

Case Report

Cancer and the Display of Lymph Nodes Using Potentized Remedies (Derivates of Iodine and Carbo Animalis)

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Abstract

Background: This article provides insight into the mode of the immune system acting hierarchically when administering potentized remedies. Occasionally, this can be best seen in severe cases, as with cancer.

Methods: The careful anamnesis and subsequent prescription is based on Jan Scholten's hierarchic classification of homeopathic mineral remedies.

Results: In such cases we may find syndrome shifts. For example, symptoms shift from vital to less vital organs, from inside outside and from up downwards; early symptoms of the patient may flare up and subside again.

Conclusions: By such treatments we may observe the dissolution of tumours and/or lymph nodes and reconstitution of an earlier and better state of health, or even cure of the patient in particular cases.



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Keywords

Cancer; lymph nodes; potentized remedies; solution of tumours; syndrome shifts; iodine, carbo animalis

1. Introduction

We illustrate that we are maintaining Scholten's approach to select the proper remedy and Hering's Rules to document the healing progress. The effectiveness of homeopathic remedies to induce long-term amelioration or complete remission (cure) of cancer is demonstrated based on four case studies.

A conscientious analysis of the periodic table of elements and the resulting classification elaborated by Jan Scholten paved the way for a systematic order of homeopathic remedies. In addition, group analysis (resorting to series and stages) enables precise prescriptions even in severe cases and therefore should be regarded as a major "quantum leap" since Hahnemann first established homeopathy. The inclusion of the mental picture – often associated with a life conflict or even a life theme – provides additional perspectives on how to look for appropriate remedies. Consequently, a patient's environment and emotional traumas create an underlying conflict and form a matrix in which suppressed and dissected painful emotions are embedded. The layer of such suppressed feelings is subconscious and attacks and irritates the health condition of the patient permanently in a detrimental way. Here, we present four severe cancer cases (Two unpublished cases and two additional in-depth evaluations of the remedies, which have been briefly outlined in a previous publication [1]) and demonstrate how remedies can be selected due to the patient's constitution (life-long signs and symptoms) and mental state, which are interwoven. Morphology is included in the remedy picture. Moreover, we give insight into the mode of the immune system acting hierarchically when administering potentized remedies. The symptoms shift from vital to less vital organs, from inside outside, and from up downwards; early symptoms of the patient may flare up and subside again (Rules of Hering). Thus, we can observe the dissolution of tumours and/or lymph nodes and a reconstitution of an earlier and better state of health, or even cure of the patient in particular cases. The case studies show how the appropriate remedy may be able to remove the disease process and re-establish psycho-physical health.

Another aim of this paper is to show the difference between treatment with molecules (chemotherapy, antibody therapies, small molecules, immune therapy, etc.) and treatment with homeopathic substances (by information of a potentized homeopathic remedy). Homeopathy (information beyond molecules) has another starting point than treatment with molecules. It includes an investigation of the character, of the life-theme and biography of the patient. If these parameters are included, the action of an appropriate potentized remedy repeatedly reveals a hierarchical organisation of the immune system by syndrome shifts (Rules of Hering) and it can be shown that the remedy attempts to reconstruct a healthy epigenome, because if old symptoms flare up again – and even if not - we may see complete remissions of tumours in particular cancer cases (nitric-acid cures stomach cancer [1], ferrum-iodatum and calcium-iodatum cure non-Hodgkin lymphomas [2, 3]).

In homoeopathy it is distinctive that the investigation and the selection of a remedy take the epigenome into account, including the psychology and the internal conflict of the patient and at the same time the patient's contestation with the environment. The epigenome is not only a cluster (aggregation) of molecules, it interacts with the psycho-neural immune system, internally with emotions, the conflict, and externally with the environment of the patient. What we observe in homoeopathy is, that the action of the remedy tries to restore a healthier epigenome, especially if old symptoms flare up again and the tumour vanishes. Thus the dissolution of the tumour can also be seen as the result of the attempt to reconstruct the epigenome.

This different point of view may be interesting for conventional oncologists: the different starting point of homoeopathy includes the psychological dimension of the patient and his/her biography; the morphology has to be covered by the remedy – this is considerably more than what conventional medicine achieves by investigating the patient.

More precisely, we look for the essence of the case, because we use only one remedy. The essence can clearly be seen on the psychological level of patients (an approach of homoeopathy, but much more the approach of Scholten), as documented by numerous published cases [1]. Today we are able to subsume the psychosomatic complex, the character, and biography of the patient, which may indicate a single remedy, sometimes called a constitutional remedy. The latter became possible by the evaluation of the periodic table (PT) by Jan Scholten, which is a classification of the minerals [4]. The periodic table (PT) deals with the smallest particles we know from chemistry and is based upon the natural order discovered by chemists and physicists. By this classification we can repeatedly classify a remedy at a glance. This classification is very important for differential diagnosis and C. Hering longed for such an order more than 100 years ago: "The zoologist can at once classify a new animal when he sees it; can instantly determine to what class it belongs, and point out its particular characteristics."

New options in cancer therapy are presented. Two parallel worlds of science and methods meet here; therapy with molecules and therapy with non-chemical medication. Conventional medicine meets homoeopathy. The article provides a discussion comparing and differentiating both methods.

With Scholten's approach we focus on psychological levels and biography first - including morphology. Paragraph 210 ff of the Organon, which emphasizes that the emotional symptoms of a patient are of highest importance, is the basis of Scholten's approach [5]. The upgrading with Scholten's approach is the classification and also the theme, the mental contents of the remedies became apparent. By this method a remedy can often be indicated at a glance and therefore it is not necessary to repertorize remedies with Kent's method. However other cases need repertorisation. These methods are best outlined by Dario Spinedi and Jens Wurster in the Clinic Santa Croce. However, since Scholten has created a classification of remedies by the analysis of the PT, it is easier to choose a remedy and we can use many more remedies never applied before or rarely known (see publications of ferr-i or ferr-sil; cases of NHL and osteolysis).

In this paper, Scholten's approach and the impact of a homoeopathic remedy concerning tumours and the subsequent display of the lymph system will be emphasized.

Therefore the article provides new options in cancer therapies. Accentuating the different starting point of homoeopathy and illustrating the impact of the remedy resulting in syndrome shifts, opens a new perspective to examine each individual case. From our point of view morphology alone is just a small – however prominent and debilitating – part of the patient. The

Scholten approach extends the possibilities to find new remedies, which are constitutional. Differential diagnosis is much clearer. The extended investigation of the patient including his/her psychological sphere has shown that a chronic disease is definitely triggered by an internal conflict of the patient.

2. Annotation

In order to guarantee the anonymity of the patients, some dates have been shifted by a couple of months without distorting the substance and evaluation of the presented cases.

2.1 Case 1

2.1.1 Lung Cancer

Kalium-iodatum, Kalium-nitricum, Scrophularia, Calcium-iodatum, Radium-bromatum, etc.

12 Jan 2005. Non-Small Cell Lung Cancer, stage III b, tumour at right main bronchus 4 cm, glands largely involved, T2 N3 M0, surgery not possible. Lost weight.

19 Dec 2006. After almost 2 years of conventional treatment (2005: 2 cycles chemotherapy with cisplatin and gemcitabine, radiation with minor response, 2006: second line chemotherapy with docetaxel, third line with pemetrexed, no change after 6 cycles, homeopathic treatment since 19 Dec 2006 and since 27 Dec 2006 targeted therapy with erlotinib (classified as an epidermal growth factor receptor inhibitor - protein-tyrosine kinase inhibitor).

This is a long terminal case, where over a period of years about 12 different remedies were used. The main strategy of the case was based on kali-i and kali-nit, which seemed to cover the local symptoms as well as the constitution and life themes of the person (impulsive, optimistic, structured, systematic, family minded (PT: Ferrum series, stage 1 = kalium); the morphology is covered by kalium: right bronchus = kalium / inflammations, skin fissured, hangnails, haemorrhoids; going out, needing space: Ego-series, stage 11 = nitricum / tumours, lung, glands involved; needs excessive physical activity, which ameliorates; is able to change his mind to complement conventional medicine and to grasp homoeopathy: silver-series, stage 17 = iodine).

Moreover kali-i and kali-nit match the situation; i.e. permanent presence of limited inflammations (bronchitis, expectoration and pain) as well as the indurations along with the tumour (compare X-rays, CT). This balanced equilibrium - which is already displayed by the immune system (inflammations may affect the tumour) - is helpful to understand the strategy and is aided by the indicated remedies: kali-i rather dissolves the tumour, kali-nit rather supports inflammations (compare with other cases: pleural mesothelioma; non-Hodgkin lymphoma (NHL) – inflammations before the tumours reappear, etc.).

In addition to kali-i and kali-n (see “perfinity” concept as presented by Scholten [6]; according to Scholten, “perfinity” refers to salts or their derivatives which have an identical element in common, e.g., kali-i and kali-n) many other remedies were used to enhance the immune system: nit-ac C 200, kali-i C 30, kali-n C 200, FC 1M, FC 5M, calc-i C 30 (“perfinity”), bac C 200, carc C 200, rad-br C 200 (“perfinity”), X-ray 200, scroph D3, nux C 30). – The nosodes Tuberculinum and Carcininum were necessary to enhance the miasmatic trait of the patient. Radium-bromatum 200, another halogene-derivate in infrequent doses was necessary to alleviate radiation side effects on the organism.

2.1.2 Results

After 2 years of conventional treatment (radiation, chemotherapy), the patient requested homeopathic treatment (see Figure 1). Soon after, targeted therapy with erlotinib (a tyrosine kinase inhibitor) started. Four months following erlotinib and additional homeopathic treatments, the tumour remained similar in size; however the glands are smaller and a tumour at the base of the right lung has disappeared. Experts consider the tumour as necrotized (CT, 11 April 2007, “a scar”). (Compare similar cases, where after homeopathic treatment the tumour became necrotic or dissolved: Astrocytoma Grade III, pleura mesothelioma, two cases of NHL.)

Later the pain and the bronchitis disappeared; he is in very good condition, bikes 20 kilometres and rides his bike up to 1200 meters altitude.

In 2010, the patient stopped homeopathy and later in 2011 targeted therapy as well; he dropped both treatment concepts along with its medication for more than four years.

In 2015, 10 years after onset of the disease, the patient remains in good condition, yet overstrains himself. He still does cycling high into the mountains and manages his business and family nicely.

In those 10 years the primary tumour remained similar in size. However, 2016 a tumour reappeared at the base of the right lung, which was operated on; histology showed fibroid tissues, similar to a tuberculoid tumour, but no malignancy.

In 2016, two glands developed nearby the necrotized primary tumour and in close proximity to the benign tumour at the base of the lung, which were surgically removed. The removed lymph nodes verify malignancy, but the glands are mushy.

The patient requested homeopathy again, and immune therapy was discussed. He was advised that in such cases continued homeopathic therapy is urgently needed. The excessive desire for physical exertion points to iodine or a derivate of it; such a prescription includes the most prominent symptoms: the glands.

After taking kali-I and kali-nit in C 30 and C 200 for 2 months in infrequent doses, however according to the valuable symptoms, PET-CT revealed no conspicuous features of malignancy in November 2016.

In April 2017, the patient suffered from frequent coughs, yet is in good condition. The disease is stable; kali-i, kali-bi 30 and kali-nit 30 are taken in infrequent doses.

In June 2017, a CT showed no progression of the tumour; however, after taking an antimycotic agent (in November 2017) for 10 days, kali-i 30 was administered daily. Three weeks later tumours and glands were considered stable with no additional growth.

In March of 2018, the patient was described as being in the best condition, with no progression of the tumour noted.



Figure 1 Relevant past medical history of a 45-year-old ambitious patient who runs his own business. He has a structured, clear and systematic personality with a heavy bias on sporting activities and at the same time is deeply rooted within his family. Having been diagnosed with lung cancer, he underwent conventional treatment and later opted for homeopathy. After 4 years he avoided any kind of medication and later underwent surgery. However homoeopathy was readopted.

Comparison to conventional therapy: As there are no significant differences between cancer stages IIIB and IV, most studies group them together. A recent investigation looking at the long-term survival rates of patients with stages IIIB and IV non-small cell lung cancer treated with chemotherapy reported a median overall survival time of 12.3 months (95% CI 10.2 – 14.5 [7]). Therein 70% were squamous cell carcinoma that underwent chemotherapeutic treatment. The median survival rate for stage IIIB was found to be 12.6 ±1.4 months whereas those for stage IV 11.9 ±1.7 months. The survival rate after a 5-year observation period was only 2.8%, with no CI listed. An older but more renowned study investigating four chemotherapeutic regimes for advanced non-small-cell lung cancer done on 1155 eligible patients documented an overall response rate of 19%, with a median survival of 7.9 months (95% CI, 7.3 to 8.5), a 1-year survival rate of 33% (95% CI, 30 to 36%), and a 2-year survival rate of 11% (95% CI, 8 to 12 %) [8].

2.1.3 Comments

Malignancy – syndrome-shifts - lymph nodes and homeopathic treatment. The action and curative effects of homeopathic remedies display syndrome shifts, well known as Rules of Hering: “When a healing process takes place, the symptoms shift from the centre to the periphery, from up downwards and old symptoms may develop again and subside.”

The clinical significance of syndrome shifts (Rules of Hering), is underlined by four cases of malignancy, which give insight in the action of the immune system using lymph nodes.

Iodine and its derivatives (kali-i, calc-i, ferr-i) display strong curative effects on the lymph nodes in cancer cases, as does *Carbo animalis* (pleural mesothelioma).

The case of a malignant pleural mesothelioma and two cases of non-Hodgkin lymphoma verify the theory of homeopathy, to consider the organism as a continuum and in its hierarchy. The cases reflect the importance of syndrome shifts and repeatedly make clear that a single remedy may be leading a case even in malignant diseases.

The cases give a deep insight into the display and hierarchic order of the immune system. They highlight the interaction of inflammations, suppressed discharges, development of tumours, solution of tumours, and how the immune system displays syndrome shifts.

Treatment possibilities by conventional therapy and by homeopathy are compared.

2.2 Case 2

2.2.1 Malignant Pleural Mesothelioma (Adapted from [9])

A case of malignant pleural mesothelioma gave in-depth insight into the activity of the immune system and the implication of lymph nodes when using homeopathic remedies. Here, we only highlight the action of the remedy (phos); i.e. the results clearly follow Hering’s Rule.

A 62 year-old male patient developed a malignant pleural mesothelioma affecting the lateral and diaphragmal pleura and the side affiliated with the mediastinum. The initial treatment included pleurodesis with bleomycin. The patient then asked for homeopathic treatment.

The application of phosphorus in high potencies (MK, C 200) resulted in a complete solution of the large tumour within a few months. The elimination of tumour tissues caused pleural effusion (treated with *Bryonia* as leading remedy) and massive swelling of the lymph nodes. Investigations showed increasing space occupation in the hilar region on the right side. During this phase the

experts considered a bronchogenic cancer rather than a pleural mesothelioma. However there was no pain and Carbo animalis in C 30 and other remedies dissolved the swelling of the lymph nodes. (Hering's Rules: If a healing process takes place, symptoms shift from inward outward, from vital to less vital organs – see Figure 2.)

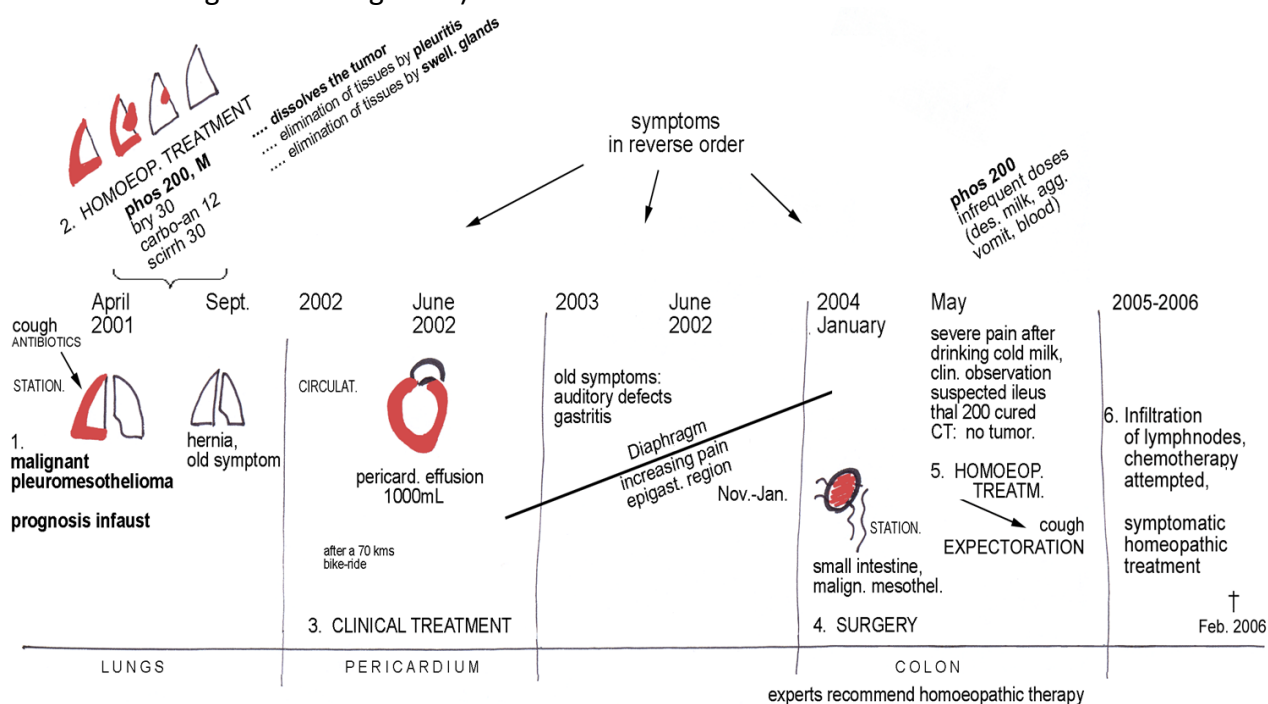


Figure 2 Disease dynamics of a 62 year-old male patient with malignant pleural mesothelioma affecting the lateral and diaphragmal pleura as well as the side affiliated with the mediastinum [9]. Initial treatment: pleurodesis with bleomycin. The patient asked for homoeopathic treatment and survived almost 5 years.

Five months after the first consultation, a bronchoscopy and X-ray of the patient showed no evidence of any kind of tumour in the respiratory system. The patient was in good condition and gained weight.

One and a half years later, the patient developed a pericardial effusion (after a long bicycle tour of 70 kms), which after puncturing, showed the same histology as found in the pleural mesothelioma. The patient recovered quickly. After another one-and-a-half-year interval, a tumour developed in the intestines, on which he was operated on (Rules of Hering: symptoms shift from above downward). Because of multiple complaints, the experts decided to start with chemotherapy. The patient survived altogether five years.

Clinical significance: According to Hering's Rules, symptoms shift from inside to outside, in this case via pleural effusions and high activity of the lymph system; and shift from above (lungs, pericardium) downward (intestines and colon). Although a cure could not be found, the appropriate remedy started a healing process; he continued to live a rather normal life and survived for overall five years rather than a few weeks or months (Figure 2).

2.2.2 Results

TNM: The tumour involves the costal and visceral pleura and eventually the lymphnodes of the hilus, T2 or T2N2M0 = stage 3 according to UICC/AJCC 2010. Survival time was 4.8 years.

Symptoms shifted from the vital organs to less vital organs, from above downwards.

Comparison to conventional treatment: An analysis from the Surveillance, Epidemiology and End Results Program (SEER) database reports a median survival rate without surgery nor radiation in the range of 3-18 months depending on grade of differentiation [10]. On the other hand, with multimodal therapy, up to 23 months of survival was reported for the 45 patients undergoing extrapleural pneumonectomy after neoadjuvant chemotherapy (95% CI 16.6 - 32.9 months) [11].

3. Introduction to Cases 3 and 4: NHLs after Treatment of Leukorrhea (Suppression and Cure) - Dissolution of Non-Hodgkin Lymphoma, Syndrome Shifts - Two Similar Cases

Two female patients developed leukorrhea, which was treated conventionally. After local treatment of the discharges, a swelling of the inguinal glands developed and both patients were diagnosed with non-Hodgkin lymphoma.

Syndrome shifts: Local treatment, such as treatment of leukorrhoea, may stop the action of the immune system according to the Rules of Hering (symptoms go from up downward, from within outside) and deflect the disease process inwards and in this way may involve more vital organs. Instead of a rather harmless leukorrhea in the periphery, more vital organs may be involved and even cancer may develop.

3.1 Case 3

3.1.1 Highly Malignant Non-Hodgkin Lymphoma (NHL)

Conventional therapy: Leukorrhea – highly malignant non-Hodgkin lymphoma – surgery and radiation, failed – recurrence of malignant tumours

A young female patient developed leukorrhea, which was treated conventionally. Within 2 weeks swelling of the lymph nodes in the inguinal region (Sept 10) and soon after fever (38.8°C) developed. A highly malignant non-Hodgkin lymphoma was diagnosed by biopsy – extirpation of the spleen, explorative dissection of paraaortal lymph nodes (Oct 16) and y-field radiation, including the paravertebral, inguinal and lymph nodes of the iliacal region (Oct 24 - Dec 4). Surgery and radiation failed. On Feb 1985, 10 weeks later, highly malignant tumours recurred, which involved now the cervical glands as well as tissues above the right clavicle (reversal of Hering's Rules: symptoms go from the periphery to the centre, from down upwards) – see Figure 3.

Homoeopathic treatment (Feb 11, 1985) / Calcium-iodatum cures.



Figure 3 Relevant past medical history of a 23-year-old female patient who had a difficult childhood, a problematic relation with her mother, and has been engaged in quite a complicated relationship. After being diagnosed with highly malignant non-Hodgkin lymphoma, she underwent surgery and radiation therapy; however, after recurrence of malignant lymph nodes and extranodal tissues, she opted homeopathic treatment.

Calcium-iodatum (calc-i) in low potencies dissolves the malignant glands and malignant tissues within a few weeks. Additional medication: X-ray C 30 and for some days Radium-bromatum C 5 were necessary to alleviate radiation side-effects on the organism. The patient felt better. It is remarkable that during the use of homeopathic medication, a plate of highly malignant tissues 5 cms in diameter formed an exophytic necrotic tumour, with a strong smell and looking like pipe tobacco, which was surgically removed 9 weeks after begin of the treatment (April 19). Another 10 weeks later, the patient is in good condition and has gained 6 kgs; however, a tumour has developed on the left shin bone with tearing pain, which subsided after taking *Calcarea-phosphorica* in low potency for three days. The glands on the left cervical region are still somewhat harder than normal (July 4).

3.1.2 Results

A follow up, 33 years after homeopathic treatment of the disease, showed the patient still in good condition. She “does not need any doctor” and feels fine. Investigations verify that there is still no malignancy. Four years ago she suffered from varicella coupled with herpes zoster in the region of the left hip, which did not heal for almost 1 year.

Clinical Significance: In spite of the recurrence of a highly malignant NHL, involving the glands of the cervical region and also other highly malignant tissues, malignancy disappeared rapidly by taking the constitutional remedy Calcium-iodatum (calc-i) in low potency within some weeks. The symptoms go from inside outside (necrotic tissues) and from up downwards (node on the shin bone).

Comparison to conventional treatment: Without immunotherapy and/or chemotherapy the prognosis of aggressive B cell lymphoma is dismal. A recent study focusing on the prognosis of this type of lymphoma reported an aggressive behavior with a median survival of less than 1 year in untreated patients (with no CI stated, as almost all patients are usually treated and the prognosis depends on risk scores (international prognostic index) [12].

Spontaneous remission in aggressive diffuse large B cell lymphoma is exceedingly rare. A very recently reported case report listed all published cases of spontaneous remission in patients with diffuse large B cell lymphoma that did not undergo chemoimmunotherapy [13]. These cases point to a potential proof of concept for investigation of unexplored pathways that impact T cell anticancer immunity.

3.1.3 Comments

In spite of radiation there is progression of the disease (recurrence and extension of the tumours).

After administering the appropriate remedy, a cure according to the Rules of Hering was initiated deflecting the disease process “from within towards the periphery” and “symptoms go from up downward;” in this case malignant tissues nearby the clavícula became necrotic and moved outwards, the malignant nodes resolved and later a painful tumour appeared on the shin bone, which was easily cured. By this way symptoms go from vital organs to less vital organs.

The curative action of homeopathic remedies displays syndrome shifts according to the Rules of Hering, which are also observed in cases as the pleural mesothelioma (above), hairy cell leukaemia, astrocytoma grade III, osteolytic bone destructions after mamma and stomach cancer, etc.

The patient feels well and has been in good health for 33 years.

3.2 Case 4

3.2.1 Low Grade Non-Hodgkin Lymphoma – Ferr-I (Adapted and Extended from [1, 2])

After FSME-vaccination a young female patient suffered from multiple inflammations for 4 years. Then leukorrhoea developed, which was treated conventionally. Thereafter a tumour on the right thigh developed, which was surgically removed and a malignant non-Hodgkin lymphoma was diagnosed. As with case 1.2, we intend to highlight the reaction of the leading remedy (ferr-i), which precisely corresponds to the predicted shifts of the symptoms as outlined by the Rules of Hering.

3.2.2 Homoeopathic Treatment / Results

The patient asked for homoeopathic treatment and was treated for four years. She became pregnant immediately after application of the first remedy (Thuja), delivered a healthy son and suffered still from asthma and multiple inflammations. She was treated with different homeopathic remedies, however the tumour continued to grow.

Ferrum-iodatum was found after 4 years of homeopathic treatment by including the emotional and mental symptoms of the patient (upper part of Figure 4). The constitutional remedy dissolved the big lymph node conglomerates in the abdomen, which have already reached a size of 10 cms in diameter within a few weeks. According to the syndrome shifts of Hering's Rules, old symptoms from which the patient suffered before the tumour, flared up again and subsided quickly. These symptoms consisted of inflammations of the stomach and the urogenital organs, the shoulder, asthma and hay fever (lower part of Figure 4).

Comparison to conventional treatment: A well-known study published by Horning et al. described the national history of initially untreated low-grade Non-Hodgkin lymphomas [3]. This is the first study that reported spontaneous remissions in the advanced disease initially managed without therapy. Survival was 82% at 5 years and 73% at 10 years. The median time until treatment was required was 3 years. Spontaneous regressions occurred in 19 untreated patients (23%). Why this happens is largely unknown and a matter of continuous research.

3.2.3 Comments

Clinical Significance: Ferrum-iodatum dissolved huge conglomerates of the lymph nodes in the abdomen. While the tumours subsided, old symptoms flared up again. The inflammations before the appearance of the tumours flared up again in the reverse order and subsided quickly.
Observation: No recurrence of lymphoma for 10 years.

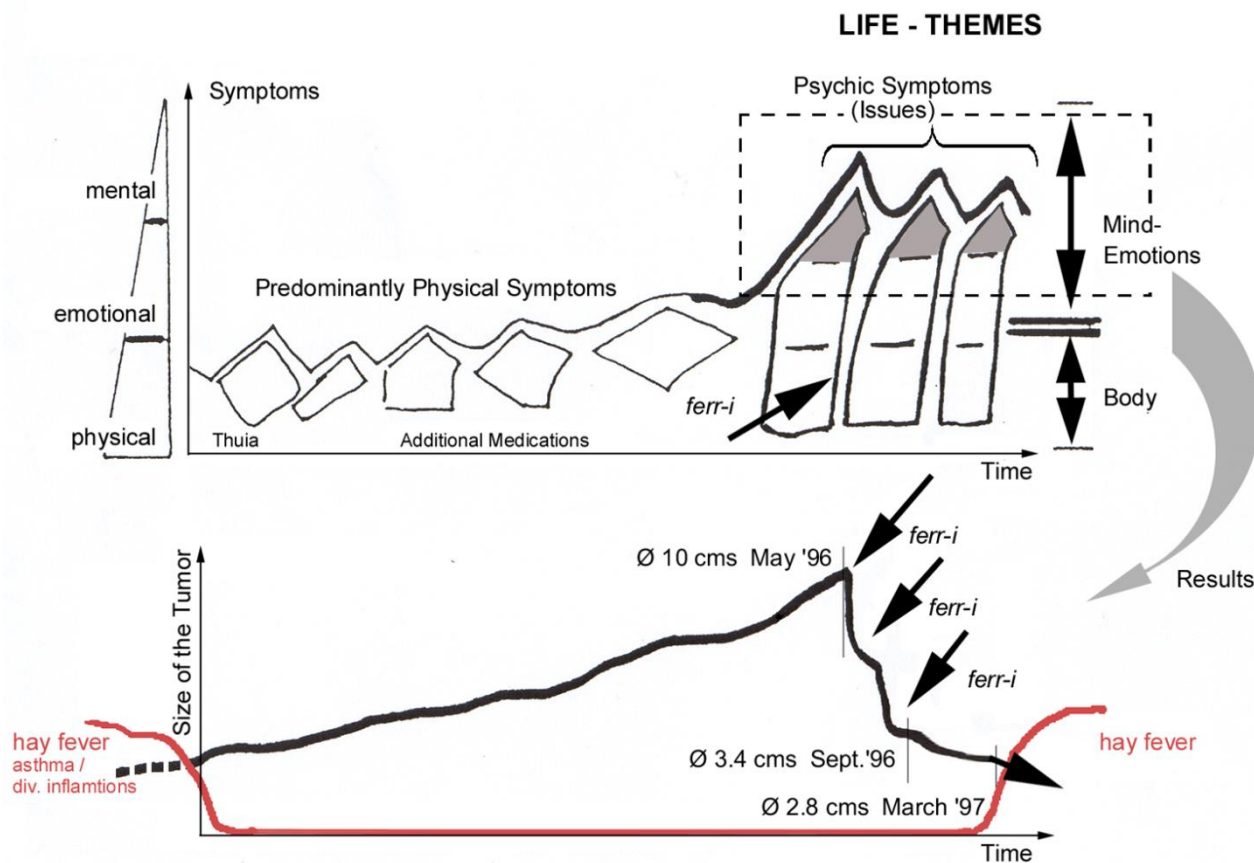


Figure 4 Timeline of a young female patient suffering from multiple inflammations for several years. Following the treatment of leukorrhoea, a tumour on the right thigh and NHL developed [1, 2]. After administration of Ferr-i, the tumours subsided and symptoms present before the onset of the tumour dynamics flared up again and vanished quickly. These symptoms reappeared in reverse order of initial appearance and vanished quickly.

4. Conclusions

Homoeopathic therapy: Syndrome shifts according to the Rules of Hering go from vital organs to less vital, from up downward (pleural mesothelioma, highly malignant non-Hodgkin lymphoma) and may bring up old symptoms again which subside quickly.

The appropriate constitutional homoeopathic remedy may include all the former symptoms as well as the present disease. It should include the constitutional (healthy) and ill parts of the person, the psyche and the morphology, the milieu and the life circumstances; therefore, it should display the bio-psycho-social situation of the patient.

The abrupt development of non-Hodgkin lymphomas after local treatment in two cases show that in particular cases it may be dangerous to suppress an outlet of the organism, on the contrary a kind of drainage is necessary (Rules of Hering, if the healing process takes place, the symptoms go from inside outside, from vital to less vital organs). The immune system, including the lymph nodes, may not be able to resist against particular infections; however, a constitutional homoeopathic remedy, which covers the constitution of the person, may be able to restore health

all over and to restore normal physiology. Epigenetic damage and the change of gene expression, which happens with the outbreak of the disease, may be rectified by the information of a homoeopathic remedy and towards re-initiation of a healthy epigenome.

With conventional therapy, syndrome-shifts occasionally are opposite to the Rules of Hering: symptoms go inwards and upwards. Both cases of non-Hodgkin lymphomas developed Leukorrhoea after vaccination. After local treatment, swelling of the inguinal lymph nodes developed and non-Hodgkin lymphomas were diagnosed. If after elimination of local symptoms, more vital organs were involved, we might speak of a kind of suppression.

Psychosomatics – Kalium, Calcium, Ferrum, Iodine, Carbo animalis.

A constitutional remedy includes the mental-emotional sphere and character of the patient, as well as the morphology and represents therefore psychosomatics. Moreover, according to the analysis of the periodic table and the classification of the elements, the remedy mirrors the bio-psycho-social situation of the patient, which includes his/her life story.

Jan Scholten has analysed the periodic table concerning the psychosomatic background images of the different elements and its combinations. He brought about the character of the elements of the periodic table concerning their mental and emotional level. His analytical investigation provides insight in a classification of the elements; therefore, we have a repertory and *Materia Medica* at the same time. By using the rows (or series) and stages of the periodic table, we receive a high quality of differential diagnosis [4].

Each of the discussed remedies, which have a significant effect on cancer and lymph nodes, is different in its psychosomatic image. It displays a different emotional-mental picture and represents a very individual life-conflict.

Iodine is a remedy of the series of scientists and artists (silver-row), which also represents a particular culture, images what a patient bears in mind. In stage 17 of that series, culture means once more to hold on and to let go afterwards. This means that a person has to change one's culture, i.e. can no longer live in the way he/she did; one has to change, eventually even to emigrate. It's easy to understand that this is often a theme in cancer patients. On the physical level iodine and its derivatives have a strong affinity to the lymph nodes.

On the other hand we have used three elements of the Ferrum series, which represent tasks, routine tasks and duties, to be perfect and to solve daily problems. Concerning our cases, these elements are combined with iodine – yet this is managed differently in each case.

The first stage in this row is Kalium, stage 1. It regards the patient with lung cancer. He is strict, systematic, impulsive, very structured, runs a business. Kalium combined with iodine, gives him a lot of energy to change his mind and to go over borders; it forces him to "emigrate," so he "landed" with homoeopathy: he must go out and act permanently, he cycles a lot and high into the mountains - he cannot be stopped.

The second one is Calcium, stage 2. Due to her insecurity to take the next step, this kind of personality often requires a lot of information in order to be able to make decisions. However, this patient was forced to make a decision because of marriage and was heavily attacked by another woman. Her insecurity in performing a task/duty along with her cultural challenge (marriage), makes the conflict in the person evident. Insecurity and change together created an internal conflict, which is expressed by calcium-iodatum. This is the psychological level and theme the patient suffers from.

The third element is Ferrum. Here, in stage 8, the pressure on the person is intense, yet she has to persist, has to succeed and to push through. As a housewife she has to maintain the difficult family structure and as such is under constant pressure.

In contrast, Carbo animalis does not have the power to act constantly, is not able to push things through and eventually to change both mind and culture. Carbo animalis is more passive, is dominated by others, as seen in the patient with mesothelioma, who has also a lot of siblings and lives with a very domineering partner.

Author Contributions

Case Reports by DP, Clinical aspects by JM, manuscript by DP & PS.

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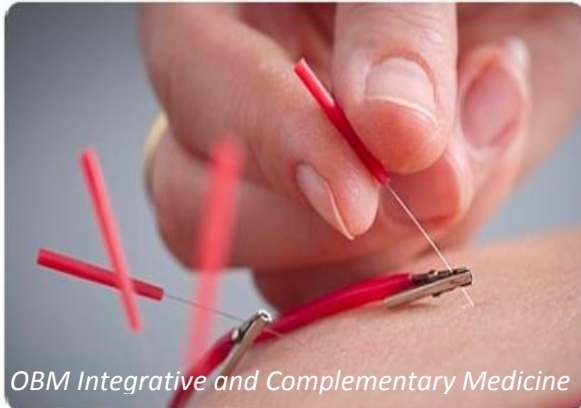
Competing Interests

The authors have declared that no competing interests exist.

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