



TEENS

Are Our FUTURE!

Nurturing our young people for a healthy tomorrow

By Amy Rothenberg, ND, DHANP

One day when my children were 4, 5, and 7, they dashed off in three different directions just as I was trying to round them up to leave the playground. A woman watching us called out to me: “Oh honey, you think you have your hands full now, just wait ten years!”

Ten years? I seldom had the leisure time to think that far ahead. With three children close in age, it was hard enough just getting dinner on the table!

As it turned out, I was blessed with kids who evolved into energetic, engaged, and thoughtful teens. Yes, my hands were full, as the woman had predicted, but in a good way.

No guarantees

It might not have been that way, however. I frequently meet parents who have seemingly done everything right, yet their teens have veered into self-destructive behavior, unhealthy relationships, substance abuse, and school failure. Or perhaps the teens simply do not engage, do not take responsibility for their lives, and “fail to launch.” We do our best as parents, but sadly, there are no guarantees.

Adolescence is a time of tremendous emotional and developmental vulnerability. The added stress of hormones and heightened expectations at school and elsewhere can stress a teen’s system in such a way that new symptoms arise or long-term symptoms get worse.



Teens are our future

I love helping people of all ages, but it is with teenagers that I do my most creative work—gaining trust, speaking a particular language, and consciously creating a unique relationship to help them get through their troubles. I also know that our time together may influence their career choice and the way they think about medicine, healing, and life, for years to come. I do not take this challenge lightly.

In my 35-plus years working with teens, I am heartened to see them blossom with the aid of homeopathy and natural medicine—health restored, passions ignited, and social skills honed. I take vicarious pride in their strong curiosity about the world and their brave experiences and accomplishments, large and small. Teens are the future adults of my practice—and our world! It's important that we treat them well!

Teens in turmoil

Unfortunately, the stresses of our current times, layered with social media and the impact of the pandemic, have hit our teens

hard. They are experiencing more mental illness, more severe mental illness, and more physical pathology than ever. These are the teens that find their way to my office. Parents bring them in for help with physical complaints, including acne, menstrual cramps, PMS, juvenile arthritis, irritable bowel syndrome, and headaches. Other teens need help with cognitive or emotional challenges, such as ADD/ADHD, behavior issues, anxiety, depression, and low self-esteem.

How I work with teens

What follows are some thoughts and details on how I work with teens—developing a rapport, making careful observations, and gathering pertinent information—to tailor an individualized, effective treatment plan for the unique teen before me.

Later, I'll share the stories of Tyler and Lena, two teens in my practice who were helped with homeopathy and natural medicine.

The consultation. Younger teens often want their parents to join them in the visit. Older teens may also prefer this if they are close with their parents or need help retelling medical histories. This is fine, of course, but I tell them up front that I might like a little time alone with each of them, as there may be something one party wants to say without the other's presence.

I often take a minute to explain how the consultation will work—that I am interested in the details of their complaint and how they experience it, that I want to understand their complaint in the context of their overall health, life situation, and habits. My questions will be new for most teens, and unless they are very extroverted, their answers may be brief or even unhelpful. By the second or third visit, however, they often get the hang of what I'm after, and they begin articulating specifics and particulars better.

Supporting parents, too. Parenting teenagers can be a delicate dance done while feeling clueless and isolated. I aim to make my office a place where parents can turn for support, recommendations, appropriate referrals, and especially encouragement.

Keeping it confidential. Unless I believe a teen's behavior is dangerous to themselves or others, I keep all information shared in the interview private. This includes drug/alcohol use, intimacy, and sex. If I feel that it might help the teen to talk about these issues with parents or other adults, I give that advice or ask permission to share certain information. If I believe

the teen is in imminent danger, however, then I will share this information. I tell parents and teens about my policy before we begin treatment, so that we are all clear from the start. I have turned patients away who could not abide by this policy, much as I've hated to do that.

Observing teens' behavior

Here are some things I look for when I see teen patients in the waiting room and in my office. These observations give me clues into homeopathic constitutional remedy types; they also inform my case-taking and what questions I might ask.

Interaction with parents. Some teens are very attached to their parents, sitting close by, chatting, and perhaps acting childlike. If I see this in a 13-year-old, I pay it less attention than in a 17-year-old. But it might lead me to ask further questions about independence, confidence, or decision-making, as well as to consider a remedy likely to help overly insecure teens, such as *Pulsatilla* or *Baryta carbonica*.

Interaction with siblings. Some teens totally disengage from younger siblings, some become automatic caregivers, some use siblings as constant sources of conflict expression, and some are reluctant babysitters.

Interaction with office staff. An older teenager might be flirting with my receptionist, another teen might be chatting up the UPS delivery person, while another might be letting the parent do all the interacting with other adults in the waiting room. Some older teens arrive on their own and handle intake forms and payment themselves.

What they're reading. Did they bring their own reading material? Is it science fiction, non-fiction, biography, romance, or a school book? Or did they choose a magazine from our piles, and which one? This can give me insight into interests and passions, which can help with conversational flow, especially during the early part of the consultation.

I am heartened to see teens blossom with the aid of homeopathy and natural medicine.



What they're wearing. Lots of clues here! Are they dressed creatively, provocatively, messily, grungily? Or do they seem to be dressed as their parents want them to be? Is it all black or see-through and strapless? How high are the shoes? Are they dressed appropriately for the weather? Are they conscientious about small things or carefree? Conscientious teens who attend to every detail call to mind homeopathic remedies such as *Natrum muriaticum*, *Thuja*, *Nux vomica*, or *Carcinosin*. Of course, each remedy type is conscientious for a different reason, and I would not prescribe solely on this; as I tell my students, observations are only as good as the questions they lead me to ask.

What they're listening to. If they're listening to music, what kind is it, and at what volume? Do they sing along, thump their hands, dance in their seat, close their eyes, or constantly switch stations or songs?

What else they're doing. They may be drawing, raiding the lollipop container, sleeping, chewing gum, eating candy, arguing with their parents, or self-grooming. If they are eating or drinking, I pay attention to what it is and whether they are doing so surreptitiously or with gusto, neatly or messily, sharing or in private.

I recall one teen who was plucking her eyebrows in my waiting room when I first met her, which I found unusual. She ended up responding well to the homeopathic remedy, *Sulphur*, which helped her complaint of chronic diarrhea. One attribute of people who do well with *Sulphur* is that they often do not care what other people think about them!

Noticing teens' appearance

Some things I notice about a teen's physical appearance that help inform my case-taking include:

Posture. This says a lot about physical strength, anatomy, and self-esteem. Attitude can also be reflected in posture and gait.

Skin. Is it smooth and baby-like? Is there acne? Is there facial hair? Are they shaving?

Hair. Many teens use hair as a form of self-expression and style. I notice the amount of hair (zero to a lot), the shape and style, the various colors, and whether it is groomed.

An older teen patient of mine had a shaved head and tattoos along his neck, much to his parent's dismay. His problem was asthma. He did well on the constitutional homeopathic remedy, *Medorrhinum*, which fit his tendencies to have asthma, erratic behavior, and a passionate need for self-expression. Shifting his diet away from dairy and refined foods also contributed to his improvement. And the tattoos remain!

Tattoos. I have seen teens with tattoos anywhere they have skin.

Some get tattoos to rebel, others to express themselves; still, others succumb to peer pressure.

Makeup. What kind and how much? Is it applied skillfully or just slapped on? Does it match the rest of the appearance?



Piercings. It is not unusual to see pierced noses, navels, eyebrows, and tongues, as well as many piercings on all parts of the ear in teens (and adults) of any age.

An aside: I've seen a number of patients with navel piercings who develop vague but constant abdominal pain that improves when the jewelry is removed. I've also had patients with a history of nipple piercings who later get abnormal mammograms with suspected lesions around the nipple.

Never act surprised

I never act shocked at anything, including tattoos and piercings, and I always ask about what I see. When did you do that? Did it hurt? Why did you do it? Would you do it again? That way, I can get a sense of whether the teen has regrets or whether that choice is still reflecting something important to them.

Tumultuous Transition TO TEENAGER

Homeopathy helps her back on track

Everyone goes through a tremendous transition from child to teenager—for some, it is more difficult than others. From a homeopathic point of view, some kids stay the same “remedy type” throughout the transition, for example, going from a sweet *Pulsatilla* kid to a sweet *Pulsatilla* teenager, no doubt becoming a lovely *Pulsatilla* adult. Other kids experience adolescence as if a huge volcano is erupting inside, and they move through various remedy types within a few years. Sometimes these changes make the teens unrecognizable to their parents, friends, relatives, and homeopath!

I remember the first time I had this experience. I had treated eight-year-old Mindy for chronic earaches. A ruddy, open-faced child with a sunny disposition, she had done very well on *Calcarea carbonica*, followed by *Sulphur*, over the course of two years. I didn't see her again for three or four years until, at age 14, she was brought in by her concerned mother for suicidal depression.

When I went to greet Mindy, I was met by a girl dressed entirely in black, including black nail polish, black eye-liner, and black lipstick. Her black t-shirt was ripped into shreds until just below the breast, and her hip-hugger pants were millimeters above her pubic bone. Her hair was greasy and completely covering her face, that is, the part that wasn't teased up into a dread-locked beehive. She wore six-inch black platform boots and towered over me as she skulked into my office.

I was overwhelmed. Where had that sweet girl gone? Where was all that openness and love of life? I had to quickly regroup.

In my experience, teens with serious self-destructive or violent tendencies often have a history of great family stress, such as divorce, death of a parent, parental extramarital affairs, a move to a new home during key years of friendships and courting, or serious financial problems, and Mindy's family history included such difficulties. Mental health issues or drug and alcohol abuse in the parents can also be a contributing factor. Even though parents have been sober for many years, their children are more at risk for the same behaviors, much to parents' deep regret.

Thankfully, I was able to connect with Mindy, and she was greatly helped with the remedy *Medorrhinum* (often used for those attracted to extremes and the wilder side of life), followed by the remedy *Aurum metallicum* (often useful for those who sink into a dark depression).

Mindy is now a graceful, worldly, college graduate and mother of four. As an adult, she seems to have landed somewhere between that open-hearted child and that suicidal teen—reserved and thoughtful but content and enjoying her life and family.



For instance, if a teen is dressed in many clothing layers during warm weather, I ask whether they are chilly, are covering up, or just like to be cozy. I don't take anything at face value, and I do not judge. Every symptom, every outward manifestation of the person is context dependent; you have to understand “the why” of what you see. In fact, there is almost no face value without the context.

Teen attitudes, practitioner feelings

I always aim to understand the attitude of my teen patient. It might reflect how they feel about being in the office that day (e.g., what they had to miss to be there), or it could be a general expression of their underlying perspectives on life. Paying attention to how I'm feeling offers me another big clue. Perhaps

I feel sorry for them, amused by them, annoyed by them, or unable to connect with them. I don't pass judgment or prescribe solely on this; rather, I use the information that I perceive via observation or my kinesthetic sense to inform the questions I ask.

For me, the most difficult patients are the ones who seem shut off from everything. I have to find some way in for these kids, especially if they really don't want to be there. I try to loosen things up by talking about anything I know they may have some interest in or had some interest in (tipped off by parents). I try to name what I'm feeling because they're probably feeling it too, for example, “It's really a bummer to have to be here, isn't it?” or “Let's try to do this quickly, so you can get back to whatever

it is you'd rather be doing." The following story of Tyler exemplifies this.

Tyler drops out

Tyler's mother called me about her son. "He has basically dropped out of life," she said. Seventeen and in the 11th grade, Tyler refused to go to school, did not want to see his friends, and was no longer interested in soccer, once a true love.

"He says he's depressed and that 'nothing matters anyway,'" she told me. She could not pinpoint any particular stress in Tyler's life that would account for his changed mood, beyond the overall isolation of pandemic times. "He has low self-esteem. He's a follower. He doesn't really have a sense of himself. His older and younger brothers are just more clearly who they are—you can tell what they think and feel about things. With Tyler, not so much," said his mom.

When I later interviewed Tyler over Zoom, it was rough-going. It's hard to connect with someone you don't know over the internet when that person a) does not want to be there, and b) is struggling mightily. I was able to piece together that Tyler felt like life was not worth it and that he was not worth it. All the effort he put into school or soccer or friends, "what did it all amount to?" But he clearly stated that he was not suicidal.

A remedy for Tyler

Based on Tyler's low self-esteem, his lack of sense of self, and his actual dislike of himself, I decided on *Thuja*. He also had physical confirmatory *Thuja* symptoms of dry hair, skin tags, and warts, but I would have given *Thuja* without those as well.

Initially, I had considered *Baryta carbonica* for Tyler but ruled it out. While it fit his lack of sense of self, he didn't have the immaturity with dependence on his parents or the frequent upper respiratory infections with swollen glands that I would expect. I also ruled out *Staphysagria*; while it can help people with depression that develops from super-low self-esteem, Tyler's bigger issue was his lack of sense of self. I would have considered *Anacardium* if Tyler's self-worth had been even lower, but he lacked the violent and aggressive tendencies that we see in people who need that remedy.

Crawling back to life

I prescribed *Thuja* 200c. The following week, Tyler's mother left a message: "He's decided he wants to go back to school." A good first report!

Over the next few weeks, Tyler crawled his way back into his classes, spending time with friends on the weekends. At our one-month check-in, Tyler was much more engaged in our conversation and shared stories about his friends. He could complain articulately about the years he lost to the pandemic, but over some months, Tyler developed a stronger sense of who

he was and what he wanted. He applied to college and eventually graduated from high school, with a group of close friends along the way.

Over time, I have given Tyler additional doses of *Thuja* when he had a few small setbacks, such as when his mood dropped or when he had a sore throat, and each time he bounced back easily. His mom feels the remedy saved him.

Hot-headed Lena has headaches

Lena was 14 when she came to see me. She was struggling with headaches that had begun the previous year, during a stressful time when her parents told her they were separating. A strong-willed, forceful child, Lena reacted to the news of her parents' separation with angry outbursts and stomping around the house. She seemed to be in a bad mood all the time and began bossing around her younger sister. At school and with her friends, however, she remained her usual upbeat, even happy-go-lucky self, with well-developed social skills and many attributes of a good leader.

Lena's headaches would come on suddenly, often after one of her outbursts, and could last for hours. They started with a bolt of pain and a pulsating feeling all over her head, accompanied by nausea without vomiting. She needed to be in a dark, cool (even chilly), quiet room, not disturbed by anyone or anything. Lena's menstrual cycles, which had started the previous year and were not yet regular, did not seem related to the timing of her headaches.

Beyond the headaches, Lena was a robust teenager, tall for her age and solidly built. She was muscular and strong but not overweight. She had a wide face with bright eyes and an easy smile. She enjoyed sports and listening to music and told me she would never do drugs or alcohol.

During the interview, Lena talked back to her mother on most every point—not aggressively, but with self-assuredness and confidence. She seemed incredulous at her mother's lack of understanding (to Lena's eye) of anything. Lena knew what she liked and wanted, and she was comfortable sharing that with her parents, as well as with me, a doctor she was meeting for the first time.

Choosing a remedy

On my short list of remedies to consider were *Medorrhinum*, *Lachesis*, and *Belladonna*, as they are often good matches for robust, outgoing people who "take up space" in a room, like Lena. In particular, *Lachesis* and *Belladonna* correspond with a tendency for headaches.

If Lena needed *Medorrhinum*, I would expect her to show more interest in sexuality and intimacy, as well as experimentation with alcohol or drugs; instead, she actively stated, "I'm not there

yet with that stuff.” I would also expect a strong risk-taking tendency, which she did not exhibit. Those who do well with *Medorrhinum* often have a chronic or recurrent discharge of some type, perhaps from the nose or vagina, but not so for Lena.

If Lena needed *Lachesis*, I would expect to see jealousy or suspiciousness, but I saw none. In fact, Lena seemed a bit naïve and open-hearted.

Lena’s symptom of feeling worse from heat during a headache correlates with both *Lachesis* and *Belladonna*. But it is *Belladonna* alone that covers Lena’s personality—open-hearted, exuberant, and full of *joie de vivre*—along with her bothersome chief complaint of headaches. Recall the sudden onset, the desire for a cool, quiet, and dark room, as well as the throbbing quality of her pain, which all point to *Belladonna*. She also had confirmatory *Belladonna* symptoms of a hot head during the headaches with cooler extremities, and she found at least temporary relief when she urinated. I gave her one dose of *Belladonna* 200c.

Headaches recede

Lena and her mother returned two months later, pleased to report that she’d had only one headache since taking the remedy. Prior to that, her headaches occurred several times a week.

Lena’s mom said her daughter’s disposition at home was brighter, and she was getting along better with her little sister. Lena still had the occasional emotional outburst, but less frequently than before. And when she did “go off” on her mom, it was less intense and was not followed by a headache.

It’s been two years since then. I have seen Lena a handful of times for acute ailments that arose, but she remains in good health and happily headache-free.

The real job of teens and parents

When I brought my last teen to college, as I helped him set up his room, he knew he didn’t really need my help, but he humored me by giving me small jobs like hanging up clothing and bringing things in from the car. I saw once again how very fleeting childhood is and how elements of adulthood are present from an early age. One child shows early the tendency to be organized or confident, one has an artistic bent or athleticism, another is exquisitely sensitive to people and surroundings. The small seed-like children grow in these in-between years and further embody their natural tendencies.

It seems the parents’ main purpose in teenagers’ lives is to support them in the only real job teens have: to figure out who they are and how they may best share their uniqueness and gifts with the world. And as the teen figures that out, the parents’ role is to encourage the young adult to create a path to that truth,

steadfastly stay true to that course, and stick to it through years of experience, work, disappointments—the stuff of life.

Hope and opportunity

I have had the immeasurable pleasure of treating many teens over the years. Even those struggling with physical or psychological issues often have tremendous creativity and energy, compassion and vision. Meeting these teens gives me every hope that the world is moving in the right direction.

The narrow strip of adolescence offers health providers a rare chance at helping steer young people in positive directions while we offer a supportive ear to the often-overwhelmed parents or caregivers. We ought never waste the chance. 💧

ABOUT THE AUTHOR



Amy Rothenberg, ND, DHANP, has been in practice since 1986 in Northampton, MA, www.nhcmcd.com. Her new book, *You Finished Treatment, Now What? A Field Guide for Cancer Survivors* (Koehler Books, 2022), can be ordered anywhere books are sold. See www.DrAmyRothenberg.com. With her partner Paul Herscu, ND, MPH, DHANP, she founded and teaches through the New England School of Homeopathy, www.nesh.com. Her writing can be found at *Medium*, *Thrive Global*, *The Huff Po*, and more. When not working, Dr. Rothenberg enjoys spending time with her family, in the garden, and on the ballroom dance floor.



Create a Lasting Legacy

A planned gift is one way you can make a meaningful contribution to the National Center for Homeopathy, while providing tax savings for your heirs. Gifts through wills, revocable living trusts, retirement (IRA) and savings accounts, life insurance, and similar plans can be structured to benefit you, your family, and NCH. Gifts of stocks, bonds, or mutual funds can support NCH and have long-term impact on homeopathy.

To learn more about making a planned gift to NCH, please contact our Resource Development team at info@homeopathycenter.org.

NCH does not provide legal or tax advice. We strongly encourage you to consult with your attorney, financial advisor, and/or tax advisor to review and approve any updates to your will or estate plan. We will gladly work with your independent advisors to assist in any way. NCH is a tax-exempt 501(c)(3) non-profit organization, so your charitable contribution is tax deductible to the fullest extent allowable by law.