



**CONCERNED ABOUT**  
**Risky Cough**  
**Medicines**  
**for Kids?**

## How to Calm a Cough—SAFELY

**A clear, easy-to-follow method for *everyone!***

by PEARLYN GOODMAN-HERRICK, ND, DHANP

ANYWHERE YOU GO DURING THE WINTER SEASON, YOU'RE LIKELY to hear someone coughing and hacking. Although an acute cough is not always serious, it often sounds terrible! Coughs can also be painful, disrupt sleep, linger on for weeks, and generally wear the sufferer out. And croup, whooping cough, and allergic coughs may even be life-threatening on occasion, especially for very young children.

# The FDA has now issued warnings against using conventional, over-the-counter cough and cold medicines for children under age 2, and the American Academy of Pediatrics warns against using these drugs for children under age 6.

Coughs can be particularly trying for kids—and for their parents, who hate to see their children suffering. But the Food and Drug Administration has now issued warnings against using conventional, over-the-counter cough and cold medicines for children under age 2, and the American Academy of Pediatrics warns against using these drugs for children under age 6, since they've been shown to be ineffective for kids and could cause serious side effects.

Where can parents turn? Homeopathy has been offering safe, effective relief and healing for coughs for many generations. Armed with a homeopathic self-care kit and a few reference books, moms and dads can successfully help their children find relief from simple coughs and other acute ailments—and help take care of their own everyday illnesses, too. And if families have a professional homeopathic practitioner to consult when the going gets rough, all the better.

## Collecting clues...

Helping people with acute coughs can sometimes be a frustrating task, though, even for a homeopath. Asking patients about their cough symptoms does not always yield the kind of explicit details that will easily help us choose a curative remedy.

"Is the cough loose or dry?" we ask. "Well, sort of loose, sort of dry," they answer.

"When is the cough worse?" we query. "I'm really not sure," they reply.

Their vague, non-descript answers don't give us good clues toward choosing any particular remedy. As observers or practitioners, we may notice nothing outstanding about the cough. However, what may at first appear to be a complex and

frustrating process can actually become quite manageable—once we have a clear, consistent approach to prescribing homeopathic remedies for coughs.

## A clear method: 2 categories

1. We first need to determine whether the cough itself provides us with unique symptoms. So we'd question the person further to find out if there is anything about their cough that is intense, remarkable, or perhaps very indicative of a certain remedy or group of remedies. (See sidebar on page 27.) If so, we'd give the remedy that best addresses these acute cough symptoms, and in most cases, the person should experience marked improvement.
2. If, however, the cough seems to have unremarkable, common, non-descript symptoms, as is often the case, we needn't be frustrated in our remedy search. Instead, we can determine the remedy that will help the cough by focusing on the person's other significant symptoms, which may be physical, mental-emotional, or general.

By approaching cough cases in this way, a high degree of successful treatment will result.

One reminder: when we treat people with coughs, we must go beyond thinking of "cough remedies," beyond looking solely for homeopathic remedies that are noted for their affinity for coughs (e.g., *Coccus cacti*, *Drosera*, or *Squilla*). While the remedy that will produce a curative response may be one of these remedies, it may just as likely be any of the thousands of other homeopathic remedies—as long as the remedy matches the significant symptoms of the case at hand.

## A distressing cough

An example of the first category approach is the case of 18-year-old Doreen, who came to me for help with a cough that had developed after an upper respiratory infection. The cough was very distressing to her because it was so frequent and violent. She'd had it now for at least five days and it was getting progressively worse. The coughs came in sudden attacks (or paroxysms) that would compel her to sit upright. These coughing fits occurred day and night, preventing her from getting much sleep. Most often, they seemed to begin with an itching in her chest.

Since Doreen's cough symptoms were quite distinct and well-defined, I chose to focus on them to find a remedy that would help her. Looking up these symptoms in the homeopathic repertory (an index to all the remedy indications) and using a computer repertorization program (*MacRepertory*), I came up with the following analysis of possible remedies:

- \*1. COUGH; ITCHING, from; Chest, in (20)
- \*2. COUGH; DISTRESSING (19)
- \*3. COUGH; SIT UP, must (42)
- \*4. COUGH; DAYTIME; agg.; night, and (45)
- \*5. COUGH; PAROXYSMAL (166)
- 6. COUGH; SLEEP; preventing (29)

Total Rubrics Family	Sep.	Kall-bi.	Sang.	Hyos.	Spong.	Stann.	Phos.	Puls.	Nux-v.
ITCHING, from; ... (20)	1	1				1	1	1	2
DISTRESSING (19)	2		2			2			3
SIT UP, must (42)	2	2	2	2	1		3	3	
DAYTIME; agg.; ... (45)	2	1			3	1	2		
PAROXYSMAL (166)	3	1	1	3	2	3	1	3	3
SLEEP; ... (29)	3	1	1	1			1	3	1

The remedy *Sepia* matched every one of Doreen's symptoms, so I gave her one dose of *Sepia* 1M. Within the first hour,



## Her son had been fine until a number of evenings previously when he awoke two hours into sleep, screaming from a nightmare.

Doreen felt significantly better with fewer and weaker coughing episodes. She continued to improve for the next 24 hours but then seemed to reach a plateau. At that point, I asked her to take another dose of *Sepia*, and by the next day, she was fully recovered. Doreen was thrilled to be able to get back into her regular schedule of classes and sports.

It's interesting to note that although I focused specifically on Doreen's cough symptoms to find the curative remedy, *Sepia* is not generally known as a specific "cough remedy." This highlights an earlier point: looking for a "cough remedy" is not necessarily the way to find the curative remedy for a cough; instead, the remedy that covers the symptoms is the remedy to use.

### The tip of the iceberg

Also of interest is that later on, *Sepia* turned out to help this young woman in many more ways. When Doreen next came to see me some months later, she was long over her cough but was now seeking help for PMS. She described herself as irritable and cranky for five days before her menstrual periods; she was snappish and easily annoyed by people. Although usually a sociable person, before her periods she preferred to be alone. "I alternate between irritable and blah," she said. She was at her worst from 3 p.m. to 5 p.m. but felt much better when she exer-

cised vigorously. These symptoms are very characteristic of *Sepia*, so I gave her another dose. This time it helped her on a deeper "constitutional" level; her PMS symptoms disappeared, her energy increased, and she gained an overall better outlook on her life. So it seems that Doreen's cough was the earliest indication of her need for this remedy.

### Cough with a whoop

Here's another example of the first category approach—where the symptoms of the cough itself ultimately led to the curative remedy. Ten-year-old Nelson had previously been brought in by his mother because he had trouble focusing and many fears; he was afraid of being alone, afraid of the dark, and unable to sleep without a nightlight and his door open to a well-lit hallway. These symptoms had improved greatly with a dose of *Phosphorus* 1M.

Six months later, he returned to my office complaining of a mild cough and a return of some of his fears and focusing problems, though milder in nature than previously. Since he had done so well on *Phosphorus*, and his cough had no distinguishing characteristics, I gave him another dose.

Again, Nelson's mental and emotional state improved greatly after taking the *Phosphorus*. The cough, however, went away for a few days and then increased in frequency and intensity over the next week; now it was ending in a whoop. It was a clear case of pertussis (whooping cough), confirmed by the child's pediatrician and laboratory work. Now the symptoms of the cough were much more distinct and apparent. Nelson had paroxysms of coughing that seemed to come from the abdomen. The cough bothered him a great deal. He found it necessary to sit up when he coughed. He said that the cough was much better when he "burps or farts." His mother reported that his lips turned bluish during the cough, and I noticed an area of circumscribed redness on his cheeks during the coughing spells.

Using *MacRepertory* software, I chose the following cough symptoms in the repertory and arrived at this analysis of remedies:

- \*1. COUGH; PAROXYSMAL (166)
- \*2. COUGH; WHOOPING (165)
- \*3. COUGH; DISTRESSING (19)
- 4. COUGH; ABDOMEN, seems to come from (10)
- \*5. COUGH; SIT UP, must (42)
- 6. COUGH; ERUCTATIONS; amel. (4)
- 7. COUGH; FLATUS, passing, amel. (2)
- \*8. FACE; DISCOLORATION; bluish; lips (86)
- \*9. FACE; DISCOLORATION; red; circumscribed (75)

Total Rubrics Family	Sang.	Dros.	Ant-t.	Spong.	Phos.	Lach.	Con.	Serieg.	Ang.
PAROXYSMAL (166)	1	3	1	2	1	2	2	2	1
WHOOPING (165)	2	3	2	2	2	1	1	2	1
DISTRESSING (19)	2					2		1	
ABDOMEN, ...(10)		2			1				
SIT UP, must (42)	2	2	2	1	3	1	3	2	
ERUCTATIONS; ...(4)	3		1						1
FLATUS, passing ...(2)	3								
DISCOLORATIO ...(86)		2	3	1	2	3	1		1
DISCOLORATIO ...(75)	2	1	2	1	3	2	1	1	

*Sanguinaria canadensis* matched the greatest number of Nelson's cough symptoms, followed closely by *Drosera*. Both remedies are known as "cough remedies," with *Drosera* being one of the most frequently indicated for whooping cough (although *Sanguinaria* is also one of 165 remedies listed in the repertory for whooping cough). The most distinguishing thing about Nelson's cough, however, was not so much the whoop but this unique feature of being both better from passing flatus and better from eructations (burps). This is not part of the symptom profile for *Drosera*, but it is a strong keynote symptom for *Sanguinaria*.

So I gave Nelson a dose of *Sanguinaria* 1M. He felt better within a few hours, and improvement progressed over the next 18 hours; then he relapsed a bit so I asked him to take another dose; when his improvement stalled again the next day, he took a third dose. Those three doses of *Sanguinaria* over the course of two days took care of Nelson's whooping cough. So, once again, we see that it is the characteristic, distinguishing symptoms of the case—matched to the characteristic, distinguishing features of a corresponding remedy—that will lead to a helpful prescription, instead of simply focusing on the disease category itself (i.e., whooping cough).\*

### A fright, then a cough

Very often, patients come into the office with exceedingly common cough symptoms. For example, they'll report that their cough is worse when lying down or worse

## Collecting Clues: Is This Symptom Important?

In homeopathy, not all symptoms are equal...

at night. (In fact, most people with upper respiratory congestion will cough more when lying down, since mucus from the nose and sinuses drains into the throat and triggers a cough.) An attempt to elicit further symptoms from them often goes nowhere. The person cannot describe the nature of the cough or any modalities (i.e., anything that makes the cough better or worse). No distinguishing features of the cough can be found from our examination or observation either.

If we try to choose a remedy based on the cough symptoms alone, we will be frustrated. The cough symptoms are so common that no single remedy will emerge clearly as the best match. In cases like these, we have to consider the person's other strong symptoms—which could be mental-emotional, general, or physical—in order to choose a remedy.

An interesting example of this type of case is that of nine-year-old James, who was brought to see me for a bothersome cough. Neither the boy nor his mother could describe the quality of the cough in much detail. They said it might occur at any time but mostly at night and that it made him tired from coughing. In my office, James coughed frequently and it sounded dry. This was about all I could determine about his cough. I knew that such vague symptoms were unlikely to lead me to a remedy, so I continued to search for some significant symptoms.

After further questioning, James' mother reported that her son had been fine until a number of evenings previously when he awoke two hours into sleep, screaming from a nightmare, hysterical and shivering. He didn't seem to realize he was awake, but his eyes were wide open. She said the cough started shortly after his waking and since then, James had been coughing on and off, day and night. Since the original episode, James needed a night-light because he had developed an intense fear of the dark. The nightmares continued, but not with the same intensity of that first episode. His mother reported that on the afternoon preceding the onset of the illness, James had watched a frightening movie that was popular with his friends at that time.

Choosing a homeopathic remedy for an acute problem is easy—just match the symptoms of the person-in-need with the indications of the homeopathic medicine, right? But wait a minute...not every symptom will help to point us toward the curative remedy, so how do we know which symptoms to pay attention to?

### Striking, strange, unusual, peculiar

Hahnemann, the founder of homeopathy said:

"...the more striking, strange, unusual, peculiar (characteristic) signs and symptoms in the case are especially, *almost exclusively*, the ones to which close attention should be given, because it is these *above all* which must correspond to very similar symptoms in the medicine being sought ... More general and indefinite symptoms, such as loss of appetite, headache, weakness, troubled sleep, discomfort, etc., if not more precisely qualified, deserve little attention, because one finds something general of the kind in almost every disease and almost every medicine."

—*The Organon*, sixth edition, aphorism 153.

### An art

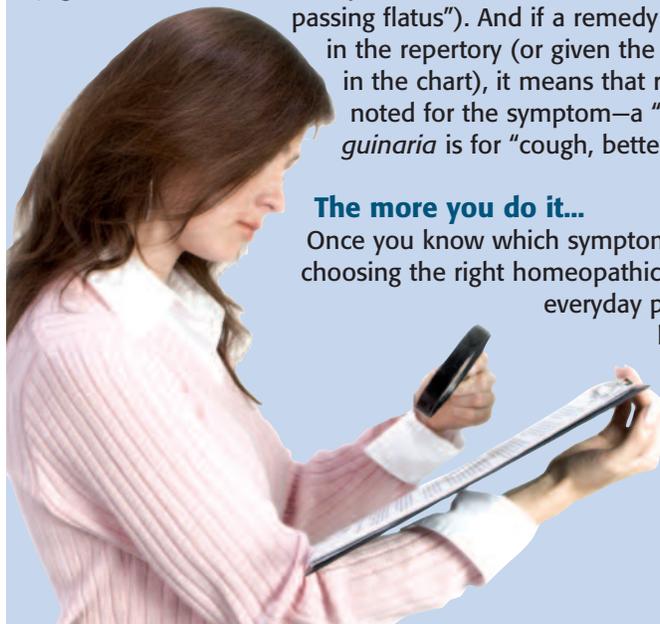
Determining which symptoms are characteristic and important versus common and less important is an art that gets refined the more we practice. Understanding coughs (or whatever illness we are treating) from a physiological/medical perspective can help us; for example, if we understand what is typical of whooping cough, we can then spot an atypical or unique symptom.

### And a science

But we also need to be familiar with the homeopathic literature to know which symptoms are unique to just a few remedies (i.e., "keynote symptoms"). For example, when we look at a symptom in the repertory and see that many remedies are listed, this indicates that the symptom is a common one, not unique to a small number of remedies (e.g., in the repertory chart on page 26, 165 remedies are listed for whooping cough). If the symptom has just a few remedies listed, however, then it is usually a unique, characteristic symptom (e.g., in that same chart, only 2 remedies have the indication, "cough better passing flatus"). And if a remedy is listed in "bold type" in the repertory (or given the numeric value of "3" in the chart), it means that remedy is strongly noted for the symptom—a "keynote" (as *Sanguinaria* is for "cough, better eructations.")

### The more you do it...

Once you know which symptoms to pay attention to, choosing the right homeopathic remedy for acute, everyday problems actually does become a simple process. So keep at it—and you'll find that it will get even easier over time.



This was interesting information that would help us find a remedy for James and his cough. He had recently developed some significant mental-emotional symptoms that he hadn't had before: fear of the dark and frightening dreams. In addition, the fright from having seen the movie had brought on a physical symptom—the cough. When a child gets physically sick and develops fears and nightmares after experiencing a fright, we think of the homeopathic remedy *Stramonium*.

A repertorization of James' significant symptoms points to *Stramonium*. (*Stramonium* can also be found in the repertory rubric, "Cough, from fright.")

James received a dose of *Stramonium* 200c in the late afternoon. He slept well that night, and his cough was remarkably better by the next day. The following night, he no longer needed a night-light. His mother reported that James no longer had nightmares or strong fears either, to her great relief.

homeopathic treatment. For best results, remember to take the time to treat each cough case individually, and use the straightforward, consistent method outlined here. And here's an extra bonus: once you master this method, it will serve you well in treating not just coughs, but any acute illness you're likely to encounter.

\*Whooping cough can be life threatening in infants and young children, particularly those less than one year old. Seek immediate medical attention for this—as well as for any cough that is accompanied by serious symptoms (e.g., breathing difficulty, blueness, high fever).

- \*1. MIND; AILMENTS from; fright or fear (84)
- \*2. MIND; ANXIETY; night; agg.; children; in (18)
- \*3. MIND; SHRIEKING, screaming, shouting; waking, on (34)
- \*4. MIND; FEAR; dark (61)
- \*5. MIND; ANXIETY; cough; from (4)

**Use this method in good health!**

At this time of year when so many kids and adults are suffering with coughs, it's good to know that we can turn to *safe*

Total Rubrics Family	Stram.	Kali-br.	Hyos.	Kali-p.	Cina	Ars.	Zinc.	Convo-s.	Calc.
AILMENTS from ....(84)	2	2	2	2	1	1	1	1	1
ANXIETY; night; ... (18)	2	4	1	2	2	3	1	1	2
SHRIEKING, ... (34)	1	1	2	2	2	1	3	1	1
MIND; FEAR; dark (61)	4	1	1			1	1		2
ANXIETY; cough; ... (4)	1								



ABOUT THE AUTHOR

Pearlyn Goodman-Herrick, ND, DHANP, has been in private practice for nearly 30 years. She has taught at the NCH Summer School, Southwest College of Naturopathic Medicine, and the University of Bridgeport, and has been a board member of the Homeopathic Academy of Naturopathic Physicians. She practices in New York City, Park Slope, NY, and Westport, CT, and can be reached at 203-256-9091 or [www.homeopathyamerica.com](http://www.homeopathyamerica.com)

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Dana Ullman has written chapters on homeopathy in medical textbooks, including *Integrative Oncology* (Oxford University Press, 2008), *Weiner's Pain Management* (2006), and veterinary textbooks, none of which he received any payment.

In the past couple of years, Dana has spoken at Stanford Medical School, UCSF School of Medicine, UC Davis School of Medicine, and UC Berkeley, without pay.

Dana does this work and so much more to grow homeopathy.

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