eyes without getting vertigo.

How can I help? “I am weak when I get up for school, I am short of breath and need my puffer, my sinuses are full because of the tree pollen (Spring 2021 was an unusually heavy year for conifer pollen), I was in bed for a few days but am up now but still tired on waking, I am restless after a few hours of sleep (goes to bed 10 to 10.30 p.m.). I have lost my taste and smell, I have no thirst but drink because I know I should. Teaching even just one student online exhausts me. I have dizziness again and often there is nausea. I get angry at my

son over little things, but he is a teenager and ignores me. He wants to go back to his friends and workout again!”

Rubrics

NOSE SMELL WANTING
GENERAL INFLAMMATION SINUSES
GENERAL WEAKNESS MORNING
VERTIGO NAUSEA WITH
MIND ANGER EASILY

She was having some return of her Wallenberg stroke symptoms that had taken several years and lots of hard work on her part to resolve. I prescribed *Gelsemium 30c* plussing method QID and checked back in three days. On the second day after starting *Gelsemium 30c* she had a bout of severe vertigo and nausea and then her recovery progressed nicely. Her taste and smell returned in one week. She is back to online teaching and doing well, and yes, her son went back to working out with his friends despite her reprimand and the provincial lockdown mandates.

Loquacity and Sore Throat

A 68-year-old female called to say she had COVID-19. In the early months of the pandemic she had called every few weeks to tell me about the latest COVID-19 and vaccine conspiracy theories. “I retreated from life and my friends in person, but I had to get groceries to eat. I am on the phone all with my friends since we cannot meet in person. We check in on each other morning, afternoon, and most evenings. I am exhausted. I have a cough, sore throat that makes it hard to swallow water, saliva and mucous. My external hemorrhoids are back because I am constipated, I had a soaking fever two nights ago, I have trouble getting to sleep, and my arms and legs are discoloured, as if I bruised them. Help Me!” I noted that she was very loquacious.

Rubrics

MIND, LOQUACITY
THROAT, SWALLOWING LIQUIDS
MIND, THEORIZING
RECTUM, HEMORRHOIDS

I prescribed *Lachesis 200c* plussing method TID. When I checked back after three days she was slowly improving, but she insisted that she only needed two pellets once per day because the ‘water thing’ made no sense to her and none of her friends had heard of it either so she was not going to do that. Her full recovery took about three weeks, but fortunately she had a moderate case.

Infected and Breastfeeding

A 34-year-old female was breastfeeding her first child, a three-month-old son. How can I help? “Everyone wanted to see my new son, so we visited his dad’s parents, lots of people were

there, and it was fun to get out and see others after over a year of this long lockdown (which was not over at that time). I am so thirsty, my bowels are hard to pass, and I am exhausted afterwards, the hemorrhoids are tender and bleed after most bowel movements. My son is colicky and that is upsetting. He nurses almost constantly. My chest is tight, and I am a bit hoarse from all the talking and coughing. I like cold water and I often chew some of the ice for comfort.” She was generally cheerful despite her story and symptoms.

Rubrics

STOMACH THIRST LARGE QUANTITIES
RECTUM HEMORRHOIDS EXTERNAL
RECTUM CONSTIPATION STOOL DIFFICULT
GENERAL WEAKNESS STOOL AFTER
GEN FOOD ICE DESIRE
MIND CHEERFUL

I prescribed *Phosphorus 200c* plussing method, QID. When I checked two days later she felt much stronger, had taken more naps with her son who was now much less colicky and she was consuming three or more liters of cold water per day. Her husband, his two sons by a prior marriage, and the extended family that attended the baby reception were all recovering nicely from COVID-19 and that helped her feel relieved. I had her take *Phosphorus 200c* plussing method TID for two more days and then asked her to follow-up in a week; she had fully recovered before that week ended.

Dry throat from ventilator

A 36-year-old male who had spent a month in the hospital on ventilation was now home from hospital and still feeling exhausted. This case was taken partially by phone and partially over a video connection. During the first interview he insisted that his wife sit next to him, even though he could talk and she had chores to do; they disagreed several times. How can I help you? “My throat is dry from the ventilator and oxygen, but not much coughing, I am physically tired going about in the house, up and down the stairs.” What do you want to eat? “I like sweets, but my wife says no because I am sick.” How is your sleep? “I wake in the early morning, about 2 a.m. and cannot get back to sleep, I am tired in the morning and often nap after breakfast.” It was hard to get many details from him, but it was clear that his COVID-19 illness had left him weakened. His oxygen was in the upper 80 percent, but if he exerted it dropped to the low 80 percent.

Rubrics

MIND, COMPANY DESIRE FOR
MIND, QUARRELSOME
GENERALITIES, WEAKNESS, MUSCULAR
SLEEP, WAKING, MIDNIGHT, AFTER 2 A.M.
SLEEP, UNREFRESHING
GENERALITIES, FOOD, SWEETS, DESIRE

I prescribed *Kali-c* 30c, plussing method QID. I would have preferred a 6c or 12c to start given his physical and mental state, but that potency was not quickly available. His recovery was slow, but over ten days his oxygen improved to the mid 90 percent and dropped to the low 90/upper 80 percent with exertion and later stayed in the high 90 percent. He took almost five weeks to recover. The goal was to have him get better and not relapse into long COVID-19.

Throat Pain and Indignation

On April 18, 2020, the daughter, an RN, of a long-standing patient called to say her mother was doing poorly. It was draining for her as was her sister with cerebral palsy (CP) who also lived at home; wondered if I could help. Her mother is a 64-year-old woman who immigrated to Canada from Germany in her twenties and has lived in Canada since. Her medical history is significant for estrogen-positive DCIS that was treated only with a lumpectomy. How can I help? “I missed my mother’s birthday celebration last month, she turned 90 and it is a big deal in our village, the mayor would have come to visit. My aunt, her sister, also passed just before the birthday so I cannot visit her grave and offer my prayers. I am the PSW (personal support worker) for an elderly woman in long-term care in lock down in Etobicoke who refuses to eat if I am not there to feed her, she will die all alone! My 31-year-old daughter with CP cannot work at McDonald’s due to the lockdowns and my other daughter is the new RN at a local hospital with no PPE or masks on her ward, and there are several COVID-19 cases in isolation on the floor right above her. This is insanity! Also, I feel lousy. I have a temperature of 100.58°F, my throat is sore on the right side, I have some nodes in the right cervical chain, and I do not want to sit in the ER and be sent home because they are not testing people, just saying isolate for 14 days. This lack of respect for people, their social needs, isolation is not for everyone, it is inhuman!”

Rubrics

EXTERNAL THROAT, SWELLING, CERVICAL GLANDS
THROAT, SWALLOWING DIFFICULT
GENERALITIES, COLD, BECOMING COLD
MIND, INDIGNATION

I prescribed *Hepar* 30c, plussing method TID, three doses tonight and four doses tomorrow then follow-up. In follow-

up the next day she reported that the swallowing pain went away that night, the lymph nodes were getting smaller, she was not cold when she awoke the next morning. In fact, she got up early and at 07:30 a.m. went grocery shopping before the long lines formed and the shortages got worse. She has not needed *Hepar* since and her symptoms have not returned.

Genus Epidemicus

The genus epidemicus is the homeopathic medicine most indicated in an epidemic, it actively cures the greatest number of patients. In the 1801 scarlet fever outbreak, Hahnemann used *Belladonna*, and described case taking in the *Organon* (O’Reilly 1996:73). Bönninghausen treated a small-pox epidemic with *Thuja* (Bönninghausen 1838), and during the 1918-1920 influenza H1N1 patients responded primarily to *Bryonia*, *Gelsemium*, and *Eupatorium perfoliatum* (Dewey 1921, Godard 2009). Within the 31 PCR-positive COVID-19 cases I treated since the spring of 2020 the genus epidemicus has been *Bryonia*. On the other hand, *Gelsemium* was prescribed three times, *Pulsatilla* three times, *Phosphorus* twice, and once each *Arsenicum*, *Belladonna*, *Camphora*, *Cocculus indicus*, *Lachesis*, and *Sulphur*. The initial prescription was changed twice, once from *Bryonia* to *Camphora*, and once from *Bryonia* to *Pulsatilla*. Numerous homeopathic medicines have been suggested by various authors, but in the cases I treated, these were the medicines that were prescribed and were effective. The *Bryonia* patients have generally had thirst and dry mucosa, dry cough, loss or weakened taste and smell, weakness or fatigue, often irritable and speaking about their work, or inability to work due to the pandemic restrictions and the illness, and have sleep that is not refreshing. Some have had fever, but usually that is gone by the time the PCR test results were confirmed.

The length of time from initial case taking to full recovery has ranged from 24 hours to five weeks; the average is two weeks. My own rating of the severity of these cases, using WHO criteria, published symptoms, and published cases was three severe, twelve moderate and the balance relatively mild (Mei et al 2020). In all cases I used the plussing method because I wanted the patient to have several doses per day but with a slight change in the potency. Initial potencies were based on the patient vitality, seriousness of their illness, and what was quickly available given the severe access, travel, and postage restrictions of COVID-19 in Ontario, Canada.

I used the plussing method because I wanted the patient to have several doses per day but with a slight change in the potency. Initial potencies were based on the patient vitality, seriousness of their illness, and what was quickly available given the severe access, travel, and postage restrictions of COVID-19 in Ontario, Canada.

During acute case taking the prescriber needs to remain calm, try to understand the origin of the pathology in their patient, how it manifests in them, changes their life and symptoms, and seek to find the most unique, rare, and peculiar symptoms of their illness or altered state. Too many rubrics can be confusing so the three rubrics or three-legged stool as Hering, Guernsey, Lippe, Nash and HC Allen advised is best, with at least one mind rubric if possible (Desai 2005). *Materia Medica* differential diagnosis, and comparison are critical to finding the correct homeopathic medicine.

Follow-up in acute cases is critical, especially given the seriousness of COVID-19 acutely and the seriousness and high risk of long COVID. The usual follow-up was 24 to 72 hours and, as the patient improved, every five to seven days a quick check up was done to determine if the progression toward health was still on course. Thankfully all returned to normal health and no patient progressed to long COVID.

References

Basavaraju SV, Patton ME, Grim K, et al. 2021. Serologic testing of US blood donations to identify severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)-reactive antibodies: December 2019- January 2020. *Clin Infect Dis*. 2021;72(12)e1004-9.doi10.1093/cid/ciaa1785.

Boenninghausen CMF, von. 1838. *The lesser writings*. Compiled TL Brantford. Translated LH Tafel. 1908. Reprinted B Jain Pub. 2012. Pp3-4.

Cui J, Li Fang, Shi ZL. 2019. Origin and evolution of pathogenic coronaviruses. *Nature Rev Microbiol*. 17. Doi.10.1038/s41579-018-0118-9.

Desai BD. 2005. *How to find the simillimum with Boger-Boenninghausen's Repertory*. Reprinted B Jain Pub. P.27.

Dewey WA. 1921. Homeopathy influenza a chorus of fifty in harmony. *American Institute of Homeopathy Journal*.

Goddard J. 2009. Homeopathy in epidemics and pandemics. In *Scientific Research in Homeopathy Conference*. Pp.1-27.

Mei Q, Li J, Du R, Yuan X, Li M, Li J. 2020. Assessment of patients who tested positive for COVID-19 after recovery. *Lancet Infect Dis*. 2020. Doi.10.1016/S1473-3099(20)30433-3.

O'Reilly WB. 1996. *Organon of the Medical Art*. Samuel Hahnemann 1842 translated. Birdcage books, Redmond, WA. 407p.

Schroyens F. 2004. *Synthesis repertorium homeopathicum syntheticum 9.1*. Homeopathic Book Publishers, London, UK. Pp2008 + Appendices.

Szabo L. 2021. Unraveling the mysterious mutations that make delta the most transmissible COVID virus yet. *Medscape Family Medicine*. July 28, 2021. Accessed July 29, 2021.

Vermeulen F. 2011. *Concordant Reference: Complete Classic Materia Medica*. B Jain Archibel SPRI, Belgium. 2074p.

Paul Richard Saunders, PhD, ND, RHOM, DHANP, CCH, graduated from Purdue, Duke, Ontario College of Naturopathic Medicine and National College of Naturopathic Medicine, including a residency in homeopathy at NCNM. Faculty member at the Canadian College of Naturopathic Medicine, the Canadian College of Homeopathic Medicine, and the National University of Health Sciences. Practices at the Dundas Naturopathic Centre.

Discover good health through nourishing traditional diets. Become a member of the **Weston A. Price Foundation** and receive our quarterly journal, *Wise Traditions for Food, Farming and the Healing Arts*, which details the latest science, explores ancient nutritional wisdom and provides valuable practical advice—including a regular column on homeopathy and help in finding good food.



THE WESTON A. PRICE FOUNDATION®
for **Wise Traditions** IN FOOD, FARMING AND THE HEALING ARTS

Enjoy our free weekly podcast & request a free infopack at westonaprice.org/infopack