Homeopathic Remedy for Panic Disorder: A case study

TIM SHANNON, ND

A 69-year-old female, Susanna, represented to me for panic disorder. She was a childhood survivor of a concentration camp. She spoke very seriously, very gravely about her problems, rarely smiled and got right to the point.

Initial Intake: June, 2003

Susanna: "If home, on the weekends, I sit in the house. No matter what I do, I get panic attacks, and I want to die. I don't want to live. During the week, I'm fine – doing things. My momma said I'd scream at night 'Momma, Momma!' and would come to her bed. I remember a childhood nightmare where someone was coming to kill us. Every night that is all I could remember. I was living that dream, maybe there was blood there, too. That may have been the start of the panic – that dream.

"Then I get taken away to a concentration camp. I was eleven when they took me away from my momma. My momma and sister went to another camp. Every year I was sick, didn't want to live. They call me 'the one who always cleans.' I make my bed every day. I always clean up someone's house (a neighbor's)."

"Are you telling me something about your sleep?" I asked every 3.5 to 2 hours. It also takes me a while to fall asleep. I can't stop looking at the clock. By 4 a.m., I am usually awake. I don't take sleeping pill.

"Can you tell me something about your appetite?" It's fine. I eat every two hours. I eat a lot of food. I have breakfast at 8 a.m.; at 10 a.m., I have some nuts and fruit; at noon, I have my big dinner; at 2 p.m., I have fruit; and at 5 p.m., I eat my supper and some fruit again."

"In '59 I came to America. At night I'd wake up and have this feeling of being scared to death. Then I'd doze off in the living room, and the same feeling would repeat – five years like that. Then in '65 I had a panic attack in Europe – at night. The next day I was scared and shaking. Took sleeping pills, and was so dizzy and panicked by those pills.

"At 7 p.m., I can't sleep. "When my husband died [16 years ago], he died at 11 p.m. Every since then, I lose at 11 p.m. exactly. "There were a lot of problems with my husband – he was drinking, and lying too much. … I loved him when he was sober; hated him when he was drunk. He is gone, and he loved life; I should be gone, too.

"A year ago I bought everything to commit suicide. I can't shake that awful feeling. Why am I scared? Why am I scared of sitting by myself? Why am I scared to death, and I don't know what I'm scared of. When I get panic attacks at a friend's house, I would move the lawn to keep busy. I was panicking waiting for my neighbor to come to my house. Or I'd walk around and around in the house, to keep moving, until 7 p.m.

"Several years ago my son moved away and I was alone. Then is when it got real bad. The worst days are bad if I have to be alone in the afternoon.

"If this (points to chest and throat) doesn't open up, if that starts then I know. If it tightens up, I want to open it. When that starts I get depressed and don't want to live. What for? I'm old enough, my kids are gone.

"Can you tell me about the first panic attack? I woke up at night, my whole body feeling funny like something was going to happen. I'd doze off and it would come again. That scary feeling, it's weird. It is a different scared … it is like you are on top of a hill and you are the only one in the whole world, that is how it feels. I'd do something it is OK, but when I relax that is when it happens."

"Do you have any physical sensations during panic? Shaking, and suffocating. I have tightness in the center of my chest and in my throat. Even after the attacks, the tightness remains. If I get depressed, that is when it happens. It only happens on the left side of the neck or the center of the sternum. It is like a spasm; it comes suddenly, like when I have it in the house. Then I don't want to go into the house, because it is a different scared … it is like you are on top of a hill and you are the only one in the whole world."

"When is it particularly bad? "I wake up day and night, can't eat and just want to die. I'm always thinking about how to commit suicide without my son finding me. I don't want to live like this anymore."

"Do you have any fears, anxieties or phobias? "Claustrophobia.

"Can you tell me about your relationship to animals? "I'm scared of animals, I always chase them. They never get me but it is very close – I finally get away. I'm afraid of horses."

"Are there foods that make you sick, or that you don't like? "Milk. I grew up a long time ago, and ice cream. I used to have headaches or nausea from milk."

"[Thinking of Lac equinum (mare's milk):] Are you fastidious? "I'm a neat freak. Everything has its place, everything has to be dusted. They call me ‘the one who always cleans.’ I make my bed every day. I always clean up someone's house (a neighbor’s)."

"Can you tell me something about your sleep?" I take every 3.5 to 2 hours. It also takes me a while to fall asleep. I can't stop looking at the clock. By 4 a.m., I am usually awake. I don't take sleeping pill.

"Can you tell me about your appetite?" It's fine. I eat every two hours. I eat a lot of food. I have breakfast at 8 a.m.; at 10 a.m., I have some nuts and fruit; at noon, I have my big dinner; at 2 p.m., I have fruit; and at 5 p.m., I eat my supper and some fruit again."

"I don't want to live like this anymore. I don't want to be scared anymore."
ND Comments

This may be a case of post-traumatic stress disorder from the concentration camp, something she was able to manage for a time by being occupied and around others. When she lost her husband and her son moved is when the panic began in earnest. In my experience, any of the mammalian milks can be very healing for patients. Of course, finding the simillimum will have the most profound improvement with a homeopathic effect.

Between a seminar I attended with Dr. Massimo Mangialavori, an Italian homeopath, and my own successful cases, I have learned that the consistent themes for mammalian milks are:

- Marked reaction to milk – either physical symptoms from milk or emotional feelings (they can love or hate dairy)
- Headaches are a common pathology for patients needing milk
- Difficulty growing up or developing a separate identity from family members
- Symptoms that gravitate to one side or the other – sometimes switching sides
- Indecision (stems from not having individuated)
- Marked attraction or aversion to the mammal they require (this is common, though not necessary).

My rationale for Lac in this case:

- Repeating dreams of horses and fear of them
- Aggravated by milk
- Restlessness and fastidiousness (Lac)
- Lac has an affinity to the lungs and breathing difficulties
- Issues with time and pace (watching the clock, or eating every two hours) – peculiar to Lac
- Indusistrus – very important for Lac
- Burden and responsibility for others (regularly volunteering to clean her neighbour’s house).

Plan: Lac 200C, Q12 hrs x 2 (dry), extra envelope to hold.

Follow-Up (5 weeks after initial dose), August 2003

Susanna: “I’m doing much better. I’ve only had mild anxiety three times. I sleep better. My neighbors were gone for nine days and I didn’t have to leave the house. I must be much better, because there was a fight and apparently I slept through it. My neighbors said the walls were shaking. Usually, I’d hear everything and I’d never go into that deep a sleep. That was a surprise to me, I couldn’t believe it.”

You were getting episodes of panic sitting in your house by yourself. How is that now? “None. I can sit there. I don’t have to go on the phone or leave. I don’t get so anxious, nothing like it used to be – 70%, improvement.”

You were waking frequently and watching the clock? “I woke up only twice with anxiety.”

You were also waking too easily? “Still waking easily, but now able to fall back to sleep.”

You had claustrophobia? “I did sit in a car for a ride and was fine instead of being panic. It used to be I felt this way even in my own house. I had this panic only once. I used to have it a lot, every day.”

Tightness in chest and throat? “It had maybe two times. It is a lot better.”

My stomach is better, too. Before, even when drinking only water, 20 minutes later I’d get stomach pains.

“When you gave me those little pellets, I thought it was a cruel joke. But I felt something after I took that medicine. For two weeks or so, I felt ... like something was working in my head. Not sleepy, but something relaxing. I can’t explain it. Like something was working in my head, calming or relaxing me.”

Assessment

Good response; physical symptoms were improving as well as the panic. She called a week later saying she was slipping slightly into panic. I told her to dissolve some pellets of Lac 200C in water and take a teaspoon once per week.

I saw her again mid-September 2003:

Susanna: “I’m much better. I can handle it now better when I’m at home. This last weekend I was home and I did OK – no panic. In the afternoon when I’m alone, I don’t get this ‘have to do something’ feeling.”

I checked her baseline again to see if she was continuing to improve. She said the tightness in her chest/throat was better. Her sleep was also improved from last visit – less waking and easier to fall asleep. She also confirmed her claustrophobia was still improved:

“I always had to be thinking about what I was going to do the next morning before going to sleep, because I wanted to get out of the house to not be alone. A friend asked me recently, ‘What are you doing tomorrow?’ And it was Saturday! That was my worst day and I hadn’t even thought about it. It is so good to feel good!”

Epilogue

Patient left a voice mail, May 2004:

“Hi, Dr. Shannon, I’m doing fine, I’ve had none of your medicine since the second week of March. I’m taking nothing except vitamins. I’m very busy seven days a week. I’m doing just fine.”

I didn’t hear from her again, so I called her in January 2005. She said she was doing fine; that since I spoke to her last, she had some mild transient anxiety. Otherwise, she had no recurrence of panic.

Often, homeopathy is much more effective than conventional drugs. The results become self-sustaining, and the patient’s global health is also significantly increased.

Tim Shannon, ND

In private practice in Portland. He specializes in the treatment of mental, emotional and behavioral health. He uses classical homeopathy to treat a wide range of mental health complaints: ADD/ADHD, OCD, PTSD, autistic spectrum, depression, anxiety, eating disorders, PTSD, bi-polar, schizophrenia, etc. Dr. Shannon lectures at NCMH as well as to the local community on a variety of mental health complaints.
Violence in Teens

Some of my most violent patients have been quite charming ... Despite having seen this phenomenon repeatedly, I can still be fooled by the teen until the parent tells me what is happening

TIM SHANNON, MD

Violence in teenagers is difficult to treat for many reasons. It is because teens often resist treatment. In addition, in teens or adults, there is often a great deal of denial and self-justification that makes getting an accurate assessment difficult. Interestingly, some of my most violent patients have been quite charming. Often, they will deny any problems or minimize them incredibly. Despite having seen this phenomenon repeatedly, I can still be fooled by the teen until the parent tells me what is happening. Of course, there also are those patients in whom the violence and maliciousness are more apparent. In many of my cases, I first see the teen separately. Then, after I've obtained what-ever useful information I can, he or she is seen with the parent. It is often when the parent(s) come in that a more realistic picture begins to form.

Case Study
The following case was unique in that the patient spoke openly about his violence / rage. In addition, he was under treatment by a local psychiatrist. Many of these patients are either sent to a "boot camp" or are put on a variety of drugs. This patient had a long history of both. The off-label use of antipsychotics is common for violence and rage in teens.

"Martin" was originally put on prescription drugs and sent to boot camp because of various episodes of violence towards his mother. In one instance, he grabbed her by the throat and slammed her against the wall, choking her. His brother was there and got Martin away from her. Similar violent acts happened frequently enough that his mother sought help from a psychiatrist. When I first saw Martin in March 2003. He was 15 years old and being managed on 20mg citalopram hydrobromide and 1.5mg risperidone QD. Martin measured 6’2" and weighed 232 pounds. He started right off discussing the main issues:

"I was at a treatment center, got worse, then went to detention center. I then went to another treatment center in the south, really rough for first six months. After that, things began to click, I started doing better. They diagnosed me with PDD [Pervasive Developmental Delay] and ODD [oppositional defiant disorder]."

I excused Martin to the waiting room, and invited in his mother. Here is her accounting:

"He couldn't have any tags in his clothes, didn't like any wrinkles, didn't want to do things he knew they were coming. He was trying this place ... I'm not sure if it's a defense mechanism. He's not successful making human connections. He more often identifies with adults, but still plays with Legos. I believe he is very loving. If not successful with that, he withdraws, gets a hard edge."

Hypersensitive?
"He couldn't have any tags in his clothes, didn't like any wrinkles, couldn't have much touch on him. Sounds, or tones of voice. He always has been a tone-of-voice kid. It wasn't just what you said, but also your tone of voice. He may think I'm mad at him if I'm not careful; gets defensive very easily about the tone I use."

"Definitely do get anxious, not depressed."
"I'll be snappy, I don't care, don't want to hear it, don't want to talk to her."
"Patient is physically larger than when I saw him last. I keep getting hives, like on the palms of my hands."

"The skin on my feet will peel and callosity, and get a rash more often than normal. It is really frequent. Large sections of the bottom of my feet will just peel off. If I grab some and pull, a whole layer of skin will come off."

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"I'm pretty irritable with my mom, not so much with others, mainly with my mom."
"Most? "Almost is in talking to the military. He hasn't done this and not done that," so I'm always irritable when she talks to me." "I'm not a huge patriot, now more"

Case Notes
I was at a treatment center, got worse, then went to detention center. I then went to another treatment center in the south, really rough for first six months. After that, things began to click, I started doing better. They diagnosed me with PDD [Pervasive Developmental Delay] and ODD [oppositional defiant disorder].

"In most areas I do above average except socially with peers. I was having a really hard time with peers – but good with adults. I want to have a good job, social standing."

"I want to have a good job, social standing."

"I know I want to have a good job, social standing."

"I want to have a good job, social standing."

"I want to have a good job, social standing."

"I don't want to do the military. He said the military wouldn't take him if he was dependent on drugs.

August 2005
Martin: “I’ve been having trouble sleeping – mostly getting to sleep. Can get to bed at 12 but won’t fall asleep until 3, just laying there in the bed.”

"What else is of concern? "I’m pretty irritable with my mom; not so much with others, mainly with my mom."

"Most? "Almost is in talking to the military. He hasn't done this and not done that," so I'm always irritable when she talks to me."

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"Anxiety or depression? "Definitely do get anxious, not depressed."

"In particular? "Mostly about how others think of me, or what their opinion is about me, am I saying the right thing, doing the right thing."

"Current meds? "Only oxtipram oxalate. About three months ago, I decided I wanted to join the army. They won't take you with drugs, but without anything I got really, really depressed."

"I wouldn't leave the house, just lay around in a pair of shorts, just mad and sleep. Just wouldn't leave."

"Singing/music (double checking for Cuprum)? "Oh yeah, love to sing, especially more obscure things, like musicals, gospels, old folk songs, etc. I like a lot of the songs from the '60s, the peace songs. I have these two aspects, anger and violence,
Follow-Up, September 2005

Case Discussion

I used this follow-up to confirm my original theory that this could be some kind of cuprum. In addition, I prompted him with several questions to confirm a cuprum salt. He confirmed the concept of déjà vu, as well as the idea of paranoia that someone is behind him. Mangiafierò has stressed that frequent déjà vu is a common expression in bromium salts. This helped me to consider that the remedy could be Cuprum bromium.

In bromium, the patient can have this fixation with the past or things behind him, and similar to iodatum, they can be overrated.

Table 1: Repertory for Martin

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<th>Total Herbs</th>
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races. My energy has definitely increased. I don't crave sweets as much, either.

Focus for school? I seem to be accomplishing more. Things are definitely moving a lot more: Not relying on Mom for rides as much, doing more busting, more independent.

Irritability? There is much, much less. My mom and I argue with some things, more normal I think.

Mother's input: "His sleep was better immediately. He'd been staying up for all doses of 30C, I decided to let him be and give a bottle of Cranberry tincture 30C (liqui-uid) to hold onto for problems that might arise. This turned out to be a mistake. The patient's sleep declined about two months after the initial doses. He got frustrat-
ed and drank the whole bottle of the remedy. He became very edgy and defensive after this. In one of his episodes, he got so angry that he kicked out the back windows of his mother's car. Then went upstairs in the house and threw things out his window. It was an incredible tantrum. He cried afterwards and called his counselor. I didn't know it at the time but the amount of the remedy given can make a difference. I've seen this phenomena in several bipolar and violent cases now. Not knowing that he'd been overdosed, I had him take some 30C twice a week. But this also didn't work. He became extra irritable just after the doses and would wake up with stomach cramps and violent vomiting. Because of this, I had him hold off on any fur-
ther dosing the entire month of December. His mother called in January 2006 say-
ing he had been doing well in December, but had become aggressive. So I had him take a Q3 (similar to LM3) daily and sched-
uled to see him in March 2006.

Follow-Up, March 2006

How are you doing? I'm doing really well. The acne has almost completely gone away. Other than the little remaining acne, everything else has really good. Mom and I have had fewer conflicts. I'm more easygoing. Better able to focus my energy and accomplish things. I changed school to another student program.

Getting along better with your mom? "Yes, definitely. Still having our snippets, but they are more friendly. I'm not so mean and rude. Now we are joking about it much better."

What has your mom said about it? "She hasn't, but usually would say 'I'm hurting her feelings, and so on, that was on a regular basis, that hasn't been happening much at all.""

Guardian Angels? "I do it but defi-

nitely not as regularly."

Any instances where lost temper and got a bit physically? "Definitely not since January. I've definitely lost my temper, but not where losing control of myself."

Is there something you are aware of about things changing? "I'm definitely more at ease, and more empowered about how I can control of myself. When I was younger, I definitely had that feeling of being the slave to my emotions. Not feeling that way at all. Late January, I was a little de-

pressed, wanted to just lay in bed, not go out and did things and was exercising. That was very good to feel that way. When I feel upset about things, I don't have to act negatively, can do other things. Also things that would have irritated me much stronger definitely irritate me on a much smaller level."

Sleep? "I'm sleeping, it is really resolved. Especially since exercising regularly, gener-
ally up by 7 or 8 and going to sleep early."

Other issues you're concerned about? "No, feel things are going well, keep doing what I'm doing."

Déjà-vu? "That doesn't happen much anymore. It used to be a frequent occur-
rence, I can't remember the last time that happened."

Cramps? "I think there was one week-
end, but it was because of overexercising, some cramps in lower legs."

On guard watching out for threats? "Definitely going much better, partly because I can pick them out right away. Even when I'm out with the Guardian Angels, I worry much less. Also, I can watch horror movies, which before I never could do. I would have nightmares. Now, I realize they are more comical than anything else."

Martin left for overseas a few weeks after this follow-up. His mother told me he took some of his remedy with him and has used it on various occasions PRN (for cramps, sleep issues, etc.). I asked her in May 2007 how he was and she said he is still doing great over-
all. He's currently stationed in Afghanistan. I've seen a good number of teens with this type of violence. There are, of course, many remedies where violence is expressed. In my experience, the precise remedy will quickly resolve the violence and help the pa-
tient to mature and begin to flow with life."

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A Case of Adolescent Self Harm

TIM SHANNON, ND

Patient: A 16-year-old girl, conventionally beautiful, thin, petite, with black and red hair, wearing a black mini skirt and fishnet stockings. She was referred by a female colleague (partially because the patient preferred a male homeopathic physician) and was seeking help for depression, anxiety and self-harm.

Initial Appointment, May 2004

(Patient) My mom wanted me to come in for help for my depression and anxiety. More? It began in seventh grade. I was very isolated and stressed. In ninth grade, I realized I was clinically depressed, and in tenth, started self-injury. I have social anxiety and blush often, feel constant stress, and use cutting and bruising as an outlet. More? I’m trying to stop self-injury, but still don’t know how to do it when anxious. I’m nervous, often panic-attack, and get extremely stressed in front of people. I’m fine with a select group, but uncomfortable in groups, especially if I’m the focus. I can’t control it, I get unusually nervous, blush and shake. It’s a huge problem – I can’t do anything. I go to great lengths to avoid giving a speech or to get out of going to a party, and it really prevents me from ending up cutting.

Example? I got pressured to do a speech, I didn’t want to, but they kept badgering me, so I skipped school and cut myself in the bathroom.

Worst-case scenario? Suicidal. When you actually do a speech? I’ll get up, there sometimes it goes okay, other times I blush, my lips shake, my heart races and I talk too fast, and am horribly depressed afterwards, and can’t think; things from long ago still bug me a lot.

Seventh grade? I felt isolated, had lots of embarrassing moments and was really, really shy. People teased me about it. I felt awkward and uncomfortable. I got home-schooled in eighth grade because I wouldn’t go back. Ninth grade was no better. I lost a big support in my life, for a while I thought that making me depressed. I don’t connect easily. I felt isolated from fourth grade ’til last year. I don’t connect well with girls. They have traits I really dislike, they value different things. I don’t understand how most girls think, don’t enjoy the same things, have a different sense of humor. I feel competition with them.

Support? My best friend moved and didn’t keep in touch; he didn’t seem interested, was a big blow. I had no other friends. In seventh and eighth grades, I could still have fun. After he left, I became unmotivated, quiet and depressed. In ninth grade, I kept being sad, but realized it wasn’t about that anymore.

Grade now? Eleventh. Most difficult now? The anxiety. I can’t hide it. If I knew I’d never blush, I wouldn’t be as crippled. It keeps me from doing stuff, restricts my life. I’m friends with this freshman; if he asks to go. I don’t have an appetite. If trying to run away from monsters, I’d disappear and then wake up. I can’t hate the feeling of floating, of not seeing what’s under water, of not being able to get away fast, feeling helpless. I have lots of dreams of things swimming underneath me and I can’t get away; or dreams of trying to run, but not fast enough, or trying to punch or kick but not fast enough, and people laughing at me because I can’t hit hard enough.

Animals? My favorite animal is a hawk; I’ve always liked bats, too. I also like big cats. Fireflies and jellyfish are interesting. Hawks and bats are the big ones.

About hawks? Hawks are fierce-looking, fascinating. I like that they’re predatory and dangerous.

Animals aversive to? I’m fascinated by dangerous ones, typical ones are boring.

Nervous habits? I chew the skin around my fingernails, a lot, rip at them and they bleed.

Appetite? Recently, the past year it hasn’t been there. I don’t have an appetite. Nothing sounds good, I’ve no will to eat. If stuff sounds good, I have no problem eating, I don’t gain weight.

Hypersensitive to sound, light, odors or touch? If music I don’t like is playing I will want to explode. Occasionally, if something rubs against my skin, I can’t get to sleep.

Sleeping up for yourself? I’m not very good about that. People used to think I was mute.

Physical health problems? A lot of headaches, I don’t drink enough.

Headaches? Usually one-sided; or it’s on both sides of my head, like a vise squeezing, and I can’t concentrate on anything.

Dreams? I used to have lucid dreams. In one, I could

Dreams under water? In one, I could

Dreams / Horrors? I have nightmares. I’ve always liked them. I used to have recurring nightmares, I’d disappear and then wake up. I can’t help it. I enjoy them, but don’t mean to hurt anyone. I hit people playfully, but too hard.

Depression? I’m depressed a lot. I’m very jealous, insecure about everything about me, jealous of everyone that looks the way I want to look. Envious? Of people who socialize easily, of people who can interact. I’m smart, but get competitive with people who do better than me.

Jealousy from boyfriend? It makes me uncomfortable. I’m insecure. I don’t need much to convince me of the worst.

Hobbies? Writing is my passion. I write almost every day. I’ve filled eleven journals over four years. I’m extremely self-critical. I just finished a short story – I’m proud of it.

Decision making? I’m indecisive: big decisions tend to stress me out.

Menses? They are regular, started in ninth grade.

Problems? Had horrible PMS for a while last year; my period would start and I’d be fine.

Depressed? I’m hopeless, sensitive, angry and easily upset about everything. When I felt completely hopeless, but as soon as my period came, I felt better. It was dramatic.

Dreams? I used to have lucid dreams. It was amazing, I could do whatever I wanted. If trying to run away from monsters, I’d disappear and then wake up. I want to be able to control things more.

When home by yourself at night? I used to think about someone lying in wait in the house. Food? I like meat in general. I’m not a picky eater, I will try anything. No favorite. Flavors you like? Spicy – spicyly spicy things. Sweet stuff doesn’t appeal to me at all.

Feel appreciated? I feel pretty appreciated by those I’m close to, those who matter. Abandonment issues? Yeah. With that guy (who left in ninth grade) I felt extremely abandoned, because he left and didn’t seem to care. It took two years to get over. Fear of dark? It is ominous. When I’m really tense, the fear manifests as a guy in the room.

Negative experience? Sometimes when scared of the dark, I listen to music, and imagine the singer protecting me.

Fears/Anxieties/Phobias? I’ve always been scared of deep water, of not being able to get away, of something swimming underneath me. I’m afraid of the dark, of public speaking.

Deep water? I hate the feeling of floating, of not seeing what’s under water, being unable to get away fast, feeling helpless. I have lots of dreams of things swimming underneath me and I can’t get away; or dreams of trying to run, but not fast enough; or trying to punch or kick but not fast enough, and people laughing at me because I can’t hit hard enough.


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Negative experience? Sometimes when scared of the dark, I listen to music, and imagine the singer protecting me.

Critical? I don’t judge people very
harshly. I’ll bristle in someone’s defense. I’m pretty much nice to everyone.

Someone complements you? I es-

spond positively. It’s rare, so I remember it, it means a lot to me.

Mother’s input: Loss of appetite, especially in the morning. Likes variety, quickly tires of foods. Doesn’t sleep well or enough. Not able to sleep until 2 or 3 a.m. Compulsively chews on fingers. Exceedingly low self-esteem and self-con-

fidence. Hopeless outlook on life, doesn’t have motivation in school, because she doesn’t think she’ll be around for long. Urge for cutting, a fight all the time not to do it, when cutting or punching herself. An ongoing struggle day in and day out. Broadly applied social anxiety, doesn’t want to do anything that in-

volves others. Gets tense and adament about not wanting to be around people. Fears/ doubts her ability, doesn’t want to learn to drive due to a fear of looking stupid. Sensitive about people thinking she’s weird. Is sometimes tortured by imaginat-

ing apart in adolescence. Seventh grade, was a happy kid. Is bright, gorgeous, but doesn’t know it. Walks in a smolder-

ing rain. An amazing writer. A lot of her poetry is dark, about breaking up and cutting and knives. Writes poetry all the time, very gifted artist. Her writing is puzzling. Just finished a disturbing story – two companions in a sculpture gallery smash it up, destroy a sanctuary. A staunch atheist, she's sweet, she's hurt and angry. A dis-

connect if anyone thinks of her positively – mismatches situations. Never been afraid of bugs, usually fascinated if there’s a snake in the yard; she’ll want to catch it.

Assessment: Patient given various potencies of Palladium for three months, which helped for a time. Her depressive mood and snake phobia improved, but not the self harm.

August 2004 (Patient): The only change is really vivid dreams, really violent nightmares. I had a nightmare four nights in a row. They are creepy, scary, violent or despairing, and lots of ghastly, graphic images of people I care about. My boyfriend was in my backyard, with his hands almost cut off and his legs cut off – I knew it was a suicide. Another was a friend beheaded by a snake. I was left with no feeling, but made really deep [cuts]. It’s just a stress or anger release. I punch myself, but always feel like I’m not doing a good enough job. I gave myself a horrible black eye.

Cut yourself? I cut my right thigh mostly, or left wrist, but only when I want to please people. When angry, I punch myself. I go into the bathroom and hit my head really hard. I think bruises and cuts are really pretty. I admire the cuts or bruises I make, I really like how it looks. I think scars are beautiful, memories, like a scrapbook.

Assessment: It became clear that Palladium was off. So I began to consider it. In particular, Elaps (bashful, shy, isolated) was a good match. The proving for this medicine was sharp and cutting in April 2005 she came to an appointment with a black eye she’d given herself and she had been cutting on her left wrist. I questioned Elaps at this point, as the deepest issue – the self harm – was not improving significantly. So I prescribed a single dose of Agkistrodon piscivorus (Agki-p) 1M. Agki-p is the venom of the cottonmouth snake. The proving for Agki-p notes incredibly violent and morbidly, so I thought it might be a better match.

May 2005 Patient happy, able to stop urge to cut or punch herself, which she says, is a “miracle.” She is going to bed earlier, has more energy, has stopped wearing only black clothing.

Assessment: Agki-p 30c once per week (a few pellets in 1oz dropper bottle, four drops per dose).

July 2005 Patient reports minor mood impulses, no longer feels shy, estimates being 100% more confident.

Assessment: Continue Agki-p 30c once per week.

September 2005 Patient adjusted to college quickly, with surpr-

isng ease. She was confronted by another student and put down in a harsh way. After this, she punched herself. Describes moods as stable and happy, feels more “resilient.” Appetite is stronger than ever remembers. Waking is “really easy.” Recognizes self-harm behavior as addiction.

Assessment: Patient still doing very well. One episode of self harm, from ex-

tenuating circumstances.

Summary

The patient has done well to date (early 2008). She has used the Agki-p for colds, sore throats and stressful situations, and it always works. In a May 2006 meeting, she couldn’t remember the last time she hit her-

self. She came back into treatment recently for irregular menses and PMS. A single dose of 1M resolved both. Her mother is also very pleased with her progress. 

Important Themes for Agki-p

We can tentatively hypothesize a few themes to help differentiate this medicine from other snakes:

Morbidity Self destructiveness, violent gory dreams

Dark side All snakes have a dark side, and this snake appears to indulge in it

Fears of Water in common with Hydro-c

Weakness Over sensitive to comments, dreams of weakness

Colors lighter in black, intense like flame red color

Low self confidence Similar to Elaps and Naja

Staying up late (An aside: The cornsmouth is most active at night)

Isolation Patient isolates herself, and is sensitive to being abandoned

Empathy Takes a filter for others’ feelings

Low appetite

Articulate, intelligent, talented writer, artist

The general themes of reptiles, according to Massimo Mangual: Seductiveness Persuasion E.g., jealousy or paranoia about betrayal

Duality A fight or struggle with the self or two parts

Constriction (Not so explicit in this case)

Congestion/ Hemorrage

Thermal Regulation Often evident with cold extremities

Perseverance Fear of snakes, delusion of someone behind or someone breaking in, etc.

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Tim Shannon, ND

is in private practice in Portland. He specializes in the treat-

ment of depression, anxiety disorders, eating disorders, mood disorders, PTSD, bipolar disorder and schizophrenia, as well as others. Dr. Shannon lectures at NDNR as well as the local com-

munity on a variety of mental health complaints.

Vis Medicatrix Naturae
**A Case of Oppositional Defiance Disorder**

**TIM SHANNON, MD**

**March 2007**

Patient is a seven-year-old boy ... pleasant child, affectionate, charming, wearing a Spiderman shirt. Patient is quiet but reserved.

**(Physician) Know why you’re here? No.**

**Things scared of?** Swimming lessons. I don’t like holding my breath, don’t like putting my head under water for a long time.

**Something else that scares you?** My brother. He rubs my hair, picks me up, didn’t listen. Then this monster jumped my friends said we have to be still, but I

**Animals? I like alligators, dinosaurs, eagles.** Favorite one? Probably alligators. I like how they bite people’s feet off, how they are in water and out of water at the same time, like turtles.

**Sleep okay?** I go to sleep at 8:30 p.m., I fall asleep around 11 p.m. I just lie in my bed, wait to go to sleep, think about different stuff.

**Dream? I remember like 20. When I was six [years old], I dreamt I was at an amusement park, each kid was taking what they wanted. Then we were in the line to go home. We were on this bridge, one of my friends said we have to be still, but I didn’t listen. Then this monster jumped out of the water and bit my head off, but I could still see. I was about to fall into the creek, then I woke up.

**You and your brother fight sometimes? Yeah.**

**Are you cautious or more of a risky type?** I like to just jump out there even if I don’t know if it is safe.

**Lots of friends?** Yeah.

**Do you prefer a certain temperature?** I like to be colder rather than warmer.

**Music?** It is my least favorite thing in school.

**(Patient’s mother): He is a bright fellow. He is here because he’s having a really hard time with his temper and is fairly rigid. He gets fixated on clothes, like a favorite sweatshirt, and will wear it for four or five weeks.

**He was in the principal’s office for punching another kid in the eye and for punching a girl in the chest. He doesn’t follow limits very well, he’s reluctant to do what he’s told. He’s very short tempered. He is very organized, makes his bed, gets upset if someone opens a closet door without closing it, if he doesn’t have control over things. He has a sacred space, it is very important for him. The violence, short temper and rigidity are issues. It’s been hyped up the last few weeks. He’s been stepped on by his brother by accident, and he was very dramatic about it. Early on in his life, he was a head banger. He is not commonly talkative. Does really well one on one, and has a hard time with groups.

**More examples of anger, violence and destructiveness? In the morning, we ask him to do simple things (like get up, get dressed, come upstairs), and he’ll yell “No!” or “I’m not ready!” Or he’ll ignore us, and after a third or fourth request, he’ll start yelling. When angry he can call us names. He says things to adults that are very strongly worded, like ‘shut up,’ or ‘you can’t make me.’ He even spit in my face one. He has a very strong sense of what is fair. If his brother has more ice cream then he has, he’ll throw an hour-long tantrum until he gets his way.

**He is quick to hit; he’s bitten children, scratched and kicked. If there is some chaos, or people ganging up on him, he doesn’t cope very well. He hit his best friend, a girl that he adores, pretty hard because he was jealous of the other kids playing with her. She was hurt, crying and upset. For a long time he couldn’t show remorse, empathy or concern, he couldn’t make eye contact with her, or apologize.

**Sympathy/Empathy? Not so empathetic. I experience him as a deeply passionate person, and caring, but not so expressive. If he’s responsible, if he’s injured someone, he is unable to make that shift. If his brother or an animal is injured, he’s there to help.

**Clothing? He doesn’t like wearing tight clothes, gets very attached to clothing. Jealousy? It translates into what he considers to be fair. If you do something for the other child, he assumes it will be done for him, too. When he was really little, he didn’t like a lot of touch.

**Is he an audacious child (looking to confirm R)?? Definitely. He’s working on his image to be a prankster, to mimic his older brother. He wants to one-up his older brother.

**Competitive? Definitely. He loves charts and wants records, stars on how he’s done. Ambitious? Yes.**

**Headaches? No.**

**Appetite? Fine, but limited to pizza and pasta.**

**Scared of?** He’s being taken swimming lessons for several months; he’s afraid of drowning, he brings it up quite often.

**Senses? He can be oversensitive with all of them. He has a particularly uncanny
acuity of hearing. He can detect tiny sounds that no one else hears.

**Baseline:**
1) Violence/hitting: once per week
2) Obstinate: multiple times per day
3) Irritable/sullen with changes
4) Insistence to wear same clothing for weeks
5) Fear of drowning and swimming

**Assessment & Comments**
During the intake, I wondered if this could be a case of Alligator mississippiensis (All-i-m in Figure 1 on Page 12). The remedy had recently been proven by Dr. Todd Rowe. Over the years, I’ve noticed that some cases that require an animal remedy will either hate, fear or admire the animal they require. Of course, there needs to be more than a like or dislike of an animal to choose a remedy.

In this case, I saw there were some themes common to reptiles that I have seen before; such as: jealousy and competitiveness, audacity (audacity and disrespect for authority is more true for Lachesis, Bothrops and T-rex), averse to tight clothes, for authority is more true for Lachesis, and for clothing, and no significant negative behavioral encounters with the teacher or kids at school. Overall there is a sense of him being more cooperative, but there are other power struggles. He used some strong

Another theme common to reptiles is an identification with the “dark” side. In this case, the patient’s interest in alligators was curious. He said he liked that they can bite people’s feet off. Also, the dream of a monster from the water biting off his head... He seemed quite pleased with himself.

**April 2007**
After the dose? (Mother): It immediately had an effect on the things we were looking at. He wasn’t hitting or using curse words as much. He even had more flexibility with clothing, and no significant negative behavioral encounters with the teacher or kids at school.

Overall there is a sense of him being more cooperative, but there are other power struggles. He used some strong language, especially after a weekend when he was with a lot of other children.

**Compared to before the Rx?** He was clearly better for a time after the dose, but he has regressed some. When he’s angry it is striking, almost frightening. His backtalk has an intense feeling behind it. It had abated after the Rx, so when it resur- faced it was noteworthy.

**Baseline:**
1) Violence/hitting: About half what it was.
2) Obstinate: Much better, once a day or every other day.
3) Irritable/sullen with changes: half as frequent.
4) Insistence to wear same clothing for weeks: He has some favorite clothes and gets really upset if they are not available.
5) Fear of drowning and swimming? (Patient): I’m not as scared, I just don’t like doing it.

**Assessment and Plan:** A good but waning response. Repeat dry dose, 30C, split – one dose in a.m., one dose p.m.

**June 2007**
Feel different? (Patient): I’ve been acting different. In school I’ve not been punching as much. It is really good at home, I’ve not had one single fight with my brother.

Sleep? Good. I used to go to sleep at 11 p.m., now going to sleep at 9 p.m.

**Anything else different?** No. How is he doing in general? (Mother): Markedly improved, just the last week slipped a bit. There is a sense of maturity, being clear about his own abilities. The issues about him being uncooperative, inflexible, short tempered – all those areas have improved. They still occur, but he is definitely more amenable, more spontaneous at helping at home. I think it has been enormously different.

Isolated? He noticed with friends and groups, he was always on the outside, had a hard time connecting with a dialog or interacting – more doing parallel play. Now he’s able to take turns, tell stories and lis- ten; it’s more of a two-way street. It seems to have markedly improved and correlates with just after the last doses.

**Baseline:**
1) Violence/hitting: Two or three incidents since last time. Something different about those episodes? It seems like they are a reaction to provocation, rather than him provoking.
2) Obstinate: Still some of that, meh-thiness sometimes. That might happen three or four times a week now; it used to be more like several times per day.
3) Insistence to wear same clothing: Question.
4) Fear of drowning and swimming? (Patient): He has some favorite clothes and gets really upset if they are not available.
5) Fear of drowning and swimming? (Patient): I’m not as scared, I just don’t like doing it.

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in a split dose – one dose in the a.m. and one in the p.m. of the same day.

**Fall 2007 Case Note**

There were multiple missed communications between the parents and me. During this time, the patient began to act out with violence, rudeness and oppositional behavior. It was hard to determine the cause, but it might have come from further contact with the boy in the neighborhood who was acting out sexually with the patient. Many attempts to coordinate a different type of dosing failed. Finally, I sent the parents a single dose of 200C in the beginning of October. The parents phoned me one month later that he was definitely improving again, though he seemed a bit apathetic. His mother was concerned about him due to his apathy. Just before Christmas he was beginning to show more rudeness and backtalk – though very little physical violence. I then gave a single dose of Alligator mississippiensis 1M.

**February 2008**

(Mother): He has trouble falling asleep, goes to bed at 8 p.m., still awake until 10 or 10:30 p.m.

Had this difficulty with falling asleep since third grade. Otherwise, he’s doing well, more flexible. He’s been cooperative, more focused.

The 1M helped? Yes, it made a huge impact. It was two weeks after. It was given on December 16, and right after Christmas he began doing really well. With the short temporized obstinacy he’s much better. At school he’s not great, though I think some of it has to do with school.

He’s much more flexible and open. He’s also more affectionate. The last few months there has been family stress. And he’s been really empathetic. He’s been very huggable, a wonderful thing for him.

**The last 1M didn’t help with the sleep?** No, it is several nights a week he’s struggling.

How often? Three or four nights a week. If he goes to sleep on his own, he tosses and turns. Can’t go to sleep without his brother in the bed.

**Some change?** There was the sexual stuff in summer with the neighbor, that has had an impact.

**Anger?** He can still be belligerent, but now he’s reachable. There is also so much less of the angry reactiveness.

**Assessment and Plan:** Sounds like a good response. They may need to use the Rx’s for sleep difficulty, but may also be able to use melatonin. No doses for now, wait and watch.

**May 2008**

Wearing same clothes? (Patient): I like to wear the same clothes about three times a week. (Mother): He has his favorites, if asked he’ll change his clothes now. He will even wear dress-up clothes, that is big for him.

Mother (after patient has left room): The last dose worked great. He’s become a bit short-tempered again, but not anywhere to where he was in the beginning. There were a few comments from his teacher, that he was not as well focused. Overall, he’s enormously improved, much more empathetic, spontaneous ... Partner and I have had some rough spots lately. She’s been more emotional, he’s been spontaneously going to hug her and try to take care of her. This empathy is really new for him – only after treatment began. He’s also asserting himself more with his brother, in a mature way.

They had an awesome interchange about one week ago. They were arguing, and he showed a wonderful ability to go from reactivity to being reasonable. Both of them have really changed on their respective remedies. But overall, he is showing less and less of the angry reactiveness. Overall he has his two feet on the ground more and more now. There is enormous change in him overall. He’s using his words much more, instead of violence.

**Assessment:** It sounds overall like a good response. Both parents are very happy with the results. All the baseline symptoms are either a great deal better or resolved. However, his sleep issues could use a bit more support, so I gave another 1M single dry dose. Given the overall good response, I told the mother that we are done with formal appointments.

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**“I never realized how much a single specimen collection could mean to my patients.”**

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**Vis Medicatrix Naturae**
Environmental sensitivities to rest and respond to environmental system, so the goal is to bring down the over-defensiveness of the entire immune system. I have found they can tolerate smells, plastics, rubber, etc. The idea is that I can feel antsy, anxious and nervous around some plastics and latex. I started getting a rash under the skin – it starts red and itchy and then turns hemorrhagic. At the dentist, when using rubber dam, my lips swell. When I was three, I realized that I was going to have a seizure. My brain goes on fog and I can't process thoughts. I feel faint as if I was going to pass out. It is a very bizarre feeling. It also happens in other grocery stores.

(Clinic) S. Fogginess remind you of something? No. I have seriously looked into this and I can't figure out why the world has become a challenging place to me. I think I am wired for anxiety and depression. My grandmother at 90 had psychotic depression when my mother moved 40 miles away. Can you navigate the world with these reactions? I can't stay in my daughter’s home because of laundry soaps. Anxiety around this phenomenon? I feel weary dealing with it and I feel isolated. I was a very social person and my sociability is impacted by this. That is isolating. I feel weakened by it. I’ve looked at it from a lot of different levels – I’ve meditated, had Reiki, had homeopathic care, and gone... it’s weird.

A family member molested me when I was young – a huge breach of trust. I feel I have faced what the issues were. I am feeling comfortable in myself as I go.

Now we are going to go to the next layer, whatever this is.

Fears? Dogs when young, being alone. I was always very small – I had dogs attack me, roosters attacked me and horses bit me. When I was three, I realized that I was going to have to take care of myself. I felt very low in the pecking order. I had a very challenging childhood, and realized that I needed to be in control and watch out for myself.

I didn’t feel that I bonded with my mother because of her postpartum depression. When hurt, my mother didn’t respond. I had a sense that people weren’t watching out for me.

Today many patients seek help for environmental sensitivities. This is true for adult patients as well as for children. In addition, many consider that toxicity is partly responsible for the increase in childhood developmental and cognitive disorders. This is not just about mercury and autism. It also appears that vaccines may be contributing to the whole range of behavioral, cognitive and social problems we are seeing in our children.

As a consequence, every manner of detoxification is being brought to the forefront – protocols of the past, as well as newly created cleansing strategies. Like any therapy, some patients benefit greatly, some less so, some derive no benefit, and some patients are simply too sensitive.

Homeopathy offers an alternative for patients with environmental sensitivities. The intention is to reduce patients’ hypersensitivity. Over time many patients find they can tolerate smells, plastics, fluorescent lights, etc. The idea is that I can feel antsy, anxious and nervous around some plastics and latex. I started getting a rash under the skin – it starts red and Icy and then turns hemorrhagic. At the dental, when using rubber dam, my lips swell. We moved to a house three years ago and made some renovations. Within 24 hours, I began to experience neurological symptoms: upper respiratory congestion, nervous feeling inside, shakiness. Now, I can’t go into the local health food stores because they are not well ventilated.

Plastics cause the worst reaction. Plastics make me feel like I am going to have a seizure. My brain goes on fog and I can’t
me – was emotionally neglected. My sense was that you had better keep your eyes open and protect yourself. I felt vulnerable.

Felt unsafe? My dad was an alcoholic and my mom was a stay-at-home mom and probably angry at dad. I remember waking and hearing my mother yelling at my father when he arrived home drunk. Food was on the table, but no love. I did not know my father even loved me.

Responsibility? Very responsible, I do the right thing. I broke many rules in college, but as an adult, it’s important to do it right.

Responsibility as child? I was a rule-breaker, the black sheep. I told them what was going on, demanded, objected, asked and pointed my finger.

I was afraid to go to sleep as a child. I had the same dream until I had my tonsils out: an alligator getting me. A lot of green had the same dream until I had my tonsils out: an alligator getting me. A lot of green

Assessment: After some study, I thought this case could require a remedy from the Asteraceae family. I attended a seminar with Massimo Mangialavori several years ago. He mentioned that certain remedies in this family, such as Arnica and Helian-
thus, share similar aspects. Massimo only teaches from first-hand knowledge, and from these stories of relative success, one has had deep healing for a minimum of two years using one precise remedy. His knowledge of Astereaceae remedies is extensive. In respect to this case, there were several themes that confirmed the family according to Massimo:

- Integrity / Wholeness
- Dignity
- Vulnerability / Armored
- Hypochondrias / Invulnerable

In other cases I’ve seen that required remedies from this family, they often show up as patients who decompensate later in life. They are often relatively unproductive, sophisticated and physically healthy until mid-life or older. Many are runners or athletes, and they often eat very conscientiously (integrity). Once they decompensate and receive their “wound,” they often become hypochondriacs (overly focused on health / disease / toxicity).

In addition, they are often patients who are able to identify with the body as male and more “male” in their identification. They tend to spend much of their life identiﬁng with the concept of being invulnerable, nothing hurts, they are strong and robust – think of Arnica “sends the doctor away.” But this is partly an armor that helps them deny the concept of being vulnerable – their greatest fear. Once that vulnerability can no longer be denied, they swing the other way – fear about anxiety about their health.

What struck me about this case was the emphasis on the fear of being murdered, of someone entering her house, almost a fear of persecution. Also there was the fear of someone entering her house, almost a fear of being attacked. That is when the skin still react to exposures, she found the reaction now, able to tolerate that without feeling the panicy feelings. The emotional fight-or-flight has greatly diminished.

4. Reaction to laundry detergent, perfumes, chemical smells. That has reduced as well. I took my son to the airport, his clothes had been heavily perfumed. I was able to deal with that without horrific feelings. It is now at levels that I can live with, not the threat it was before.

5. Anxiety flare-up in new places, couple times a week: It has reduced. I’m not always anxious if I have to go out and be exposed. Now I feel I can be exposed and still deal with it if it happens; no dread about going out, and if exposed reaction is much milder.

6. Depression about condition: That is absolutely better. That’s a different feeling. Not as limiting in my mind. I don’t feel as apologetic about it, or that it looms larger than I do.

Assessment: I told her it looks good; need more time to confirm. Watch and wait; may need to re-dose on low potency.

Summary: Sept 2007 – March 2008:
The patient had a follow-up in May of 2007. The definitive positive response to the tincture lasted about two weeks, so I had her take a drop of the tincture diluted in water once per week. She remains in treatment, but has commented that she no longer has allergic reactions to cats or dogs, little to no reaction around plastics; her vertigo has diminished markedly; and all the other baseline symptoms have maintained good improvement. At the last follow-up, she stated the changes overall since the beginning of treatment have been incredible. We are still working together to reduce sensitiv- ity further, but for the most part, after one year of treatment Cindy has had marked improvements in all baseline symptoms, with many being entirely resolved.}

**biochemical**

**September 10, 2007**

**What has changed?** [The remedy] has helped. Rashies on my skin are almost non-existent – remarkable. Anxiety has been reduced. I had quite a reaction the first week after the dose; my allergies really kicked up. In fact, the whole picture, felt like a healing crisis, really blossomed. Since that time, things have improved.

**More?** The dizziness is about the same as before. The aggravation started about 24 hours after the dose. Then after 7 to 10 days it subsided. That is when the skin rashes resolved; I felt an improved sense of well-being; energy was improved. Positive feeling in general.

**Well-being?** I felt very depressed before, powerless to these external things to my environment that were threatening to my physical being. That sense of threat went away. The fear of being a burden to people because I have this condition eased.

**How long with these issues?** Cats and dogs – a lifetime. The anxiety, not until the last three or four years. Perfumes for years and years.

**Had other treatments?** Some, but not for the environmental issues. I have been seeking treatment for the anxiety, and the enormity of it has been the last two years.

**This feels significant?** It has addressed what feels to be root issues, dialing down the anxiety, reactivity, etc. The vertigo is anatomical. It is from riding a bike, looking down and some neck and upper back issues. I feel that is more anatomical – my muscle issues have improved as well. They are not as disabling. I used to get more muscle spasms when doing exercise.

**Baseline**

1. Overreaction to being around plastics. That has gotten better. Within 24 hours after the aggravation resolved, I felt a clear improvement.
2. Reaction to dogs and cats. Still there, but does seem to have changed. I have much less reaction now, able to tolerate that without feeling the panicy feelings. The emotional fight-or-flight has greatly diminished.
3. Reaction to laundry detergent, perfumes, chemical smells. That has reduced as well. I took my son to the airport, his clothes had been heavily perfumed. I was able to deal with that without horrific feelings. It is now at levels that I can live with, not the threat it was before.
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5. Background vertigo: Same.
6. Depression about condition: That is absolutely better. That’s a different feeling. Not as limiting in my mind. I don’t feel as apologetic about it, or that it looms larger than I do.

**Assessment:** I told her it looks good; need more time to confirm. Watch and wait; may need to re-dose on low potency.

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**Vis Medicatrix Naturae**

**Plan:**

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**Tim Shannon, ND** is in private practice in Portland. He specializes in the treat- ment of mental, emotional and behav- ioral health. He uses classical homeo- pathy to treat a wide range of mental health complaints: ADHD, OCD, PMS, autistic spectrum, depression, anxiety, eating disorders, PTSD, bi-polar, schizo- phrenia, etc. Dr. Shannon lectures at NCMI as well as to the local community on a variety of mental health complaints.

She had this to say: “I took a dose on Tuesday, May 27. That afternoon, I felt better without flare of any symptoms. Meeds were better. Prior to the dose I was feeling down, isolated and lonely. This all really dissipated with the dose. This is such a dramatic shift from when we began. Within 15 minutes of taking the dose I felt a sense of calm, almost sleepy, relaxation instead of that observing tension. The first night I was a bit observant until after midnight and then slept well the rest of the night. I also had a good night’s sleep last night. Yesterday there was a subtle sense of well-being.” The definitive positive response to the tincture lasted about one week, so I had her take a drop of the tincture diluted in water once per week. She remains in treatment, but has commented that she no longer has allergic reactions to cats or dogs, little to no reaction around plastics; her vertigo has diminished markedly; and all the other baseline symptoms have maintained good improvement. At the last follow-up, she stated the changes overall since the beginning of treatment have been incredible. We are still working together to reduce sensitiv- ity further, but for the most part, after one year of treatment Cindy has had marked improvements in all baseline symptoms, with many being entirely resolved.