Colds and influenza infections are a local infection of the upper and lower air passages. In most cases these are virus infections, which occur more frequently in the cold season.

Everyone is familiar with the signs and symptoms: shivering, headaches, sore throat, pharyngitis, rhinitis, increased nasal mucus secretion and in some cases coughing.

In uncomplicated cases a flu infection lasts only a few days; if secondary infections arise however, then the illness may persist for weeks, as in the case of reduced immunity. (1)

Antiphlogistic and antipyretic medicines repress the symptoms and mean that the infection is “delayed”. If on the other hand biotherapy is applied, the body’s own defences are strengthened. The excretion phase is intensified in order to remove toxins and infection sources from the organism. Anyone unfamiliar with the effective principle of biological remedies could therefore consider this ineffective. (2) According to Reckeweg, however, the “intensification” of the cold means nothing other than a “regressive variation of the virus disease, common cold or influenza to the excretion phase, which means overcoming the virus infection”.

Gripp-Heel is mentioned in medical literature by Hochmann (3) as early as 1954. According to this, the total effect corresponds to an acceleration of mesenchymal immune reaction. John (4) characterizes the 5 components of this homeopathic combination preparation as follows:

Aconitum is the most important homeopathic fever drug, which is indicated for all beginning signs of inflammation which have not yet been localized.

Eupatorium perfoliatum is used for the feelings of weakness and rheumatic pains typical of influenza infections.

Bryonia is administered in cases of dryness and mucous membrane secretion.

Phosphorus is active on the pulmonary parenchyma.

Lachesis helps when the mouth and throat feel raw and in case of other throat afflictions.

The remarks on aconitum appear to me to be particularly important and characteristic for the effectiveness of the preparation Gripp-Heel. For Gripp-Heel to develop its full effectiveness, it must be taken as early as possible, at the very first symptoms of a flu infection. Endogenous immunity can no longer be adequately activated once the illness has advanced.

I should like to briefly document my own experience with Gripp-Heel with the 4 cases listed below:

**Patient 1:**
- **Dosage:** 5 x daily 1 Gripp-Heel tablet
- **Diagnosis/Symptoms:** Influenza, slight fever
- **Improvement:** after 3 days
- **Free of complaints:** after 7 days
- **Additional therapy (for cough):** Aspecton®

**Patient 2:**
- **Dosage:** 5 x daily 1 Gripp-Heel tablet
- **Diagnosis/Symptoms:** Influenza, slight fever
- **Improvement:** after 2 days
- **Free of complaints:** after 5 days
- **Additional therapy (for cough):** Aspecton®

**Patient 3:**
- **Dosage:** 5 x daily 1 Gripp-Heel tablet
- **Diagnosis/Symptoms:** Influenza, slight fever
- **Improvement:** after 1 day
- **Free of complaints:** after 3 days
- **Additional therapy (for cough):** Aspecton®

**Patient 4:**
- **Dosage:** 5 x daily 1 Gripp-Heel tablet
- **Diagnosis/Symptoms:** Influenza, slight fever
- **Improvement:** after 0 days
- **Free of complaints:** after 2 days
- **Additional therapy (for cough):** Aspecton®
Patient 2:
Dosage:
Diagnosis/Symptoms: influenza, fever
Imputation:
Free of complaints:
Additional therapy (for cough):
Aspecton®

Patient 3:
Dosage:
Diagnosis/Symptoms: influenza, slight fever
Imputation:
Free of complaints:
Additional therapy (for cough):
Remedecel®

Patient 4:
Dosage:
Diagnosis/Symptoms: influenza, fever
Imputation:
Free of complaints:
Additional therapy (for cough):
Aspecton®

Literature:
(3) Hochmann, E., Biotherapie der Grippe, Fortschritte der Medizin, 72, 4, 101 (1954)

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