Deer and mice are the primary carriers of the Lyme disease bacteria. Ticks bite infected deer or mice and can spread the bacteria when they bite other
with Lyme. I am happy to report great success using homeopathy for those with later-stage Lyme disease or post-Lyme disease syndrome who have not responded to antibiotic treatment. Many suffer for years, visit doctor after doctor, and take multiple rounds of antibiotics—yet still suffer with symptoms. So it is gratifying to help them regain their health with such a safe, effective, and non-toxic treatment as homeopathy!

Early-stage Lyme disease is another story, however. Antibiotics are often very effective at eradicating the Lyme organism at this stage before it has a chance to cause deeper disease. In fact, I recently took antibiotics myself because, in a strange twist of synchronicity, while writing this article I was bitten by a tick and developed the characteristic red rash ring indicative of Lyme disease! But more about that later.

The facts of Lyme

The disease got its name because it was first identified in the city of Old Lyme, Connecticut, in the 1970s. It has since become the most common tick-borne illness in the U.S. and Europe. The tiny nymphal (i.e., baby) ticks do most of the biting, and since they are no bigger than a pinhead, they often go unnoticed as they attach to the skin and feed for several days, eventually swelling with blood. The nymphs are most active in May and June, so June, July, and August are prime times for people to notice Lyme symptoms and seek treatment. Children aged 5 to 9 have the highest incidence of the disease (61% of reported cases are children from age 5 to 14), followed by adults aged 55 to 65. Diagnosis of Lyme disease can be tricky because many people never see the tick, 25% of people never develop the classic Lyme rash, lab test results may be inconclusive especially in the early stage, and symptoms of the disease can vary widely.

Stage 1—just bitten!

Approximately 70-75% of people infected will experience local symptoms from 3 to 30 days after a tick bite. A red, ring-like rash called erythema migrans (EM) occurs at the site of the bite and enlarges over several days. In 40% of cases, this rash has a central clearing called a “bull’s-eye.” The rash is often accompanied by flu-like symptoms such as low-grade fever, headaches, malaise, muscle pain, joint pain, and enlarged lymph nodes.

During this early stage, the standard medical treatment of a 10- to 21-day course of antibiotic therapy (typically doxycycline in adults, amoxicillin in children) is usually very effective in eradicating the bacteria before it has a chance to cause deeper, more invasive disease.* Blood tests for Lyme during stage 1 will often be negative since it can take up to six weeks for antibodies to show up in testing. So, a characteristic EM rash with or without accompanying flu-like symptoms is enough to warrant a 10- to 21-day course of antibiotic treatment without blood testing.

Homeopathic or conventional treatment?

Although a number of homeopaths have reported using remedies acutely such as Ledum, Arnica,
A red, ring-like, "bull's eye" rash usually occurs at the site of the bite and enlarges over several days.

James Gathany; Centers for Disease Control Public Health Image Library

Stop Lyme Before It Starts!

Obviously, the best deterrent to Lyme disease is to prevent it in the first place. Ticks prefer wooded and bushy areas with tall grass and leaf litter. They can also be found on lawns and in gardens, especially at the edges of woodlands and near old stone walls. If you live in an area where Lyme is prevalent, be especially cautious in May through August when Lyme ticks are most active.

When in infested areas, wear long pants tucked into long socks, long-sleeved shirts tucked into pants, and light-colored clothing to make it easier to spot ticks. Always wear shoes and walk in the middle of trails. Spray tick repellent on clothes and shoes. Inspect all pets

Belladonna, and the Lyme nosode (i.e., remedy prepared from the Borrelia burgdorferi bacterium) to treat patients during this first stage, I myself would be reluctant to use homeopathy alone because of the invasive nature of Lyme disease and the high success rate with early antibiotic treatment. However, I would use homeopathy alongside conventional treatment to speed up the recovery process. Also, after antibiotic therapy, I would use homeopathy to treat the patient constitutionally—in order to strengthen the body and reduce any likelihood of treatment failure.

For those who worry about antibiotics suppressing the illness and causing a worsening of health, I can only say that in my 15 years of practice, I have never seen the appropriate use of antibiotics (e.g., for severe bacterial infections) to be a problem. Of course the key word here is "appropriate." It is the overuse and inappropriate use of antibiotics that cause the most harm to the body (in terms of disruption of intestinal flora and other possible effects) as well as globally (through the emergence of resistant bacterial strains such as methicillin resistant Staphylococcus aureus infections known as MRSA).

Stages 2 & 3—many symptoms

Approximately 25% of people infected with Lyme first seek help during stage 2 of the illness—weeks or months after the tick bite. They may now have multiple, oval-shaped EM rashes along with flu-like symptoms, migratory arthritis in various joints, and fibromyalgia-type symptoms (fatigue, weakness, muscle aches and pains). Less commonly, meningitis (inflammation of the membrane surrounding the brain), carditis (inflammation of the heart resulting in other heart problems), and cranial neuropathies (such as Bell's palsy) can occur.

People with stage 3 Lyme, occurring months to years after a bite, usually experience chronic monoarthritis (warmth, swelling from fluid build-up, and limited range of motion in one joint) especially of the knee. About 10% develop meningitis, encephalitis, or neurological symptoms such as confusion, impaired memory, blurry vision, speech difficulties, mood changes, sleep disturbances, numbness and tingling in the extremities, and facial paralysis. They may develop heart complications such as chest pain and shortness of breath, enlargement and inflammation of the heart, palpitations, lightheadedness, and sudden fainting. Although it can be difficult to distinguish between stages 2 and 3, stage 3 symptoms are usually more severe and resistant to conventional treatment.

To confirm a diagnosis of Lyme during stages 2 and 3, a screening enzyme-linked immunoassay (ELISA) is performed first. Borderline or positive results will be followed by a Western Blot test. Although false positive and false negative results do occur, most patients with Borrelia burgdorferi infection will eventually show a positive Western Blot test, even after antibiotic treatment. ** Fortunately, because homeopathic treatment of Lyme is patient-specific rather than disease-specific, the occasional patient who comes to me
If you do find a tick, don’t panic! Studies have shown that transmission of infection is unlikely if the tick has been attached for less than 36–48 hours (increasing after 72 hours), and many of these ticks will not even be infected with the Lyme spirochete. This is why giving antibiotics prophylactically for a tick bite, before any symptoms occur, is not standard practice.

If a tick is found, use a tweezer to firmly grasp it by its head close to the skin. Apply gentle pressure for 15 to 30 seconds to loosen mouth parts, then pull outward gently and steadily making sure all parts of the tick are removed (squeezing the body can potentially inject infection into the skin). Wash the area with Calendula tincture diluted in water or an antiseptic. You can give Ledum 30c prophylactically if there is a high suspicion of Lyme transmission (this depends on engorgement of the tick and geography of the region). Ledum is a homeopathic remedy that can be useful for puncture wounds and insect bites. I don’t like to recommend this to my ongoing patients too often unless I have a very anxious parent, however, because in my experience, it can interfere with the child’s constitutional remedy (a common problem when parents give Arnica too freely for mild traumas), and there are no studies confirming Ledum for tick bites. However, based on anecdotal evidence, Ledum can be helpful preventatively, but the child should definitely be watched for a few weeks to check for the development of a Lyme rash and/or flu-like symptoms.

What can homeopathy offer?

Most people who seek help from me for Lyme do not come during stage 1 of the disease but rather during the later stages. In most of these cases, stage 1 was misdiagnosed, mistreated, missed by the patient entirely (the EM rash is usually neither painful nor itchy and may occur on the back), or never occurred. Most of these patients have already been on and off antibiotic therapy for months or even years. Many are suffering from “post-Lyme syndrome” (persistent Lyme symptoms after antibiotic treatment). Whether this is some kind of immunological reaction to the original infection or persistent active infection has been argued within certain infectious disease circles. A comprehensive article in a recent edition of the New England Journal of Medicine, however, concluded that there is insufficient evidence for the persistence of B. Burgdorferi infection in antibiotic-treated patients and that the chronic use of antibiotics for persistent post-Lyme symptoms is inappropriate and potentially dangerous.**

As a homeopathic practitioner, I have had great success treating post-Lyme syndrome patients. In most cases, symptoms completely resolve within 6 weeks of the correct constitutional remedy. In the case of a boy with later-stage Lyme encephalitis described on page 40, just one dose of a homeopathic remedy was all that was needed for a complete cure. In other instances, however, increasing potencies of the remedy over time may be required before lasting improvement is achieved. Such was the case with Mary.

A missed diagnosis for Mary

Mary was 14 years old when I saw her in February 1997 for late-stage Lyme disease. She reported having been perfectly healthy until July 1995 when she began to experience Stop Lyme Before It Starts! Obviously, the best deterrent to Lyme disease is to prevent it in the first place. Ticks prefer wooded and bushy areas with tall grass and leaf litter. They can also be found on lawns and in gardens, especially at the edges of woodlands and near old stone walls. If you live in an area where Lyme is prevalent, be especially cautious in May through August when Lyme ticks are most active. When in infested areas, wear long pants tucked into long socks, long-sleeved shirts tucked into pants, and light-colored clothing to make it easier to spot ticks. Always wear shoes and walk in the middle of trails. Spray tick repellant on clothes and shoes. Inspect all pets daily during the summer months. Be especially careful not to allow outdoor cats on your bed and couches (this will also help you avoid getting poison ivy, which can be carried on the animal’s fur). When your children come in from playing in the yard, get in the habit of checking them daily for ticks. Inspect their armpits, nape of the neck, behind the ears, back of the knees, navel and groin areas, and scalp. Lightly run your fingertips over these areas, paying special attention to the hair near the hairline. An attached tick will often feel like a small scab.

If you do find a tick, don’t panic! Studies have shown that transmission of infection is unlikely if
the tick has been attached for less than 36–48 hours (increasing after 72 hours), and many of these ticks will not even be infected with the Lyme spirochete. This is why giving antibiotics prophylactically for a tick bite, before any symptoms occur, is not standard practice. If a tick is found, use a tweezer to firmly grasp it by its head close to the skin. Apply gentle pressure for 15 to 30 seconds to loosen mouth parts, then pull outward gently and steadily making sure all parts of the tick are removed (squeezing the body can potentially inject infection into the skin). Wash the area with Calendula tincture diluted in water or an antiseptic. You can give Ledum 30c prophylactically if there is a high suspicion of Lyme transmission (this depends on engorgement of the tick and geography of the region). Ledum is a homeopathic remedy that can be useful for puncture wounds and insect bites. I don’t like to recommend this to my ongoing patients too often unless I have a very anxious parent, however, because in my experience, it can interfere with the child’s constitutional remedy (a common problem when parents give Arnica too freely for mild trauma), and there are no studies confirming Ledum for tick bites. However, based on anecdotal evidence, Ledum can be helpful preventatively, but the child should definitely be watched for a few weeks to check for the development of a Lyme rash and/or flu-like symptoms. fatigue, chronic sore throats, and muscle aches. Her mother said that when Mary first became ill she had a hive-like, itchy rash that waxed and waned, but their pediatrician did not test for Lyme because it did not look like a typical Lyme rash. Mary continued to suffer with the above symptoms on and off for months until her mother took her to another physician who performed a Western Blot test that came back highly positive.

The girl was placed on amoxicillin for one month, and she felt better initially, but her symptoms returned once treatment ended. She began missing school again from continued fatigue, muscle aches, and chronic sore throats. For the next year until I saw her, Mary was placed on a myriad of antibiotics including doxycycline, cefuroxime, and IV rocephin. Each time she received the drugs, she felt better initially only to feel worse again when the treatment was discontinued.

Heavy doses of antibiotics

By the time I saw Mary, she was on 7 grams of amoxicillin a day! (A usual dose for more common bacterial infections, such as a middle ear infection, might be 1 to 2 grams per day.) Even so, she complained of many additional symptoms including dizziness, chest pain, constant twitching of her eyelids, extreme sensitivity to light and sound, swollen ankles, and severe migraine headaches. At this point, she had nervous system involvement as evidenced by her extreme sound and light sensitivity, and problems with focusing and short-term memory. An honor student, Mary was very concerned that she was missing so much school.

Mary appeared sweet, shy, and reserved in my office. Her mother described her as very responsible, perfectionistic with her schoolwork, and neat with her possessions. Sitting in front of me was a girl whose case beautifully fit the indications for the homeopathic remedy Natrum muriaticum, as indicated by her emotional sensitivity, reservedness, light sensitivity, and migraines. From my earlier experience treating the boy with late-stage Lyme encephalitis, I...
suspected that the heavy doses of antibiotics she was taking might interfere with the action of the homeopathic remedy, so I asked Mary’s mother to withdraw them. She was nervous about this but agreed. I explained that Mary might have an aggravation of her symptoms for a day or two after taking the homeopathic remedy, but that they should try not to treat it. I gave Mary *Natrum muriaticum* 200c.

**Back to her old self**

Within 24 hours of taking the remedy, Mary complained of intense fatigue and a severe migraine—a worsening of her symptoms. By the second day, however, she was feeling better and her symptoms steadily improved over the next several weeks. At her follow-up visit one month later, Mary’s mother stated that for the first 3 weeks, her daughter was back to her old self—happy, energetic, and making jokes at the dinner table. Mary had been completely free of symptoms until just a few days ago when she woke up with a sore throat, fatigue, and headache. I prescribed another dose of *Natrum muriaticum* 200c. She did well again for two weeks and then relapsed. This pointed to the need for a higher dose, so I gave her *Natrum muriaticum* 1M. She remained asymptomatic for the next six weeks until she relapsed again. At this point, I gave her *Natrum muriaticum* 10M.

Mary did great for the next two years! She remained mostly asymptomatic—no headaches, no fatigue, no aches and pains, no chest pain, no dizziness. Her mother was thrilled! The only symptom that remained was ankle swelling when Mary engaged in intense physical activity (she was back on the field hockey team). Then a few of her old symptoms began to creep back... she started to complain of feeling a little fatigued, her headaches returned (though mildly), and her mom said she was getting more irritable. I gave Mary another dose of *Natrum muriaticum* 10M, and she did beautifully for the next nine years! She is now a 24-year-old medical student.

It is interesting to note that Mary needed several doses of her remedy initially over the course of three months, whereas the boy with Lyme encephalitis was cured with only one dose of his remedy. I suspect that this was because Mary had been on high doses of antibiotics for two years, which probably acted suppressively and weakened her immunity. We can be thankful, however, that the human body has a tremendous capacity for healing, and with the correct homeopathic remedy (as well as a healthy diet, exercise, and a good attitude), people can often spring back from a lifetime of bad habits and/or excessive suppressive therapies and enjoy excellent health and wellness.

**Unique symptoms point the way**

Homeopathy is patient-specific, not disease-specific. Every offending agent, whether it is the Lyme spirochete or any other organism, causes the person’s vital force to respond in ways that are unique to the individual based on his/her genetic predisposition, individual temperament, life experience, etc. These unique mental/emotional and physical characteristics of the patient will lead the homeopath to the correct remedy.

In almost every case of Lyme I have treated, the common, everyday symptoms of Lyme disease have not led me to the restorative homeopathic remedy. Instead, most important were the symptoms unique to the person, or unique to the disease. For example, many patients with Lyme disease will have headaches—it is a common symptom of Lyme and therefore unremarkable. Few, however, will have such severe migraines as Mary did. Because of their unique intensity, I considered Mary’s migraines to be an important characteristic symptom of her Lyme disease and therefore crucial to the selection of a curative remedy.

**Lyme can magnify constitutional symptoms**

Because Lyme is a stress on the system, the vital force may also respond with an exacerbation of the person’s underlying constitutional tendencies. For example, a man with constitutional *Stramonium* tendencies (i.e., whose overall pre-Lyme constitutional state was consistent with the indications for the homeopathic remedy *Stramonium*) came to see me years ago with post-Lyme syndrome—severe fatigue, musculoskeletal aches and pains, and “foggy brain,” which are all common Lyme symptoms. Along with this, however, he was experiencing an exacerbation of his longstanding tics, more irritability and anger than ever, and renewed flashbacks of his extremely abusive childhood when he was beaten repeatedly by his father. Tics, anger, and fear of violence and/or violent behavior are common in people who need *Stramonium*. A dose of this remedy promptly cured his Lyme symptoms—which never reoccurred—and helped alleviate his anger and mental anguish.

Another Lyme patient came to me after having been on several courses of antibiotics for years...
because of her severe fatigue, fibromyalgia-like symptoms, and headaches that would disturb her sleep. While taking her case, I noted that her constitutional tendencies seemed consistent with the remedy Lachesis. She had an intense almost suspicious type of personality with a history of severe pre-menstrual symptoms (irritability and anger) that were greatly relieved each month as soon as her period began. The key to selecting Lachesis (besides the above symptoms and her headaches being worse at night during sleep) was an intense jealousy of her husband that became especially profound during the years of her illness to the point where she had him followed day and night for a suspected affair. Strong jealousy and suspiciousness is a Lachesis tendency. After just two doses of Lachesis (a 30c followed some weeks later by a 200c potency), not only did her Lyme symptoms dissipate, but she began to recognize her unhealthy behavior. She visited a therapist to help her deal with her husband’s possible infidelity and her strong fears of abandonment. Eventually, she was able to confront her husband, and they entered marital counseling.

**Help for Lyme sufferers**

Of course, prevention of Lyme infection is the ideal (see page 37), but this requires hyper-vigilance if you live in a deer-tick infested area—and during the spring and summer months, no less, just when we want to kick back and relax! If, despite your best efforts, Lyme disease strikes and you get the characteristic rash and/or flu-like symptoms, see your doctor immediately for a course of antibiotics.

You may also want to take a few doses of homeopathic Ledum, the most commonly reported remedy for stage 1 Lyme disease, or another well-indicated homeopathic remedy. For example, if the rash is purplish and/or feels very sore and is tender when touched, with a bruised sensation in your body, then Arnica would be the remedy of choice. A rash that is hot to touch accompanied by a high fever with red face and/or throbbing headache would indicate the need for Belladonna.

If you have Lyme that has not responded well to antibiotics, see your homeopathic professional today. Thankfully, homeopathy has an excellent track record for helping in such cases, and you have a superb chance of regaining your health and wellness.

Footnotes:

* Note that a 2003 study determined 10 days of doxycycline to be just as effective as 21 days for early Lyme disease with the classic EM rash but without neurological or cardiac involvement. See G.P. Wormser, et al. Annals of Internal Medicine, 2003, May 6; 138(9):697-704. Duration of antibiotic therapy for early Lyme disease. A randomized, double-blind, placebo-controlled trial.


http://content.nejm.org/cgi/content/full/357/14/1422

Interested readers may also Google “Infectious Diseases Society of America” for current guidelines for Lyme treatment.

**ABOUT THE AUTHOR**

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