

The Use of Homeopathic Preparations for Treating Dizziness

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I have been using homeopathic combination preparations from Heel for almost 20 years in the treatment of patients with vertigo. I use these products in addition to the conventional allopathic approaches to treatment. I have found that the patients using the homeopathic treatment modalities recover faster, feel better while they're improving, and also continue to be symptom-free longer than those patients treated only with allopathic approaches.

The patients that I see have been seen by many other physicians (average 6-8) prior to my seeing them. Most have been evaluated insufficiently because only diseases such as Ménière's disease, acoustic neurinoma, and BPPV have been considered. Most have been treated symptomatically with the usual suppressive medications and a low salt diet, or have had surgical intervention such as shunts or neurectomies. Therefore, for the most part, few of these patients have had any etiologic mechanism testing for biochemical, nutritional, immunologic, or hormonal abnormalities.

My routine for the evaluation and treatment of such patients is as follows:

- 1) Thorough history including all of the general body systems and very complete documentation of all medications taken and currently used.
- 2) A complete physical examination with a special focus on the neurootologic evaluation.
- 3) Complete objective testing of the auditory and vestibule systems to include:

Auditory Testing

- a) Pure Tone Air and Bone Conduction
- b) Speech Testing
- c) Tympanometry and Reflex Testing
- d) Auditory Brainstem Response (ABR)

Vestibular Testing

- e) Electronystagmography (ENG)
- f) Harmonic Acceleration Rotation Testing
- g) Dynamic Posturography
- h) M.R.I. and/or SPECT Scans
- i) Biochemical, Immunological, and Hormonal Evaluations

Following such an evaluation, the causative mechanisms are addressed with the least amount of allopathic medications possible. This approach has been supplemented with the following combination of homeopathic products (Vertigoheel®, Barijodeel®, BHI Calming, BHI Gingko, and BHI Enzyme). These are regularly administered three or four times daily.

In addition, at the beginning of the treatment protocol, Vertigoheel® Liquid is prescribed to be used for acute vertiginous episodes whenever necessary. When there is an acute episode, the recommendation is made to use the Vertigoheel® Liquid every 15 minutes until the symptoms subside. With less severe episodes, the recommendation is made to use the Vertigoheel® Liquid

every hour or two until symptoms subside.

The major advantage of the use of Vertigoheel® is that the vertiginous symptoms are suppressed, but the adaptation and compensation mechanisms that are necessary to get the patient well are not interfered with.

Using the treatment routine just described, most patients with dizziness or vertigo will recover from their symptoms and stabilize their neurootologic abnormalities. Our patients' success rate for both stabilization and recovery has been more than 80%. Patient compliance with such a treatment routine is, of course, most important. In order to ensure compliance, a patient must be presented with an understandable explanation of the disease process and must also be apprised of the need to follow the instructions carefully. We accomplish this by providing at least a one-hour explanation of treatment and, in addition, the patient leaves the office with complete written instructions for all the modalities recommended. We are also available to the patient for telephone questions whenever the patient feels this is necessary.

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