

No. 12 Sinusitis

Typical Illnesses and their Treatment with WALA Remedies

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Etiology, Pathology, and Treatment of Sinusitis

Etiology

The Lymphatic Constitution

The creation of air spaces in the skull – the frontal, maxillary, sphenoid and ethmoid sinuses – takes place in close connection with the process of breathing. The sinuses are normally ventilated during expiration.* But in early childhood they are not yet fully developed (pneumatized). They are completed when the initially lymphatic constitution of the child is transformed, involving deeper breathing and the imprinting of individual form on the facial skull and the entire constitution.

The physiological conclusion of maxillary sinus pneumatization occurs at the end of the first year, that of the sphenoid sinus at the end of the fourth year and of the frontal sinus at the end of the twelfth year. Pneumatization of the skull is closely connected with the liberation of intelligence and the activation of a solidifying, sclerotizing tendency at puberty.

Pathology

Type 1 – exudative diathesis

In small children there is a tendency to recurrent and chronic nasal catarrh, tonsillitis and inflammations of the middle ear, ethmoid and mastoid. These can be designated as an attempt by nature to create airspace by "melting away" hypertrophied, inappropriately persistent lymphatic tissue in the head region. In youth and adulthood the exudative-lymphatic constitution often leads to chronic sinus inflammation.

* The sinuses experience an increase in pressure during exhalation and a decrease in pressure during inhalation, according to K. Schmuecker, Zeitschrift fuer HNO-Heilkunde, 1932, p.638 ff.

Type 2 – hypertrophic-dysplastic diathesis

In addition to the exudative-lymphatic constitution, degenerative hyperplasia of mucous membranes can lead to polyposis of the sinuses and chronic sinusitis. This usually involves degenerative-hypertrophic-inflammatory changes of the maxillary and ethmoid mucous membranes and occasionally of the nasal membranes alone. Polypous, pale-glassy mucous membrane growths frequently appear in the nasal cavity below the middle nasal concha and sometimes extend into the nasopharynx. Here, too, a constitutional disposition is present, based on a weakness of form in the serous membranes which is already evident during pneumatization of the sinuses. This form of sinusitis requires a different treatment than that based on the exudative- lymphatic diathesis.

Type 3 – hypotrophic-dysplastic (atrophic) diathesis

A third type can be etiologically traced to the "dry" lymphatic constitution. Here there is a tendency to mucous membrane atrophy. The hypoplastic-atrophic lymphatic diathesis leads to reactive inflammation of nasal and sinus mucous membranes with a tendency to recidivism and chronicity. Hard lymph nodes are present and sinus ventilation is insufficient, usually as a result of breathing through the mouth.

Differential Diagnosis

It must be ascertained whether a case of sinusitis maxillaris is due to focal stress of the teeth.

Therapy

The first aim of therapy must be to reactivate the subacute inflammatory process in the mucous membranes and stimulate secretions. This can be done through the sulfur component in **Hepar sulfuris** (a mixture of calcium polysulfides and calcium sulfate) combined with the organ preparation **Membrana sinuum paranasalium*** in low potency [**Hepar sulfuris comp.** (WALA)], as well as through **Myristica sebifera** [contained in **Myristica sebifera comp.** (WALA)].

The second task is to stimulate regeneration of the mucous membrane tissue which has been damaged by chronic inflammation. **Argentum nitricum**, **Berberis** and **Quartz** are indicated here. The frontal sinuses are connected with the liver, and therefore can be influenced by liver remedies. In addition, organ preparations can be employed as a fundamental therapy.

Basic Treatment

The following indications apply for basic treatment of all three illness types.

1st week:

Hepar sulfuris comp. (WALA) – 1 ml subcutaneous injection every other day,** perhaps with **Tunica mucosa nasi D4**. If secretory processes are not reactivated during the first

* For a basic introduction to therapy with potentized organ preparations, see the WALA Therapeutic Preparations List for Physicians and H.H. Vogel: Therapy with Potentized Organ Preparations.

** The ampules mentioned in this article should be injected SC in the neck region if possible; it is also possible to administer orally (sublingually) – the ampule contents are held under the tongue for about a minute and then swallowed. A glass straw is included in the package for this purpose.

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week, continue the medication for a second and possibly a third week.

After the above treatment, no sooner than the second week, give the following remedies for 2-4 weeks:

Either **Myristica sebifera comp.** (WALA) or **Echinacea/Argentum** (WALA), together with **Membrana sinuum paranasalium D15**: One injection 2-3 times per week.*

The above basic treatment can yield therapeutic results in every case.

Individual Treatment of the Three Illness Types

The remedies mentioned below are selected according to the symptoms of the homeopathic remedy picture and added to the basic therapy.

1. Exudative-lymphatic diathesis

Conchae D20 (Calcium carbonicum derived from oyster shells): One injection every 2 weeks. After sinusitis is overcome, continue this constitutional treatment with 1 injection every 2-3 months.*

2. Hypertrophic-dysplastic diathesis

Kalium (potassium) salts are indicated in cases where sinusitis frontalis is predominant, with headache under the right eye and/or the base of the nose – usually worsening at night between 2 and 3 a.m. (Kalium is a primary liver remedy.)

Kalium carbonicum D12 (D20), **Kalium bichromicum**, **Kalium chloratum**, or **Kalium iodatum** (in the same potencies) can be injected 2-3 times per week.* (Or **Myristica sebifera comp.** (WALA), if not already being given as part of the basic therapy.)

In cases of forehead pain, increasing and decreasing with the course of the sun, often with a feeling of sickness, **Hepar/Stannum D4/D10** (WALA) can be injected 2-3 times per week.*

For pain at the base of the nose with a feeling of tightness in the forehead skin, give **Sticta pulmonaria D6-D15** injections 2-3 times per week (Sticta is an exceptional liver remedy.)

3. Hypotrophic-dysplastic diathesis

For the "dry" lymphatic constitution administer injections of **Lycopodium e planta tota D30** (D15, D12) every 2-3 weeks.* For constitutional, degenerative connective tissue weakness and loss of vitality with extreme need for warmth, give **Quartz (Silica) D30** (D12) injections every 2 weeks.*

* The ampules mentioned in this article should be injected SC in the neck region if possible; it is also possible to administer orally (sublingually) – the ampule contents are held under the tongue for about a minute and then swallowed. A glass straw is included in the package for this purpose.

Oil Dispersion Baths*

If the patient can take oil dispersion baths, the following oils can be considered: **Aesculus e sem. 5%, Oleum, Calamus, Ol. aeth. 5% Hypericum ex herba 5% Oleum.** In cases where there is great need for warmth **Rosmarinus, Ol. aeth. 10%** (WALA) can be prescribed.

Physical Therapy

The warmth organism can be especially strengthened by physical therapy.

Parts of the body can be washed with the following substances diluted in cool or lukewarm water: mornings with sea or rock salt, evenings with lemon juice, apple or wine vinegar, **Prunus-Essence** (WALA) or **Salvia-Essence** (WALA).

Foot baths can be given in the evening with the addition of **Prunus-Essence** (WALA) or **Quercus-Essence** (WALA) (one tablespoonful) or St. John's-wort tea, 1 quart per foot bath. A gradual temperature elevation is effected by the addition of hot water. Baths can last 5-10 minutes at the beginning, later 20 min. At the halfway point and at the end, dip the feet in room temperature water for about 3 seconds. Dry the feet well and apply **Blackthorn Massage Oil** (WALA), Copper oxide ointment (**Kupfersalbe rot**, WALA) or **Rosemary Lotion** (WALA). The patient should then rest in a warm bed.

Full baths may be taken once a week with **Kalium sulfuratum Bath** (WALA), **Calamus-**, **Aesculus-**, or **Prunus-Essence** (WALA) – 2-3 tablespoonfuls per bath, or the above-mentioned dispersion bath oils. The baths should be of 10 min. duration, temperature not to exceed 100.4 degrees F. After drying, **Blackthorn Massage Oil** should be rubbed over the entire body.

Diet

In the first weeks, raw food should be eaten as much as possible (provided the digestion can assimilate it). Otherwise, a strict vegetarian diet should be adhered to, if possible for several months. Avoid sugar and white flour. Foods rich in vitamins B and C are important; salad, vegetables (if possible, lacto-fermented), fresh fruit, bio-dynamic or organic wheat and barley (freshly milled or soaked overnight in water), wheat germ flakes, millet, oat flakes.

To insure successful medicinal treatment, the patient's cooperation in dietary matters is essential.

Sample diet for one day:

Breakfast:

2-3 tablespoonfuls cottage cheese with 1 tablespoonful thistle, flaxseed or walnut oil, mixed with wheat germ flakes and fresh fruit. In addition, crackers, whole-grain bread, herb tea (unsweetened kidney or liver tea).

* For details, see note in Typical Illnesses and their Treatment, No. 5 – Arthropathy.

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Mid-morning:

Vegetable juice (beet, carrot, if possible lacto-fermented), crackers with butter or cheese, cottage cheese.

Lunch:

Large salad plate with lemon juice and sour cream, curry rice (whole grain), millet, baked bananas, zucchini, cheese, cottage cheese, fruit.

Mid-afternoon:

Herb tea (can be sweetened with honey), crackers, whole-wheat or flaxseed bread, butter, almond butter.

Supper:

Raw food, salad, bread (as above), butter, cottage cheese.

Summary of the Above-Mentioned Combination Remedies

Berberis/Quartz	Amp.
Berberis e fruct.	D3
Quartz	D20
Echinacea/Argentum	Amp.
Echinacea e rad.	D3
Argentum	D30
Hepar sulfuris comp.	Amp.
Hepar sulfuris	D6
Membrana sinuum paranasalium	D4
Myristica sebifera comp.	Amp.
Argentum nitricum	D20
Kalium bichromicum	D6
Myristica sebifera succus e cortice	D4

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