



From Practice - For Practice

CEE - Central European Encephalitis

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Central European Encephalitis [*also known as Spring-Summer Encephalitis, and in German as Early Summer Meningo-Encephalitis*] is a notifiable viral disease which is transmitted by the bite of the tick (*Ixodes ricinus*). As well as this, particularly in Eastern Europe, infection from drinking contaminated, untreated milk or products from it is also known. Following infection, the arboviruses spread by way of the blood and lymphatic systems.

Of those infected, only about 30% go on to develop any symptoms, following an incubation period of anything from three days to three weeks. The symptoms resemble those of flu, with headaches and pains in the limbs, plus fever lasting from four to seven days. In about 10% of cases, several days free of

symptoms are then followed by a second peak of fever with neurological symptoms. The parts most frequently affected are the brain and meninges, with paralysis and dulling of consciousness. However, there may also be involvement of the spinal cord (myelitic form) and nerve roots (radiculitic form).

Following this, those affected frequently suffer from difficulties in concentration and emotional stress. Once the disease has been overcome, there is lifelong immunity.

The diagnosis is made by demonstrating the presence of specific antibodies in the blood or cerebrospinal fluid. Allopathic treatment focuses on combatting the symptoms; a degree of success is achieved with antibiotics, inter alia. As well as this, orthodox medicine

recommends an active prophylactic vaccination; however, as is the case with other vaccines too, this may set off undesired side-effects in the immune system and the organism as a whole.

As CEE is a notifiable disease, natural therapies can only be used as a supplementary treatment.

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Isopathic Supplementary or Adjunctive Treatment

1. ALKALAN powder, 1 measuring-spoonful twice a day in warm water; CITROKEHL, 10 drops twice a day; Traumeel drops (Heel), 5 drops twice a day; all these for the duration of the treatment.
2. At the same time, start giving NOTAKEHL 5X drops, 10 in the mornings, and QUENTAKEHL 5X drops, 10 in the evenings, for a fortnight, then switch to
3. SANKOMBI 5X drops, 10 drops twice a day from Mon. to Fri.; on Sat. and Sun. NOTAKEHL 5X drops and QUENTAKEHL 5X drops. This pattern can be continued for several weeks or months, depending on the symptoms.
4. Beginning simultaneously with (3) above, RECARCIN 6X drops, 3-5 drops twice a day, massaged in or orally; additionally, depending on the symptoms, SANUKEHL Pseu 6X drops, SANUKEHL Brucel 6X drops or SANUKEHL Myc. 6X drops, 2-10 drops once a day, on alternating days in rotation, half the dose orally and the rest massaged in.