

## Fifteen Years Experience with Homeopathic Immunizations [Homeoprophylaxis]

by

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### Abstract

Over a fifteen-year period, 184 children between ages two months and twelve years were given potentized Polio, trivalent Diphtheria, Pertussis and Tetanus [DPT], and Measles, Mumps and Rubella [MMR] vaccines. None of the children developed those diseases over the course of the study. There was one episode of a minor skin eruption.

If one adds this information to the results of the study by Isaac Golden on 1305 children over thirteen years, almost 1,500 children receiving homeopathic immunization obtained excellent results.

There is little information on the long-term results of giving homeopathic potentized conventional immunizations. As a General Practitioner, I devised an informal study over the last fifteen years on primarily using the potentized forms of Polio, the trivalent Diphtheria, Pertussis and Tetanus [DPT] and Measles, Mumps and Rubella [MMR] vaccines, which were prepared by the Hylands/Standard Homeopathic Pharmacy. 184 children were chosen from ages 2 months to 12 years old. Approximately forty percent of the children had received some conventional immunization.

The patients' parents were all given a handout informing them of concerns regarding safety of conventional immunizations as well as a compilation by Francisco Eizayaga, MD on global research and technical information concerning homeopathic immunizations. It was explained to the parents that the immunizations were not the same as conventional immunizations. A potency of 200 C was chosen □ well beyond Avogadro's Number [ $10^{23}$ ] and therefore beyond any molecular substance remaining from the medicine, according to understanding at the time. It was felt that this would be safe and, hopefully, effective. Fifty-eight children were treated in the first five-year period. Sixty-one additional children were treated in the next five years. In the past five years, sixty-five were treated according to the schedule on page 6. These children were given the immunization at various times, depending on when they made their appointments, their previous conventional vaccinations, and the age at which I started seeing them.

When I first started using these homeopathic immunizations, I followed Dr Eizayaga's regimen of giving the 200 C daily for three days every year. This was discontinued about nine years ago.. I then decided to follow the more routine schedule for conventional immunizations because I wanted to try a different approach. (see Figure 1: *Homeopathic Immunization Schedule*).

None of the 184 children had any of the illnesses for which they received immunizations. There were no side effects or allergic reactions. To my knowledge, the only negative report was of a rash on the upper extremities that later appeared to be a milk allergy.

There is a more thorough study on vaccinations done by Isaac Golden, a homeopathic practitioner from Australia, described in his book, *Vaccination? A Review of Risks and Alternatives*.<sup>1</sup> He applied a homeopathic immunization program based on the recommended Australian regimen: Diphtheria, Pertussis, Tetanus, Poliomyelitis, Measles, Mumps, Rubella and Hemophilus Influenza. The Kit he used covered all of these except Rubella, and he collected data from 1988 to 1998 in a series of eight research surveys filled

out by the parents. A total of 1,305 children were treated. Of these, twenty to thirty percent already had received at least some conventional immunizations. As of publication, the efficacy of his homeopathic prophylaxis was between ninety and ninety-eight percent. Success rate refers to children definitely exposed to the disease. The incidence of mild side effects (which would include homeopathic aggravations or healing manifestations according to Hering's Law of Cure) was ten percent, which compares favorably to the sixty-three percent side-effect rate of conventional vaccinations.<sup>2</sup>

### Questions about Conventional Vaccinations

For each conventional immunization, Golden gives arguments questioning the actual effectiveness. One of the most often used arguments is that the incidence of the disease was already decreasing. Or, in other words, the cycle of the illness was already becoming less. Diseases have natural cycles of increasing and decreasing. Cycles are more important than one might imagine. After all nature manifests cycles at every turn.

Harris Coulter, PhD in his book *Vaccination, Social Violence & Criminality*,<sup>3</sup> supports "A Summary of Some of the Long Term Side Effects of Vaccinations" listed by Golden.<sup>4</sup>

- 1] Severe Neurological damages.
- 2] Brain Damage.
- 3] Allergy and hypersensitivity.
- 4] General damage to the immune system.
- 5] Slow viruses.
- 6] Genetic abnormalities – Jumping Gene phenomenon.
- 7] Viral transference.
- 8] Trigger mechanism for immune system diseases.
- 9] Dynamic [miasmatic] damage.

In 2000, the United States House of Representatives had a committee hearing on the incidences of Autism associated with the Measles immunization.

Isaac Golden states: "In 1986 the U S government established an agency to compensate parents of vaccine-related illnesses of children... up until 1988 \$ 108 million were paid. However, in 1991, there were around 4,100 further petitions pending, with a potential payout value of over \$3 billion."<sup>5</sup>

In 1975 I personally had the unfortunate experience of seeing first-hand the effects of a DPT immunization given by another physician to a child a few months old. The child developed mental retardation and chronic seizure disorder.. This case involved a legal settlement that the DPT was the cause. The conditions continued at least until 1987 when I lost track of the patient. Since that time, I have not given any conventional immunizations, only homeopathic.

### Master Homeopaths Who Support Prophylaxis With Homeopathy

Isaac Golden lists a number of famous homeopaths that supported homeopathic prevention of infectious disease (homeoprophylaxis):

In 1801, Samuel Hahnemann described the use of *Belladonna* to prevent Scarlet Fever.

In 1900 Dr. J T Kent wrote in his *Lectures on Homoeopathic Philosophy*,

“We must look to homoeopathy for our protection as well as for our cure. Now you will find that for prophylaxis there is required a less degree of similitude than is necessary for curing. A remedy will not have to be so similar to prevent disease as to cure it, and these remedies in daily use will enable you to prevent a large number of people from becoming sick.”<sup>6</sup>

In 1907 Dr. C W Eaton read a paper before the American Institute of Homeopathy on *Variolinum 30* [a Nosode prepared from a smallpox vesicle]

|   |       |
|---|-------|
| Persons given Variolinum 30                   | 2806  |
| Definite exposures after taking Variolinum 30 | 547   |
| Smallpox cases after taking Variolinum 30     | 14    |
| Efficacy                                      | 97.5% |

Dr. Dorothy Shephard states in *Homoeopathy in Epidemic Diseases*, “Nosodes or disease products of the actual disease are often most active preventatives.” [1967].<sup>7</sup>

Dr. P Sankaran in *Prophylactics in Homoeopathy* in 1972 reviews the clinical data of 92 practitioners including hundreds of examples of homeopathic prevention. In 1978 in *Some Notes on the Nosodes*, he writes, “Wheeler recommends that in epidemics, the corresponding nosode in the 30<sup>th</sup> potency will protect for at least a fortnight. Others, like Grimmer, recommend one dose in high potency, once a year.”<sup>8</sup>

In 1991 Dr. B Sethi, in *Homoeopathic Prophylactic Remedies*, states that, in regard to *Diphtherinum*, Allen “had used it for 25 years as a prophylactic and has never known a second case of diphtheria to occur in a family after it has been administered.”<sup>9</sup>

A large study done in Cuba in 2007 with homeoprophylaxis using a *Leptospirosis 200C* nosode to 2.3 million people had the following results:

***After the homeoprophylactic intervention a significant decrease of the disease incidence was observed in the intervention regions. No such modifications were observed in non-intervention regions. In the intervention region the incidence of Leptospirosis fell below the historic median. This observation was independent of rainfall.***<sup>10</sup>

One of the major criticisms from conventional medicine is that the homeopathic nosodes do not produce a titers against the pathogens. Isaac Golden quotes that “The National Health and Medical Research Council reported in 1993 ...blood samples of 20 children who had used Homoeopathics, revealed no antibodies for the disease covered.”<sup>11</sup>

His answer to this was: “Firstly, it has never been claimed that the potencies confer immunity by stimulating antibody production. How, for example, could *Belladonna*

[Hahnemann's first prophylactic application] be expected to stimulate antibodies in Scarlet Fever?"<sup>12</sup>

In other words, the homeopathic medicine stimulates the immune system by imitating the refined energy/substance of the pathogen.  
Many more quotes could be given.

### Questions and Problems Concerning the Fifteen Year Case Series

One of the more obvious problems is that no discrimination was made between those who had received one or more conventional immunizations and those who had none. Patients in this case series differed from conventionally treated patients also in the number and timing of their other immunizations, such as, Hemophilus Influenza (Hib) and Hepatitis B, which were given less frequently than standard. There was no blinding, and no placebo controls. The observations did not require a set time of reporting. The only mandatory requirement was that the parents inform me if any negative symptoms occurred.

Another question concerns the fact that the seven illnesses treated by homeoprophylaxis in this case series have shown a decreased incidence in the population, which is thought to be due to conventional immunizations. Given this, can one say that over the last fifteen years the homeoprophylaxis, or perhaps constitutional homeopathic treatment, really kept these children from acquiring these diseases? I cannot say for sure that either the homeopathic or the conventional approach prevented these illnesses.

For the practicing homeopath, a concern is whether the homeopathic immunizations interfered with constitutional prescribing. The answer to this question is not clear. Generally they did not seem to interfere. However, in some patients with more serious systems, I was reluctant to give the homeopathic immunizations. Obviously, not every child seen was cured of every chronic illness, but overall my results were good when the simillimum seemed clear. As a rule, no homeopathic vaccination was given until at least two weeks after an acute illness and my prescribing for that. Also no homeopathically potentized vaccine was given until at least two weeks following a constitutional prescription. In comparing conventional immunizations with homeoprophylaxis, there is little doubt in my mind that conventional immunizations are more likely to cause interference with constitutional prescribing.

The question of suppression must be raised. Since nosodes/isodes do not consider the "whole" symptom picture or full constitution, the possibility of suppression cannot be totally ruled out. This argument, of course, could be made about any mistaken prescription: its intent may have been to meet the totality of characteristic symptoms, but if it evidently did not, did it act suppressively? I was mindful of this possibility, observed as closely as I could, and was not aware of any suppression from the homeopathic immunization protocols. But I cannot categorically say that no case was suppressed.

Some practitioners state that no immunizations, conventional or homeopathic, should ever be given. I must say that I have had difficulty making such an absolute statement. Isaac Golden speaks to this point in his book on vaccinations:

**”Some homeopaths argue [correctly] that we do not fully know the dynamic [miasmatic] long term consequences of potentized prophylactics. They conclude that it is desirable to allow a child to contract a disease and treat the disease according to the Law of Similars.**

**This argument is appealing in theory, and can be sustained where both parents and practitioners wish to follow this approach. However, there are complications in practice:**

**[a] Some diseases can be tragically severe in tiny infants, even with reasonable treatment. *Eg.* Pertussis ...**

**Without doubting the effectiveness of homeopathic treatment, such treatment presumes that an accurate prescriber is locally available, and somewhat ignores the suffering for both child and parents while treatment occurs.**

**[b] Many parents are not impressed with the argument that a child should be allowed to contract every disease and, if no alternative method of protection is offered, they will resort to conventional vaccination.**

**...The author would strongly argue that if parents prefer to vaccinate their children rather than provide no specific protection, we as practitioners are professionally obliged to offer them the use of the homeopathic alternative...**

**“Some homeopaths might argue that protection can be stimulated by using constitutional remedies. Even though this method undoubtedly works, there are many examples of individuals with a high vital force contracting specific infectious diseases. Disease-specific prophylaxis is more effective in stimulating disease-specific immunity.”<sup>13</sup> “The ‘purists’ have not proven that homeoprophylaxis [HP] causes dynamic damage, just as the ‘pragmatists’ cannot prove it doesn’t. To ignore the value of HP, however, places those patients who would otherwise vaccinate conventionally at a disadvantage. And to be openly antagonistic towards colleagues who are doing no more than following in the footsteps of the Master prescribers is as foolish as it is divisive.”<sup>14</sup>**

**A number of practitioners feel that giving the homeopathic potency of an immunization after a conventional immunization can be beneficial to antidote the negative effects of the conventional treatment. This concept of antidoting is not clearly seen by my experience.**

**In the “real world” many parents find it very difficult to do “all or nothing.” There is generally a great deal of pressure on parents from schools, pediatricians, and advertisements, even from one parent on the other, to accept conventional immunizations. The schools as a rule make it seem that the child must receive conventional immunizations in order to be allowed in school. As a matter of fact in most states, including California, the law allows three exceptions to obtaining immunizations: medical, religious and philosophical reasons. Finally, let us look at what homeoprophylaxis might offer in this post-9/11 era of possible bio-warfare from terrorism. According to the Centers for Disease Control [CDC] in the United States, the five most likely candidates for bio-terrorism (with the corresponding homeopathic nosode following in brackets) are: 1) Anthrax**

(*Anthracinum*) 2) Smallpox (*Variolinum*), 3) Botulism (*Botulinum*), 4) Rattlesnake venom (*Crotalus Horridus*) and 5) Plague (*Operculina*).

If there were an exposure or epidemic, a suggested procedure for prescribing would be a 200 C or 30C [X] daily for a week, and then weekly for a month. I hope this paper has helped to clarify my ideas on immunizations. It is one of the most important and hotly debated subjects of our time.

### Conclusion

In an informal study in the midst of a clinical practice, homeoprophylaxis for seven diseases – polio, DPT, and MMR - with either incomplete or no associated conventional vaccination, showed no failures. This contributes to the growing data on the use of homeopathic immunizations to indicate their validity and to stimulate more formal and extensive research.

| Study Periods   | 15 Year Experience with Homeopathic Immunizations    |   |  |
|---|--|---|--|
|   | 1986-1996  | 1991-1996   | 1996-2001  |
| Total of 184 Children   | 58   | 61  | 65   |
| DPT 200C<br>POLIO 200C<br>MMR 200C                                  | ALL  | ALL   | ALL  |
| Estimated % already having some conventional Immunizations          | 40%  | 40%   | 40%  |
| % Exposure to any of the above Diseases                             | Unknown  | Unknown, But there were reported some cases of Pertussis in Ventura, County | Unknown But there were reported some cases of Pertussis in Ventura, County |
| % having any negative effects from homeopathic nosode immunizations | 1% a mild skin eruption                              | None reported   | None reported  |
| % having negative effects from conventional immunizations           | Estimated the 50-70% mainly fever, pain, rashes, URI | Estimated the 50-70% mainly fever, pain, rashes, URI                        | Estimated the 50-70% mainly fever, pain, rashes, URI                       |
| % having the disease after homeopathic Immunization                 | 0%   | 0%  | 0%   |

|   |                |                |                |
|---|----------------|----------------|----------------|
| <b>% having the disease after conventional immunization</b> | <b>Unknown</b> | <b>Unknown</b> | <b>Unknown</b> |
|---|----------------|----------------|----------------|

| <b>Homeopathic Immunization Schedule</b> |  |
|--|--|
| <b>AGE</b>                               | <b>IMMUNIZATION</b>                      |
| <b>2 MONTHS</b>                          | <b>DPT 200 C # 1<br/>POLIO 200 C # 1</b> |
| <b>4 MONTHS</b>                          | <b>DPT 200 C # 2<br/>POLIO 200 C # 2</b> |
| <b>6 MONTHS</b>                          | <b>DPT 200 C # 3</b>                     |
| <b>12 MONTHS</b>                         | <b>MMR 200 C # 1</b>                     |
| <b>18 MONTHS</b>                         | <b>POLIO 200 C # 3<br/>DPT # 4</b>       |
| <b>5 YEARS</b>                           | <b>DPT 200 C # 5<br/>POLIO 200 C # 4</b> |
| <b>12 YEARS</b>                          | <b>MMR 200 C #2</b>                      |

## Bibliography

- <sup>1</sup> Isaac Golden, *Vaccination? A Review of Risks and Alternatives*, National Library, Canberra, Australia. 5<sup>th</sup> Edition 1998.
- <sup>2</sup> Ibid., p. 142. Table 3.3.2 [a].
- <sup>3</sup> Harris L Coulter, *Vaccination, Social Violence & Criminality*, North Atlantic Books. 1990.
- <sup>4</sup> Golden, op.cit., p. 25, Table 1.3.1.
- <sup>5</sup> Ibid., p. 50.
- <sup>6</sup> Dr. J. T, Kent *Lectures on Homeopathic Philosophy*, Jain, 5<sup>th</sup> Edition. 1954. P. 229.
- <sup>7</sup> Dr. Dorothy Shepherd *Homoeopathy in Epidemic Diseases* Health Science Press. 1981. P 15.
- <sup>8</sup> Dr. P. Sankaran, *Prophylactics in Homoeopathy*. Homoeopathic Medical Publishers, 1961.
- <sup>9</sup> Dr. B Sethi, Jain, *Homoeopathic Prophylactic Remedies*, Pages 22, 47, 56, 78.
- <sup>10</sup> [Homeopathy](https://pubmed.ncbi.nlm.nih.gov/20674839/). 2010 Jul;99(3):156-66. doi: 10.1016/j.homp.2010.05.009.  
<http://www.ncbi.nlm.nih.gov/pubmed/20674839>
- <sup>11</sup> Golden, op.cit., p. 157
- <sup>12</sup> Ibid., p. 125.
- <sup>13</sup> Ibid., p. 128.
- <sup>14</sup> Ibid.,p 134.