

COMPLEMENTARY TREATMENT WITH ANTIHOMOTOXIC REMEDIES FOR CHOLESTEROL MANAGEMENT



Cholesterol profiling is a popular procedure in mainstream medicine, but the conventional treatments often fall short of reality. Diet is not always the culprit. Many menopausal women have high cholesterol despite their diets. Changes in their hormonal profile is the obvious cause, while the middle-aged executive man has a high-stress job which contributes to his cholesterol profile. The causes of hypercholesterolemia are varied but conventional treatments are not. Diet is usually the first recommendation, and the most frustrating for the patient who has high cholesterol probably because he/she has lots of life stresses; asking such a patient to watch his/her food intake is a chore and success rates are extremely low even though, it remains important in the control of hypercholesterolemia. Allopathic drugs such as statins can work well, but they target just one mechanism associated with cholesterol: they act by inhibiting the enzyme HMG-coenzyme A reductase. We know now that many natural products like essential oils can mimic these same enzyme-blocking mechanisms.

Liver function, cortisol levels, and coping mechanisms are not enhanced or even addressed by most conventional treatments. This is where homotoxicology can be so useful. Antihomotoxic remedies for cholesterol are many and they mostly work by enhancing hepatic and biliary function thereby increasing the production of endogenous enzymes and thus mediating the biochemical pathways associated with cholesterol production. At the same time, antihomotoxic remedies clear toxins that, if allowed to accumulate, would impede the mechanism and function of the eliminating organs like the intestines.

GENERAL PROTOCOL FOR HYPERCHOLESTEROLEMIA

NUX VOMICA-HOMACCORD:

1 vial 3X/week for 3 weeks then 2X/week for 5 weeks

or drops: 20 drops t.i.d. for 3 weeks then 15 drops b.i.d. for 8 weeks

+





LYMPHOMYOSOT/LYPHOSOT:

1 vial 2X/week for 5 weeks

or drops: 20 drops b.i.d. for 6 weeks



The following is a chart with the best choices for cholesterol management. The indications and properties representing a particular remedy are based on the remedy's capacity to intervene in mechanisms associated with cholesterol.

ANTI-HOMOTOXIC REMEDY	ASSOCIATED SYMPTOMS	SUGGESTED PROTOCOL FOR CHOLESTEROL-RELATED CONDITIONS
 NUX VOMICA-HOMACCORD	<ul style="list-style-type: none"> hypercholesterolemia lipid nephrosis biliary stasis or obstruction (elevated alkaline phosphatase) cholesterolosis bulbi cholesteroluria hyperlipidemia 	VIALS: one 3X/week for 3 weeks. Repeat after a 7 day interval. DROPS: 15 drops t.i.d. for 5 weeks.
CARDUUS MARIANUS-INJEEL	<ul style="list-style-type: none"> toxic jaundice hypercholesterolemia cholangiolitis cholangiohepatitis environmental contaminant (including spores) and heavy metal toxicity 	VIALS: one 3X/week for 2 weeks, then 2X/week for 4 weeks. DROPS: 15 drops b.i.d. for 8 weeks. Taken with Nux vomica-Homaccord will optimize the protocol. Take Carduus marianus-Injeel on alternate days from Nux vomica-Homaccord.
 CHELIDONIUM-HOMACCORD	<ul style="list-style-type: none"> liver dysfunction hyperlipidemia cholangitis detoxifying flatulence gastric colic 	VIALS: one 2X/week for 5 weeks. May repeat 2-3X/year. DROPS: 15 drops t.i.d. for 3-5 weeks
LYCOPODIUM-INJEEL	<ul style="list-style-type: none"> affects biochemical nature of the liver and eliminating capacity of intestinal tract detoxifies polysaccharide contamination (bacterial toxins) 	 VIALS: one 2X/week for 4 weeks. DROPS: 15 drops b.i.d. for 3-5 weeks.
 PODOPHYLLUM COMPOSITUM	<ul style="list-style-type: none"> indirectly effective for cholesterol-related conditions or consequences mostly included when pancreatic conditions and/or diabetic states are present with high cholesterol 	VIALS: use one 2X/week for 2 weeks. (Always use in conjunction with other remedies for treating cholesterol.)

Other products that may be applicable as adjuvant therapy to cholesterol management include:

- Chol-Heel
- Hepeel
- Hepar Compositum

Combined or followed by other cholesterol-reducing therapies, these homotoxic protocols can help increase the potency of other management therapies you are prescribing or using in your practice, including allopathic treatments.

Any protocol created by using suggestions from the chart can be followed by a mild drainage protocol with Lymphomyosot/Lyphosot.

LYMPHOMYOSOT/LYPHOSOT:

1 vial 2-4 days consecutively then 1 vial 2X/week for 3 weeks

or

Drops: 15 t.i.d. for 3 weeks

or

Tablets: 1 t.i.d. for 4 weeks