PTSD
The Gentle Homeopathic Approach

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Triggers

- Combat
- Abuse
- Accident or disaster
- Terrorist attack
Returning to Civilian Life

- Depression
- Anger or rage, can be explosive or violent
- Anxiety
- Memory problems
- Sleep disruption
- Drug and/or alcohol abuse
- Hypersensitivity and restlessness
- Irritability
- Hyper-arousal, hyper-vigilant, fight-or-flight response
Symptoms

- Flashbacks
- Disassociation
- Reckless or sensation seeking behavior
- Anticipation of threat
- Over-reaction to startle
- Grief driven behavior
- Complex reenactment behavior
- Perceived anti-social attitudes
- Fear
PTSD can cause:

- Mood and anxiety disorders
- Substance abuse disorders, hoarding, gambling, shopping addictions
- Greater functional impairment
- Reduced quality of life
- Elevated risk of poor physical health
Symptoms include:

• Reliving the event

• Avoiding reminders of the event (creates isolation)

• Numbing (prevents intrusive thoughts, psychogenic amnesia)

• Hyper-arousal (hyper-vigilance and startle response)
Freud adopted these views from Janet and also suggested that the fixation on the trauma is biologically based:

"After severe shock ... the dream life continually takes the patient back to the situation of his disaster from which he awakens with renewed terror ... the patient has undergone a physical fixation to the trauma"

(Freud, 1919, 1954, p. 207).
Some Common Attitudes in PTSD:

• Everything is my fault (even though I act like I don't care).
• I can never be forgiven.
• No one can ever understand me, I am really different.
• Come here but go away.
• Shame based arrogance (I didn't do enough) and the flip side (you are clueless).
• Surrender is a dirty word.
• I feel nothing at all but surges of fear and anger.
• Life sucks and anyone who believes otherwise is stupid.
• I am a cynic yet everything should be perfect.
• I have multiple tracks in my head; I am here but not here.
3 key areas affected by PTSD:

**Hypothalamus**
Director of the autonomic nervous system

**Amygdala**
The larger the amygdala, the more the brain is susceptible to fear.

**Hippocampus**
(‘seahorse’ in Latin) Intricate memory database
Who experiences PTSD?

• Young children, especially if separated from their loved ones

• Those from 40-60, dealing with parents and children

• Those with financial difficulties

• Gender - 10% of women suffer from it at some point in their lives, but only 5% of men

• All those exposed to war-like conditions
My Checklist

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• Aconite daily (most veterans benefit from it for over a year)
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• Address any addictions or health concerns (chronic pain, blood pressure, addictions, exercise, diet)
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• For the veteran, sleep, safety and sobriety is the mantra
George Carlin - shell shock
http://youtu.be/hSp8IyaKCs0
TBI is an insult to the brain, not of a degenerative or congenital nature, but caused by an external physical force, that may produce a diminished or altered state of consciousness, which results in an impairment of cognitive abilities or physical functioning.

It can also result in the disturbance of behavioral or emotional functioning. These impairments may be either temporary or permanent and cause partial or total functional disability or psychosocial maladjustment.

National Head Injury Foundation - 80% are considered MILD (m)TBI.
Remedies for PTSD and TBI

- Aconite Family (7 remedies)

Aconitum cammarum

Aconitum ferox

Aconitum lycoctonum

Aconitum carmichaelii

Aconitum napellus
Remedies for PTSD and TBI

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• Arnica
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- Arnica
- Opium
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- Aconite Family (7 remedies)
- Arnica
- Opium
- Acids
- Nosodes (Carc)
- Natrums and Staphysagria
- Head injury remedies (Nat-sulph, Cicuta, Secale, Helleborus)
Potencies

• Ascertain compliance first! If uncertain, tell them one dose per day.

• Start low if weak vital force or uncertainty.

• Vary potency (higher if using it more often, lower if using it less often).

• Be conservative, but give a higher dose in an envelope to hold, it gives security.
Administration

- Daily like an LM to start; if sudden rage or trigger, can use multiple times per day.

- 2oz dropper bottles work well; boil when reusing them (or sanitize in dishwasher).

- Label with date and dosage, replace bottles monthly (mold) unless adding alcohol.
Brain Injury Mechanisms

- Coup – contracoup injury
- Diffuse axonal injuries
- Swelling
- Hematoma
- Hydrocepalhalus
- Hemorrhages

(can also be from anoxia or hypoxia)
Coup
Contrecoup
Injury

Diagram showing the concept of Coup Injury and Contrecoup Injury.
Characteristics of Behavioral Instability:

- Confusion/disorientation
- Poor/limited awareness
- Refusal/resistance
- Mood instability
- Threatening/demanding
- Verbal and/or physical aggression
- Property destruction
- Elopement
- Substance use
Functional Impacts of Brain Injury

- Memory problems
- Executive functioning issues
- Initiation problems
Changes in Thinking:

• Anosognosia (ability to control only one side of the brain)
• Confusion
• Distractibility
• Inattention
• Inflexibility
• Difficulty with basic calculations
• Difficulty with sequencing
Who experiences MST?

• Issues go back to childhood traumas before war; PTSD from childhood – neglect, abuse, parents are addicts/alcoholics - join military as an escape.

• Trauma experienced in military leading to PTSD for first time.

• Compounded PTSD – from childhood and war.

• It may be an unrelated experience the child has not shared and cannot process.
Brain Structures Involved in Dealing with Fear and Stress

Neocortex: higher mental functions, general movement, perception and behavioral responses

Corpus Striatum (Basal ganglia) connection between cerebral cortex and cerebellum; helps regulate automatic movement

Prefrontal Cortex

Amygdala: emotional responses; aggressive behavior

Hippocampus: Memory of new information and recent events
Informative Links:

- Study at UCSF about brain structure and PTSD

- A helpful app for veterans from the VA

- Study on OEF/OIF PTSD/major depression/TBI
  http://www.rand.org/content/dam/rand/pubs/monographs/2008/RAND_MG720.pdf

- A noteworthy blog
  http://stopthestorm.wordpress.com/2010/03/03/a-word-on-trauma-triggers-and-falling-apart/

- For homeopaths with a scientific interest

Homeopathy and TBI research

Chapman, E, Homeopathic Treatment of Mild Traumatic Brain Injury: A Randomized, Double-Blind, Placebo-Controlled Clinical Trial (JOURNAL OF HEAD TRAUMA REHABILITATION/DECEMBER 1999)

Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery
Terri Tanelian and Lisa H. Jaycox, Editors
Renita Herrmann, Classical Homeopath, CCH, RsHom(NA), MS

Welcome,
Ever feel like you're not being heard by your healthcare provider? It's time to try something different. Try a Registered Certified Classical Homeopath.

Treat yourself with the holistic approach: emotional, mental, and physical symptoms are all alleviated with one remedy. Do you have trouble sleeping? Chronic health complaints? Seasonal flu and colds? Does the stress and strain of every day life get you down? Tired of taking pills that don't help? Are you suppressing your problems or fixing them?

This website is to introduce not only new clients to homeopathy, but also to keep past and present clients aware of issues in health that may be of interest. There are articles about pertinent issues, and links to other websites, schools, homeopathic pharmacies, and books. Please check out the other webpages for items of interest.

Make an appointment today. My office hours are Monday through Friday, by appointment only, from 9 AM until 5 PM.

My telephone number is 415-221-6635, and I accept major credit cards. Please see About Renita for information about this almost-zero carbon footprint office.

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