Dosage of Isopathic and Immunobiological Remedies for Children and Juveniles

by Dr. Konrad Werthmann, M.D.
The prescription of medications, of whatever type, requires a number of preconditions. Above all, it is necessary to know how the medicine works and what its possible side effects are. The efficiency of the detoxification and excretion organs must also be taken into consideration. In addition it is necessary to take note of the reactivity of the organ being targeted by the medication and of the age of the patient.

The following notes refer only to infants, young children and older children in connection with isopathic and immunobiological SANUM therapeutics. The comments can however also be applied to a great extent to other homeopathic remedies. As regards the division into age groups, it is to be noted that the transition from one age group to the next is not clear-cut. As regards dosage, a frail and possibly underweight child who is suffering from acute problems or has a long history of illness should be treated as belonging to the next age group down, rather than to the one which corresponds with his actual age.

The use and dosage of isopathic and immunobiological SANUM remedies depend on the following factors:

### Age and actuality
For the most part the parents who come into a natural healing practice with their children, or with infants and young children, are those who have had negative experiences themselves of a quick course of antibiotics or of treatment to reduce fever, or who have seen these problems in their children. The age of newborn babies and infants presents many practitioners with difficulties regarding dosage. We must be quite clear about one important fact: children in these age groups present particularly in acute illnesses with a high temperature; on the other hand these patients have strong powers of selfhealing and require low dosages. In addition the healing process can appear surprisingly fast - to the practitioner as well as to the parents. However, reactions involving reaction of excretion where the child temporarily has a high temperature can also give the parents a great deal of worry. This should be observed particularly when immunobiological medications are being used. This can lead to doubts as to the correctness of use or the dosage prescribed.

Chronic illnesses occur very rarely in newborn babies and infants. It is more likely that one will come across the consequences of allergic reactions in the intestinal mucous membrane of the infant. Therefore it is necessary to carry out an anamnesis of his/her bowel movements for each child. Children of this age group who suffer from hereditary illness or injury caused by the trauma of birth are still cared for intensively by the appropriate specialist departments or outpatient clinics. Only after some time - when there is no visible let-up in the handling of these children or after treatment which has been given in vain - do the parents turn their backs on the clinics and bring the children to natural healing therapists. That unfortunately is the nature of things.

### Forms of administration
The same rules for use apply in chronic illnesses as in acute illnesses. In contrast to the practice of about thirty years ago, nowadays more and more therapists prescribe isopathic remedies orally and not by injection. There are several reasons for this change of attitude. Patients are brave enough to articulate their preference for the oral form, and the therapist yields to his own feelings in preferring to write out a prescription rather than order an injection. This should not be regarded as negative but rather as something very good. Besides, remedies taken orally or as embrocation have considerable advantages over injections. For the therapist, the effect on the body of remedies taken in the oral form can be controlled more easily. When subjective problems arise, the amount can be quickly reduced as desired, or even stopped suddenly or replaced by other remedies.
also has advantages for the patient. Neither are the pathways of excretion put under strain, nor can an initial aggravation occur which is too strong on account of the mobilisation of toxins being too high. Of course there are exceptions which require an injection.

Because the essential isopathic and immunobiological remedies can be used in oral form, this solves the problem of dosage for children and juveniles. As this discussion continues, we shall deal again and again with the possibility of administering remedies in drop form. This allows elegant solutions to be found for specific problems in different age groups and at different stages of development. When used as an embrocation, the corresponding remedy in drop form is also available to little children.

Girls of all ages, particularly those of school age, prefer drops or tablets to suppositories. It is of no importance whether this is a primeval fear of possibly damaging the nearby vagina or an articulation of the beginning of a feeling of shame. Girls in all age groups prefer oral medication.

You find similar problems among small children regarding capsules and tablets. On one occasion they may be too big, another time the child may not be able to swallow the remedy or they say it tastes and smells “funny”. If there are problems with drops, you simply add one or two drops of raspberry syrup, and then every child is happy to “consume” the remedy.

Drops should be prescribed more frequently as embrocation, as the skin is a specialised and immunologically active organ. The children themselves should be involved more in doing this. Guidance from the parents is very advisable: they should put the drops onto the palm of the child’s hand and then guide the child’s palm over the skin and at the same time rub in the drops. In this way the parents become aware of the effect of the remedy. Adults should never massage children with the palm of their hands.

The skin is the ideal organ for taking in medication and for excretion. Unfortunately it is used all too infrequently in therapy. As a paediatrician, the author is able to establish again and again that drops used as embrocation are ideal for children. Parents and children enjoy visiting their therapist. There are no complaints about the course of an illness being changed because of differences between remedies being administered orally or percutaneously.

Subcutaneous and intramuscular injections should instead be reserved more for therapists who deal with neural therapeutics. Injections are more likely to be the exception in the group which includes children from birth to puberty. Of course in chronic illnesses an isopathic or immunobiological remedy can also be added to the “regular weekly“ injection. It appears that in this age group an injection with more than three remedies is not ideal and also not desirable. The processes of the body’s metabolism are not known in enough detail to be able to deny with any certainty that there will be any interaction between them. The more medications that are used in one place, the higher is the probability of possible interaction. In the same way one should assess the possibility of sedimentation being caused by mixing remedies and the capacity for resorption.

Juveniles and older children do not like intradermal stimuli, as they hurt. The addition of 1% lignocaine or 1% procaine to the isopathic remedies for the purpose of neural therapeutic use on acupuncture points does not show any important negative effects on the results. In the author’s experience both groups of remedies are very compatible. Immunobiological therapies should only be given as an intramuscular injection.

**Frequency of administration**

The success of healing clearly depends upon the frequency of the medication. As a matter of principle, with all oral doses it is desirable to prescribe twice daily, but the time factor is important with regard to how the medications are to be taken. Basically they should be taken at least 1 - 2 hours before eating, and the meal which follows should contain little or no animal protein. If animal protein has to be served, then it should be poultry or fish. These two proteins are governed by other cyclogeny and are therefore less of a strain on the human body.

Isopathic remedies work according to the paradigms discovered and postulated by Professor Enderlein. The basic physiological and highly potent basic forms - chondrite and protite - are able to redistribute the pathological high valencies into a
number of lower valencies and so to become capable of excretion. In any case when there are abnormal pH conditions these can immediately develop in an upward direction again in pathological forms. As the basic forms can only work in an environment with a normal pH value and potential for redox reactions, the environment must be modified at the same time. This requires the patient to reduce his consumption of proteins significantly, for it also affects the dosage of microbiological remedies. In Professor Enderlein’s time many people died from lack of carbohydrates and protein, today they die of a surfeit of both these food groups. The overavailability of meat from warmblooded creatures and mammals causes considerable problems for human beings. This also applies to children, as the substitute for mother’s own milk is often cow’s milk. This is consumed in huge quantities. Despite sterilisation it still contains many minor pathogens which in the same way have to be broken down by the basic forms in the remedies. This situation can be managed by prescribing medication twice daily and in a somewhat higher dose.

Where mothers are breastfeeding their children without giving any other foods, the suggestion is frequently made that it would be possible to pass on these remedies through the mother’s milk. This can of course be done: however it is questionable whether an individual therapist could estimate the amount which the child receives. Furthermore it is necessary to prescribe an adult dose for the mother and at the same time stop her consuming protein from warmblooded creatures or mammals, otherwise the isopathic medications will be used up by the mother’s high valencies. Such considerations are of course also valid where our sick children and juveniles are concerned. Without taking additional dietary measures, these age groups also have to be given correspondingly higher doses of remedies. The normal dosages are described in further detail below.

Immunobiological therapeutics are in most cases prescribed as a single dose: capsules, suppositories and injections mostly once a week. For some time now immunobiological remedies are also available as 6X drops. This is very welcome, and it enables a paediatric practice to prescribe a daily dose of these remedies. This significantly reduces any aches and pains in the initial aggravation. If this form at first brings little success, one can go on to the next higher strength without further ado. In children one will always begin by using small doses (2 drops once daily) as embrocation.

Sequence and dosage of therapeutics

When one speaks of age groups, a child aged from birth to 2 years is described as an infant, from 2 to 6 years as small child (nursery age) and from 6 to about 12 or 14 as an older child. Juveniles are given adult dosages.

In each case one begins treatment with preparations from the penicillium cyclogeny - i.e. in bacterial illnesses with NOTAKEHL, in viral illnesses with QUENTAKEHL and in all cases of intestinal problems with FORTAKEHL. After 1 or 2 weeks one changes to the basic therapy, the combination of MUCOKEHL and NIGERSAN, whilst repeating the treatment with the penicillium cyclogeny at the end of every week.

This procedure has two advantages: the body always has time to keep up with the removal of all the debris from the old high valencies, and moreover the possible high valencies of the penicillium cyclogeny are brought back to lower valencies at weekly intervals and so cannot support chronic, inflammatory (rheumatic) processes. This applies to all areas, from the intestines to Waldeyer’s tonsillaring.

Isopathic remedies

In principle infants are prescribed 2 -3 drops orally or as an embrocation twice daily. Small children are prescribed 5 -7 drops orally twice
<table>
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<tr>
<th>Condition</th>
<th>Infants (up to 24 months)</th>
<th>Small children (to 5 - 6 years)</th>
<th>Older children (to 12 - 14 years)</th>
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<tr>
<td><strong>Diarrhoea</strong></td>
<td>FITAKEHL 5X drops orally / as embrocation, 2-3 drops twice daily for 3-5 days; then SANKOMBI 5X drops orally / as embrocation, 2-3 drops twice daily, Monday to Friday; FITAKEHL 5X drops on Saturday and Sunday. Supplement: OKOUBASAN 2X drops, 2 drops once daily. No products from cows' milk or hens' eggs for mother or child.</td>
<td>FITAKEHL 5X drops orally / as embrocation, 2-3 drops twice daily for 3-5 days; then SANKOMBI 5X drops orally / as embrocation, 2-3 drops twice daily, Monday to Friday; FITAKEHL 5X drops on Saturday and Sunday.</td>
<td>FITAKEHL 5X drops, 10 drops twice daily or 1 tablet twice daily for 3-5 days; then SANKOMBI 5X drops, 10 drops twice daily, Monday to Friday; FITAKEHL 5X drops or tablets on Saturday and Sunday. Supplement: OKOUBASAN 2X drops, 2-3 drops 3 times daily. No products from cows' milk or hens' eggs.</td>
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<td><strong>Angina Otitis</strong></td>
<td>NOTAKEHL 5X drops orally / as embrocation, 2-3 drops twice daily for 3-5 days; then SANKOMBI 5X drops orally / as embrocation, 2-3 drops twice daily, Monday to Friday; NOTAKEHL 5X drops on Saturday and Sunday.</td>
<td>NOTAKEHL 5X drops orally / as embrocation, 2-3 drops twice daily for 3-5 days; then SANKOMBI 5X drops orally / as embrocation, 2-3 drops twice daily, Monday to Friday; NOTAKEHL 5X drops on Saturday and Sunday. Supplement: UTILIN 6X drops rubbed in 2 drops once daily.</td>
<td>NOTAKEHL 5X drops orally / rubbed in 10 drops twice daily for 3-5 days; then SANKOMBI 5X drops orally 10 drops twice daily, Monday to Friday; NOTAKEHL 5X drops on Saturday and Sunday. Supplement: UTILIN 6X drops as embrocation 2 drops once daily.</td>
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<td><strong>Mycoses</strong></td>
<td>ALBICANSAN 5X drops or PEFAKEHL 5X drops orally 2-3 drops twice daily for 5-7 days; then SANKOMBI 5X drops orally 2-3 drops twice daily, Monday to Friday; ALBICANSAN / PEFAKEHL 5X drops on Saturday and Sunday. Duration: 2-3 weeks</td>
<td>ALBICANSAN 5X drops or PEFAKEHL 5X drops orally 5-7 drops twice daily for 5-7 days; then SANKOMBI 5X drops orally 5-7 drops twice daily, Monday to Friday; ALBICANSAN / PEFAKEHL 5X drops on Saturday and Sunday. Duration: 2-3 weeks.</td>
<td>ALBICANSAN 5X drops or PEFAKEHL 5X drops 10 drops twice daily orally for 5-7 days or EXMYKEHL 3X supp. 1 suppository once daily in the evening respectively EXMYKEHL 5X drops orally / as embrocation 10 drops twice daily; then SANKOMBI 5X drops 10 drops twice daily orally Monday to Friday; ALBICANSAN / PEFAKEHL / EXMYKEHL on Saturday and Sunday. Duration: 2-3 weeks.</td>
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<td><strong>Herpes Perlèche Aphthae</strong></td>
<td>GRIFOKEHL 5X drops 1 drop 2-4 times daily rubbed into the skin or (using a cotton bud) into the inside cheek, or orally, for 3-7 days; then SANKOMBI 5X drops 2-3 drops twice daily orally, Monday to Friday, GRIFOKEHL 5X drops on Saturday and Sunday.</td>
<td>GRIFOKEHL 5X drops 2-4 times daily rubbed into the skin or (using a cotton bud) into the inside cheek, or orally, for 3-7 days; then SANKOMBI 5X drops 2-3 drops twice daily orally, Monday to Friday, GRIFOKEHL 5X drops on Saturday and Sunday. Supplement: LATENSIN 6X drops 2-3 drops once daily orally / as embrocation.</td>
<td>GRIFOKEHL 5X drops 4 drops 2-4 times daily rubbed into the skin or (using a cotton bud) into the inside cheek, or orally, for 3-7 days; then SANKOMBI 5X drops 10 drops twice daily orally, Monday to Friday, GRIFOKEHL 5X drops on Saturday and Sunday. Supplement: LATENSIN 6X drops 3-6 drops once daily orally / as embrocation.</td>
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daily, or part as an embrocation and orally. Of course administration with chocolate or milky coffee is not advisable.

In older children it is also possible to prescribe the remedy as tablets as well as in drop form without further ado. This age group can also cope with a single dose of 1 tablet twice daily. A short term or once only double increase of the stated quantities does not normally lead to an overdose in the sense of a dangerous complication. Overdosing in this manner is not even theoretically possible. It is only necessary to safeguard sufficient opportunities for excretion, so for example the patient should drink more fluid.

The yeast remedies, ALBICANSAN 5X drops and PEFRAKEHL 5X drops, should basically be used in the same way as remedies from the penicillium cyclogeny (see suggestions for therapy in cases of mycoses).

**Immunobiological remedies**

For treating children and juveniles the 6X drops are the most suitable here, as they are a relatively low dose form of administration. As I commented previously, embrocation is the most suitable form to use at the start of treatment.

In infancy such therapeutic remedies are only prescribed in rare cases, as for example UTILIN 6X drops and RECARCIN 6X drops in cases of neurodermatitis. 1 drop is applied as embrocation once daily, using the two remedies on alternate days. (See also the article “Dermatosen - praxisnah betrachtet” [Dermatoses - seen from the point of view of the practice] in SANUM-Post no. 44, pp. 2-5.)

In young children a similarly cautious manner is also required. An embrocation of 1 - 3 drops once daily is favoured.

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In older children the active substances can also be prescribed without further ado as UTILIN 6X capsules or RECARCIN 6X capsules to be taken orally. However, the author also favours embrocations here, using the skin as the organ of uptake, because better control of the amount is guaranteed this way.

SANUKEHL products should only be used in older children.

In the table (see previous page) some examples of therapy are given.

Finally let it be noted that children respond very well to isopathic and immunobiological remedies. If at first too low a dose is prescribed this is not a tragedy, as the child’s body can also begin with small amounts. It is simply important that the system or sequence of medications is adhered to, otherwise there will be only partial success.

First published in the German language in the SANUM-POST magazine (53/2000)

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