



Endogenous Depression Case Illustration of a Treatment using SANUM Remedies

by Wolfgang Podmirseg, Naturopath



Since the new anti-depressant drugs were introduced, sadly Orthodox Medicine often no longer makes a distinction between endogenous and exogenous depression. Heavy medicinal artillery is brought to bear, but frequently success proves elusive. Aggravation and chronicity may set in.

When evaluating depression, it is necessary to consider any organic disease, as well as metabolic processes. Environmental influences (such as geopathic stress, electromagnetic pollution, radiation from mobile phones, roving electric currents at home and in the workplace), not to mention galvanic currents in the oral region resulting from implanted metallic alloys (e.g. amalgam) must all be clarified.

There is a great dearth of causality. Psyche and soma make up an inseparable unity; emotional suffering can evoke physical complaints, and vice-versa: if organs are under long-lasting strain, this can result in emotional disorders. In such a case, endogenous depression may be the outcome. If no distinction is made between endogenous and exogenous depression, treating both in the same way, the treatment can result in utter failure. The intestinal flora can be harmed by long-term doses of partially toxic psychotropic drugs, which only serves to reinforce the depression. Thus a vicious circle develops, since in any case endogenous depression is usually caused by a pathogenic bacterial underlay.

In the best case scenario, the patient experiences an apparent emotional improvement which, unfortunately, often does not last for long.

Case example:

A 35-year-old woman, nursery-school teacher, married, two healthy children, marriage and finances intact, complaining of bouts of depression as follows: "I feel depressed and unhappy, I have nightmares and feel as though the world is coming to an end, although there's no reason I can think of. I really ought to be happy and contented, I don't lack anything. Most other people would envy me. I'm not plagued by cares, needs or anxieties, my situation couldn't be better. I just don't know what's bugging me. Nor do I know where it comes from; it's as if somebody had put a curse on me, like a dark shadow sitting over me. It possesses me. Again and again I fight it off, but it always comes back."

In this context the past history may possibly be of interest: the woman comes from a medical family (her father was a specialist in internal medicine, her mother a gynaecologist, other relatives were doctors). As a child, the patient was treated exclusively with allopathic drugs, and was also vaccinated. While she was still a child she had a tonsillectomy, and some time later her appendix was removed. Since that time she has had frequent infections during the winter which were treated with antibiotics. Even at the age of 14 she was put on the Pill.

Possibly also because of her parents' stressful jobs, for several years she lived on an unhealthy diet, with fast food, mainly pre-cooked dishes (microwaved), a lot of sweet things and a lot of products of animal origin. As she got older, she also smoked tobacco and drank alcohol. By the age of 20, the patient was already 20 Kg. (*over 3 st.*) overweight.

The patient got married at 23. Then came two problem-free pregnancies, and she gave birth to two healthy children.

At 24, she was having constantly recurring vaginal thrush, repeatedly suppressed with nystatin, cortisone suspensions and tablets (at least six times a year).

At 25, the bouts of depression began, and these were unsuccessfully treated for five years. This situation became unbearable, another approach had to be found, as the patient put it, for she did not want to lose her sanity. When she came to me, her first words were: "Please help me, I'm prepared to take on whatever you tell me to do; I'll even commit a crime if needs be, to get myself out of this dreadful situation! I don't want anything more to do with orthodox medicine; all it's done for me so far is to create suffering and problems."

The first step was to test her for fungal infection and to arrange a stool analysis - both of these showed the suspected endobiosis at an advanced developmental stage. The woman was asking for a biological tranquilizer; as a stop-gap measure she was given a fairly high dosage of St. John's Wort tablets since, once the colon had been cleansed, the depression would gradually disappear anyway. Thus the patient was required to follow an appropriate diet, as recommended by Dr. Werthmann.

Further treatment followed the plan below:

To re-tune the milieu, for about a fortnight:
- ALKALAN powder, one mea-



suring spoonful to be dissolved in hot water twice daily and sipped slowly.

- SANUVIS tablets, one tablet twice per morning, and CITRO-KEHL tablets, one twice per evening, to be dissolved under the tongue;

Plus:

- EXMYKEHL 3X suppositories, one each morning and one each evening, per rectum for two weeks;

Then switch to:

- FORTAKEHL 5X tablets, one twice a day from Monday to Friday
- On Saturday and Sunday, PEFRAKEHL 5X drops, 10 drops twice a day.

FORTAKEHL and PEFRAKEHL to be taken for a fortnight,

Then switch to:

- MUCOKEHL 5X tablets, one in the morning, and NIGERSAN 5X tablets, one in the evening, from Monday to Friday
- EXMYKEHL 3X suppositories, one in the morning and one in the evening, per rectum, on Saturdays and Sundays.

MUCOKEHL, NIGERSAN and EXMYKEHL to be taken according to this rhythm for six-eight weeks.

Then, following on, for immune system modulation:

- SANUKEHL Pseu 6X drops and SANUKEHL Coli 6X drops, in daily alternation, 5 drops to be rubbed into the hollow of the elbow twice daily.

- UTILIN "S" 6X drops, 5 drops to be rubbed in once a day for one week

- RECARCIN capsules, one per week.

UTILIN and RECARCIN on alternating weeks.

After as little as three weeks on the SANUM treatment there was a noticeable improvement in her emotional state. There was a tremendous "lightening up". The patient experienced this state: "as if the sun had risen from the darkness, giving brightness to everything; I feel as if it will never set." In spite of this rapid success, the treatment plan that had been drawn up was adhered to for about six months.

There followed stool analysis and pathological tests, and happily the results showed that no pathology had been found, the dysbiosis had been eliminated, the patient's state of health could not have been better.

"I feel born again, more full of vitality and energy. I've actually never felt as good as this", was how the patient described it. The diet suited her very well and she was keeping to it.

To stabilise this good state, there followed two additional months on MUCEDOKEHL and MUSCARSAN, the reason being that, during treatment, the patient had given up alcohol and nicotine, so that a few slight withdrawal symptoms were still present.

New treatment plan to last two months and round off the therapy:

- MUCEDOKEHL 3X suppositories, one daily per rectum, in the evening before retiring to bed.

- MUSCARSAN 6X ampoules, one intramuscular injection weekly.

- On days when no injection, MUSCARSAN 6X tablets, one twice a day.

By the time the treatment had concluded, the patient was enjoying an excellent state of health.

We should reflect carefully on this patient's history. It is one of the highest tasks of the healing professions to activate the person's self-healing powers by creating the right conditions for natural regulation. Again and again we need to be clear that suppressing symptoms forces the disease on to a different level, making treatment more difficult.

Thanks to Professor Enderlein's research, regulation and healing are possible, using the SANUM treatment. As Prof. Semmelweis has already recognised: "If Enderlein is right, then we can jettison all the medical literature that has already been written."

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