

## FEATURE

# Some notes for

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## Prevention is better than cure

Holidays, quite naturally, are to be enjoyed. I know many of you don't go on holidays but prefer to attend conferences abroad – but the only difference is that one thing is tax-deductible, the other not (sleeping in the day is perhaps common to both). Essentially, there are many situations which can kill either. It may be that you have a new partner, and they've given you twin beds, or the view of the sea you were promised is one of laundry dangling in the rat-infested back yard of the hotel. Worst of all is to get ill, as many do – and prevention is better than cure! In this short article I shall endeavour to give you some tips not to be found in either the first or the second edition of my *World Travellers' Manual of Homeopathy*, plus an expansion of some important ideas that one or other already contains – hopefully, for both your benefit and that of your patients.

## The Ten Commandments

It is perhaps a little cruel to suggest that most vacation illnesses are preventable – but I do believe it to be so. The following 'Ten Commandments', were they closely adhered to, would achieve much for many. Neither in general nor in homeopathic practice are these commandments emphasised enough to the prospective traveller:

1. Thou shalt avoid drinking contaminated water, cleaning thy teeth in it, or eating raw foods which have probably been washed in it.
2. Thou shalt avoid swimming in contaminated water – and don't dip thy hands in the Nile (i.e. where *Bilharzia* organisms are present)!
3. Thou shalt avoid eating in dives, even if thou art impecunious.
4. Thou shalt avoid being bitten or stung.
5. Thou shalt avoid the sun.
6. Thou shalt avoid dehydration and salt depletion.
7. Thou shalt avoid venous stasis.

8. Thou shalt avoid walking bare-foot in tropical and subtropical areas (lest thou shouldst acquaint thyself with hookworm, creeping eruption, etc.)

9. Thou shalt avoid close physical contact with persons of doubtful sexual or hygienic practices, and beware of foreigners bearing gifts.

10. Thou shalt look left, right and left again before crossing the road in countries which drive on the right side (many pedestrian travellers are killed or injured by motor vehicles).

Obviously, patients must be encouraged to do a little of their own homework to establish what is relevant to their own needs. Travellers to Amsterdam, for example, should realise that the chances of being run over by a bicycle are very high! Therefore, in Amsterdam (or Cambridge for that matter), don't forget *Arnica* 30–200c for bruising, *Symphytum* 6c for promoting the union of fractures and *Natrum sulphuricum* 30c for concussion. Travellers who prefer to forego the window-shopping of Amsterdam for the rustic pleasures of the river valleys of North America will observe that Jewelweed (*Impatiens capensis* soap/spray) is probably the bees-knees for Poison ivy rash.

## STIs

Those who would ignore the Ninth Commandment should observe that condoms are not the entire answer. Herpes simplex and syphilis, for example, are still transmissible. Even scabies is an occasional STI, in which case, of course, you might well think of *Sulphur*, but *Silicea* 6–12c is a lot better at throwing out those little foreign bodies. Molluscum contagiosum is another which may respond to *Sil.* 6–12c, though most cases seem to clear up with Propolis cream applied twice daily. Propolis tincture itself (especially prepared for oral use), by the way, is great for common

aphthous ulcers (but, regrettably, not for syphilitic ones of the mouth).

## Bites and stings

For the external pharmaceutical prevention of mosquito bites, Citronella oil takes a lot of beating. It has a pleasant smell like lemon grass and only rarely are people allergic to it (actually, I've never seen a case). It is important, however, that it is applied every few hours in order to be effective – not only to skin, but also, preferably, to clothing. Midge or gnat bites (common in those who wear the kilt), however, are another beastie. Here, the only successful preventative is to rub yourself with the leaves of Bog myrtle.

However, once bitten or stung by an insect, assuming there is no reactive anaphylaxis, what should be done? Well there are many things you could apply topically, including various herbal compounds. By far the best all round application, however, is something which is neither homeopathic nor conventional, viz. ammonia solution. This is easily obtained from most regular pharmacies in the form of an applicator pen, marketed under the name of Afterbite. *Ledum* 30–200c should be taken as the best-bet internal remedy for stings, though for midge or gnat bites, *Cantharis* 30c may be more effective.

One relatively common problem is the person who always gets bad reactions to insect bites or stings. Here again, *Ledum* (100–200c) given once daily (from three days before the trip) can prevent this happening (but don't take their adrenaline pen away from them, should they have one – just in case!) In some cases its effect should be fortified by giving *Sulph.* 6–30c in alternation; but beware of proving in the form of externalisation. As for *Ledum*'s reputation for preventing tetanus in puncture wounds, it has never

# travellers

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been proven – so don't rely on it exclusively.

## Care of remedies

Sensible people will always take a small remedy kit with them. If you are not sure what to put in it, you will find some guidance in this article as we go through the various topics. The most convenient way to transport potentised remedies is in the form of globules, each the size of a pin-head. Small plastic vials are quite acceptable and, being shatter-proof, are more durable than those made of glass.

Now, a lot of people get paranoid over airport X-rays and their effect on remedies – even going to the expense of purchasing multilingual cards (in Albanian to Welsh and Zulu) to explain the problem to suspicious security staff. In fact,

the exposure to this ionising radiation is far too feeble and brief to be of any consequence – to which I can attest on the basis of personal experience.

Sunlight, however, is another matter. Indeed, prolonged exposure to bright sunshine (as opposed to bright domestic lights) will tend to reduce the strength of potentised remedies, eventually to the point of annihilation. I used to think that letting pills or tablets dry out had a similarly deleterious effect, but I am now quite convinced that the sugars themselves are quite capable of holding potency. Otherwise, how could vials with porous cork stoppers still be effective after many decades? It is true that dry heat can be used to rid a remedy (or its residue on the walls of a container) of thera-

**There is nothing to stop you from enjoying paradise – if you are well prepared.**

peutic action, but under normal circumstances (even in the tropics), the appropriate level of heat (at least 70°C) just isn't attained.

## Sunburn

Apart from the more usual methods of preventing sunburn, it is perhaps worth remarking that nutritional supplements taken *before, during and after* exposure (not just *after*) can limit damage to the skin – even though they cannot offer absolute protection. The following daily adult doses may be considered, and any or all may be used in combination: vitamin E 400 IU, beta-carotene 15 mg, vitamin C 1000 mg, Selenium 200 mcg (micrograms!), anthocyanidins 160–320 mg. Vitamin E certainly is most important, but watch out for:

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- ▷ ● The patient who is taking orthodox (or herbal) medicines with which it might interact adversely, e.g. Warfarin, Ginkgo biloba (in which case, seek further help).
- The hypertensive patient in whom it may produce exacerbation of the blood pressure (a physician should always be consulted before prescribing).
- The patient with a past history (or very strong family history) of breast cancer, where it is probably best avoided.

Indeed, additional advice should always be sought when prescribing either internal supplements or herbal preparations where orthodox drugs are being taken concurrently, or where the patient is pregnant or breastfeeding. Homeopathically, *Sol 30c* is also worth a go, and provings are unlikely.

Once someone is burnt, creams can be valuable in reducing skin damage and discomfort. Those which contain vitamin E or Aloe vera (or both) are particularly useful, perhaps with some extracts of *Hypericum* and *Collinsonia canadensis* thrown in for good measure. (*Topically applied* vitamin E and herbs of this sort are unlikely to be absorbed systemically in sufficient quantities to be harmful to any patient – hypertensive, pregnant or otherwise – but remember that there will always be the odd person who is allergic to something in the cream, and you might well get the blame for the itchy skin rash if you don't inform your patients routinely of this possibility.) *Collinsonia canadensis* (Stone root) – a member of the mint family – is a more recent addition to my armamentarium, but the North American Indians of the east (and probably most hillbillies) have known about it for yonks. It has a great reputation for promoting healing of skin which has been abraded, cut or burnt (rather like *Calendula*, but perhaps more powerful). But don't forget about good old *Belladonna* 30–100c in most cases of sunburn.

### Immunisation

This is the most controversial of all the topics I wish to discuss. So let me give you a sensible approach to the handling of your patients over this issue. The first thing to be said is that the decision to receive or not to receive appropriate conventional immunisation (or orthodox malarial prophylaxis) is up to the patient, who should not be

## One of the most common problems experienced by travellers to hot climates is salt depletion

coerced. Although I am no lawyer, I suggest that this approach will protect you against any possible litigation if things go wrong (even the nicest patients can turn nasty!) You must make your position quite clear. However, should the patient of his or her own volition request homeopathic prophylactic advice (in addition to, or in substitution for, orthodox prophylaxis), that is a different matter. But, you must emphasise that homeopathic preventative measures, though you believe them to be valuable, are by no means of proven efficacy.

Now, bacterial and viral nosodes are commonly prescribed for prophylaxis, but it is to be emphasised that they do not work in the same way as orthodox vaccines. Antibodies, to the best of my knowledge, are not produced. It is thus pretty pointless to emulate the orthodox approach by prescribing three doses of nosode X a few weeks or so apart before the proposed trip, in the hope that the traveller will be protected. Homeopathic remedies are essentially electromagnetic patterns which impose themselves on the general electromagnetic field of the body. It is this superimposed pattern which prevents successful infection (for further details of how this might be achieved, see my *Companion to Homeopathic Studies*). But, this pattern (except rarely and in sensitive subjects) is relatively short-lived. In order to keep it going, doses must usually be given about a week apart, and sometimes more frequently (a useful precaution when the risk factors are higher, e.g. during an epidemic).

### Desalination and dehydration

One of the most common problems experienced by travellers to hot climates is salt depletion – which I term 'desalination'. Its origin is often the low salt diet, so openly promoted by doctors and nutritionists in our cool temperate climate. Unfortunately, only a few are told to up their salt intake when going somewhere considerably warmer, where they are likely to sweat away buckets of Sodium

chloride. Indeed, to do so is absolutely essential if you want to leave your air-conditioned apartment, villa or hotel. The Roman legionaries were not paid in salt for nothing – that is to say, that was their 'salary'. Indeed, any professional worth their salt, should be aware of this fact. This, coupled with dehydration, produces, at the very least, heat cramps or heat exhaustion, and, at the worst, frank heat stroke. Dehydration is often caused by an inadequate thirst response (especially in *Pulsatilla* types), excessive alcohol consumption (alcohol is a diuretic), lack of availability of drinks, too much air-conditioning, profuse sweating (especially on exertion), travel sickness, or diarrhea, with or without vomiting.

Whilst homeopathic remedies (e.g. *Cuprum metallicum* 30–200c for cramps) might well be used to treat the various consequences of desalination and dehydration, replacement of salt and water is of greater importance, and, in fact, absolutely essential.

### Backache

Very common in those without servants these days, or too mean or impoverished to pay for the services of a porter. Unfortunately, there are many remedies that could be indicated, depending on causation and modalities, but probably one of the best to take with you for baggage-handler's back is *Bellis perennis* 30–100c. If it is just a case of stiffness from sitting too long, with loosening upon movement, *Rhus toxicodendron* 30–200c might be better. Another simple approach, short of seeking out a chiropractor on Devil's Island at midnight, would be to block the pain by applying Capsaicin cream about four times daily to the painful area. Of course, this is expensive stuff made by the pharmaceutical industry, but it is very cheaply produced by mixing tincture of chillies (from which capsaicin is derived) with bog standard, common or garden, aqueous cream. Probably a must in the travelling kit for all those without slaves.

### Flight problems

These usually begin when you have either lost your passport or missed your connection. But, these, of course, are only an hors d'oeuvre.

Deep vein thrombosis as a consequence of flight has certainly hit the headlines. It is largely preventable by frequent walks down the aisle, wearing support stockings if you have varicose veins and maintaining a high water intake (which will definitely keep you mobile). Taking vitamin E (see above), and *Hamamelis* 6c may also be helpful.

Those prone to earache due to pressure changes often benefit from a few doses of *Medorrhinum* 200c prior to flying, a remedy which may be used as an acute for opening the Eustachian tubes (hence, also a valuable prescription in acute otitis media).

Jet-lag is usually alleviated by taking *Cocculus indicus* 30c before and during the flight. For obvious reasons, you won't find *Cocculus* in the old literature under jet-lag, but you will find it under effects of night-watching, a pursuit which involves similar disturbances of the biological time clock.

Apart from by keeping on the move, swelling of the ankles can be prevented by taking *Urtica urens* (or *dioica*) tincture, 5–10 drops three times daily. This is also a great treatment for acute gout, which itself may be brought on by dehydration and alcohol, and is a useful preventative for those prone to solar urticaria (sun nettle-rash), though most patients incorrectly refer to this as 'prickly heat', which is a different condition altogether.

### Gut problems

One of the most common problems is short-term (less than 14 days) traveller's watery (as opposed to bloody) diarrhea. A lot of cases will clear up with *Arsenicum album* 6c only, but sometimes it is necessary to give this remedy in daily rotation with *China* 30c and *Podophyllum* 6c (e.g. Day 1: *Ars-alb.* every 6 hours; Day 2: *China* every 6 hours; Day 3: *Podoph.* every 6 hours; etc.) Another approach is to use *Crataegus oxyanthoides* fluid extract (a sort of strong tincture, but ordinary tincture will often suffice), 5–10 drops three times daily (this is the adult dose, and must be reduced for children according to weight). Perhaps more importantly, and coupled with normal hygienic precautions, the same can be used for the prevention of gut infections, though in the 5-drop dose.

When I first published this idea in the *World Travellers' Manual*, it was greeted with an element of disbelief from the homeopathic pundits, since *Crataegus* was then only known in those circles as a heart medicine. In fact, I had extracted the idea from a standard textbook of Chinese herbal medicine. The main problem with *Crataegus* used in this way is that it produces hypotension – though such a side-effect is very rare in the dosages suggested. If, however, the patient does experience dizziness or faintness, either the dose must be reduced or the prescription discontinued. Those who suffer from IBS, even if only due to change in diet or dietary indiscretion, may also find this substance helpful in similar dosage. Some cases of reflux oesophagitis are also improved likewise.

It is important to watch out for cases of watery traveller's diarrhea which persist for more than 14 days, especially if they then develop symptoms resembling IBS coupled with loss of weight. Such people may well be suffering from the parasitic disorder known as giardiasis. Whilst homeopathic and herbal treatment may well be of assistance, injections of vitamin B12 and the provision of oral zinc and vitamin B complex will often speed up the cure. The diagnosis is often missed in general practice,

## The best all-round remedy for travel sickness is strong tincture of *Zingiber officinalis*

especially where the incubation period has been lengthy (up to 21 days) and the initial phase of watery diarrhea has not developed until some weeks after the patient has returned from holiday.

Another cautionary tale is that of another parasitic gut infection, viz. amoebiasis – a form of dysentery (bloody diarrhea). I fancy there are many people who have contracted this disorder, yet who have been misdiagnosed as cases of ulcerative colitis, even being subjected ultimately to an irreversible colectomy. This frequently happens because the travel history of the patient has not been requested.

### Travel and mountain sickness

Without a shadow of doubt, the best all-round remedy for both the prevention and treatment of travel (motion) sickness is strong tincture of *Zingiber officinalis*. An adult dose is 5–10 drops in no more than one teaspoonful (5 ml) of water. Another interesting property of ginger is its antiviral capability, and, if 20 drops in one sherry-glassful of water are taken at the very onset of a common cold, when the only symptoms are drowsiness and sore throat, it will often abort.

For the prevention of mountain sickness – apart from avoiding dehydration, tobacco, alcohol and excessive physical activity – *Coca* 30c takes a lot of beating. It is certainly indispensable for trips to the Andes. Many who have climbed beyond 2000 m have attested to its efficacy.

### DIY for beginners

Many years ago, my daughter went swimming in a heavily chlorinated pool in Spain. As a result, she contracted chlorine conjunctivitis. In order to prevent this condition, *Chlorinum* 8x is probably the best remedy. Bearing in mind her love of swimming, this is what I should have had in my emergency kit. As luck would have it, I didn't. So what did I do? I made it myself – or something rather close in character.

The trick here was to use a crude form of Korsakovian technique. I took a small clean glass bottle, filled it with water from the pool, and tipped it out. This left a thin film of chlorinated water on the inside. I then filled it two-thirds full with cheap Spanish vodka, and succussed it ten times, with my thumb acting as a stopper and a Spanish dictionary on the table, against which to deliver the important succussive blows – so completing the first arbitrary dilution (call it 1k). The bottle was emptied again, refilled two-thirds with vodka and re-succussed – 2k completed. This process was repeated until 8k was produced, and a few drops of the resultant liquid dropped onto a teaspoon of granulated sugar. I can assure you, the remedy worked perfectly.

Now, that's real desert island stuff!!

Bon voyage! □