



# Strange, Rare and Peculiar Symptoms of COVID-19 Cases Managed by Practitioners of the Homeopathy Help Network

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## Abstract

**Background** More than 670 million people have been infected by COVID-19. This case series reports 8 of 55 cases in a broader study of COVID-positive clients who sought homeopathic care for symptoms. Existing studies of homeopathy and COVID-19 have sometimes failed to employ the underpinning theoretical framework of homeopathy—the *genus epidemicus*. Special focus has been placed on standout symptoms not often reported in conventional medical outlets, known among homeopaths as “strange, rare and peculiar” (SRP) symptoms. The Homeopathy Help Network (HHN) team of practitioners noted SRP symptoms across dozens of cases and studied how they shifted collectively as different variants of the virus emerged.

**Methods** COVID-positive individuals self-selected for individualized care for their symptoms using homeopathy. They received tele-health consultations and individualized homeopathy interventions in an out-patient homeopathy clinical setting. Clients were seen by individual professional homeopathy practitioners and students under supervision working at the HHN in the United States. Cases for the series were hand-picked with the aim of being an average representation of the more than 4,000 COVID-positive cases seen by members of the HHN. Cases in the full compendium are grouped according to a predominant case feature: Multiple remedies, Posology, Time ill, Single remedy resolution, Hospitalization and, in this case series, SRP symptoms.

**Results** SRP symptoms included: continually on the verge of unconsciousness; dark green stools; very low pulse alternating with tachycardia; sensation of strong or burning chemical smells; sensation of inhaling water through the nose; recurring electric shock sensations in head or extremities; yellow-green stools.

**Conclusion** Collective SRP symptoms from the pandemic provided the opportunity to study the hallmark features of COVID-19 in depth. The importance of these symptoms highlights the applicability of Hahnemannian principles and good case-taking practices.

## Keywords

- ▶ homeopathy
- ▶ COVID-19
- ▶ strange
- ▶ rare
- ▶ peculiar
- ▶ characteristic
- ▶ case series

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## Introduction

The novel coronavirus (coronavirus disease 2019 [COVID-19]) infected more than 670 million people, with deaths nearing 7 million people globally by the spring of 2023.<sup>1</sup> Our research examines the strange, rare and peculiar (SRP) symptoms of individuals with this virus between March 2020 and December 2021. Homeopathy has a history of effective resolution of symptoms during epidemics.<sup>2</sup> Conventional medicine still has no preventative treatment other than general public health measures.<sup>3</sup> While some efficacy studies<sup>4</sup> and case studies with a focus on homeopathy and COVID-19 have been published in various parts of the world,<sup>3,5-10</sup> it has been observed that the theoretical underpinning that drives clinical decision-making in epidemics (the *genus epidemicus*), originally articulated by the founder of homeopathy Hahnemann, has often been missing in these papers. In this case series we examine the SRP symptoms and homeopathic care of clients that received tele-health consultations and individualized homeopathy interventions in an out-patient homeopathy clinical setting where symptomatic COVID-19-positive clients were seen by individual professional homeopathy practitioners and students under supervision, working together at the Homeopathy Help Network (HHN) in the United States.

The aim of the full case series, of which this paper represents a part, is to report individual symptom and remedy details of successfully resolved cases of 55 symptomatic COVID-19-positive clients who used homeopathy as adjunctive care for symptom relief. The eight cases collated here in this sixth part of the series are considered by the authors to be a relevant representation of the more than 4,000 COVID-positive individuals who have received care by the HHN team. Care was taken by the authors not only to include the resolved cases, but also to give a more average portrayal of the kinds of cases seen across 22 months. This makes for a wide variety of cases selected for publication. Some cases in the series show progression through acute phases with new symptoms emerging during care, whereas others resolve more quickly.

Cases included in this article represent clients across various regions in the United States as well as some clients from outside the country. HHN was created in March 2020 to respond to the urgent need of care for the burgeoning number of COVID-19 cases in the United States. All cases taken through HHN contribute to large-scale clinical-outcomes research designed to support international research initiatives in the clinical effectiveness of homeopathy. HHN clients receive individualized homeopathy case analysis and remedy recommendation; no protocols are used by the team. Individualized homeopathy is intended to stimulate a healing response, which reduces or removes symptoms. It helps those with symptoms move toward a stronger, dynamic state of health according to that person's specific array of symptoms across their health history.<sup>11</sup> In the homeopathic system of healing, when treating individual illness associated with epidemic/pandemic disease—different than in everyday individualized practice—the combined symptoms

of a large group of people with the same condition have special importance and serve to define the *genus epidemicus*, a small cluster of homeopathic remedies understood to address the whole symptom complex of the epidemic disease as if it affects one person.<sup>12-14</sup> It is understood that in different locations, the effects of various factors such as climate, collective emotional state, diet and virus strains impact how COVID-19 presents and must be taken into account when considering an emerging set of *genus epidemicus* remedies. HHN practitioners have committed to working closely together (and with colleagues across the world) to contribute to the identification and application of such a *genus epidemicus* through careful identification and collation of peculiar and common symptoms as well as the indicated remedies among the greatest number of cases possible. Clients were seen by individual professional homeopathy practitioners and students under supervision, working together at HHN in the United States. HHN is a working group of professional homeopathy practitioners, administrative volunteers, student practitioners under supervision, and independent researchers.

Subsequent cases in the full compendium are grouped by these additional features:

1. Multiple remedies: cases that required more than two remedy recommendations to move acute symptoms through to resolution.
2. Posology: cases that presented a unique perspective on remedy doses to reach symptom resolution.
3. Time Ill: cases in which clients were ill for 14 days or longer before receiving the HHN homeopathic intervention.
4. Single Remedy Resolution: cases that resolved with use of one remedy only.
5. Hospitalization: cases in which clients received homeopathic intervention while hospitalized.

At the time of publication of this case series, several articles in this series have been published online,<sup>15</sup> and others are in print.<sup>16</sup> As a consequence of this being a case series involving the cherry picking of cases with no controls, this compilation is in no way making claims about homeopathy, its efficacy in COVID-19, or suggesting homeopathic remedy guidelines for COVID-19 symptoms.

## Objective

This case series article places special focus on standout symptoms not often reported in conventional medical outlets, known among homeopaths as “SRP” (often defined as extremely characteristic) symptoms. Samuel Hahnemann emphasized that these “signs and symptoms of the disease case are to be especially and almost solely kept in view”.<sup>17</sup> The HHN team of practitioners noted SRP symptoms across dozens of cases and studied how they shifted collectively as different variants of the virus emerged. The eight cases included here were selected for one or more of their characteristic symptoms, which were also observed in other COVID-positive cases.

## Methods

The HHN team of practitioners was formed as a result of many professional practitioners and homeopathy students expressing their desire to be of service at the outbreak of COVID-19 in the United States. The practitioner and administrative team had a rotating roster of participants during the study period. Clients were seen by professional classical homeopathy practitioners (Council for Homeopathic Certification or a Registered Member of the Society of Homeopaths) of various levels of experience and students under supervision.

Self-selecting individuals, who were COVID-19 positive or probable, navigated to the WordPress HHN web portal and submitted an online intake form for assistance with their symptoms. In initial and subsequent consultations with the assigned practitioner (conducted via telephone or video conferencing software, as appropriate to the client's condition), additional relevant clinical data were added to the case notes. These included presenting symptoms, COVID-19 status at intake, other modalities/interventions used, comorbidities, and remedy details. Upon closing a case, practitioners submitted the anonymized case notes and outcome measures in Google Drive. This information was then collated for analysis. Participants provided their informed consent for participation in research projects and publication of their anonymized treatment data in an academic journal when they completed an online intake form. It is noted below in which cases clients received concurrent conventional medical treatment alongside the homeopathic intervention. HHN practitioners made no suggestion to alter or stop conventional treatments.

## Inclusion Criteria

A case series is, by definition, observational and non-controlled. Cases were hand-picked with the aim of showcasing a wide variety of cases across a range of time (21 months), geographic locations, team practitioners, severity of illness, and health status prior to infection. Cases were considered for inclusion in the case series only if they met the following criteria:

- Tested COVID-19 positive (reverse transcription polymerase chain reaction tested positive for 2019-novel coronavirus, serology test positive for immunoglobulin M / immunoglobulin G, or rapid antigen test specific for COVID-19).
- Resolution of symptoms noted at final contact with client.
- Existing clear case notes detailing symptoms, remedy recommendation, client compliance, and the stages to symptom resolution. (Note: cases with unclear remedy response, sometimes due to concurrent use of prescription or off-label medications, were not included.)

Each case presented in this series reports client symptoms throughout the intervention period, until full positive resolution had been achieved. Also included with each case are remedy and posology recommendations. Where available, repertorizations of symptoms are included using *Synthesis Treasure Edition Repertory 2009V* last updated in *RadarOpus*

2.2.16. Cases of vaccinated individuals were not included in this case series because it was a minority number, which did not represent the larger sample from this date range.

In severe cases, follow-up consultations sometimes took place as soon as an hour after the remedy was recommended and taken. Conversely, in situations with poor communications compliance, engagement could be delayed by days or weeks. Another important feature of the team's work was the limited availability of some first- or even second-choice remedies. Where possible, notes from the practitioner about using second- or third-choice remedies are included in the record. As the work of the team developed over some months into the pandemic, a handful of *genus*-potential remedies was emerging, but sometimes these remedies did not feature in the repertorization, as may also be evident in some case notes.

In clinical practice posology varies in the administration of homeopathic medicine (e.g., number of pellets, repetitions, liquid preparations, dilutions), but in this case series HHN practitioners recommended remedies in centesimal potencies to be delivered in dry or liquid doses. Some case notes included liquid dilution details, whereas others did not.

## Results

Case Series Part 6 focuses on cases where SRP symptoms were present in the cases: those that included standout symptoms not often reported in conventional medical outlets. Of the cases included here, the following are among the SRP symptoms noted by our team of practitioners: continually on the verge of unconsciousness; dark green stools; very low pulse alternating with tachycardia; sensation of strong or burning chemical smells; sensation of inhaling water through the nose; recurring electric shock sensations in head or extremities; yellow-green stools.

### Case 1 (HHN # 6)

This client was a 58-year-old woman who was a breast cancer survivor and had high blood pressure for which she took various prescription medications. She was symptomatic with COVID for 3 weeks and took three doses of hydroxychloroquine only prior to the intake. She presented with the following:

1. Extreme nausea for the last 4 days, can barely eat or drink (only eats crackers; gags on water), better walking around, worse on waking in morning.
2. No smell or taste.
3. Sharp pain in back near right lung for last 10 days, better reclined position and hot shower; pain can also come from occiput down the back.
4. Fever 100.6°F, chills with strong shivering, alternating between hot (face feels burned) and freezing; using fever reducer every 4 hours.
5. White coating on tongue.
6. Very weak and faint, everything is fuzzy, nothing in sharp focus.
7. Feels she has to hold onto self or will easily slip into unconsciousness.

See ► **Fig. 1.**

*Repertorization of characteristic symptoms.*

Remedy recommendation: *Arsenicum album* 30c dry dose twice, 1-hour apart.

Follow-up #1 the following day after two doses of remedy:

1. Nausea and back pain are noticeably improving.

Remedy recommendation: wait, or if symptoms worsen, *Arsenicum album* 30c one dry dose.

Follow-up #2 the following day after one dose of remedy:

1. Nausea is much worse, gags after two bites of food, better motion, walking.
2. Worsening weakness.
3. Back pain now extends over whole body with aches; rocks back and forth.
4. Fever of 101.6°F.
5. O<sub>2</sub> saturation level is ok.

Remedy recommendation: *Pyrogenium* 30c, dissolve two pellets into 4oz water, stir/succuss 10 times. Take one liquid dose every 2 hours.

Follow-up #3 the following day after taking liquid doses every 2 hours:

1. Slight improvement in all areas.

Remedy recommendation: *Pyrogenium* 200c, dry dose twice, 1-hour apart.

Follow-up #4 the following day after two dry doses:

1. Feeling a bit better in all ways.
2. No fever all day.
3. Less nauseous.

Remedy recommendation: wait or if symptoms worsen, repeat *Pyrogenium* 200c, one dry dose.

Follow-up #5 2 days later, after no additional doses:

1. "I've turned the corner", nearly 100%.

Remedy recommendation: not applicable (N/A), case closed.

**Case 2 (HHN # 124)**

The client was a 65-year-old woman, symptomatic for 6 days. Before the consultation, she had tried *Arsenicum album*, *Aconitum napellus*, *Bryonia alba* and *Arnica montana*, with no clear improvement. She had no chronic complaints and took no conventional medications. She presented with the following:

1. Strong nausea, little appetite, and easily sated.
2. Exhausted, weak, lethargic.
3. Strong muscle aches, much worse climbing stairs, pain causing tears; taking over-the-counter pain medication.
4. Face and scalp hurt, tender feeling.
5. Eyes very sensitive to light.
6. Shortness of breath with any exertion.
7. Loose bowel movements, with urging.
8. Thirsty for cold drinks.
9. Headache at occiput and behind ears, worse pressure and right side.
10. Dream: on a skateboard high up on a rocky, dusty mountain with no green, going down, where only two of the skateboard's wheels would fit on the cliff edge. She was making it down but turned back and was disappointed that she didn't just go for it.

See ► **Fig. 2.**

*Repertorization of characteristic symptoms with emphasis on emerging potential genus remedy, Coca.*

Remedy recommendation: *Coca* 200c, two dry doses 1-hour apart.

Follow-up #1, 2 days later after taking remedy as recommended:

1. Better energy after doses.
2. Today woke with headache and hip aches.

Remedy recommendation: *Coca* 200c, two dry doses 1-hour apart.

Follow-up #2, the following day after taking remedy as recommended and one dose of *Arnica* 200c today for pain:

1. Body aches returned.
2. Headache continues.
3. Strong back and hip pains.

	bry.	ars.	phos.	verat.	nux-v.	rhus-t.	acon.	puls.	merc.	bell.	cocc.	sep.	sil.	sulph.	ant-t.
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
5	5	5	5	5	5	5	4	4	4	4	4	4	4	4	4
10	9	9	9	8	7	5	10	9	7	7	7	7	7	5	4

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1. STOMACH - NAUSEA - drinking - after - agg.	(52)	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
2. STOMACH - NAUSEA - walking - amel.	(13)	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
3. MOUTH - TASTE - wanting, loss of taste	(127)	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
4. FEVER - SUCCESSION OF STAGES - heat - alternating with - shivering	(34)	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
5. GENERALS - FAINTNESS - weakness; from	(21)	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
6. MOUTH - DISCOLORATION - Tongue - white - heavily coated	(31)	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
7. BACK - PAIN - Dorsal region - Scapulae - right	(118)	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1

**Fig. 1** Repertorization of Case 6.

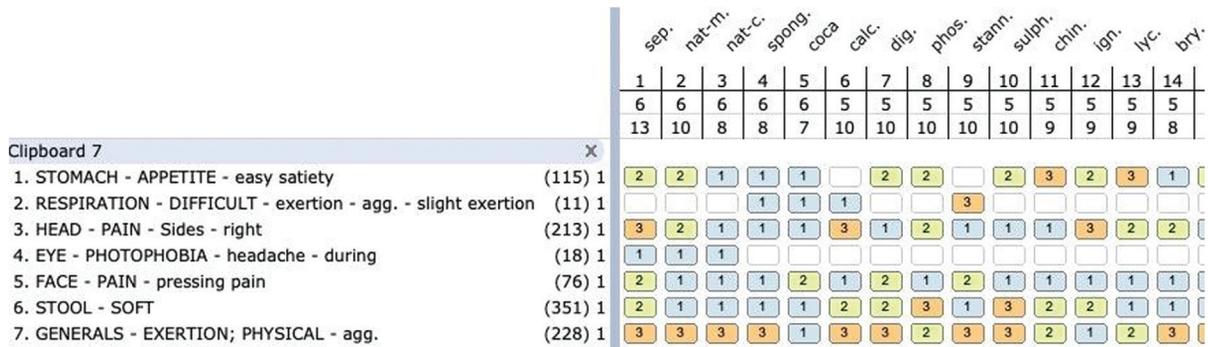


Fig. 2 Repertorization of Case 124.

- 4. Fever of 99.4 to 101°F.
- 5. Body aches reduced with *Arnica* dose.

Remedy recommendation: *Arnica montana* 200c, one dry dose every 15 minutes for four doses.

Follow-up #3 the following day after taking remedy as recommended:

- 1. Small improvement in body aches following dose, now returning.
- 2. Fever improved and has returned.
- 3. Energy dropped and became dizzy after standing.
- 4. Stools are dark green, almost black.
- 5. Has lost taste and smell.

Remedy recommendation: *Arnica* 200c, one dry dose every 15 minutes for four doses. Get *Ozonum* in 200c or 1M and take in liquid doses every 15 minutes for four doses if no better following the doses of *Arnica*.

Follow-up #4 the following day after taking *Ozon* 1M liquid doses every 15 minutes for four doses:

- 1. Slept much better.
- 2. Still having dark green stools.

Remedy recommendation: *Ozonum* 1M, one dry dose.

Follow-up #5, 2 days later after taking the dry remedy dose:

- 1. Energy is good.
- 2. No body aches or headaches.
- 3. Stool is still dark green, almost black.
- 4. Difficult bowel movement with sweat, palpitations followed by coldness and shaking.

Remedy recommendation: *Ozonum* 1M in 60 mL (2oz) water, liquid doses every 15 minutes for four doses.

Follow-up #6 the following day after taking the remedy doses, but in 236 mL (8oz) dilution:

- 1. Rested well.
- 2. Dark stools continue but without difficulty.

Remedy recommendation: *Ozonum* 1M in 236 mL (8oz) water, 1 liquid dose.

Follow-up #7, 3 days later after taking remedy dose as recommended:

- 1. Feeling much better, but some low energy continues.
- 2. Dark stools continue.
- 3. Still no taste or smell.

Remedy recommendation: *Ozonum* 1M, one dry dose.

Follow-up #8, a few days later after taking remedy dose as recommended:

- 1. All symptoms resolved and client returned to work.

Remedy recommendation: N/A, case closed.

**Case 3 (HHN # 449)**

The client was a 44-year-old man with no pre-existing conditions. He was symptomatic for 25 days. He presented with the following:

- 1. Chills with no fever.
- 2. No smell or taste.
- 3. 4 days ago, sudden difficulty breathing; strong pressure/weight at center of chest, much worse lying on back.
- 4. Exhaustion and shortness of breath with little activity.
- 5. Soreness in right side of back.
- 6. Bottom of feet very cold and sweating.
- 7. Tachycardia and very slow pulse when lying down.
- 8. Heart pounding jolting awake with difficulty breathing.
- 9. Very low energy; feels knees will give out—weak and numb feeling below knees.
- 10. Normal appetite but full after a few bites.
- 11. More thirsty than normal for cold water.
- 12. White coating on tongue.
- 13. Dizziness.

See ►Fig. 3A.

Repertorization of characteristic symptoms prominently placing the smaller remedy *Digitalis purpurea* followed by other remedies showing good results among other clients.

Remedy recommendation: *Phosphorus* 200c, two dry doses in 1 hour, one dry dose tomorrow morning (also get *Lachesis muta* 200c).

Follow-up #1, 2 days later after taking remedy as recommended:

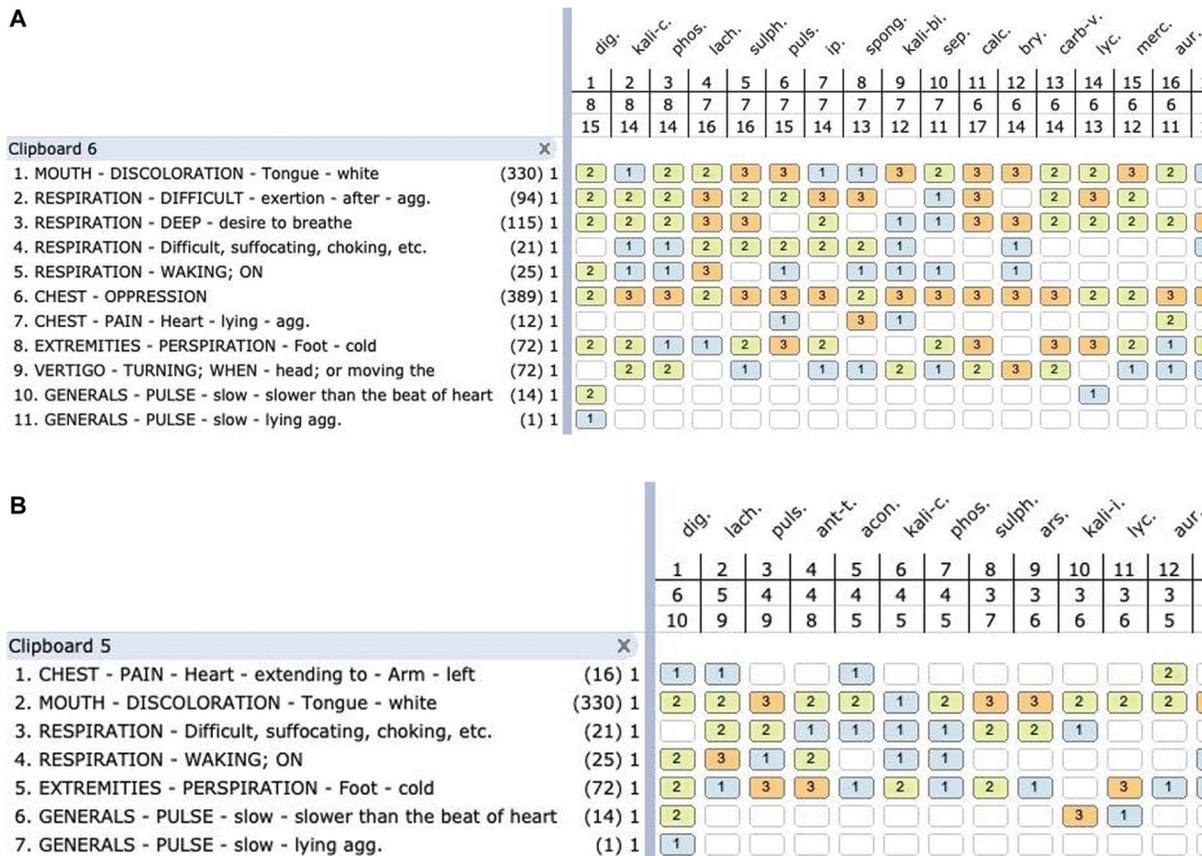


Fig. 3 (A) Repertorization #1 of Case 449. (B) Repertorization #2 of Case 449.

1. Back pain has improved.
2. Less dizziness.
3. Same difficulty breathing with weight on the chest.
4. Same drop in heart rate as falling asleep, startling awake, gasping.

Remedy recommendation: *Phosphorus* 200c, liquid dose every 2 hours.

Follow-up #2, the following day. Client misunderstood instructions and took *Phosphorus* 200c and *Lachesis* 200c together in water:

1. No difference in chest pain and pressure or shortness of breath.
2. No difference in heart symptoms.

Remedy recommendation: *Lachesis* 200c, two dry doses 30-minute apart, then liquid doses every 3 to 4 hours.

Follow-up #3, 2 days later after taking remedy for 1 day as recommended:

1. No dizziness.
2. Couldn't sleep; heart rate dropped below 50 and woke with a shock trying to breathe; breathing is fine when standing up.
3. Emergency room chest X-ray yesterday showed nodule in lower lobe of right lung and elevated D-Dimer test.

4. Pinching pain in heart last night and this morning, extending to left shoulder and upper arm.
5. Dreams of trying to rescue someone in a car that is burning or drowning.

See **Fig. 3B**.

A more focused repertorization on remaining characteristic symptoms, further indicating use of *Digitalis*.

Remedy recommendation: *Digitalis purpurea* 30c, three dry doses 30-minute apart, then, if any improvement, liquid dose hourly.

Follow-up #4, 21 days later (client was nervous about taking the remedy and had difficulty getting it). His symptoms had persisted, and he took the remedy as recommended only the day before follow-up #4 and reported the following:

1. Thirty minutes after taking two dry doses, pain and pressure in chest were relieved 100%.
2. Much improved energy after doses.
3. Last night woke up with somewhat low pulse and O<sub>2</sub> levels (smart watch alert, no jolting awake, as before).
4. In last few weeks has been exhausted by 1 p.m.

Remedy recommendation: *Digitalis* 30c, liquid dose once daily for 2 days.

Follow-up #5, 2 days later after having taken remedy only once more:

1. Slept well.
2. No pain, pressure, shortness of breath.
3. Improved energy.
4. Feels nearly 100%.

Remedy recommendation: N/A, case closed.

**Case 4 (HHN # 691)**

The client was a 47-year-old man with chronic headaches and no prescription medications at the time of intake. He had been symptomatic for 3 days and had taken repeated doses of *Aconitum napellus* and *Phosphorus* prior to intake, where he presented with the following symptoms:

1. Illness started with painful cold sore on lip.
2. Burning sensation in lower back, better with walking, returns upon lying down.
3. Nasal congestion, hard to breathe, feeling of not getting in enough air.
4. Smells strong bleach odor when inhaling.
5. Dull sense of taste and smell.
6. Extreme coldness and skin hypersensitivity.
7. Fatigue.

See ▶Fig. 4.

Repertorization of characteristic symptoms, showing several remedies for peculiar symptoms of smell of bleach and skin hypersensitivity.

Remedy recommendation: *Lachesis* 30c, two dry doses 30-minute apart.

Follow-up #1, the following day after taking the remedy as recommended:

1. Less pain in the back.
2. Less congestion.
3. Had diarrhea after eating soup.
4. Some fatigue, though reduced.

Remedy recommendation: *Lachesis* 30c, liquid doses every 1 to 2 hours.

Follow-up #2, the following day after taking remedy as recommended:

1. Less congestion but persisting.
2. Some fatigue is remaining.

Remedy recommendation: *Lachesis* 30c, liquid doses as needed.

Follow-up #3, 4 days later after having taken remedy only a few times in recent days:

1. Doing much better, jogged a mile.
2. Only weak taste and smell remain; all other symptoms are resolved.

Remedy recommendation: N/A, case closed.

**Case 5 (HHN # 724)**

The client was a 58-year-old man with no pre-existing conditions and no prescription medications at the time of intake. He had been symptomatic for 8 days with the following symptoms:

1. Fever of 100°F for 3 days—no fever at intake.
2. Fatigue with brain fog—cannot make decisions. Fatigue felt down through bones and knees. Energy is 10% of normal.
3. A “zinger”, like an electrical impulse, felt in toes and knees.
4. Diminished appetite and thirst.
5. Lost taste and smell 2 days ago, though some improvement at intake.
6. Thick white coating on tongue with a “cottony dry” sensation and bitter taste in mouth.
7. Headache with strong pain wrapping around front of head (from temples to center) for a few seconds, then rapidly disappearing.
8. Cough, worse in the afternoon with clear expectoration. Spasmodic coughing triggered by deep breath.
9. Shortness of breath, deep breathing triggers painful soreness at bottom of lungs.
10. Scratchy dry throat, worse lying on back.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Clipboard 7	X														
1. BACK - PAIN - burning	(98) 1	3	2	3	2	2	2	1	3	1	2		1		1
2. GENERALS - LYING - agg.	(213) 1	2	2	3	2	1	2	1	3	3	3	3	2	1	1
3. SKIN - SENSITIVENESS	(178) 1	3	2	1	3	3	3	2	1	2	1	1	2	2	1
4. NOSE - DISCHARGE - crusts, scabs, inside	(167) 1	2	3	2	2	2	2	2	1	2	2	1	1	2	2
5. FACE - ERUPTIONS - herpes - Lips - About	(80) 1	1	3	2	1	1	1		3		1		1	1	
6. GENERALS - BREATHING - deep - desire to breath deeply	(75) 1	3	1		3	2	1	3	2		2		3		1
7. NOSE - SMELL - wanting	(107) 1	2	3	2	1	3	3	3	2	2	3	2	2	1	2
8. MIND - DELUSIONS - smell, of	(22) 1	1		1	1								1	2	
9. NOSE - ODORS; IMAGINARY AND REAL	(123) 1	2	1	1		1	1	3	1	2	1	2	1	2	1

Fig. 4 Repertorization of Case 691.

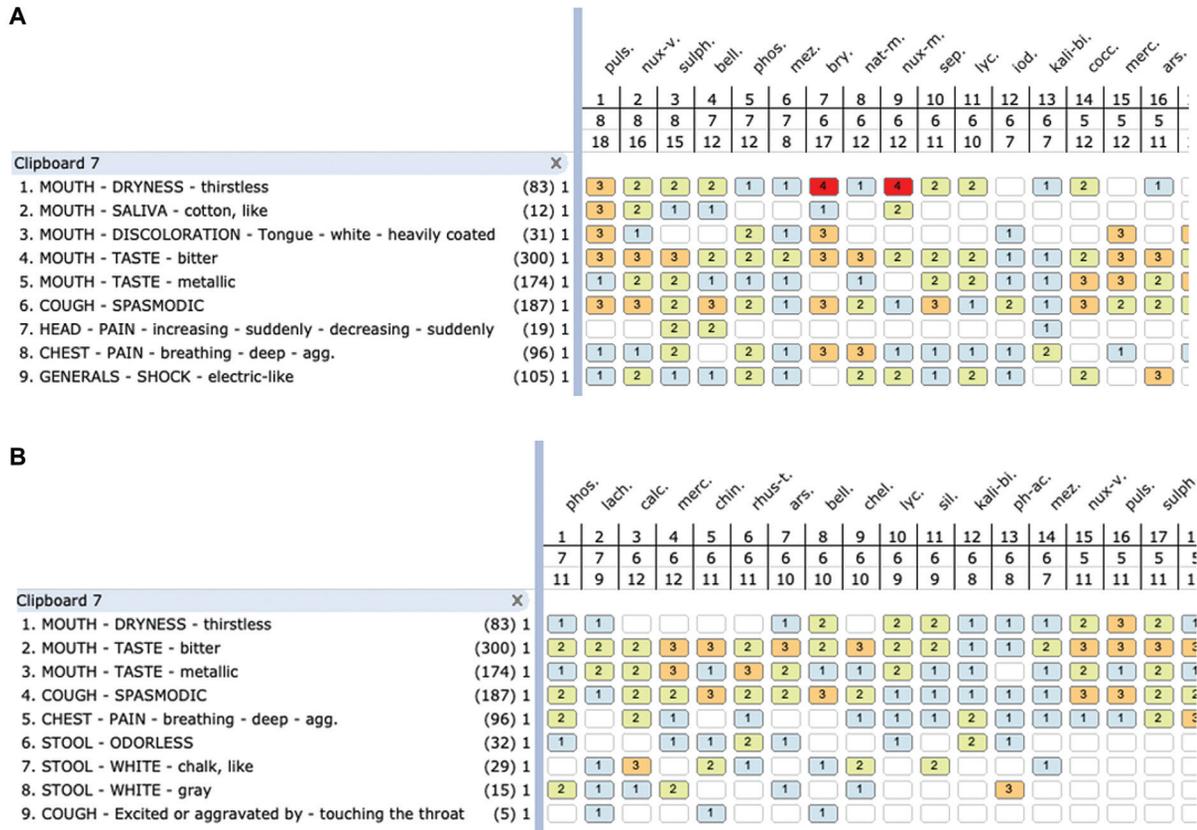


Fig. 5 (A) Repertorization #1 for Case 724. (B) Repertorization #2 for Case 724.

- Poor sleep, restless.
- Diarrhea early in illness—18-inch-long clear spiral liquid that seemed like mucous.

See ► Fig. 5A.

Repertorization of characteristic and peculiar symptoms.

Remedy recommendation: *Phosphorus* 200c, two dry doses, then liquid dose 4 times today.

Follow-up #1, next day after taking remedy as recommended:

- Fever returned after dosing with remedy yesterday evening—client also took acetaminophen.
- Fever returned in the last hour at 101.9°F.
- Profuse sweating on chest, back, inside legs, and arms.
- Client felt good but weak on waking.
- Coughing more intense and more frequent than yesterday without having to breathe deeply.
- Cotton sensation in mouth increased throughout day.
- Electric shocks have disappeared today.

Remedy recommendation: *Lachesis* 200c, two dry doses, then liquid doses 3 to 4 ×/day. (Note: client only has access to 30c today.)

Follow-up #2, 4 days later after taking *Lachesis* 30c liquid doses 4 times yesterday but none today.

- Fatigue continues—25% of full energy but stamina increased.
- Coughing greatly improved today (client coughed all day yesterday). Deep breath still triggers cough.
- No fever but chilly sensation.

Remedy recommendation: *Ferrum phosphoricum* 30c, dry dose 2 times in 1 hour, then in water every 3 to 4 hours.

Follow-up #3, next day:

- Cough improving—dry cough every 10 to 15 minutes.
- Headache this morning on waking that lasted for 30 minutes—“solid, pointed” pain on top, and pushing on both sides of head.
- Diarrhea yesterday and today—watery, pale, chalky. No odor, pain, gas, cramping, or urgency.
- Jacket zipped up to neck triggers cough.
- Fatigue continues.

See ► Fig. 5B.

Repertorization of shifting characteristic symptoms.

Remedy recommendation: *Lachesis* 30c in liquid every 3 to 4 hours.

Follow-up #4, later the same day:

- Client did not have any positive response to *Lachesis* 30c.

Remedy recommendation: *Phosphorus* 200c in liquid every 3 to 4 hours.

Follow-up #5, 3 days later, after receiving remedy the prior day and taking it as recommended:

1. Symptoms improving more quickly.
2. Light, breathy, mild cough remains.

Remedy recommendation: *Phosphorus* 200c in liquid every 3 to 4 hours.

Follow-up #6, next day after having taken 3 to 4 sips that morning:

1. Practitioner's observation: client's voice sounds much better.
2. Client reported that he had a tough day in cold, misty, windy weather yesterday and felt bad last night, as if a relapse would come.
3. Intense coughing last night—woke up to a coughing fit 2 hours after going to bed, with only slight expectoration. Cough remains spasmodic.
4. Sun greatly ameliorates symptoms—feels healing.
5. Covers or anything on the neck aggravates.

Remedy recommendation: *Rumex crispus* 30c, two dry doses in 1 hour. If any improvement, continue with liquid doses in 4oz water as needed.

Follow-up #7, 23 days later, after having taken the remedy for 3 days after last consultation:

1. Symptoms will not go away—some days are good, others not so good.
2. Fatigue continues—heavy sensation in body and weakness.
3. Difficult concentration—client feels he is in a vegetative state and just wants to stare into space. No desire to focus on previously inspiring art projects.
4. Easily irritated when son asks a question that he should already know the answer to.
5. Desires sugar but it aggravates, resulting in a “weird crash”.
6. Cough is occasional, light, when weakened.
7. Stool is thin, mushy, coming approximately every other day.
8. Clear, excoriating nasal discharge over last few days.
9. Eating well but no increased energy from food.
10. Mildly breathless after talking for an extended period.

Remedy recommendation: *Phosphoricum acidum* 200c in liquid every 3 to 4 hours.

Follow-up #8, 2 days later, after taking the remedy as recommended:

1. Energy much improved.
2. Nasal discharge diminished.
3. Sleep improved.

4. Stools normal.
5. Cough diminished.

Remedy recommendation: *Phosphoricum acidum* 200c in liquid every 3 to 4 hours.

Follow-up #9, 3 days later, after having not taken the remedy for the last 2 days:

1. Feeling much better .
2. Energy level at 90%.
3. Appetite good.
4. No cough.

Remedy recommendation: N/A, case closed.

### Case 6 (HHN # 785)

The client was a 53-year-old woman with diagnoses of Type 2 diabetes, asthma, depression, obesity, mild hypertension and eczema, and taking numerous prescription medications. She was symptomatic with COVID-19 for 15 days and presented with the following:

1. Headache with electric shock pains on right side, worse bending over, activated by deep inhale.
2. Intense, sharp burning in nose and chest, as if inhaling ammonia.
3. Lost taste and smell now altered—everything tastes metallic and bitter.
4. No appetite.
5. Dizziness each time rising or changing position.
6. Mild cough with small amount of clear expectoration.
7. Shortness of breath with any exertion, much better in cold fresh air.
8. Pricking pain around heart and left thorax on inhalation.
9. Very thirsty for cold water, drinking in gulps.
10. Strong craving for sour, fermented foods.
11. Mental cloudiness, can't focus, easily mentally overwhelmed.
12. Weakness in legs.
13. Extreme fatigue, needing 10 to 12 hours of sleep with multiple naps in the day.
14. Strong desire to be left alone.

See ► **Fig. 6.**

*Repertorization shows characteristic and peculiar symptoms.*

Remedy recommendation: *Bryonia alba* 200c, two dry doses 1-hour apart, then liquid doses every 3 hours.

Follow-up #1, 3 days later, after two dry doses and taking liquid dose 3 to 4 times daily:

1. Still needing 12 hours sleep.
2. Able to focus and talk with others better.
3. Less thirsty, still prefers cold.
4. Better appetite, still has bitter taste.
5. No cough or shortness of breath.
6. No more heart pricking pain.
7. Legs wobbly, but no dizziness.

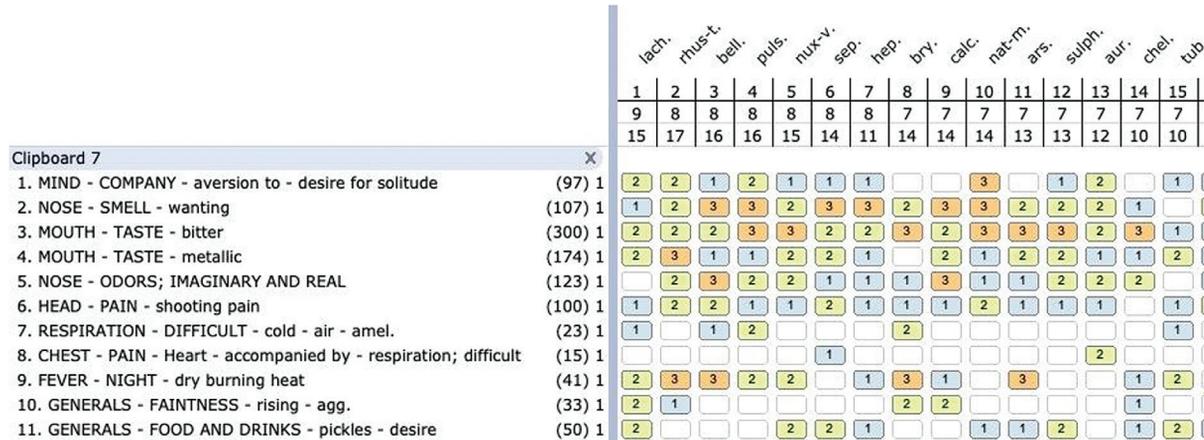


Fig. 6 Repertorization of Case 785.

- Energy improving but still very weak.
- Some headache that feels like “brain freeze” (drinking something cold too quickly).

Remedy recommendation: *Bryonia* 200c, one liquid dose every 3 hours (order *Phosphoricum acidum* to have on hand).

Follow-up #2, 8 days later, after having taken remedy every 3 to 5 hours:

- Diarrhea after eating, every couple of days, painless, watery.
- No headache.
- Still no taste or smell, still bitter taste.
- Still craving sour foods.
- Very low energy and dizziness in the morning.

Remedy recommendation: *Phosphoricum acidum* 200c, one liquid dose every 3 to 4 hours.

Follow-up #3, 2 days later, after having taken remedy every 4 hours:

- Hard to get going in morning.
- Feeling thirstier.
- Feel more motivated after the doses.
- No dizziness.
- Energy improving.

Remedy recommendation: *Phosphoricum acidum* 200c, one liquid dose every 3 to 4 hours.

Follow-up #4, 3 days later, after having taken remedy every 4 hours for 2 days:

- Didn't take any remedy yesterday.
- Glad to be back to work.
- Energy at 90%.
- Normal thirst.
- No bitter taste.
- Taste and smell gradually returning.

Remedy recommendation: N/A, case closed.

**Case 7 (HHN # 894)**

The client was a 51-year-old woman with no chronic diagnoses or medications. She was symptomatic with COVID-19 for 18 days and had taken no medications for her symptoms. She presented with the following in the supervised student clinic:

- Sick with no reprieve for 18 days (crying throughout consult).
- Struggles to eat or drink—no appetite and thirstless; has lost 12.5 pounds.
- No smell or taste.
- Thick gray film coating tongue; scrubbing tongue doesn't remove it.
- Spit is foamy, frothy, white, floating in water in toilet.
- Strong metallic taste when drinking water.
- Body aches as if arthritis, need to move slow, hard to get out of bed.
- Strong fatigue; sleeping 18 hours each day; waking at 3 or 4 a.m. for a few hours daily.
- Pain and pressure in chest, comes and goes.
- Deep powerful cough with little expectoration, feels like cotton, with coughing fits until vomiting.
- Stabbing pain in head; pressure like it will explode, all over head. Better squeezing between cold hands and cold applications.
- Episodes of shivering chills, 5 to 6 times a day for 30 to 45 minutes—they are enjoyable.
- Watery diarrhea, lemon-lime color, caustic.
- Feeling of despair, weeping, depressed.
- Better for open air, fan.

See - Fig. 7.

Repertorization strongly indicating *Pulsatilla pratensis* for characteristic and peculiar symptoms.

Remedy recommendation: *Pulsatilla pratensis* 30c, one liquid dose every 30 minutes and at night when awake.

Follow-up #1, the following day after taking the remedy as recommended:

- Much improvement.

	puls.	phos.	ars.	calc.	lach.	nat-m.	sulph.	aloe	lyc.	nat-c.	am-c.	bell.	bry.	chel.	alum.
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
8	7	6	6	6	5	5	5	5	5	5	5	5	5	5	5
14	11	14	13	10	10	10	9	9	9	8	8	8	8	7	7

Symptom	Count	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1. MIND - DESPAIR - recovery, of	(78) 1	1	1	3	1	1	1		2	1	1	2	2		3	1	
2. MOUTH - TASTE - metallic	(174) 1	1	1	2	2	2	1	2	1	2	3	2	1		1	1	
3. MOUTH - Tongue - coated (not clear) - gray	(8) 1	2	1									1		1		2	
4. COUGH - SPASMODIC - vomiting; with	(7) 1	1											1				
5. STOOL - WATERY - yellow	(57) 1	1	1	1	2	1			2		2			2			
6. STOOL - ACRID	(98) 1	3	2	3	1	2	3	2	2	1	1	1		1		1	
7. CHILL - SHAKING	(236) 1	3	3	3	2	2	3	3	1	3	2	2	2	2	3	1	
8. HEAD - PAIN - cold - applications - amel.	(97) 1	2	2	2	2	2	2	2	3	1		2	2	2	1	1	

Fig. 7 Repertorization of Case 894.

Remedy recommendation: *Pulsatilla pratensis* 30c, one liquid dose 3 times a day.

Follow-up #2, the following day after taking the remedy as recommended:

1. Still no taste or smell.
2. Still needing to move slowly.
3. Some residual soreness.
4. Other symptoms are resolved.

Remedy recommendation: *Pulsatilla pratensis* 30c, one liquid dose 3 times a day.

Follow-up #3, 6 days after taking the remedy as recommended for a few days only:

1. All symptoms are resolved.
2. Smell and taste are nearly back to normal.

Remedy recommendation: N/A, case closed.

**Case 8 (HHN # A622)**

The client was a 55-year-old woman, with no prior conditions or medications. She was symptomatic with COVID-19 for 2 days and presented with the following:

1. Strong headache behind eyes and on the right top of head: starts behind eyes and in sinuses and moves upward to head. Swollen feeling, worse sleeping, and any movement.
2. Sensation of breathing in water deep in the nose, burns, causes intense pain in head.
3. Right ear full feeling, plugged.
4. Cough with no expectoration, worse talking.
5. Strong body aches, deep in bones, bed and pillow feel too hard, every bone hurts; worse any touch or clothing, no matter how light; harder pressure is better than light touch.
6. Minor sore throat.
7. Feeling of pressure on chest, as if someone sitting on chest.
8. Low appetite.
9. Very cold at night, needing many blankets.

10. Feeling easily annoyed by people.

See >Fig. 8A.

Repertorization highlighting characteristic and peculiar symptoms relating to body pains and burning sensation of breathing in water.

Remedy recommendation: *Bryonia* 30c liquid dose in 118 mL (4oz) water, two doses before bed, tomorrow 3 times a day.

Follow-up #1, 2 days later after taking remedy as recommended:

1. Body aches only slightly better, still very painful; sore bruised feeling, even every hair hurts as if being ripped out; better on cold sheets, worse light touch.
2. Same eye pain, much worse moving eyes.
3. Same strong pain in nose as if breathing in water.
4. Occasional cough that is painful, as if whole body is bruised.
5. Extreme weakness, don't want to stand to walk.
6. Bed and pillow still feel very hard.
7. Stomach-ache on eating, full and painful with little food.

Remedy recommendation: *Eupatorium perfoliatum* 30c, liquid dose in 118 mL (4oz) water, one dose every hour for 3 hours. If improving, continue tomorrow every 4 hours or as needed.

Follow-up #2, 2 days later after taking remedy as recommended:

1. Body aches much improved, still painful but tolerable.
2. No headache.
3. No extreme fatigue.
4. Same sensation of breathing pool water in through nose, like brain freeze.
5. Heaviness in chest has developed, worse taking deep breath.
6. No appetite, no food tastes good.
7. Chewing or anything touching inside of mouth hurts, especially the first bite.

8. No stomach-aches.

See ► **Fig. 8B.**

Repertorization represents shifting symptoms though peculiar symptoms do not repertorize well.

Remedy recommendation: *Sulphur* 30c, liquid dose in 118 mL (4oz) water, one dose every hour for 3 hours. If improving, continue tomorrow every 4 hours or as needed.

Follow-up #3, 2 days later after taking remedy as recommended:

1. Yesterday headache all day, very tight neck muscles and shoulder; coming every other day.
2. Chest heaviness is better.
3. Same water sensation in sinuses with deep breath.
4. Same lack of appetite.
5. Pain with eating is resolved.
6. Improved energy but lacks motivation.

Remedy recommendation: *Sulphur* 30c, liquid dose in 118 mL (4oz) water, dose 3 times daily.

Follow-up #4, 2 days later after taking remedy as recommended:

1. 90% better, more energy and motivation.
2. Tickling cough is more pronounced but not bothersome.
3. Food still not appealing but eating more.
4. No headache, only shoulder and neck soreness.

Remedy recommendation: *Sulphur* 30c, liquid dose in 118 mL (4oz) water, dose 2 to 3 times daily, as needed.

Follow-up #5, 5 days later:

1. Energy is nearly back to full.
2. Only small lingering cough of no concern.

Remedy recommendation: N/A, case closed.

### Discussion

There are three general discussion points related to the full case series compendium to be made and one specific discussion point about this part of the case series.

First, this case series, and the full case series compendium of which it is a part, reflects the work of homeopaths working closely together as a team. Team members met weekly to discuss cases and closely tracked emerging patterns of symptoms and remedy responses. While there is variety in remedy choice and posology evident across the cases presented here, there is a unifying alignment to Hahnemannian epidemic theory and guidelines.<sup>17</sup> Moreover, members of the team understood each case as being a piece of a larger puzzle, with potentially profound insights to offer into the larger understanding of the infectious disease and the development of our genus of remedies. This kind of concierge and rapid-response team approach to working with clients appears to be a rare and modern phenomenon in North America and is noted as an important opportunity for our profession

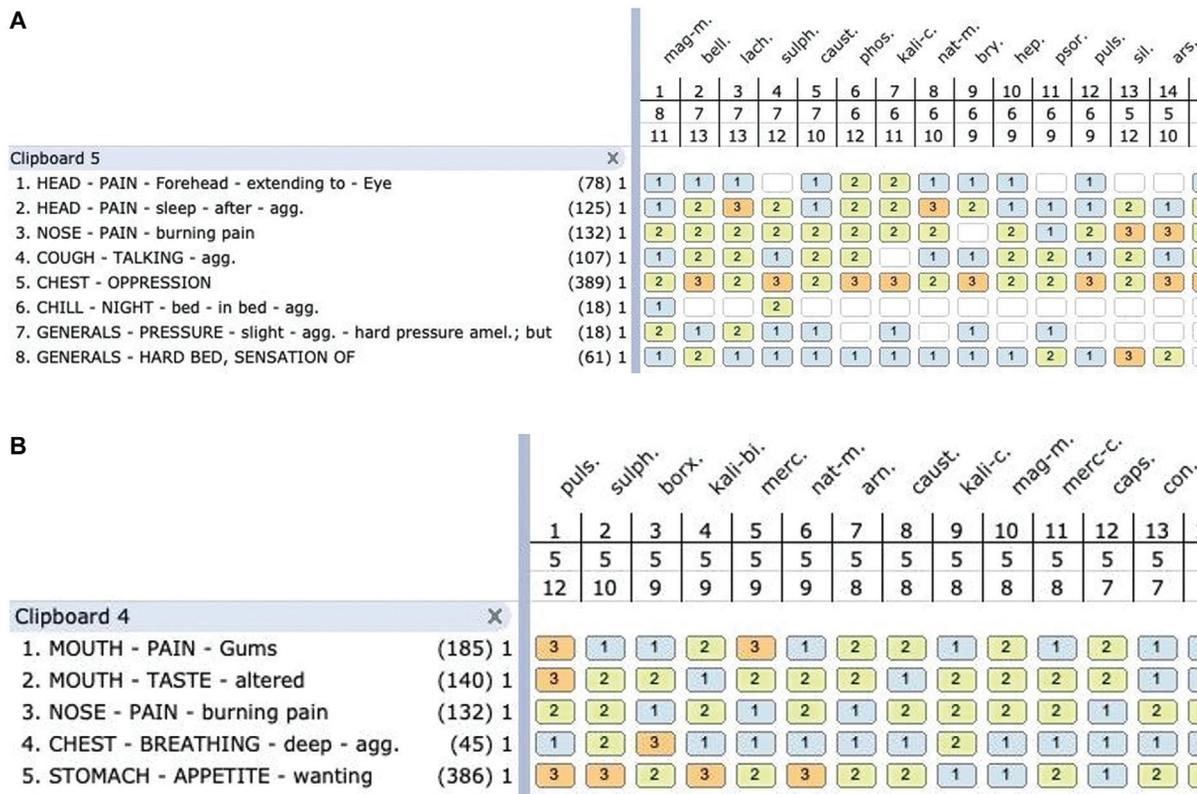


Fig. 8 (A) Repertorization #1 of Case A622. (B) Repertorization #2 of Case A622.

internationally.<sup>9</sup> We have seen substantial benefits to this approach, the likes of which may be limited to the current team-based approach in the work of Wanda Smith-Schick and Christina Garelli at Homeopathy Institute of the Pacific (HIP) and in the Integrative Healers Action Network (IHAN). (HIP is a donation-based clinic run exclusively by volunteers, which offers low-cost homeopathic care to the underserved, and IHAN is a disaster response network of integrative health care providers). Given the observed benefits to this approach, more research into team-based case-taking and analysis is warranted.

Second, we have identified a challenge of access to remedies in times of public health crisis. Case notes and team discussions highlighted clients' limited access to first-choice remedies. While operating a decentralized out-patient tele-health clinic offers innumerable advantages, this is one disadvantage seen consistently through the work of the team. Many of the cases presented here resolved very well with more easily accessed remedies but lack of access to lesser-known remedies became a limitation for team members wishing to recommend *genus*-potential remedies more often than was possible. It was observed in the early days of the pandemic that pharmacies dispensing homeopathy became overwhelmed by orders from non-professional users of homeopathy (members of the public), restricting access to professionals and impacting the timely identification of *genus* remedies.

Third, and specific to this case series, for homeopathic practitioners there is no underestimating the importance of symptoms deemed to be SRP. For the HHN team working in a pandemic context, these symptoms became especially important when seen across numerous cases and lent special weight to the identification of *genus* remedies. For example, the symptom of everything smelling of bleach or other strong chemicals when seen across dozens of cases was given special attention, as guided by Hahnemann in the *Organon of the Medical Art*.<sup>17</sup> Some authors have posited that the complex nature of COVID-19 is not amenable to a *genus epidemicus* approach, given the extreme variability of its manifestations.<sup>18</sup> This opinion is incongruent with the findings of this paper.

## Conclusions

The collective SRP symptoms from the pandemic provided us with the opportunity to study the hallmark features of COVID in-depth. The importance of these symptoms and cases highlights the applicability of Hahnemannian principles and good case-taking practices. Our research has provided the foundation for future analyses related to the case data and provides an opportunity for clinicians to proceed without speculation, guesswork or protocols; and traditional homeopathic approaches appeared to be timely, appropriate and safe.

### Highlights

- These cases are considered by the authors to be a relevant representation of the more than 4200 COVID-positive individuals who have received care by the HHN team.

- The clients in this series received tele-health consultations and interventions in an out-patient, online, homeopathy clinical setting.
- All cases taken through HHN contribute to large-scale clinical-outcomes research designed to support international research initiatives in the clinical effectiveness of homeopathy.
- Cases were considered for inclusion in the case series only if they tested COVID-19 positive.
- Strange, rare and peculiar (characteristic) symptoms became especially important when seen across numerous cases and lend special weight to the identification of *genus* remedies.

### Funding

None.

### Conflict of Interest

None declared.

## References

- 1 Johns Hopkins University. Coronavirus Resource Center. Interactive COVID-19 Dashboard. Available at: <https://coronavirus.jhu.edu/map.html>. Accessed May 22, 2023
- 2 Jacobs J. Homeopathic prevention and management of epidemic diseases. *Homeopathy* 2018;107:157–160
- 3 Prajapati S, Sharma M, Kumar A, Gupta P, Narasimha Kumar GV. An update on novel COVID-19 pandemic: a battle between humans and virus. *Eur Rev Med Pharmacol Sci* 2020;24:5819–5829
- 4 Nayak D, Gupta J, Chaudhary A, et al. Efficacy of individualized homeopathy as an adjunct to standard of care of COVID-19: a randomized, single-blind, placebo-controlled study. *Complement Ther Clin Pract* 2022;48:101602
- 5 To KLA, Fok YYY. Homeopathic clinical features of 18 patients in COVID-19 outbreaks in Hong Kong. *Homeopathy* 2020; 109:146–162
- 6 Oberbaum M. Will we miss the opportunity again? *Homeopathy* 2020;109:176–178
- 7 Basu N, Das BC, Tandon S. Interim management of COVID-19 by repurposed homeopathic medicines. *Homeopathy* 2020; 109:182–183
- 8 Teixeira MZ. Clinical research protocol to evaluate the effectiveness and safety of individualized homeopathic medicine in the treatment and prevention of the COVID-19 epidemic. *Rev Assoc Med Bras* 2020;66:405–406
- 9 Rossi EG. The experience of an Italian public homeopathy clinic during the COVID-19 epidemic, March-May 2020. *Homeopathy* 2020;109:167–168
- 10 Jethani B, Gupta M, Wadhvani P, et al. Clinical characteristics and remedy profiles of patients with COVID-19: a retrospective cohort study. *Homeopathy* 2021;110:86–93
- 11 Gray AC. *Method in Homeopathy Practice: The Landscape of Homeopathic Medicine*. 2nd ed. Delhi: B Jain; 2019
- 12 Hubbard EW. Strange, Rare and Peculiar Symptoms. *The Homeopathic Herald* 1940; Vol 3: No. 9
- 13 Ullman D. *Discovering Homeopathy: Medicine for the 21st Century*. North Atlantic Books; 1991
- 14 Chappell P, van der Zee H. *Homeopathy for Diseases: Vital Remedies for Epidemics, Trauma and Chronic Diseases*. Homeolinks; 2012
- 15 Pracjek P, Gray A, Doherty R, Straiges D. An observational case series: selected COVID cases from the HHN clinic, part 1: multiple remedies 1. *Hopathy*, June 2022. Last accessed, March 1, 2023

- 16 Pracjek P, Gray A, Doherty R, Straiges D. An observational case series: selected COVID cases from the HHN clinic, part 5. *The Homoeopathic Heritage* 2023;49:103–115
- 17 Hahnemann S. *Organon of the Medical Art*. 6th ed. W.B. O'Reilly, ed. Redmond, WA: Birdcage Books; 1996
- 18 Waisse S, Oberbaum M, Frass M. The Hydra-headed coronaviruses: implications of COVID-19 for homeopathy. *Homeopathy* 2020;109:169–175