Antihomotoxic Treatment of Herpes Infections
Franz-Anselm von Ingelheim, M.D.

At an infection rate of up to 90%, Herpes simplex infections are among the most frequent infectious diseases. The life-long persistence of the germ and the frequency of recurrence, which may be high in some individuals, sometimes cause great problems for physicians and patients alike.

With a few exceptions, infections caused by herpes viruses are clinically harmless but of great interest from the therapeutic perspective.

It is essential to take into account the behavior of the virus and the course of the illness runs in the body and to emphasize two facts:

1. Appropriate treatment can have a significant impact on acute symptoms of primary or recurrent infection within just a few days.

2. Experience shows that reduction in the frequency of recurrences is a significant measure of the success of therapy. With follow-up treatment, patients who formerly had one or more recurrences annually will experience longer intervals between recurrences, and the symptoms will be significantly milder.

Reckeweg’s antihomotoxic therapy attempts to remove the viral genome from the host’s cell structure by enhancing the body’s elimination mechanisms.

Acute Infection

By using homeopathic antihomotoxic remedies as a specific irritation therapy in the acute phase, we attempt to step up the body’s lytic action through the use of an elimination preparation such as Lymphomyosot® (15 drops 3 times a day). In addition, Engystol® (1 tablet 3 times a day) is specifically indicated for activating the body’s nonspecific defenses in viral illnesses. Coenzyme Q10 ampules, either alone or in combination with 1 ampule Lymphomyosot® ampules, should be administered two or three times a week to free up blocked enzyme mechanisms. Detoxification remedies that may also be used three times a week include Hepar compositum® for the liver, Solidago compositum for the kidneys, and Nux vomica-Homaccord® for the gastrointestinal tract.

Basic therapy for acute herpes infections consists of Ranunculus-Homaccord® drops and Mezereum-Homaccord® drops. The ingredients of Ranunculus-Homaccord® make it especially suitable for treating herpes infections accompanied by intercostal neuralgia and pleuritic pain. The ingredient Ranunculus bulbosus is used for rheumatic symptoms, neuralgia, and skin eruptions (especially burning or itching rashes with blisters). The ingredient Asclepias tuberosa is especially effective against the scabbing pains of herpes infections. In acute infections, Traumeel® ointment and the liquid from Engystol® ampules may also be applied to the blisters several times a day.

A tip for practitioners: Euphorbium compositum® has potent antiviral effects, as laboratory tests have proved, and should therefore be used in all viral infections, especially herpes infections. Experience has shown, for example, that spraying herpes lesions with Euphorbium compositum® nasal spray is very helpful. This treatment is also effective for shingles (herpes zoster).

The preparations listed above are usually sufficient for treating acute cases.

Chronic Infection

In chronic or chronic-recurrent herpes infections, I recommend major elimination therapy such as the following intravenous treatment, which should be administered twice a week for a total of five to ten times:

- 250 ml balanced electrolyte solution
- 1 ampule Hepar compositum®
- 1 ampule Solidago compositum
- 1 ampule Lymphomyosot®
- 1 ampule Nux vomica-Homaccord®
- 1 ampule Engystol®
- 1 ampule Euphorbium compositum®

Catalysts and antioxidants (Vitamin B complex, Vitamin C, Vitamin E) should also be prescribed to support cellular functions, and the appropriate herpes nosode (simplex or zoster) should be administered (after testing) once a week for a period of five weeks in conjunction with the elimination therapy.

Preventing Recurrences

A multi-stage auto-sanguis therapy as developed by Reckeweg is implemented as a prophylaxis against recurrences:

Stage 1: Engystol® + Euphorbium compositum®
Stage 2: Lymphomyosot® + Calium-Heel
Stage 3: Mucosa compositum® + Curis compositum®, if needed
Stage 4: Herpes nosode (simplex or zoster)

In cases of severe inflammation, Traumeel® can also be added to the first stage.

This homeopathic own-blood therapy should be implemented twice a week for a total of 10 to 20 times. Antioxidants and enzyme preparations may be administered concurrently. Dental restoration should also be considered, especially in herpetic aphthous stomatitis.

Address of the author:
Franz-Anselm von Ingelheim, M.D.
Bischof-Blum-Platz 10
67654 Geisenheim
Germany