Selecting the potency of *Viscum Mali* to treat osteoarthritis

_Franziska Roemer_
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Mistletoe products for the treatment of cancer produced by anthroposophical manufacturers (Abnobaviscum, Iscador, Iscucin, Helixor, Vyso-rel) are specific to that field, and the manufacturers provide detailed directions for their use. These concern the choice of host tree and also the potency level corresponding to the type and stage of the carcinoma, permitting optimum use of the product. According to Rudolf Steiner, the manufacture of mistletoe preparations involves a specific mechanical process.

“Normally” produced products, on the other hand, include Viscum Mali and Viscum Pini by Weleda and WALA. The WALA method is to use an aqueous mother tincture succussed by hand in a rhythm maintained over a period of seven days and fermented.

Essentially Viscum preparations have a broad spectrum of uses. Among these are general cooling and local weaknesses in the warmth organization, metabolic sluggishness, premature ageing processes and dissolution of circadian temperature rhythms, degenerative processes, atrophies and scleroses. All this hypergic organic weaknesses and diseases may promote a tendency to develop cancer at a later time (1).

Viscum is also excellent for treating influenza that persists, with weakness in warmth organization. It is also one of the most important hypotensives (2, 3) in anthroposophical medicine.

Mistletoe products in homoeopathic form are also part of the classic repertoire in natural medicine, e.g. those by Madaus. Initially Plenosol® was recommended in rising phytotherapeutic concentrations with marked local and systemic side effects (4). From the summer of 2003, Madaus have been offering Plenosol at the single potency level of the 6x, stating that the dosage can be varied (5). The Viscum products of Weleda and WALA, on the other hand, have a broad spectrum of concentrations and potencies, and osteoarthritis, for example, can be treated with these according to the given situation.

In combination with the potentized organ preparation is the basic medicament for osteoarthritis. In practice, correctly dosed mistletoe treatment will often delay the need for an endoprosthesis in the joint for years. This is also of interest to the patient, for the impression is that the first endoprosthesis is often relatively soon followed by others.

Compared to mistletoe treatment, conventional treatment is merely symptomatic, e.g. with NSAIDs. According to a metaanalysis of randomized trials, these are only slightly better than placebo after some weeks of treatment and are therefore at most recommended only for short-term analgesia (6), as there is no real improvement in evolution overall.

Mistletoe essentially counteracts degeneration all the more the lower the chosen potency. In practice, one needs to proceed according to the given situation and stage. Incipient osteoarthritis with morning stiffness and coldness in patients who are relatively young, external application of the ointment at night is sufficient (Viscum Mali 5 % Ointment Weleda, or Viscum Mali e planta total 3 % Unguentum WALA), e.g. for a month or two in the cool season of the year.

If several joints are affected and there is a general weakness in warmth organization, one would consider oil dispersion baths with the Werner Junge apparatus and Viscum Mali ex herba W 5 %, Oleum WALA. If one starts treatment in good time, it is possible to reverse the whole process even at this stage. No reference is made in this context to necessary movement therapies such as eurythmy therapy.
A medium high potency, 12 – 18 x by s.c. injection, is used on the one hand in cases that are not far advanced, and on the other in more advanced cases with the reactive inflammatory changes one often sees on examination. The osteoarthritis starts from the head pole of the joint, the cartilage. This splits into fibres, hyalinizes, wears down, and cartilaginous particles mobilized by erosion and microfractures cause painful synovialitis, a futile attempt of the body to heal itself. In this case, one must always treat the reactive inflammatory changes first, using a higher potency, and then go down in potency to treat the actual degeneration. Low potencies given too soon will aggravate the inflammatory reactions.

The more severe the degeneration, the lower should finally be the potency to see a physically evident effect. The decrease in potency should be in stages, as patients vary in their stimulus thresholds and this is not foreseeable. A general rule of thumb is higher concentrations are needed and tolerated at more advanced age and a male, robust or sulphuric and hysterical constitution, and that one needs to be more careful in adjusting the dose with allergic patients, physical weakness and a neurasthenic constitution.

One goes down in packs, therefore, e.g. Viscum Mali e planta tota 6 x, 4 x, 3 x, 2 x, 2 %, 3 %, 5 % WALA until one reaches the potency or strength where one gets a local reaction in the form of an erythema. The most effective strength for a patient is one step above the one which just still evokes a local reaction or slight local erythema. Some colleagues who are greatly experienced in guiding mistletoe dosage will deliberately accept a passing limitation of movement for 2 or 3 days, having first discussed this with the patient, in which case the improvement which follows is even more definite.

In contrast to cancer treatment, one does not aim for the marked local reaction or a general febrile reaction seen with even greater concentrations.

The rarely occurring local or general allergic reactions (skin reactions, rigors, dyspnoea, shock) referred to in the information leaflet are as a rule due to starting with low Viscum potencies and not using a gradual, individual approach. The risk does not exist with appropriate use.

Caution is, of course, also required with autoimmune inflammatory joint disease such as psC or psoriatic arthritis, where mistletoe can cause aggravation during the inflammatory phase. If mistletoe treatment should be required on these indications, WALA offer high potencies—Viscum Mali/Pini 40x/60x.

In spite of this, mistletoe is most effective in chronic arthritis if one takes the potency as low as the patient is able to tolerate without side effects. With long-standing arthritis of the large joints with osseous deformation and exostoses this will often mean percentage strengths given by s.c. or i.c. injection. Apart from marked reduction in pain, it may be possible to dissolve pathological exostoses (X-ray evidence) with long-term injection therapy.

The action is enhanced by injecting the mistletoe product i.c. in the pain points around the joint. Good experience has been gained with Bachmann’s points 7 in the case of the knee.

The lower the chosen potency, the greater the warming, dissolving action of mistletoe right into the physical bone.

The higher the potency, the less does its action promote inflammation and the more systemic or general the effect, also influencing soul and spirit. In this potency range, mistletoe indications include inflexibility of warmth organization, of the psyche and also rigid, compulsively neurotic behaviour.

The small finger and foot joints are an exception, e.g. Heberden’s and Bouchard’s nodes. Here medium potencies of Viscum Mali (around the 12x) get the best response. Local application is unpleasant but patients will often accept it because of the good results. In general it only has to be repeated when relatively severe symptoms recur after 6 – 8 weeks.

The German Anthroposophical Medical Association (GAÄD) has published an Opinion on 14 May 2007 (8, 9, 10) in which mistletoe preparations are referred to as the current standard treatment for chronic arthritides of both large and small joints.

The effect is generally evident in 1 – 4 weeks, sometimes following a period of aggravation in the early days. Duration of treatment is months if not years, with intervals. It is also recorded that in the small joints, higher potencies and longer treatment intervals are adequate.

It must not be forgotten that for reimbursement by insurance companies, mistletoe treatment for chronic arthritis is reimbursed by the GKV insurance company under the heading of “severe pain” (special regulation § 16.4) (8).

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References
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9 Simon L. Substanzen und Heilprozesse zur konstitutions-gemäßen anthroposophischen Therapie der chronischen Polyarthriten. Der Merkurstab 2001; Jg. 54 (Sonderheft): 35–59
A patient’s experience with Aesculus cortex D50

In the 4/2004 issue of Der Merkurstab, Mr Reinhard Menzel, Freiburg dentist, reported on Aesculus cortex 50x.

I am taking this and am greatly surprised at the rapid, definite action—regeneration and consolidation of dental tissues, oral mucous membrane and also hair, nails and skin.

My dentist had recommended extraction of a tooth as there appeared to be an inflammatory condition. It was [is] a bridge support. I was not convinced that extraction was necessary and took the above-mentioned product even more regularly. Definite improvement and tissue restoration—which I was able to observe in the mucous membrane—followed in a short time.

I am surprised and thankful that such restoration, such a miracle, is possible even at an “advanced age”.

I can add that the good regenerative action of Aesculus cortex 50x also helped to make the pain bearable and I did not need to take analgesics.

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