Aspects of the Agaricus muscarius, Cutis rubra preparation

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Ash-grown mistletoe

Abstract

A well-proven medicament made from the red skin of fly agaric is presented. References to fungi made by R. Steiner cast light on the rationale for its clinical use based on the anthroposophical view of the human being. Use in the treatment of meningeal signs and sequels of meningitis is illustrated by case records.

Keywords

Fly agaric
Meningitis
Meningeal signs
Vital meningitis
Neural tissue
Amanita muscaria

Fly agaric, Amanita muscaria (Fig. 1), formerly Agaricus muscarius, stands out from the large group of cap fungi (Basidiomycota) with the surface of the cap a bright red and covered with white specks (warts), remnants of the universal veil. The glossy red skin can be pulled off easily and is potentized to make the medicament.

R. Steiner referred to the nature of the diseases where fungi may be considered medicinal in various parts of his collected works. His spiritual-scientific insights allowed him to speak of the root nature of old plants such as fungi which go back a long way in evolution. This, he said made them potential medicines for diseases affecting the head organism. “For anything pathological in the head we must look for medicines a long way back in the evolution of the natural world, that is, something which reminds us of earlier natural processes, for instance among the fungi. Their present-day imperfect configuration as plants is, as it were, recapitulating past plant development. Or we may look to the algae and lichens, or to the roots of perfect plants, the roots being the part which remains from earliest times” (1).

Elsewhere he said that fungi relate closely to all problems that are like headaches. “Fungi relate especially to the soul quality of thinking a lot about things, living in the psyche in such a way that one does not need much from the outside world but pumps everything out of oneself, one will then again find that this inner quality, which essentially points to the fungi, relates very closely to all problems that have headache character. This will guide us to relationships between fungi and headache-type conditions” (2).

Poisonous fungi can make nerve tissue capable of regeneration. They are differentiated into those with warty caps, like fly agaric, which act more towards the periphery, and those with smooth caps like amanita (Agaricus bulbosus) which act more in the direction of the inner parts of nerve tissue. “Gentleman, age 41, diagnosed with epidemic encephalitis, now Parkinson’s disease as a sequel. Dr Steiner now recommended injections with the poisonous golden agaric; this not being available locally, he gave Amanita bulbous instead. Rudolf Steiner said that poisonous fungi altogether had the ability to make tissues capable of regeneration again. Agaricus muscarius, and
fungi with warty caps should be used more for actions towards the periphery, those with smooth caps could also be used for the inner part ... The Agaricus bulbous injections resulted in marked improvement in the ability to walk and powers of speech in the autumn" (3).

The next two case histories demonstrate this important distinction which is so important in practice.

A case of brain fever (probably meningitis or meningoencephalitis) with sequelae was reported in R. Steiner and I. Wegman’s first Letter to Physicians. The advice was to give fly agaric injections in the 30x, and ensure that a confident, cheerful mood prevailed after the injection. The fly agaric (warty cap) was suggested because the action was to be on neural tissues in the brain that were more to the outside, peripheral.

In case record No. 69 in the Degenaar collection, Rudolf Steiner suggested treating a patient with Parkinson’s disease which had followed epidemic encephalitis, with injections of Agaricus bulbous (smooth cap), as strong as possible (3). In this case, the aim was regeneration of more centrally located brain tissue.

To help us understand the preparation Agaricus muscarius, Cutis rubra, we must once more consider the development of fungi, as Rudolf Steiner described it in Anthroposophical Spiritual Science and Medical Therapy. Fungi develop where the cosmic astrality influencing earth’s forces does not exhaust itself in developing the flowers of plants above ground level but penetrates further, to just above soil level. Fungi then result. Development of fungi, as Rudolf Steiner described it in Anthroposophical Spiritual Science and Medical Therapy.

Case histories relating to Agaricus muscarius, Cutis rubra 30x

**Girl age 12½**

The girl was brought to the practice because of a rapidly rising temperature and severe headache. The problem had started two days earlier, with persistent cough going so far as making her vomit. Clinical examination showed normal throat, auscultation of the lungs also n. a. d. The girl was listless in general, with communication distinctly slowed down. She repeatedly stressed the violent headache located in the back of the neck. Neurological examination showed that the chin could not be lowered down to the sternum, and in the absence of inflammatory parameters in laboratory tests which was considered to be meningism with virus infection.

A single dose of Agaricus muscarius, Cutis rubra 30x was given by injection and the girl kept in the practice for 3 hours’ observation. After about two hours, the headache grew less and the temperature went down. The girl was distinctly more lively and asked for something to eat and to drink. After the three hours the back of the neck was fully mobile again, with no sign of meningism. The patient was sent home with Silicea comp., 10 pilules t. d. s. The temperature continued to go down and by the next day the patient was practically symptom-free.

**Boy age 4**

The mother brought her 4-year-old to the practice because he had been febrile, tired and lacking in energy for a day. He also had a headache which improved for a time following exhibition of Belladonna 6x but got much worse again a few hours later. On examination the boy’s general condition was found to be poor, with the skin of his face reddened. He did respond and said he had great pain in the whole of his head. Temperature 40°C. Final stage of meningism (stiff neck). Brudzinski’s sign positive. Clinically no focus of infection could be found.

The diagnosis was virus infection with meningeval irritation. One ampoule each of Agaricus muscarius, Cutis rubra 30x and Quartz 30 were injected and the boy was admitted to hospital for further observation. Two hours later his temperature was down and he showed no sign of meningism; discharge on the same day. Check-up by family physician the next day showed n. a. d.

**Boy age 4**

The child was brought by his mother because of acute pyrexia and frontal headache. His general condition was distinctly poor. Larynx reddened, tonsils enlarged, with pustules and whitish coating. Final stage of meningism with neck pain. Eardrums and auscultation of lungs showed n. a. d.

Virus infection with tonsillitis and meningeval irritation syndrome was diagnosed and one ampoule of Agaricus muscarius, Cutis rubra 30x given by s. c. injection. He was also given one ampoule of Argentum nitricum 20x by mouth.
The headache improved within an hour with this treatment and the temperature was going down. The tonsillitis was then successfully treated with *Apis/Belladonna* 6X/6 pilules and *Glycerinum* comp. as a gargle.

**Girl age 7**

The mother came and spoke to the physician as her daughter had developed an acute high temperature, headache and stiff neck. A domiciliary visit showed the girl to be somnolent, with meningism. Ten minutes after s.c. injection of one ampoule of *Agaricus muscaria*, *Cutis rubra* 30X together with one ampoule of *Argentum nitricum* 30X in the thigh meningism was no longer in evidence. Her mind was getting clearer and her responses were livelier. Her mother watched her through the night, ready to telephone if necessary. The next morning she said that the headache and temperature had gone and the child was able to bend her head down to her chest without problem. A remaining dry cough was treated with *Infludoron®*. Three days later the temperature rose to 39.6°C again, diarrhoea, mild headache, general condition continuing to be good. Another two days later otitis media, treated by giving *Pulsatilla* and *Levisticum* in addition. The girl continued in good health after this and was only seen in the practice again five months later, but for another reason.

**Woman age 57**

The patient had bacterial meningitis which had developed from sinusitis. In spite of the usual conventional medical treatment she had suffered severe headache for days. One ampoule of *Agaricus muscaria*, *Cutis rubra* 30X was injected between the shoulder blades on the 4th day, with rapid improvement within 8 hours, especially in the pain and in alertness.

**Woman age 31**

The patient had had meningitis stage 2. From her 20th year, severe migraines had been a recurrent problem. At age 28, erythema migrans and 6 months later neuroborreliosis with burning pain in the extremities, visual problems and paraesthesia. She had had antibiotics for 3 months but there were residual problems. Following a change of address and taking up a new job these grew worse, especially a clouding of consciousness and blocks in thinking. The patient was afraid that the borreliosis might be reactivated and reacted with depression. She had refused further antibiotics.

The patient came to see me for a first consultation at this time. She complained of dysesthesia in hands and feet, a clouded mind, feeling of being absent, and dreamlike states affecting her concentration and performance at work. She was given *Scordite* 30X, one ampoule s.c. three times a week and *Agaricus muscaria* 6X combined with *Arnica* planta tota 30X, one ampoule each s.c. three times a week, as well as *Ledum palustre* 3X and *Stibium* 6X by mouth. Symptoms did not satisfactorily improve over the next two weeks and treatment was therefore modified. In view of past meningitis, *Agaricus muscaria* 6X was replaced with *Agaricus muscaria*, *Cutis rubra* 30X, and the *Scordite* with *Dyscrasite* 20X. The symptoms improved within a week after this change. All that remained were circumscribed paraesthesias. The feeling of numbness had also decreased greatly; all that remained was great tiredness. Although the mind was still slightly clouded, the patient was resume work as a journalist. Two months later, the *Dyscrasite* was discontinued and injections reduced to *Agaricus muscaria*, *Cutis rubra* 30X twice a week for a total of six months.

**Discussion of the case histories**

*Agaricus muscaria*, *Cutis rubra* 30X was used to treat acute meningeal irritation syndrome and postmeningeal-gistic symptoms. It was always given by injection, which was not a problem even with children. Improvement was very rapid if not instant in every case, which is typical of this medicine. The main indication were R. Steiner’s words in Degenaar Case History No. 69: “Poisonous fungi can make [nerve] tissue capable of regeneration again. *Agaricus muscaria*, and others with warty caps, to be used to act more towards the periphery …” (3). It served to counteract inflammatory degradation of the peripheral meninges.

In 3 out of 4 cases, the medicament was not used alone but together with another (Quartz 30X, *Argentum nitricum* 20X, *Argentum* 30X). No such improvement was, however, seen with Quartz or *Argentum* on their own in similar cases. *Agaricus muscaria*, *Cutis rubra* is therefore responsible for the effective action. Experience gained elsewhere with *Agaricus muscaria*, *Cutis rubra* 30X given on its own substantiate this.

In the last case history given, *Agaricus muscaria*, *Cutis rubra* was also used concurrently with another product (*Dyscrasite*) to treat postmeningitic state. The typical, rapid improvement must here, too, be ascribed primarily to *Agaricus muscaria*, *Cutis rubra* 30X.

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**Note**

I am indebted and most grateful to my colleagues M. Gauch, Chr. Kaufmann, v. Kestenholz and K. Studer-Senn for making their case records available.

References