



SANUM Therapy in daily practice:

a brief description of some cases and the treatment given

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My first article, published in SANUM Post no. 59, was followed by a brisk influx of inquiries by post and telephone. I was very pleased about the interest shown by numerous colleagues in Germany and from abroad, and I would like to take this opportunity to express my thanks once again.

The following reports and notes on ideas that I have learnt from my practice are a result of the positive response and the repeated requests to continue passing on tried and tested treatment concepts for the benefit of our patients.

Christine P., b.1965

Trichilemmal cyst on the top of the head

The patient complained of a „lump“ on her head, which increased in size with the phases of the moon and caused pressure and a feeling of tension. The cyst, which was about 1 cm in size, had been causing problems for about 12 years and was operated on in 1998. Following surgical removal, it had soon grown back again.

The young woman is disabled on her right side as a result of lack of oxygen during her birth; this presents itself as spasticity and a lack of fine motor functions over the whole right side of her body.

In her anamnesis, there had been psychotic episodes, which had been treated with traditional medicine. In addition, the patient complained of nervous weakness, stomach cramps during her periods and an increased need for sleep (9 – 10 hours each night).

Irisdiagnosis revealed a lymphatic constitution and a neurogenic predisposition with neural networks, also a tuberculin disposition and a blurred blood/lymph zone.

The patient was treated with reflexology, she applied a liver wrap at home several times a week, drank a bitter tea mixture, and avoided cow's milk and cow's milk products. The lymphatic system was stimulated and the pH value regulated using Lympholact as a drinking cure (1 dessertspoonful to one litre of water).

She was given SANKOMBI by mouth in the mornings, with 1-2 drops rubbed into the cyst twice a day, 2 tablets of CITROKEHL in the evening, and MUCEDOKEHL before going to sleep to alleviate the neurovegetative symptoms. After approx. 4 weeks, the prescription was changed to 1 capsule of MU-COKEHL in the morning and 1 capsule of NIGERSAN in the evening. After about 6 weeks, the patient noticed that the cyst had got smaller, she no longer had a feeling of tension and her whole state was considerably more relaxed.

Today (14 months later) the cyst is a small lump (about the size of a pinhead); it is no longer growing and causes no feeling of pressure or tension at all.

Sascha J., b.2000

Chronic bronchitis / lack of appetite / crying baby

The boy, almost 2 years of age, was brought to our practice on account of chronic bronchitis (as diagnosed by the paediatrician); he was stertorous, and his breathing sounded like

snoring. The child was lymphatic, he breathed with his mouth open and showed signs of scrofulosis.

Until recently, the boy's sleeping and eating patterns had been no cause of concern. Now, over a period of some time, the child had changed completely: he frequently screamed as if he were being tortured, cried a great deal and no longer wanted to be left alone. He had no appetite but drank 2-3 bottles of milk a day. Occasionally, he had diarrhoea or night sweats, particularly on the head.

His mother remembered that 5 months previously, he had been given several immunisations within a period of 8 weeks, whereby Sascha had reacted to the penta-vaccine with redness and a rash over the body, and he had also tolerated the hepatitis B vaccination badly.

Cow's milk and cow's milk products, pork, citrus fruits and juices were immediately strictly removed from his diet for 3 weeks. To replace these, he was offered rice milk, almond milk, biological coconut milk, sheep's and goat's milk and products made from these. He was given tea or mineral water to drink.

Diet should consist mainly of vegetables, potatoes and vegetable soups. Vegetable-based spreads were allowed as sandwich spreads, biscuits and cakes were replaced with rice wafers.

The child was prescribed FOR-TAKEHL for 3 days, then SANKOMBI for another 3 days, and



so on, in each case 2 drops in the morning. In addition, he was given 2 capsules of Thuja 6X in the evening, in order to excrete any possible after-effects of the immunisation.

After 3 weeks, the previously sceptical mother returned to the practice with the child. The child was accepting the substitutes for cow's milk, and for well over a week began to develop an appetite. After 1 week of treatment, Sascha reacted with an ear infection, which was easily treated and went again as quickly as it had come. The boy had made significant developmental progress and was again happy and balanced, as he had been before.

The sterterousness and „chronic bronchitis“ had completely disappeared. It had been possible to help the young patient quickly and successfully with just a few remedies.

The main work lay in explaining to the mother precisely why „good cow's milk“ is frequently classified as a primary antigen, and therefore should be avoided.

Katharina Sch., b.1955

Fibromyalgia syndrome or „pains everywhere“

The patient arrived with a whole package of symptoms: headaches rising from the neck (temporal region, with pain in the left eye), frequently with nausea but no vomiting, shoulder and neck pain, exhaustion, debility; even short walks demanded a lot of effort. Pain in the buttocks spreading into the legs, particularly in the upper thigh region, pain in the area of the ribs, a feeling of trembling inwardly, a mood of depression, PMS, blood circulation disorders and coldness particularly in

the feet, problems in falling to sleep, interrupted sleep, urinary urgency sometimes hourly, flatulence, diarrhoea caused by stress, dry eyes. The patient had been signed off work for 2 months.

Her GP had diagnosed „muscular weakness in the spinal region“ and „onset of the menopause“ and had prescribed exercise, physiotherapy and massages.

The aches and pains continued.

The anamnesis included two episodes of long-term tendosynovitis (in 1998, lasting 8 weeks, and 2001, lasting 6 months), a viral disease as an adult (chickenpox), previous fungal infections (in particular during her divorce) and 11 old amalgam fillings.

Diet: milk, Kaba (a milk powder drink), chocolate, frequently yogurt and cheese, also meat 2x and fish 2x a week. Fluid intake: just under 1 litre per day.

We began treatment with the SANUM excretion therapy (OKOUBASAN, USNEABASAN, MAPURIT, ZINKOKEHL, LUFFASAN; for a description see SANUM Post no. 55, page 14) over a period of 3 weeks and an appointment with a dentist who works holistically. I informed the dentist about the patient's aches and pains and asked him to look for disruptive fields. There was one molar with a dead root and one suppurative focus in the upper right jaw; both

were dealt with by the dentist.

The patient was put onto a low-protein diet as prescribed by Dr. Werthmann,

The patient was given reflexology (according to Marquardt), infra-red-A deep heat, a basic footbath every evening, NOTAKEHL, FORTAKHEL, SANUVIS and Lymphomyosot, later MUCOKEHL and NIGERSAN alternating with FORTAKEHL and NOTAKEHL, continuing with the SANUVIS.

After about 6 weeks, the aches and pains had reduced from 100% at the start of treatment to 20%. The general state of affairs had improved significantly, and the patient again had energy, was able to sleep well, had regained her enjoyment of life and was delighted that she could come off the analgesics, which she had been taking for years and would not have to suffer their later consequences.

P.S.:

A relatively large number of female patients come to my practice with fibromyalgia. I have been able to help many of them successfully: some are now free of pain. Here too, the main work lay in convincing the patient of the significance of today's protein-rich diet in the clinical picture of fibromyalgia.

People who want to be truly healthy, will only succeed if they accept an overall concept and change their diet pattern for the long term (in defiance of TV advertising). Despite enormous aches and pains, it seems impossible for most people to re-



duce their protein intake – but without a change of diet the treatment does not have the desired success. It is up to us to give our patients comprehensive advice, to offer them the best possible treatment, to look for remedies that suit each individual case, and to motivate them to work with us at improving their health.

Maria G., b.1949

Menopausal hot flushes / pain in the left neck and shoulder / pains in both joints at the base of the thumbs (arthrosis)

At the time of the initial consultation, the patient had had no periods for 4 months. Heavy sweats periodically day and night (waking every hour at night). Severe pains in the neck and shoulder and in both thumbs caused this secretary enormous problems.

When menstruation ceases, women lose an additional outlet and a further opportunity for detoxification. A lot of women suffer at this time from hot flushes, which are not only unpleasant but also have a weakening effect.

Here treatment begins with deacidification and fasting from protein:

ALKALAN (1 measuring spoon in a large glass of hot water, mornings and evenings), FORTAKEHL mornings and evenings, 1 capsule of MAPURIT with the midday meal, Phönix Phönohepan 3 x 30 drops after meals, later Bomaklim drops from Hevert.

Basic 30-minute footbaths each evening, liver wrap and a bitter tea mixture (wormwood, sage, birch leaves) reduced the patient's aches

and pains significantly; after a total of 5 weeks, the pain and hot flushes had nearly disappeared.

Ralph P., b.1964

Herpes zoster affecting the left half of the body / impending blindness

The patient came to my practice on the advice of his wife. He was suffering from the after-effects of zoster neuralgia (Trigeminus 1, involving the eyes: inflammation of the cornea and iris as well as scar damage to the cornea).

His doctor had prescribed Zovirax eye ointment, a corticoid (Isoptomax), analgesics (Tramagetic 100 mg effervescent tablets) and a psychotropic drug (Amineurin).

After 4 weeks of treatment by two eye specialists, the following symptoms remained: a stabbing pain in the left eye, vision as if through frosted glass, itching on the left side of the face and the diagnosis that he would most probably become blind in the left eye, as experience has shown that improvement was only possible in one out of ten cases.

Other problems included: headache for the past 20 years, mostly on the right side; migraine some 4 times a year; interrupted sleep; restlessness; exhaustion; tinnitus in both ears; a high level of stress through pressure of time and in his workplace (working on a computer).

The holistic treatment of the patient comprised 8 sessions of reflexology, a daily liver wrap and basic

footbaths and a change of diet avoiding animal proteins in favour of alkaline foods. The number of hours he worked was significantly reduced to half-days.

The main remedies were: GRI-FOKEHL drops (Holomed, Netherlands) 2x daily by mouth and 2x daily rubbed into the outer eyelid, alternating every 3 weeks with QUENTAKEHL taken orally mornings and evenings. In addition, SANUVIS, Hevert B-complex forte, Phönix Solidago and Phönix Phönohepan to support the liver and kidneys.

Just a month later, the sight had already improved to 85% (according to the eye specialists), the milky-white veil had disappeared, his sensitivity to light was now bearable, the stabbing pain in the eye had reduced significantly and had become bearable without analgesics (both eye specialists were surprised at the measurable improvement, but unfortunately neither of them was interested in what had caused it).

After a total of 5 weeks, I also added: *Cornea suis / Oculus tot. / Nervus opticus*, Traumeel tablets made by Heel and an eye nutrient made by the company Regena Ney.

The sight had meanwhile improved to 95%; the scarring on the cornea had improved significantly; by day, the sight was as it had been previously, by dusk somewhat worse. With this result, I was able to sign off the patient from treatment in my practice in August 2002 after just under 8 weeks of treatment.

In mid-October 2002, the patient



was again prescribed Dexagel eye-drops (corticosteroid) and Vidisic eye gel by the eye specialist to treat conjunctivitis. The herpes flared up again and his vision grew worse, so that the patient could only see blurred shapes. He could hardly see himself when standing 1 m away from a mirror. The eye clinic was consulted and the condition was treated with Zovirax, Dexagel and Acic tablets.

However, the situation was so dramatic that the patient once more turned to me; the natural healing treatment had to start again from the beginning: again alternating GRIFOKEHL and QUENTA-KEHL for 3 days each, liver and kidney remedies, Traumeel, B-complex *forte* from Hevert, Heel remedies as ampoules to drink,

Unizink 50, Eleu Kokk, shading for the eyes, relaxation exercises, reduction of stress, etc.

This time, it took almost 11 weeks until the improvement began to show.

Draughts and cold during the winter months made the situation a great deal worse. The eyes still had to be protected for a longer period, with the help of an understanding employer, the reduction in working hours continued. The patient has now been free of pain for 5 months and his sight is almost restored to what it was before his illness.

From this case alone, one can see that successful treatment depends on many factors: the cooperation of the patient, the daily tasks to be

carried out at home (liver wraps, footbaths, etc.), the change of lifestyle (reduction of stress, less pressure in the workplace) and the involvement of diet have the same value as selecting the proper biological remedies. Here, we were lucky that on two occasions in succession we were able to help the patient with holistic therapy, for which both of us – patient and therapist – are very thankful.

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