

Folliculinum- A matridonial remedy to prevent infertility

Indications and results in treatment of anovulatory female cycle disorders

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It is a special honour for me to point out the importance of a remedy which can without doubt be considered the most female of remedies of *Materia Medica Homoeopathica*.

The substance I am talking about is a sarcode, Folliculinum or oestrone, a natural hormone, which is secreted by the ovaries, playing the leading part in reproduction of our organism. This steroid hormone with typical steran structure and the formula $C_{18}H_{22}O_2$ is able to directly interact with nuclear DNA if connected with a steroid-receptor, well known as an important and urgent transmitting substance.

The name oestrogen is derived from Greek. Oistros means “rut or lust” and genao “to create”. What we are talking about is a “**rut or lust generating substance**”.

The oestrone used in homoeopathy is derived from the urine. It is a water-insoluble, white, crystalline substance, triturated to C3.

A number of renowned colleagues have already closely studied the substance over the past decades and through their findings have described a wide spectrum of indications. The remedy was proved clinically in detail by **Madame De Mattos** already in the 1950s. At that time mainly low potencies of the remedy were applied and that primarily showed positive effects against the so-called **Hyperfolliculinia Syndrome**.

Real Hyperfolliculinia takes the form of a glandular-cystic hyperplasia. It is manifested in an anovulatory cycle which can lead to clinical disorders in terms of, for example, a polycystic ovary syndrome, cysts or tumours of female organs that finally leads towards infertility. This real hyperfolliculinia can be histological verified through biopsy and is differentiated from functional Hyperfolliculinia.

Donald Foubister followed **Madame De Mattos** to examine the remedy. Publications added by **Melissa Assilem** have essentially contributed to the development of contemporary remedy characteristics. In her manuscript `Mist or Miasma`, she was the first to show the fatal consequences of hormonal abuse, effecting the following generations, starting in the second half of the past century: During a period of about

thirty years a drug called Diethylstilbestrol (DES) was given to numerous of women, to prevent miscarriages, in U.K. and U.S.A., causing a rare form of cancer, a vaginal clear-cell adenocarcinoma in daughters of those women. Although these cancers could arise very early, many were not triggered off until the girl was exposed to more hormones, e.g. the pill, or another hormonal treatment. Assilem claimed this to be a case of an acquired miasma triggering off an inherited one. Many sons of those women treated with DES suffered from low sperm counts or abnormally shaped sperms. The so-called morning after pill was made from DES as well.

Finally in 1999, Folliculinum was proved by **Andreas Holling** during a seminar in Münster with **Jayesh Shah** involving 10 participants.

Complemented by the symptoms derived from this proving and by my own extensive experiences with the remedy over a period of more than ten years I managed to work out a precisely characterized picture of Folliculinum, showing a very wide spectrum of indications, exceeding cases of symptomatic, hormone specific disease patterns.

This lecture will concentrate on indications concerning afflictions in preference of the female sex. The effective range of oestrogens expresses itself in the complexity of the feedback mechanism between hypothalamus, hypophysis and the gonads.

Connections between symptoms and clinical pictures on different organ system levels, including mind symptoms and sensations can be explained that way. It has been proven that sexual hormones directly influence the neurotransmitting systems, unless they are considered to be neurotransmitter themselves.

Primarily oestrogens are responsible for sustaining fertility in human organism. They stimulate the development, the functioning, and regulation of female sexual organs and finally affect the spermatogenesis in men. They dictate the female hormonal balance and they safeguard the dynamics of an individual balanced ovular cycle of a woman.

Oestrogens are the pace maker in a healthy female cycle.

Every healthy woman, therefore, has her own individual rhythmical cycle which helps her to find the right measure in relation to empathy, devotion, self-determination, strength of will, and individuality.

These are the essential prerequisites of a healthy female organism.

Any disturbed or suppressed physiological cycle signifies a missing pace setting signal of the oestrogens and leads to well known disorders in the sense of hyperfolliculina and its reflecting symptoms, concerning the entire organism, body, sense and mind.

As a sarcode Folliculinum contains information of a healthy mode of action in organisms of mammals, therefore it must have the inner capacity to re-establish health and fertility.

To show indications for Folliculinum, in preference of female sex, I will proceed in aetiological terms, according to clinical aspects, which correspond with the typical pathognomic symptom complexes, including all psycho vegetative symptoms, and also showing up the side effect symptoms of synthetic hormones.

1. I would like to start with indications which can be put down to physiologic fluctuations of the hormonal balance:

- In **puberty**, if the development of the ovulatory cycle shows disturbances, characterized by difficulties concerning the individualisation process leading to womanhood.
- In case of **abnormalities at the time of ovulation and the days before menstruation**, especially afflictions in terms of a premenstrual dysphoric syndrome or **menstrual disorders in general**, despite the modality that the start of the period causes improvement.
- During **pregnancy**, around **birth**, during the **breastfeeding phase**, especially when there is a lack in a balanced mother-child relationship, to the point of puerperal psychosis.
- In **menopause**, the whole spectrum of physical and mental symptoms is covered.

2. Furthermore, Folliculinum is indicated in case of functional and organically manifested female diseases, which can be attributed to an impaired ovulation cycle, such as polycystic ovary syndrome, endometriosis, ovary cysts, myomas, malignomas and other tumours, depressions and other physical or mental manifested disorders.

All diseases regarding breasts should remind of Folliculinum.

3. Now for iatrogenic causes:

- **Long lasting hormonal suppression or replacement therapies** represent a serious iatrogenic cause, as severe physical side effects and a higher risk of developing cancer are proven. That fact shows one of the main indications for the remedy. It is common practice to treat functional endocrine disorders with synthetic hormones. **In that way to us homeopaths alarming disorders such as acne vulgaris, endometriosis and PCO syndrome are basically and simply suppressed.**
- **Hormonal contraceptives**, no matter what kind, totally block the functioning of the ovaries. They are made available too easily to even very young girls, whose cycle is barely developed yet. Suppression and deception of one`s own balancing mechanisms often leads to an ovular cycle not able to regenerate itself, which **may cause infertility**. This drastic consequence, the side and after effects of contraceptives such as widespread **urinary tract infections, migraine** etc. can successfully be treated with Folliculinum.

First stop suppressive drugs and than prescribe rhythmically repeated medications of Folliculinum, because oestrogens are the pace maker in an ovulatory cycle, this is a simple way to induce regeneration! This method has proven to be very successful in my experience, in the sense of functional therapy, in intervals, supplemented by the treatment with a Simile.

- We know that modern medicine`s answer to infertility is further hormonal treatment and finally **in vitro fertilization**, which most often needs to be repeated causing severe symptomatic and functional disorders within the organisms of those women.

Consequently, children procreated this way may suffer from problems and diseases. This could be a theme for us in future and shows up a severe miasmatic pressure already!

- **Antihormone therapy** against hormone-receptor positive carcinomas, causing lots of side effects, can clearly be made better tolerated by rhythmically repeated medications of Folliculinum C200. Some women respond to weekly, others to doses given every two weeks.

Over the past ten years of intense studies with this remedy, **functional and miasmatic prescriptions of Folliculinum** have become more and more common to me. In this way and especially when complemented by a Simile the nosode accompanies chronic recoveries. This method has proven to be successful with many patients and resulted in lasting recoveries.

Foubister already experienced good effects giving Folliculinum three or four days before an individually selected constitutional remedy.

Let me introduce you to one of my first successful Folliculinum case.

Female, age 27

Diagnosis: PCO-Syndrome, Infertility

1st consultation, December 6th 2001

Her menarche started at the age of 15 years, she developed an impaired hormonal cycle right from the beginning. Headaches appeared two days before menses, getting better as soon as bleeding started, which was not heavy at all, but lasted eight days. She had acne vulgaris in puberty. At the age of 17 her acne and the impaired cycle were treated by the anti baby pill. Instead of acne she developed a dermatitis seborrhoica perioral.

She stopped taking the pill after nine years, with the intention to get pregnant.

Her acne again aggravated, which made her feel unsteady, the same feeling she had in puberty. She was consequently using a topical cream which contained oestrogens to treat the acne.

Within one year after she had stopped taking the pill she still had no spontaneous menstruation. Therefore she and her husband decided to go for in vitro fertilisation.

They tried two times without success. She even could not tolerate the hormonal treatment which accompanied the IVF. She felt terrible the time she consulted me.

Out of the anamnesis:

She had a mononucleosis infection at the age of 15, treated by antibiotics, followed by persisting heavy sweating in axils.

She suffered of numerous vaginal infections with Candida and urinary infections including a pyelonephritis during pill taking period.

According to the symptoms in total I ordered Calcium Muriaticum. The guiding symptoms leading towards this remedy were: Severe unsteadiness, because of acne and not being able to become a mother. In her childhood she was longing for the sympathy of her mother, who was an unsteady person herself and easily irritated, not drawing enough attention to her daughter.

Prescription: Calcium Muriaticum LM6 daily

Oestro- Gestagen Mix D30 two times a week (this remedy I used in case of amenorrhoea before knowing about Folliculinum)

2nd consultation, January 10th 2002

She feels better; menstruation appeared 14 days after starting the treatment. Acne aggravated, especially perioral. After menses the skin was better again. The urinary system was irritated like before, but amelioration followed spontaneously.

Headache appeared again.

I ask her to continue with the prescription.

3rd consultation, January 24th 2002

She visits without appointment to claim that her menstruation has not appeared in time!

She suffers from PDS as well as from her acne.

Prescription: Stop Oestro-Gestagen Mix

Folliculinum C200, a single dose, after one week continued by Calc.

Mur. LM6

At that time I knew about Folliculinum by Vermeulen's Synoptic Materia Media 2. All these symptoms and indications we find with Folliculinum.

I supposed that the suppressive treatment of the mononucleosis primarily affected her immune system, actually at that time her menarche was just about to arise and the PCO-syndrome was established. She started to take the pill at a time her individual female hormonal rhythm had not even settled. Nine years of hormonal suppression finally caused this state of infertility. In the rubric mononucleosis you find Folliculinum beside Carcininum. Even the difficulties in separating from the mother you will find with Folliculinum as well.

4th consultation, April 15th 2002

The general condition is fine, which up to that day has not been the case for a long time.

The skin is better than it ever was. She is less nervous, less irritated.

Menstruation appeared four weeks after Folliculinum, but she has been waiting for the next one to come for about seven weeks. She talks about having felt her ovulation, like middle pain. Since then her nipples have been oversensitive.

Prescription: Folliculinum C200, a single dose to stabilize her cycle.

Stop taking Calcium Muriaticum, because she feels completely fine.

5th consultation, October 15th 2002

Her hormonal cycle completely stabilized after the second dose of Folliculinum and finally she got pregnant spontaneously. She was in the 11th week of her first pregnancy. She suffered of sickness, acne and circulatory disturbances, she felt unsteady and ugly, although she felt very happy about her pregnancy.

Prescription: Calcium Muriaticum LM6

Finally this lady has given birth to three children, two girls and one boy. The boy was born with a urinary reflux, which reminds me of Folliculinum. But this is a different story!

Folliculinum and Miasma

Hormonal balance in women is very sensitive and easily effected, either by endogen or exogen disturbances.

Pressure and suppression induced by dominant forces on an individual such as dominant parents, husband, harassment at work or religions dominance can be a cause to create a so called Folliculinum state, as well as results from immune system suffering after long lasting and profound infection, which is suppressed by medication.

As a result of growing environmental stress and an overload of forced hormonal supplement in food together with treatments of synthetic hormones including contraceptives such as the Anti Baby Pill over a period of many decades, hormonal abuse has become part of our lives and should be taken as a severe risk for our health, concerning both sexes.

The increase in breast cancer and cervical dysplasia in even very young women is alarming. In Austria one out of eight women develops a carcinoma in her mammals. The fertility rate

in so-called industrialized countries is constantly decreasing, while syndromes such as endometriosis and poly cystic ovaries are on the rise.

Even men develop sub fertility, disorders in spermatogenesis are frequently observed.

This severe situation is putting tension on us and assuming a miasma in general to be an influence that induces illness and is hidden behind common pathologic symptoms which are signs of a disrupted force of life. These circumstances allow for discussion of a new kind of miasma, which can be acquired or inherited, and which primarily leads to degenerative disorders to sign up for reduced regenerative properties.

Folliculinum in general serves as a remedy in case of suppression or loss of the individual rhythm of life. As a sarcode it owns the inner capacity to re-establish its healthy mode of action within organisms to prevent infertility and degeneration. .

Over the past ten years of intense studies with this remedy, functional and miasmatic prescriptions of Folliculinum have proven to be successful with many patients and resulted in long lasting recoveries, especially when complemented by a simile.

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