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**“EFFICACY OF HOMEOPATHIC MEDICINE IN UTERINE FIBROMATOSIS”
(PSYCHOBIOLOGY OF THE MYOMETRIUM)**

Key words: Homeopathy, uterine fibromatosis, biological codes

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Thanks to my teacher ...
who taught me "*what to cure*".

**Adele Alma
Rodriguez**

LUIMO Napoli



Background

Aim of the study is to evaluate the prognosis of a homogeneous group of 250 fertile women affected by uterine fibromatosis, evaluated and treated with a new experimental method.

To verify the chance of homeopathic remedy-guided healing, a key instrument to reveal the unconscious, to induce the appearance and analysis of removed conflicts and their decoding - reprocessing.

The statistical analysis of patients' mental symptoms allowed to discover "common characteristic conflictual experiences" in all patients, depending on the uterine localization of leiomyomas.

INTRODUCTION

The uterine fibromatosis therapy does not find a satisfying therapeutic response according to the allopathic suppressive therapy: myectomy in fertile age and hysterectomy during climacteric age.

Conservative approaches consist of uterine arteries embolization, needle/radiofrequency myo-lysis and GnRH analogues.

On the contrary, homeopathy is not “against” the “enemy” myoma, but towards its own reception-comprehension.

Methods

A homogeneous group of 250 fertile women (age 18-40) was enrolled and included in a 12-year follow-up (2008 to 2018).

Symptoms considered "disorders from", mental, general and local, arising in the period (1 year) prior to the onset of gynecological symptoms (pelvic pain, irregular menstruation) .

There were recognized "recurrent characteristic conflictual experiences", associated with a peculiar localization of the neoplasm (leiomyoma) within the uterus, that can be considered prescriptive "**key notes**".

Intramural (20% of cases)

Biological sense: myoma to strengthen the uterus
and make it capable of becoming pregnant

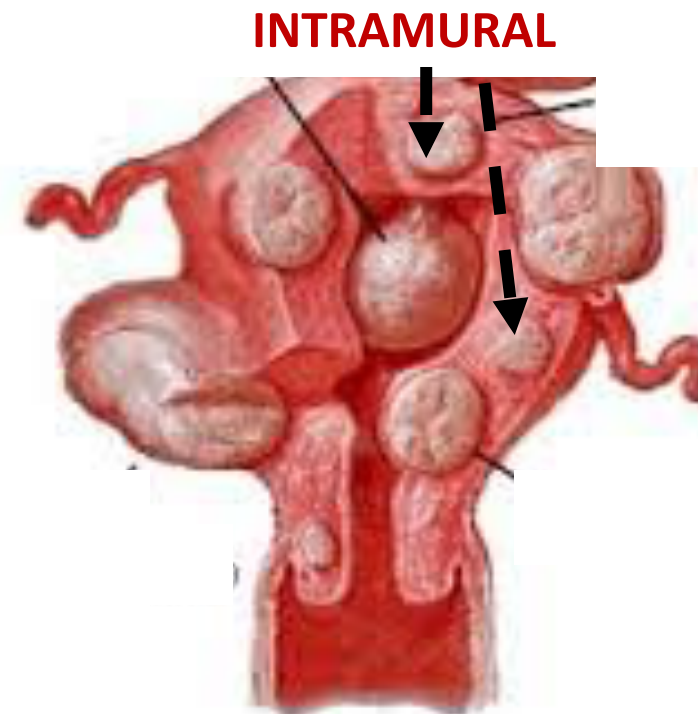


Associated conflictual experience : fear of not having an uterus “strong enough” to carry on a pregnancy and to have a physiological delivery.

*Hysterical, suspicious, pessimistic depression:
I will never have a pregnancy!*

Leiomyoma as a “biological transposition” of an unborn child.

ACTEA RACEMOSA



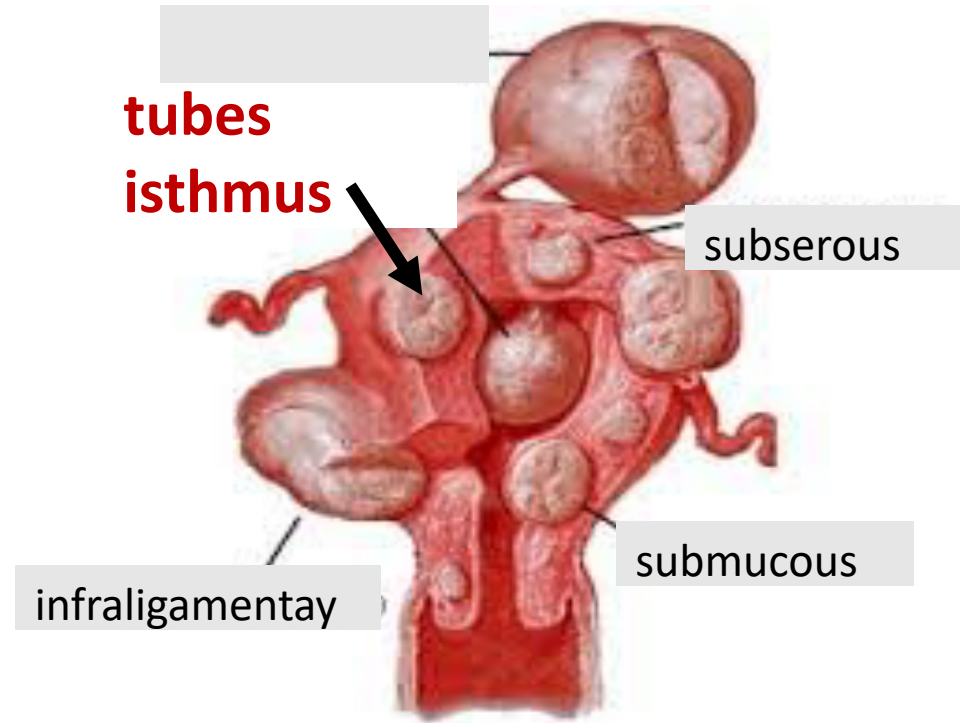
Uterine tubes isthmus (5%)

As if he wanted to obstruct spermatozoa from the tuba.

Unconscious pregnancy refuse because of doubt-dissatisfaction of the familiar or environmental situation, considered uncertain.

The partner is considered inadequate for paternity, for the defence of “territorial nest”, **delusion**.

NATRIUM MURIATICUM



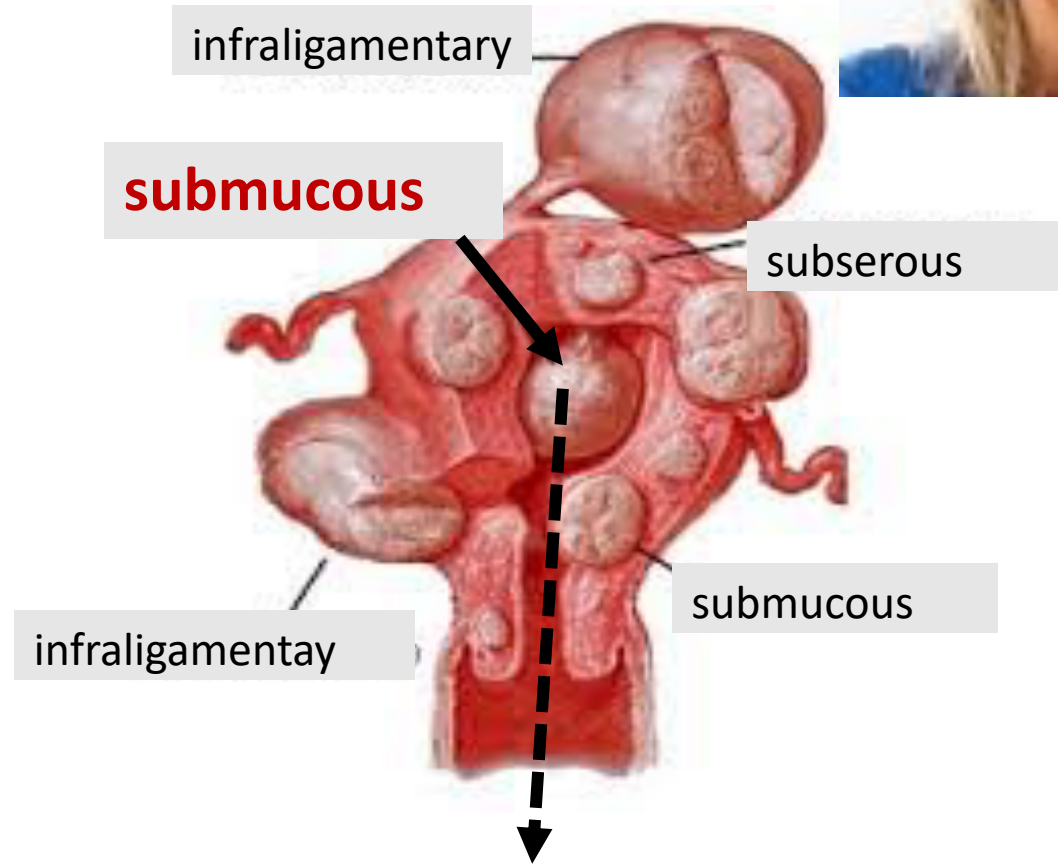
Submucous (10%):

MIOMA TRANSPOSITION OF THE CONFLICT (PARTNER) TO BE ELIMINATED

Intracavitary growth.
Refuse of pregnancy because
of an inadequate and vulgar
partner, will to get rid of him.
Feeling of guilt for wrong
choices.

Conflict of sexual refuse for
sexual abuse. Feeling of
dirtiness. Lost of self-
confidence.

LAC CANINUM



Subserous (30%)

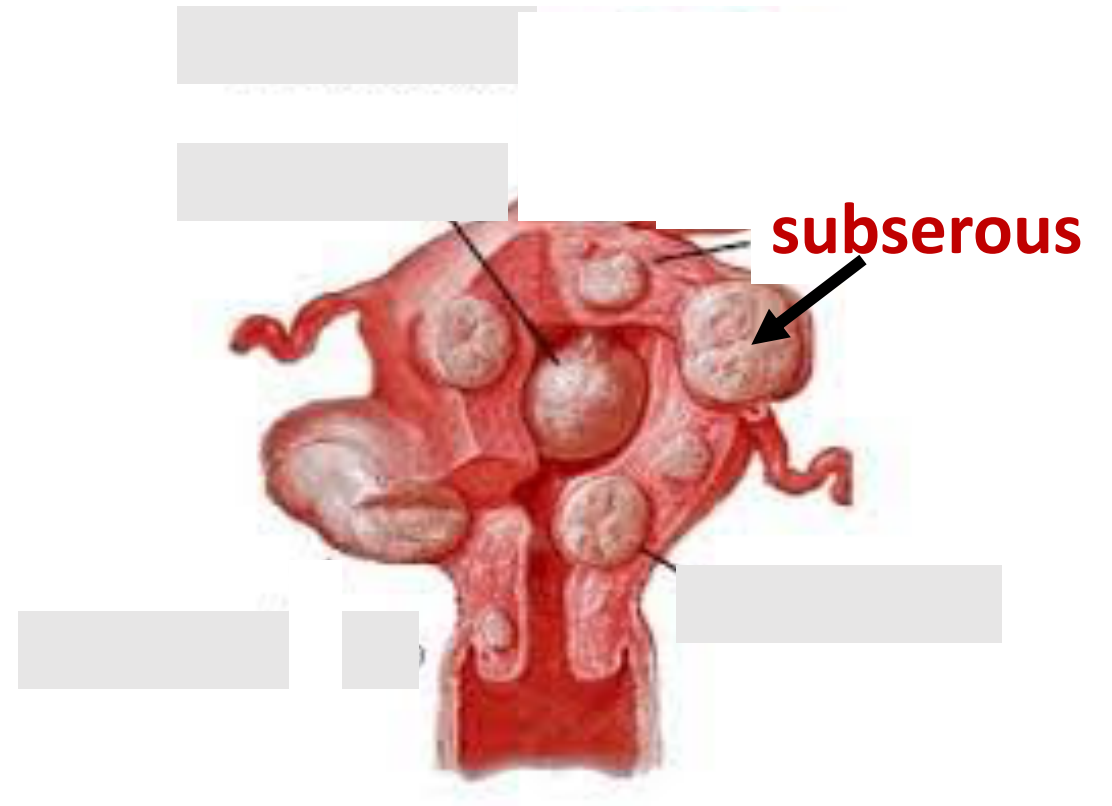
Intramyometrial myoma developing towards the outside: fear of losing everything.

Fear of not giving birth and losing the partner too.

Feeling of lost: but chances to recover!

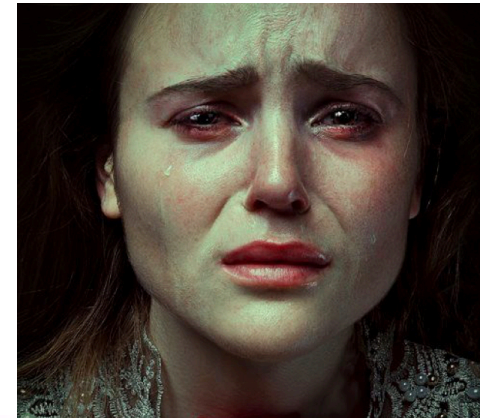
Great desire to be loved.

PHOSPHORUS FLAVUS



Intraligamentary (5%): MIOMA OUTSIDE THE UTERUS.

Feeling of having lost everything:
both the possibility of having a child, and the partner



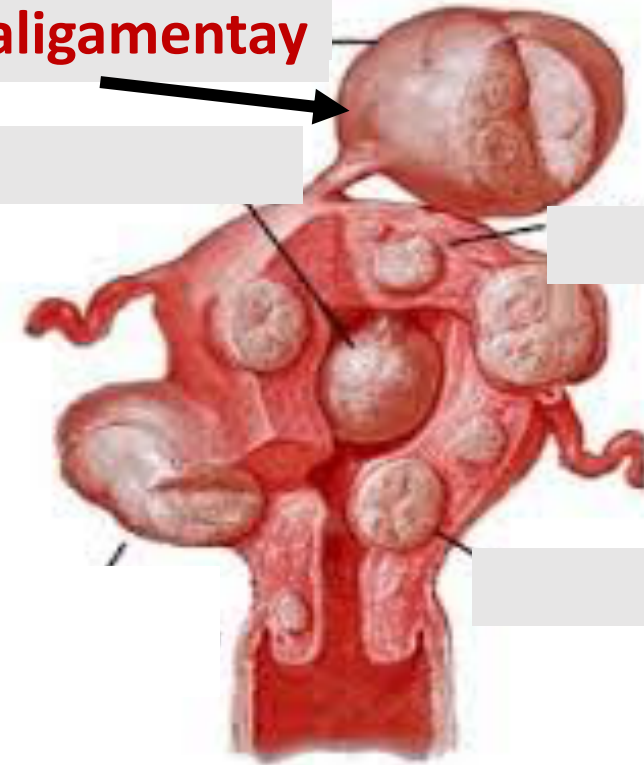
Certain fear of failure with partner,
considered suitable.

Delusion-anxiety of consciousness with
feeling of guilt.

*Not having children: failure that leads
to self-destruction.*

AURUM metallicum

intraligamentary



Fibromatous uterus (30%)

A long accumulation of harassment and indignation.

Uterine nodules: likewise suppressed sad stories.

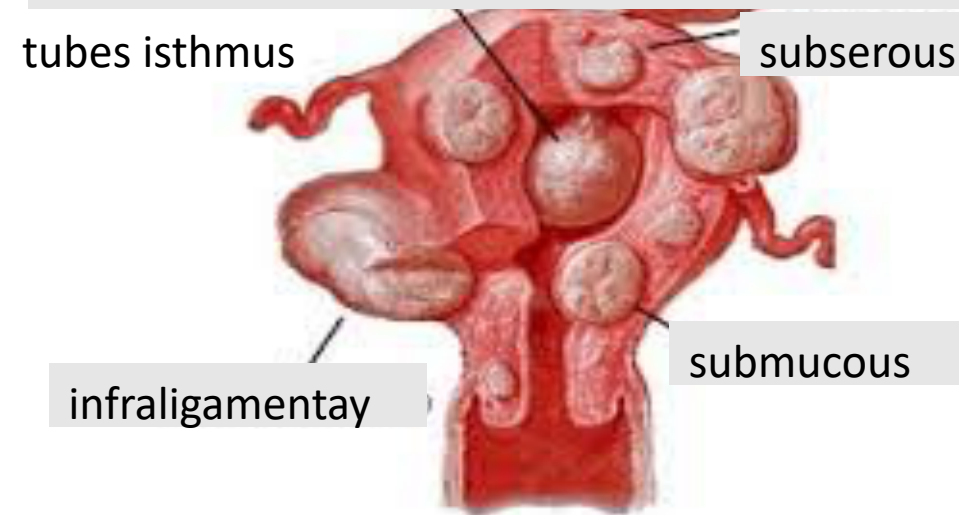


Chronicity with several conflictual relapses. “I don’t surrender” but the situation is compromised.

Conflict of identity: not to know where the place in life is (family, partner), inability to mark one’s territory, separation and sexual frustration.

STAPHISAGRIA

DIFFUSE FIBROMATOSIS



Drug dosage

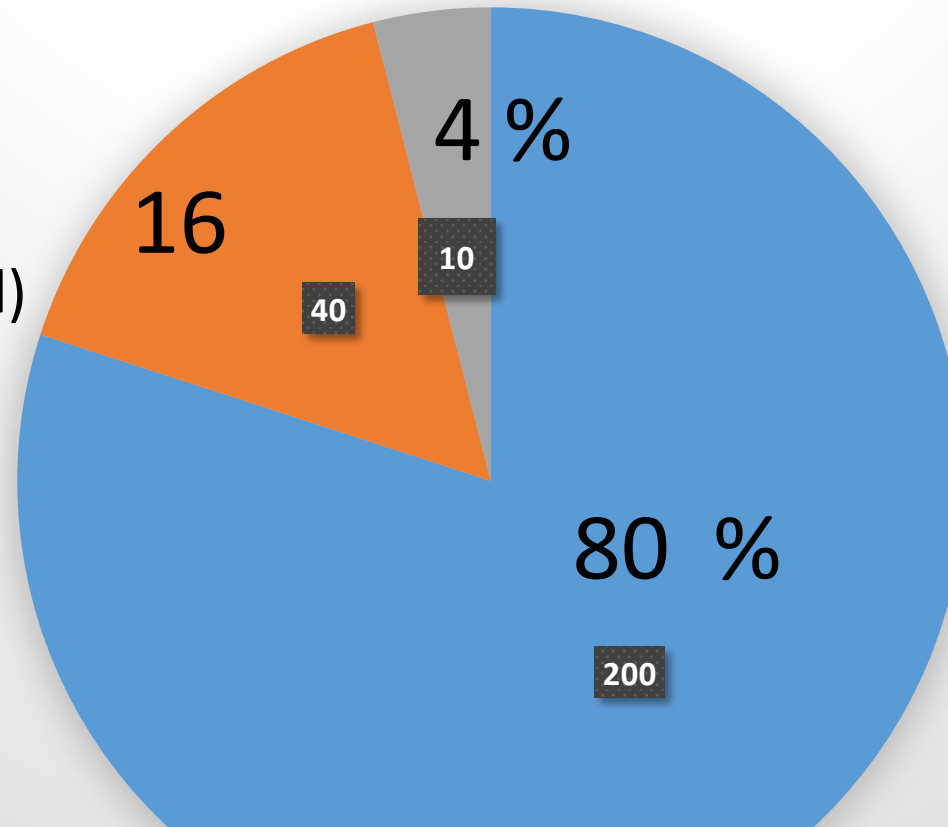
The remedy was administered through a LM dilution, from 1, up to growing power; during first 10 days once daily, then every 3 days, increasing power and becoming less frequent to a maintain dose “more simillimum power”: 5 days/week for 3 months, then once every 15 days for 3 months more.

Psycho-Biological Autogenic Training (PBAT): once every 2 weeks for 3 months, then once monthly for 6 months.

RESULTS: all the patients underwent six-monthly evaluation, up to clinical stability, then once yearly.

In 10 cases (4%) was administered GnRH homologue.

In 40 cases (15%) had to be added hemostatic therapy (tranexamin acid) for hemorrhagic symptoms.



All cases underwent to growth arrest of fibromatous uterus, without the need of surgery.

The resolution of critical symptoms was obtained within 6 months just through the simillimum associated with PBAT in 200 cases (80%).

CONCLUSIONS

The individuation of the decodifying “key notes” of organic symptoms and non-verbal biological language of mind-body is of a particular interest.

The archetype Biological Codes related to the emotional - conflictual feelings of the myometrium are: “**fear of abortion**”, associated with the unconscious perception of not being capable of bringing pregnancy to full term and being a “good” mother.

LEIOMYOMAS AND FIBROMA: a different psychobiological significance

Myomas (or leiomyomas)

Originating from the smooth muscle cells, they reveal the “conflict of survival” typical of the endodermal-derived tissues. Their biological-archetype significance is to try to increase muscle tone, mass and power of uterus, to promote pregnancy, “to better bear the product of conception” and to improve the performance of delivery.

Fibromas

They origin from the uterine connective tissue, of mesodermal origin. They reflect the “conflict of worthlessness” of this embryonic layer. Fear of “being attacked” into the intimal sexual freedom or being forced to an undesired pregnancy. The conflictual living is “not to be able to defense oneself”. Fibroma as a “shield” to strengthen the uterus to resist attacks.

Considerations

The “homeopathic simillimum” in neoplasm represents the “heart” of every integrated-therapeutic strategy, not just a simplistic “support.

Categorical imperative: to delete the prejudice “neoplastic disease = bad things”, to fight and destroy!

They represent the “condemn” of human kind to adequate itself, both structurally and functionally, to survival- evolution. They should be “welcomed”, decoded and elaborated.

The natural, millennial self-healing process of body cannot be “fought”.

Psychobiopathology : a new paradigm of “Human science”

The real healing process is to find the harmony with one's family-environment, to feel appreciated, useful and loved; gratified by the joy of knowledge, art, discovery.

To contribute to the evolution of the Whole- Organism, in coherence with the Vital Force that leads the Life, feeding oneself with love and solidarity (High Aim of Existence)

The **psychobiopathology**” propose itself as a new paradigm of “Human science” to discover the bio-logical connections **between diseases and every biochemical network, cells, organs and tissues.**

A scenic view of a rocky coastline. On the left, a steep, rocky cliff covered in green vegetation descends to a small, crescent-shaped sandy beach. Several people are on the beach, some sitting under umbrellas. The water is a vibrant turquoise color near the shore, transitioning to a deep blue further out. Numerous white boats are anchored in the bay. In the background, a small town is visible on the coast, and distant mountains rise under a clear sky. Large, light-colored rocks are scattered in the shallow water near the beach.

THANK YOU FOR
ATTENTION !

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