



# The Lovely Man in the Fedora

## A cured case of post-herpetic neuralgia

by AMY ROTHENBERG ND

DURING A TYPICAL DAY AT WORK, IT'S NOT UNCOMMON FOR MY receptionist to hand me a phone message asking me to call a prospective patient about a specific complaint. The patient or their caregiver usually wants to know if I can help them or their loved one with a particular illness. I will pick up the phone, learn a little about the person with the problem, offer my thoughts, and share bits from my relevant experience.



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pears, too. Sometimes, however, the pain continues long after the rash is gone; this is known as post-herpetic neuralgia and can continue for many months or even years.

Richie's 90-year-old father, Frank, was the unlucky patient who had been enduring severe pain for several months, ever since an outbreak of shingles. I told Richie that I'd had good experience treating post-herpetic neuralgia, that the prescription was not routine, and that yes, I would be happy to treat his dad.

### Tall, straight ... in pain

Frank arrived a few weeks later with his son and daughter-in-law in tow. He was tall and straight, dressed in a long, grey, cashmere overcoat with a fedora placed squarely on his head. His eyes were a bit rheumy, but his large, strong hands conveyed warmth and sweetness. Here is the story that unfolded.

Frank had had a bout of shingles some three months prior to this visit. The eruption was on his left chest underneath the breast area. It was accompanied by sharp, stabbing sensations, intermixed with a relentless dull ache. His doctors had prescribed antiviral medication and the rash slowly receded. Unfortunately, however, the pain did not; if anything, it seemed to worsen.

What was even more noticeable, especially to his son, was that Frank seemed depressed. Usually quite outgoing and communicative, for the first time in his life Frank preferred to be alone and did not want to be involved with his large,

Such was a phone call I made to 60-year-old Richie about post-herpetic neuralgia. This condition, which sometimes follows an outbreak of shingles, can be quite painful and long-lasting. Herpes zoster, the medical term for shingles, is caused by the varicella-zoster virus, the same virus that leads to chickenpox. Those who have herpes zoster complain of a bubbled rash usually accompanied by pain in a particular skin area related to an underlying nerve—hence the intense neurological pain that sufferers endure. When the rash is present, people may also experience fever and general malaise. Once the rash goes away, the nerve pain usually disap-

social family. He was losing interest in all the things he had enjoyed into his later years, such as gardening, woodworking, and music.

### What shifted?

Like any good homeopathic sleuth, my first question for Frank was, “What was happening in the months preceding your shingles?” Was there anything in Frank’s story or his life that would have made him susceptible to shingles and the ensuing depression, I wondered? Had he become depressed before the shingles outbreak for any reason? This is what I wanted to understand: what *shifted*, so that the course of this healthy, robust person’s life had also shifted?

Very occasionally when a homeopath pursues this line of questioning, the patient will answer, “Nothing happened.” But be persistent! More commonly, perhaps with a bit of prodding, what emerges is a story: an event, experience, realization, trauma, or grief that has powerfully impacted the patient. Whether it affected the psyche or the immune system or caused other physiologic reactions, look for what the stressor may have been and how the patient reacted to it. In general, each of us reacts to stressors in patterned and predictable ways. One person may always get a sore throat when under pressure, another a flare-up of a skin condition or digestive problem. The patterned way a person manifests illness is a reflection of their constitutional type. By prescribing that constitutional remedy, we are able to address these underlying tendencies.

### A monumental loss

It turned out that Frank had had tremendous stress before the shingles outbreak—in fact, several different events had impacted him within a narrow timeframe. Sadly, five months before our meeting, Frank had lost his beloved wife of 72 years. His daughter-in-law chimed in to tell me that theirs had been a truly rare relationship of mutual admiration and

support.

The love that emanated from their household was legendary among their six children and many grandchildren, great-grandchildren, neighbors, and friends. How lucky they were to have been blessed with long lives together!

Though Frank seemed to handle his wife’s passing with grace and stoicism, one month later he landed in the hospital with a mild heart attack. During the recuperative phase, he developed severe pneumonia and teetered between life and death for several days. After three weeks in the hospital, he finally seemed strong enough to return home. A few days later, the shingles appeared.

When you speak by phone and get only the slimmest sketch of the problem or perhaps just the name of the illness, you can never know the full story of where that diagnosis fits into a particular person’s life. This, of course, is the joy and privilege of being a homeopath: understanding people, their lives, and the context for their ailments. How much more compelling to grasp the context and see the person’s vital force offering up characteristic symptoms and clear modalities, than simply to treat “post-herpetic neuralgia”! Unlike our allopathic colleagues who prescribe based on what is *common* about an illness, treating all who have a particular diagnosis in much the same way, we homeopaths work to *understand* the person with the illness and to prescribe individualized treatment based on that person’s unique situation.

### New constitutional state

After hearing many examples of Frank’s strength and fortitude, his compassion and need for connection, I knew that his current situation had him veering in another direction. He had reacted to the multiple stressful events in his life with depression, retreat from others, and phys-



ical illness—ways that were *atypical* for him.

Although I had not treated Frank before, I

knew that whatever remedy I would prescribe would be different than what he would have received just a few years back. To me this reflected the idea that he had now moved away from his former constitutional type into a new constitutional state. Because Frank had already been ill for more than three months, I categorized his current condition as a new chronic state—rather than an acute illness.

### Rash gone, pain remains

After the shingles rash disappeared, Frank had been left with the dull ache in his chest interspersed with frequent strong shooting pains. He did not want anything to touch the area. He felt worse with motion, especially of his arms. His only relief was in a hot shower. He was short of breath, a new symptom for him, probably secondary to his serious dance with pneumonia. He was also less steady on his feet. This may not seem unusual for a man in his 90s but it was a big shift for Frank who prided himself on his self-sufficiency and physical abilities.

Since the shingles, Frank complained of a chronic, low-grade headache on the left side; it was nondescript and worse with light. He was struggling with tremendously dry, cracking lips, which might have been due to some of his pain medications. His digestion was good, and his appetite was normal for him with no particular cravings or aversions. He was thirsty for room temperature water. He was generally neither warm nor chilly. He slept on his left side, even with the post-herpetic neuralgia pain there.

He’d been having a serious problem sleeping since this ordeal began and was taking pain medication and sleeping pills; he’d also just begun an antidepressant. Frank said the pain meds made him sleepy



all day, yet he was unable to sleep at night. He was also taking cardiac and cholesterol/blood pressure lowering drugs.

### Two tasks

In my estimation, I had two jobs to do. I needed to help reduce Frank's pain from the post-herpetic neuralgia; but I also needed to address his mounting depression. It could be said, of course, that the chronic pain itself was depressing, but both Frank and his family felt that his depression was more due to feelings of loneliness and sadness about losing his wife and best friend.

In repertorizing Frank's case, I considered symptoms of his pain along with his emotional concerns, and several remedies were strongly represented including *Ranunculus bulbosus*, *Rhus toxicodendron*, and *Natrum muriaticum*. Although the first two remedies covered Frank's physical symptoms well, the *Natrum muriaticum* covered those symptoms *along with* his emotional state—the ill-effects of grief, his depression and insomnia, and his preference for being alone. Whenever we are able to address the whole person with one remedy, we should choose that remedy as it will act more deeply and the patient will feel better overall.

### Deep-acting remedy

I gave Frank one dose of *Natrum muriaticum* 200c and asked him to call in two weeks. I would not want to wait longer than that if the remedy was not correct. I also advised him to talk with his family doctor about discontinuing the anti-depressant. He had just begun it, and he didn't like the way it made him feel.

When Frank and his son called back two weeks later, Frank reported that he had no sharp pains in his chest but the dull ache was still there. He reported feeling more energetic and brighter. He had attended a large family gathering and enjoyed the hustle and bustle and being around all the children once again. Frank's son said that his father seemed more himself—interested and engaged in life. I told them this was a good preliminary report and that I would see him in the office two weeks later.

When Frank arrived, I knew right away he was better. He had a jauntiness to his

gait and a big smile for me. When the subject of his cataracts came up, something we'd not talked about at our first visit, he said, "Yes, they are definitely an issue, in fact I can hardly see you." Not missing a beat, I said, "You know, I'm really very pretty," to which he quickly replied, "Oh yes, I know that." He had a kind of levity and ease and very upbeat energy. That said, he still had the dull ache remaining in his chest; however, his headaches were gone, his lips were healed, and his sleep had greatly improved.

### Treating what's left

At a follow-up visit like this when a patient has done well and the remaining symptoms are covered by the remedy you initially gave, in most cases, you would simply wait or perhaps repeat the remedy. In Frank's case however, several of the things covered by *Natrum muriaticum* were now gone (the mood issues, the headaches, the cracked lips), and they were *completely* gone. I decided that he was no longer in that *Natrum muriaticum* state and that what was left to treat were strictly the local symptoms left by the herpes zoster—a left-sided, post-herpetic, dull ache. The pain was worse when he moved his arms or took a deep breath, and he had itching in the area.

So I decided to prescribe very specifically for his remaining symptoms by giving him *Ranunculus bulbosus* 200c. I had confidence changing remedies this quickly because Frank exhibited a strong vital force, which had reacted well to *Natrum muriaticum* and which presented symptoms clearly. And now, his manifestation of symptoms was clearly pointing to *Ranunculus bulbosus*.

Over the course of several weeks, the dull aches slowly dissipated and Frank felt better than ever. He jumped into projects around the house, and in the several years since I treated him, I hear periodically from his family members that he is doing well.



### ABOUT THE AUTHOR

Amy Rothenberg, ND, with her husband and partner, Paul Herscu, ND, teach for the New England School of Homeopathy. For information on the Two Year Certificate Course scheduled to begin in February 2007, or to subscribe to the online *Herscu Letter*, visit [www.nesh.com](http://www.nesh.com)



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### Where homeopathy shines

Post-herpetic neuralgia is a complaint that the conventional medical world is not often able to help. The strong pain medications prescribed may numb or lessen the discomfort, but they come with side-effects and other issues. So, do not hesitate to recommend homeopathy in these cases—but be sure to take the whole case and understand the neuralgia in the context of the whole person.

### Postscript: a phone call

When Frank's son Richie called a few weeks after the *Ranunculus* prescription to give me the preliminary report on his father, he thanked me profusely for my help, saying that he felt like he had his old father back. He wondered if he could ask me an unrelated question. Did I think homeopathy could help his chronic prostatitis?