Integrating complementary treatment options with traditional veterinary practice is a growing trend in veterinary medicine. Veterinarians and clients alike have an interest in expanding potential treatment to include approaches such as Western and Chinese Herbal Medicine, Acupuncture, Homotoxicology, and Therapeutic Nutrition along with conventional medicine. Integrating Complementary Medicine into Veterinary Practice offers a valuable introduction to these modalities and provides useful guidance to integrating them into an established veterinary practice.

Integrating Complementary Medicine into Veterinary Practice takes a systems-based approach and introduces and familiarizes veterinarians with the terminology and procedures of these methods of treatment. The user-friendly design facilitates the easy integration of new techniques into practice. Key diseases and disorders ranging from emotional and behavior issues to cancer are covered and the authors provide invaluable suggested treatment protocols to help facilitate appropriate treatment of veterinary patients.

Integrating Complementary Medicine into Veterinary Practice brings together a wide range of information on key integrative treatment options from experts in the field of herbal medicine, acupuncture, homotoxicology, and therapeutic nutrition together in a single volume. This book is an invaluable resource for veterinarians interested in expanding the treatment options used in their practices.

Robert Goldstein is Director of Veterinary Services for Animal Nutrition Technologies, Healing Center for Animals, Northern Skies Veterinary Center and Director of Product Development for Earth Animal, all in Westport, CT.

Paula Jo Broadfoot graduated from Kansas State University School of Veterinary Medicine and has been studying and practicing therapeutic nutrition for the past 18 years.

Richard E. Palmquist is currently the head of medicine at Centinela Animal Hospital in Inglewood, California. He is currently research chair for the American Holistic Veterinary Medical Association and a consultant in alternative medicine for the Veterinary Information Network (Vet Info).

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INTEGRATING
COMPLEMENTARY MEDICINE
INTO VETERINARY PRACTICE
INTEGRATING COMPLEMENTARY MEDICINE INTO VETERINARY PRACTICE

Edited by: ROBERT S. GOLDSTEIN, VMD
Paula Jo Broadfoot, DVM; Richard E. Palmquist, DVM; Karen Johnston, DVM; Barbara Fougere, BVSc; Jiu Jia Wen, DVM; with Margo Roman, DVM

A John Wiley & Sons, Inc., Publication
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Edition first published 2008
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Blackwell Publishing was acquired by John Wiley & Sons in February 2007. Blackwell’s publishing program has been merged with Wiley’s global Scientific, Technical, and Medical business to form Wiley-Blackwell.

Editorial Office
2121 State Avenue, Ames, Iowa 50014-8300, USA

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Library of Congress Cataloging-in-Publication Data
Integrating complementary medicine into veterinary practice / by Robert S. Goldstein . . . [et al.]. – 1st ed.

P. ; cm.

Includes bibliographical references and index.
ISBN-10: 0-8138-2020-0 (alk. paper)
SF745.5.I58 2007
636.08953–dc22
2007017470

A catalogue record for this book is available from the U.S. Library of Congress.

Set in 9.5/12 Sabon by SNP Best-set Typesetter Ltd., Hong Kong

Printed in Singapore by Markono Print Media Pte Ltd

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Dedication

This book is dedicated to our fellow colleagues and all veterinary professionals who have the insight, motivation, and inspiration to reach out and find innovative therapies that improve the health and well being of animals everywhere. A special acknowledgement goes to our patients, past and present, and their human companions for their courage, fortitude, and ability to persist through these challenging times of transformation. They are our greatest teachers and rewards in this work. We also dedicate this work to the new patients who will benefit from the open mindedness of their veterinarians who begin to include nutritional, biological, and herbal therapies in their treatment regimes. God bless us all!
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About 30 years ago I became interested in the concepts of alternative and complementary veterinary medicine and in the course of things searched out names of veterinarians who had similar interests. One of those is the editor of this new book in veterinary medicine. At that time Dr. Bob Goldstein was a practitioner with his brother Marty in New York State. During a visit with Bob, he said to me, “We need somebody who can pull us all together and get the idea of complementary veterinary medicine going.”

As a result, I sent letters around and in 1982 the American Veterinary Holistic Medical Association was formed at the Western States Veterinary Conference (now the Western Veterinary Conference). Over the course of time this organization’s name changed to the American Holistic Veterinary Medical Association. At the time of that initial meeting we wrestled with the terms to describe what we wanted to do in the profession, and the word (w)holistic was chosen because then it seemed to be the most commonly used word. We didn’t want “alternative” for obvious reasons, and “complementary” seemed too far away at the time.

Now things have changed, and veterinary medicine is looking to integrate these complementary and alternative veterinary protocols into mainstream veterinary medicine. We have sessions relating to alternative and complementary therapies at all the major meetings, and almost all state associations have had sessions at one time or another. Even the words have changed. Since many presentations frequently mention conventional medicine techniques along with the alternative techniques, the word “integrative” is one that is appropriately used.

This book is designed to answer the changing needs brought on by these developments. Its concept is to be in the line of Conn’s Current Therapy for human medicine and Kirk’s Current Veterinary Therapy for veterinary medicine, taking diseases and syndromes and examining diagnostic treatment techniques for each of them. We have a number of books currently available within the profession that present great discussions about particular modalities. This book allows us to integrate those conventional modalities of the profession with a number of the complementary and alternative modalities to provide better care for our patients. It is my hope that this book, like Current Veterinary Therapy, will be updated and expanded as new information and understandings in veterinary medicine become available.

Carvel G. Tiekert, DVM; Founder, American Holistic Veterinary Medical Association
Integrating Complementary Medicine into Veterinary Practice is written by experienced practitioners and presents in modern and concise language a fully referenced book on the theory of alternative methods as well as individual disease treatment protocols. This book gives clinicians a guide so they can quickly access a knowledge base of alternative therapies and decide on a case-by-case basis whether to use conventional medical or alternative therapies alone or a combination of both.

Integrating Complementary Veterinary Medicine into Veterinary Practice is important because an increasing number of clients request complementary medicine for their pets’ medical treatment as well as pre- and post-operative regimes. This book provides, in a clear and organized fashion, the indications and applications of complementary medicine for the general practitioner as well as the specialist.

Martin Deangelis, DVM; Diplomate, ACVS
The veterinary profession has made major diagnostic and therapeutic advances in the treatment of infectious and degenerative diseases. The incidence of chronic disease and cancer, however, has increased at alarming rates and is diagnosed at younger ages, even in puppies and kittens. Perhaps it is this rising incidence of degenerative diseases that has spawned an insatiable search by professionals, scientists, and animal guardians for alternative therapies. Such therapies are gentle in their action, more effective in their abilities to prevent disease, and hold the promise of true healing—a goal that modern medicine to date has only been able to control but not cure.

At this same time, there is a widening gap within the veterinary profession between the “conventional” and “holistic” practitioners. This gap is deep and has been fueled by misunderstandings in terms, evidence-based rules, and the sense that a clinician has to be either one type of practitioner or another, as well as an overall incorrect perception that one form of practice is right and therefore the other must be false or bogus.

Integrative veterinary medicine (IVM), as outlined in this book, defines one profession that uses a combination of alternative and conventional practice methods for the benefit of the patient. IVM seeks to remind veterinarians of their “oath” to use knowledge and skill for the protection of patients, to relieve suffering, to help advance medical knowledge and individual competency, and above all to do no harm.

Within the tenets of this oath and our intent to do right for our patients, we often run into the brick wall of evidence-based rules that prohibit the expanded use of alternative therapies because there is little statistical proof that they work. While the authors of this book do not challenge this “evidence-based filter,” our 100-plus years of combined experience has shown us that these therapies are right for our patients and their companions.

At some point in our evolution as practitioners, we made a paradigm shift to expand our approach and care for our patients within the broad framework of our veterinary oath. Each author has had a personal journey that has led to the exploration of alternative therapies. At that point in time, there was no book nor reference nor scientific study that led to and opened the door. In our cases, “a light bulb went on” that brightened our way to explore alternative therapies with the ultimate goal of benefiting our patients and their companions. The intent of this “shift in perception” was not to abandon school and practice lessons, but rather to include therapies that we resonated with, that made sense, were requested by our clients, helped our patients, and improved our skills as medical healers.

We became proficient in these methods, but our profession as a whole did not embrace a unified vision, and many who were thought to be in opposing camps were choosing sides. The concept of one profession with multiple treatment choices was not materializing, and frustrated clients were forced to seek alternative solutions in areas such as the data-bloated Internet—fraught with misinformation—or from well intended but unqualified people. Our vision was to write a book for the professional that addressed these issues.

*Integrating Complementary Medicine into Veterinary Practice* was written in the convenient style of *Current Veterinary Therapy* or *Blackwell's Five-Minute Veterinary Consult*, offering clinicians fully referenced treatment protocols that address the clinical, emotional, and decisional situations that practitioners face daily. When this integrative veterinary concept was presented to Wiley-Blackwell, the publisher, they felt it was important to secure independent veterinary opinions as to the perceived need for a book of this type. This practitioner survey was overwhelmingly positive, indicating that the need for this book truly exists.

Chances are, if you are reading this preface, you too are wondering if there are other tools out there for your own personal toolbox of healing. Perhaps you hope for or envision a day when you can heal more patients with greater clarity in regard to this newly emerging field of practice. If so, we welcome you to our family and to the pages of this book. Holistic doctors believe that through natural methods much health can be rekindled and
engaged, and through conventional medicine many miracles can occur.

We truly believe that integrative medicine is the movement of the future. It holds the experiential efforts of pioneering healers long gone and the promise of technologies we haven’t yet dreamed of discovering, let alone implementing. It uses science to chart a path but never forgets its own ability to watch, listen, and know what it sees. Medicine is and always will be an art, and technology serves that art; however, it is the artist that applies the technology in ways that lead to success. We as authors of this book have worked diligently in our spare time to create this text, and we know that your experiences and comments will make the future editions even better. That is the reason that we came together to produce this text. It is our hope that this book brings you greater fulfillment and a new sense of joy in your work as veterinarians.

May your journey never end!

Respectfully,

Robert S. Goldstein, VMD, (editor); and Rick Palmquist, DVM (writing for Paula J. Broadfoot, DVM; Karen Johnston, DVM; Barbara Fougere, BVSc; Jiu Jia Wen, DVM; and Margo Roman, DVM)
Acknowledgments

I would like to thank my wife Susan for her total support for the writing of this book. Thanks to Susan and Andes Best for the creation of the book’s logo, which represents the guiding principle of integrative medicine. I thank Dan, who introduced Wiley-Blackwell to the data and concept that serve as the basis for this book. Thanks to Fred Best for his technical and editorial efforts and to Melissa, John, Betsy, Helmut, and Patricia for their ongoing support. I give my thanks to my family Abbey, Merritt, Jeff, Dan, Sam, Cooper, and Graham, and an extra special thanks to my brother Marty for his pioneering work in alternative veterinary medicine.

I give my thanks to PJ and Rick, who spent innumerable hours writing the homotoxicology sections of this book and also found the necessary time to assist me in the editing process, and to Jay and Karen for staying on course and especially for substantiating CHM clinical references under tremendous deadline pressure. A very special thanks goes to Barbara Fougere, who miraculously delivered the chapters on Western herbal medicine in an incredibly short amount of time, and to Margo Roman for her efforts and support of Barbara and the book. I thank Ray Kersey, Justin Jeffryes, Erica Judisch, Erin Magnani, and Antonia Seymour from Wiley-Blackwell—especially Erica and Justin, who smoothed the road to a larger and more comprehensive book. And finally a special thanks to Tracy Petersen whose editing and query expertise has transformed the raw manuscript into a professionally organized, readable textbook.

Robert S. Goldstein, VMD

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PJ Broadfoot, DVM

My eternal gratitude extends to my parents Mary and Allen, for showing me how to know truth; my wife MJ and my children Jessica, Jake, and Jared, for allowing me the time and support to write; to my staff for their endless support; my clients and patients, for teaching me how to apply the wonderful things I learned in veterinary school; Martin Goldstein, for showing me another way to practice; my co-authors—especially PJ Broadfoot and Robert Goldstein—who I am sure will remain lifelong friends in healing; and the American Holistic Veterinary Medical Association, for providing a safe place for the development of CAVM. Finally, I extend my gratitude to Dr. Alta Smit of Heel for her tireless support of biological therapy.

Rick Palmquist, DVM

It has been a great honor to be trusted with the lives of my patients and I am grateful for the faith they have shown in me. I promise to continue to seek knowledge so that I may always provide them with my best care. I would like to thank my family for their support throughout my schooling, and my husband Jiu for introducing me to herbs and acupuncture. I also want to thank Jason,
Joshua, and Jacob for being the best sons a mother could have.

Karen Johnston, DVM

I want to thank my wife Karen for all her support.

Jiu Wen, DVM

I would like to acknowledge Drs. Susan Wynn, Bob Goldstein, and Margo Roman for their support in this project; my teachers—particularly Kerry Bone—and my four-legged patients who have shown me the gentle power of plant-based medicine.

Barbara Fougere, BVSc

I thank all the animals that have given enlightenment to the doctors and their caretakers and my horse Champ who empowered me to seek integrative veterinary medicine for his care and for inspiring the DrDoMore project.

Margo Roman, DVM
Introduction: How to Use This Book

This book is a working manual for veterinarians who are interested in the integration of alternative methods into conventional veterinary practice.

Section 1 of the book covers the history, theory, evidence, and clinical references for therapeutic nutrition, Chinese herbal medicine/acupuncture, homotoxicology, and Western herbal medicine. In each modality there is an extensive reference section that substantiates the use of each of the methodologies in both human and veterinary medicine.

Sections 2 and 3 of the book contain disease protocols using combination therapies of therapeutic nutrition, Chinese herbal medicine/acupuncture, and homotoxicology. Section 2 covers chronic degenerative diseases and Section 3 covers infectious diseases. The disease protocols are all similarly formatted as follows: definition and cause, medical therapy and nutritional recommendations, anticipated prognosis, integrative veterinary medicine, therapeutic nutrition (general considerations and appropriate nutrients), Chinese herbal medicine/acupuncture (general considerations and appropriate Chinese herbs), homotoxicology (general considerations and appropriate anti-homotoxic agents), the authors’ suggested protocols (therapeutic nutrients, Chinese herbs, and homotoxicology), product sources, and references.

Section 4 is dedicated completely to Western herbal medicine. It lists similar diseases as found in Section 2 and 3 and specific Western herbal protocols for those diseases, followed by substantiating references.

Section 5 covers neoplastic processes and is similar in organization to Sections 2 and 3. The first chapter in this section is a discussion of the integrative veterinary therapies of therapeutic nutrition, Chinese herbal medicine, and introductory homotoxicology. There is a discussion on diet, elaborating upon the restrictions that are required when Chinese herbal protocols are used. The next chapter spells out cancer treatment protocols by cancer type, listing the recommended therapeutic nutrients, Chinese herbal formulas, and homotoxicology remedies. The following chapter provides more in-depth discussions on the autosanguis and advanced homotoxicology approach to cancer and a complete listing of references and scientific studies that support the recommendations.

Section 6 is a discussion of vaccinations, their impact upon the cause and prevention of diseases, and alternatives, as well as treatment protocols that are designed to prevent complications and future problems. This is followed by scientific references.

Section 7 is a glossary of the most common terms related to therapeutic nutrition and nutraceuticals, Chinese herbal medicine and acupuncture, homotoxicology, and Western herbal medicine.

Section 8 is a comprehensive set of resources. It includes organizations and advanced studies for alternative methods and an extensive listing of companies that manufacture the foods, nutraceuticals, homeopathics, Western herbs, and Chinese herbs that are presented in the disease protocols in Sections 2, 3, and 5.

The Appendix contains a list of acupuncture points mentioned in this text.
INTEGRATING COMPLEMENTARY MEDICINE INTO VETERINARY PRACTICE
SECTION 1

Introduction to Integrative Veterinary Medicine: The Integration of Old and Ancient Medical Practice Techniques into Conventional Veterinary Practice
Chapter One

Introduction to Integrative Veterinary Medicine

INTEGRATING ANCIENT MEDICAL PRACTICE TECHNIQUES INTO CONVENTIONAL VETERINARY PRACTICE

Integrative veterinary medicine (IVM) combines natural and alternative approaches with conventional veterinary practice methods for the benefit of the patient. IVM uses modalities such as therapeutic nutrition, Chinese herbal medicine, and homeopathy, along with a proper diagnosis, relying upon internal medicine, ultrasound, radiology, blood evaluation, and other recognized diagnostic techniques. The purpose of this book on integrative veterinary medicine is to define and blend conventional (allopathic) veterinary and alternative (holistic) practice methods along with traditional definitions of healing.

This book discusses the arts and practices of therapeutic nutrition, Chinese and Western herbal medicine, and homotoxicology (a combination form of homeopathy). Guidelines for practicing veterinarians to incorporate these treatment modalities into routine daily practice are outlined in modern terms. The book defines and clarifies terms and concepts of therapeutic nutrition and non-Western forms of medicine in more understandable language. As an example, fever, redness, inflammation, and thready pulse are commonly accepted terms that are often discussed in a clinical veterinary practice. Terms such as “Chi,” “Yin and Yang,” and “tongue or pulse diagnosis” often bring misunderstanding and confusion to conventionally trained clinicians.

The modern interpretation of alternative and ancient therapies allows them to be integrated into veterinary practice without years of intensive training or learning of new methodologies, terms, and procedures. The treatment protocols presented in this book have been used in a clinical setting and are specifically matched to the clinical condition. The goal is to improve therapeutic results when these treatment modalities are used alone or in combination with prescribed medications for the benefit of the patient. Also presented, when indicated, is a comparison of results when treating diseases with conventional medicine alone, with alternative medicines alone, and with a combination of conventional and alternative methods.

DESCRIPTION OF VETERINARY PRACTICES TODAY

The basis of conventional veterinary practice—diagnosis and pathology orientation and symptom-oriented drug therapies

Our veterinary education builds from the scientific basis of biochemistry and physiology, through disease definitions and histology, and finally into the clinical application of diagnosis and medical treatments. The more specialized our veterinary training, the further our focus shifts from underlying causes and prevention to diagnosis and appropriate medical therapies. Additionally, most pharmaceutical research is focused upon the treatment of existing disease and less upon prevention and wellness.

As busy veterinary practitioners, we often become overwhelmed with the case load of infectious and chronic degenerative diseases. Many times we barely have enough time to do more than treat and stop the bleeding, itching, chewing, vomiting, diarrhea, limping, eating, drinking, urinating, and so on. In many practices, this required focus upon medicating symptoms often leaves little time to discuss prevention, wellness, supplements, and natural remedies, all of which may help the pet’s present situation.

Although this may be an exaggeration of day-to-day practice, as veterinarians, we often guide our clients on daily home care, diet, supplements, training, grooming, and so on. However, the fact remains that wellness and prevention methods often do not get the time that they deserve. The unfortunate result is that clients, when faced with recurring conditions and desiring options for alternatives to chronic medications, often seek answers to their questions from the Internet or from other potentially unreliable sources.
Holistic, alternative, and complementary veterinary practice

Many terms such as “holistic,” “alternative,” and “complementary” are often used interchangeably, leading to confusion and a breakdown in communication between animal companions, veterinarians, and animal health care personnel. Current terminology refers to such practices as complementary alternative veterinary medicine (CAVM), which includes a diverse group of therapies typically not taught in medical schools. (Some alternative modalities, such as acupuncture, therapeutic nutrition, and Chinese herbal medicine, are now being taught in a few veterinary schools and an increasing number of medical schools.) Because of these misunderstandings, veterinarians are often reluctant to speak highly of any alternative therapies until there is sound evidence-based proof that these treatment modalities are clinically beneficial.

Unfortunately, this lack of scientifically validated evidence has helped to fuel and widen the gap between conventional and holistic veterinarians, leading to more client confusion and perceived divergent types of veterinary practices available for the public to select, i.e., conventionally trained or holistically trained practitioners. Many clients are beginning to say they prefer medical professionals trained in both types of healing, i.e., integrative veterinarians.

Alternative veterinary therapies may augment, or in some instances replace, conventional medical therapy, depending upon the condition and the clinical status of the patient. In this book on integrative veterinary medicine, we present protocols for chronic and infectious diseases using therapeutic nutrition, Chinese and Western herbal medicine, and homotoxicology. These therapies are presented on an integrative basis for veterinarians to choose at their level of comfort and experience.

Clinical (academic) veterinary nutrition

Veterinary schools recognize and offer nutrition as part of their teaching curriculum. Although the importance of proper nutrition in the cause and treatment of diseases is recognized, graduate veterinarians have not totally embraced the concept of nutrition for the treatment of disease. Of the approximately 60,000 veterinarians in the United States, there are about 60 diplomates of the American College of Veterinary Nutrition (ACVN), and only about one-third of veterinary schools have a diplomate on faculty staff.

The trained or board-certified veterinary nutritionist assesses nutrition in a clinical setting by first assessing the animal’s condition, i.e., physical, diagnostics (blood and so forth), current diet, body weight, and hydration. This is done to gain knowledge about the animal’s nutritional requirements and adequacy of the current diet; it does not focus on the potential therapeutic value of food or supplements in the treatment of disease.

Please note that the disease protocols presented in Sections 2 and 3 (Chapters 6 through 18) of this book list nutrients based upon their therapeutic value in the treatment of that disease.

Integrative veterinary medicine

IVM incorporates a fair measure of the lost “art of medicine,” in which the practitioner uses his or her senses in a more critical way to assess the totality of the patient being treated, by tapping into an expanded list of therapies based upon the following criteria:

• The clinical and physical condition of the animal
• The medical diagnosis
• An evaluation of the proper medical or surgical treatments available, including their effectiveness and prognosis
• A similar evaluation of alternative therapies, such as therapeutic nutrition, as well as herbal and homeopathic remedies that are appropriate for the condition
• An evaluation of the client’s needs and wants

This expanded treatment option program is discussed with the client, who then, with all the facts in hand, makes the appropriate decision for the animal’s health and well being.

Evidence-based medicine in practice

According to the Evidence-Based Veterinary Medical Association (EBVMA 2006), evidence-based veterinary medicine (EBVM) is “the incorporation of evidence-based medicine principles (EBM) into veterinary practice.” Evidence-based medicine relies upon the principle that “the practice of medicine should be based on valid, clinically relevant research data” with a footnote that states “to be accurate, this definition should include the phrase, ‘whenever possible,’ as medical ethics precludes conducting research that includes inhumane circumstances.”

The EBVMA Web site goes on to say that this “is in preference to the traditional method of medical training—still in sway—that is weighted more toward authoritative ‘experts,’ espousing their best judgments, which are based on their experiences and their understandings of pathophysiology. Once fully integrated, EBM will place human medicine on a scientifically sound foundation so that decisions concerning diagnosis, prognosis,
treatment, and risk can be made on the basis of more predictable outcomes.”

As practicing veterinarians, we rely upon authoritative experts for our clinical, decision-making process. We also depend upon data from the pharmaceutical industry, veterinary journals, professional reference books, lectures, veterinary teaching schools and specialty groups, conventions, and the wealth of data that is available on the Internet. Another influence for veterinarians is our clients’ wishes for their animals. We are often faced with decisions that alter the course of our recommendations because the client does not wish to pursue our medical or surgical recommendations. Veterinarians are often asked what alternative therapies are available for the animals. Currently in veterinary practice, unlike in human medicine, the decision makers are the clients, and they are free to make the choices that they feel will be best for their animals and their families.

**Integrative veterinary medicine**

The American Veterinary Medical Association (AVMA) guidelines for complementary and alternative veterinary medicine (CAVM) assist veterinarians in making choices related to CAVM techniques. The AVMA guidelines clearly state, “All veterinary medicine, including CAVM, should be held to the same standards. Claims for safety and effectiveness ultimately should be proven by the scientific method. Circumstances commonly require that veterinarians extrapolate information when formulating a course of therapy. Veterinarians should exercise caution in such circumstances. Practices and philosophies that are ineffective or unsafe should be discarded.”

Therefore, veterinarians, confronted with the standards of EBVM and the AVMA guidelines for CAVM, face a dilemma when considering IVM therapies. To begin with, most current clinical research focuses upon the efficacy of a specific medical therapy for a disease condition, and little data has been published or peer reviewed on alternative veterinary therapies. To complicate matters further, although much data exists on alternative veterinary therapies, little has been published. There exists a much larger clinical pool of data in human medicine; however, many scientists and veterinarians correctly caution that human data is often not relevant for animals.

The practicing veterinarian is left to do the following:

1. Make the medical diagnosis.
2. Discuss the medical or surgical recommendation with the client.
3. Search out alternative methods when conventional therapy has no clear curative answers or when the client decides against conventional therapies.
4. Heed the precautions of the AVMA.

This book on integrative veterinary medicine helps practitioners who are interested in integrating alternative methods into their practices by compiling available, credible clinical research and authoritative data into a single resource.

**Evidence-based history**

The battle between evidentiary medicine and holistic medicine goes back hundreds of years. Factually, conventional doctors created the term “evidentiary” in their attack on homoeopaths. Homeopaths were concerned with results for individuals only and not on populations. Evidentiary doctors were worried about “broad-population” health issues, and at the time this term was coined, they were concerned with competition. As the medical and veterinary professions have progressed and become more sophisticated, so too has this evidentiary issue matured, such that today, it is a central issue in the growth and expansion of all healing professions.

The veterinary profession is broad in many opportunities for practicing and research veterinarians, from clinical small animal practice, food animal medicine, treatment of race and show horses, across the spectrum to zoo and laboratory animal medicine. These areas of specialties have a common thread as the basis for their teaching—there is evidence and research supporting their science and practice, but many things are not known and remain to be properly researched. Some alternative therapies, such as acupuncture and Chinese herbal medicine, are mainstream and being taught at veterinary schools, even though much evidentiary proof is scant or not available in the United States.

In homotoxicology and Traditional Chinese Medicine (TCM), for example, a large portion of the literature is not translated into English, which makes its pursuit even more challenging. Similarly, there is evidence and research on pharmaceutical agents, but that doesn’t assure their safety or efficacy. Traditional Chinese Medicine has been practiced for more than 4,000 years, and it is firmly entrenched in a methodology that is fundamentally different from the evidenced-based theories and practices upon which conventional (Western) treatments are based. TCM relies upon a deep, astute observation of body systems and responses to manipulation with herbs and other interventions. As a result, these ancient therapies are quite often difficult to integrate or evaluate, because their foundation uses a different point of reference.

When integrating these conventional and alternative methods of healing, we must realize that both the known and unknown are important. As individual doctors we need to be professionally responsible and use techniques that are predictable in assisting our patients in their recovery. When these are known we should recommend them.
When they are not known, it becomes the professional’s responsibility to apply his or her knowledge of fundamental theories and concepts to the case at hand to improve the patient’s condition.

For example, when some NSAIDs cause illness from side effects, it makes sense to look for alternatives. Glucosamine, chondroitin, and similar natural products lead to improvement and have no major side effects. Once these alternatives are known to be safe and helpful, it makes sense to choose them before resorting to more dangerous agents. In this way alternative agents become therapeutic norms, based on evidentiary results. We currently know that glycosaminoglycans assist in control of arthritis, and they have become more mainstream therapeutic agents. Similarly, milk thistle and its components, as well as SAMe, have moved forward by this same logic.

Evidence—The evolution of scientific truth

Humans have long sought information in pursuit of improved survival (Hellemands, Bunch 1988). Resulting fields of knowledge grow and are organized, and when they are beneficial, become specialized areas of expertise. In this way, civilization grows and prospers on the accuracy of its knowledge base. Professionals are respected for their command of knowledge and their ability to apply it in such a way that it helps the survival of others. The field of medicine is simply one such field, and judging from the longevity statistics over the last few generations, medicine is assisting our population to live longer and more productive lives.

As with all professions, veterinarians continually strive to gain better perspectives and theories of health and disease, and as we gather better information, we constantly review our practices, abandoning the less successful ones and adding those techniques with better outcomes. This is an endless process for any sincere profession. A profession that succeeds in this is respected and loved, and the veterinary profession is currently enjoying rapid growth and high respect. Individual veterinarians who perform these functions effectively are found to have superior incomes and better quality of life.

Science is the orderly asking of questions and recording of data, which is then organized into specialized areas of knowledge. This scientific data can be verified and is repeatable. The word “science” literally means “to know,” and the process involves looking at a specific area, deriving what is known, making hypotheses about that area, and then testing those hypotheses using the scientific method. The data achieved from that process are organized and evaluated until a theory, an idea that explains phenomena in a more correct way, can be put forth. This theoretical idea gives rise to models, and these are tested until they are proven or refuted. Achieving scientific knowledge is a process. It is never static, but rather dynamic, and movements within the fields of knowledge arise and build agreement for their theories and models. Political and economic pressures and factors can enter into the field and block this process with a resulting decline in understanding and scientific discovery.

Technology takes the data that is discovered by scientific method and organizes it into workable means of improving life. The more a discovery improves life, the more valued it becomes. Technology is simply applied knowledge. Philosophy values these discoveries and technologies and examines how they are beneficial or damaging. A truly enlightened civilization will realize that the more ethically its citizens behave, the greater the value of its discoveries and technologies. For this reason, there must always be a conscious ethical arm of any profession, and discussion of ethics (those actions that bring maximal survival to self, groups, and other life forms) must prevail in any living and active profession.

Evidenced-based medicine is a simple concept. It states that a doctor and profession should strive to use technology and techniques that have been proven to be helpful. This keeps a profession on its healing course and preserves the ethical compass of its practitioners, which further ensures the survival of the profession and its clients. It would be ridiculous to fight evidenced-based medicine as a theory, but there can be much disagreement as to what is considered evidence acceptable to the profession. Just as we see in science, a profession must examine the evidence and measure the outcomes of its activity. In doing so we must realize that we will invariably encounter disagreements stemming from a wide variety of sources, not the least of which are economic, religious, and political. The idea of evidenced-based medicine is a good one and one that should be actively pursued, but the concept can become a trap as well, especially when methodologies and meaning of evidence are not properly understood, or when economic or political pressures are brought to bear on a body of knowledge with a purpose other than discovery of the truth.

The word “evidence” comes from “evident,” which originates from Latin and literally means “to see out.” Evidence is what we see, perceive, or can measure on instruments. A hidden thing is not evident until one removes the barrier to perception, at which time it becomes obvious. The hidden thing is always there and acting as itself, even though science or scientists do not recognize it, name it, or understand it. Consider, if you will, the concept of the zero net energy field, the variable in physics equations that is known to exist but at present is an unquantifiable entity. On Earth, the sun appears to rise in the east and set in the west; however, until more recently there were many opinions and theories about where the sun spent its time at night. In medicine, the scientific
method has spent a considerable time understanding the events of the cell, but only recently did medicine begin to appreciate the massive contribution to the organism made by the space between cells and the connective tissue.

First proposed a century ago, this area of research has been hidden as the field of medicine that looked almost exclusively at cellular structural mechanics and the biochemical activity. Cellular study has been a most worthy study, with a host of lifesaving pharmaceuticals and techniques resulting. As we begin to delve into cellular energetics, field mechanics, and the actions of the connective tissue, we find a gold mine of information with which we may assist patients in recovery from disease, as well as create better states of health for our population.

The science of therapeutic nutrition

Therapeutic nutrition, of all the modalities discussed and explained in this book, is the most studied under the guidelines set by evidence-based standards. One simply has to go to a popular Web site, such as the Linus Pauling Institute at Oregon State University (http://lpi.oregonstate.edu/) or the Mayo Clinic (http://www.mayo.edu/), to find a wealth of credible information on the topic. Linus Pauling, the famous researcher most well known for his work with vitamin C, is referenced throughout chapter 2 of this book. Simply by going to the Linus Pauling Institute Web site and reviewing the micronutrient section one can find an extensive listing of references and clinical trials on vitamins, minerals, phytonutrients, antioxidants, foods, and so on.

In this age of the Internet and the overwhelming amount of credible and not-so-credible information, it is nearly impossible for the layperson, and somewhat difficult for the professional, to decipher truth from fiction. However, if one goes to credible sites such as the Pauling Institute, page after page of non-biased scientific research backs up the claims that various nutrients have been proven beneficial in medical conditions ranging from simple skin disease to cancer.

The one important difference in credible sites is the almost paranoid desire to get away from false and misleading claims and to state the true facts. For example, there is language such as: “while a specific clinical trial has definitively shown that a certain nutrient has been proven beneficial for a specific disease, there is equal and oftentimes more data that states that the specific clinical trial was not only flawed but that other clinical trials failed to prove what the original trial claimed.”

Using The Pauling Institute and the medical benefits of vitamin C in treating cancer as an example, one can find the following published data on the Pauling Institute Web site (http://lpi.oregonstate.edu/):

“Studies in the 1970s and 1980s conducted by Linus Pauling and colleagues suggested that very large doses of vitamin C (10 grams/day intravenously for 10 days followed by at least 10 grams/day orally indefinitely) were helpful in increasing the survival time and improving the quality of life of terminal cancer patients (Cameron, Pauling 1976). However, two randomized placebo-controlled studies conducted at the Mayo Clinic found no differences in outcome between terminal cancer patients receiving 10 grams of vitamin C/day orally or placebo (Creagan 1979, Moertel 1985). There were significant methodological differences between the Mayo Clinic and Pauling’s studies, and recently, two researchers from the NIH suggested that the route of administration (intravenous versus oral) may have been the key to the discrepant results. Intravenous (IV) administration can result in much higher blood levels of vitamin C than oral administration, and levels that are toxic to certain types of cancer cells in culture can be achieved with intravenous but not oral administration of vitamin C (Padayatty 2004). Thus, it appears reasonable to re-evaluate the use of high-dose vitamin C as cancer therapy.”

This example shows the evidentiary process in action. Some clinical trials support the use of vitamin C as a treatment and some do not. The important point regarding this book on integrative veterinary medicine and the current status of the veterinary/client relationship relates to the statement mentioned above in the section on the evolution of scientific truth. What do we as veterinarians recommend for our client whose dog has cancer and who is morally or ethically against chemotherapy and is asking for alternative advice? Three choices:

1. Refer the client to a holistic veterinarian who is experienced in treating cancer but who uses modalities that have no evidence-based proof.
2. Suggest that the client search the Internet or other sources for alternative therapies to treat the animal that has cancer.
3. Suggest alternative therapies that have been used clinically, that may or may not have evidence-based proof, that do no harm, and that offer the client the veterinary-supervised alternative therapy to help in the animal’s day-to-day battle against the disease.

Throughout this book’s sections on therapeutic nutrition, we will present clinical proof, when available, and outline specific protocols that are designed to assist veterinarians in making therapeutic nutritional treatment decisions for the benefit of their patients and clients.

The science of Chinese herbal medicine

Traditional Chinese Medicine has historically been passed down from one person to the next. In fact, formulas from one region might be markedly different from formulas in
another region. The doctors would use whichever herbs were available to them. Now we have classes and even entire schools dedicated to herbal medicine and acupuncture. This is an exciting development. Although some formulas may be proven to be ineffective, most have demonstrated efficacy in the laboratory and in practice.

Recent research has begun to assign Western indications to herbs. Not surprisingly, the Western and Eastern indications tend to match. In traditional Chinese medicine, ginseng (ren shen) is used for “wasting and thirsting disorder,” which is a syndrome of polydipsia and weight loss, such as might be seen with diabetes mellitus. In experimental settings we find that ginseng improves clinical signs and lowers blood glucose levels (Chavez 2001). It is also known to benefit Heart Qi in TCM. It is indicated for calming the spirit and for palpitations with anxiety due to Qi and Blood deficiency (Bensky 2004). Modern research has demonstrated that it has inotropic effects similar to cardiac glycosides in dogs, cats, and rabbits (CA 1992). It is clear that although the terminology differs between the two modalities, both are describing the same effect upon the body.

The final stumbling block for acceptance by “modern” practitioners is the often-mentioned lack of scientific studies concerning herbs. Throughout this book, references are cited to demonstrate the use of herbs for each specific condition. The references cited are based upon in vitro laboratory experiments or studies in animals or humans. When the authors have been unable to find studies of acceptable quality, the herbs are listed in a separate paragraph with a statement that these herbs help increase efficacy of the formula.

Because traditional Chinese herbal medicine originated in Asia, many of the studies of herbs and acupuncture were first conducted and published in Asian countries. It is only in recent times that researchers and universities in the United States and other countries have begun to publish on these topics. As a result, more reference material is currently available in foreign language texts. This is changing rapidly, and in future writings, we expect to cite more clinical studies that are published in English and in the United States.

In addition, professional journals have been reluctant to publish articles about herbs, preferring a more progressive image. Just recently, veterinarians who use herbs have been given columns in professional journals. Veterinary Forum, the Journal of the American Veterinary Medical Association, and Veterinary Practice News have all published articles concerning herbal medicine and acupuncture.

There are now entire practitioner-oriented publications that carry studies about herbal medicine, homeopathic medicine, and acupuncture. For example, Alternative Therapies in Health and Medicine is a peer-reviewed journal that has been available at the National Library of Medicine since 1996. Books devoted to acupuncture and herbal medicine are being published in record numbers. Universities and government agencies are beginning to conduct research on the use and abuse of herbs. With this increase in research comes a greater understanding of the efficacy and safety of herbal therapy.

### The science of homotoxicology

This text contains many studies regarding homotoxicology. Academic studies are desired in a scientific field, and homotoxicology has its share of them. The reader is referred to the evidence-based section (Chapter 4, introduction to homotoxicology) for more detail. Knowledge can be obtained in many ways. The simplest method is to ask the question and look at the material available. When we ask, “Does homotoxicology assist survival?” the answer is not clear to many people. This necessitates the application of scientific method and ethical discussion to the field, because it will be rapidly recognized that this question is simply too broad for inquiry. We must narrow the field and look at simpler systems to gain better understanding.

Analysis literally means “to break apart.” Just as we gained understanding of the body by dissection, a healing profession gains professional data from breaking fields down and examining their parts. For a professional considering integrative practice, that process involves constantly evaluating information and choosing those factors that seem plausible to assist patients and then incorporating them into clinical practice. As evidence arises, it is then examined and decisions can be made. The entire profession is currently involved in this very activity.

Homotoxicology attempts to unite and integrate the fields of conventional Western medicine and homeopathy. Its discoveries are validated by normal physiological and biochemical sciences, but the validity of homotoxicology is linked to the question of the validity of homopathy. A major problem in examining homopathy for validity has been the lack of any theory that adequately explains the results observed. Many trained in Western medicine feel that they must understand these materials before using them. Although understanding is nice, it is not necessary for successfully using an area of technology. A person can use a computer to assist a veterinarian in running his practice without knowing how the computer works. Homeopaths frequently comment that it is not necessary to know the details of how something works if it can be established that it does work. There is much merit to this comment.

Penicillin kills many bacteria and was successful for years before we understood how it interfered with bacterial growth. As we learned more, science discovered enzymes and enzyme inhibition, and our knowledge base grew. Penicillin continued to kill bacteria in the same way as before, and doctors used it frequently because it accomplished the treatment goals, even though there were no
random clinical trials done. Some areas of complementary alternative veterinary medicine and complementary alternative medicine (CAM) are more difficult to examine directly (Lewith, Jonas, Walach 2005). The anatomy of the spirit is a controversial concept, yet nearly half of our population believes that we are spiritual beings and resorts to prayer as part of the routine activity of living. Prayer is the most common form of CAM in human medicine.

Numerous studies have demonstrated benefits from prayer, and some of these are even blinded. This suggests that there is some phenomena, be it simply the power of positive thinking or something far greater, in action in this area. Fortunately for us, prayer rarely interferes with effective medical procedures; it is not required that we answer the exact mechanics involved in this area, because people do not routinely die from prayer; and involving prayer in a practice should not cause much harm to those involved! If a CAM procedure is not harmful in and of itself, then it may be criticized as an unnecessary expense, or it may cause the patient to seek out ineffective therapy over effective therapy, thus delaying needed treatment. For this last reason alone, it is wise for those seeking out CAM to have an interest in the evidence for each aspect proposed for use in an animal hospital.

Homeopathy is a field that has suffered for lack of a concrete explanation of its method of action. Until recently no one really knew how a homeopathic remedy created its effect. Skeptics frequently state that homeopathy works as some sort of placebo, but one study demonstrated greater results than placebo alone, a fact that makes interested parties continue to investigate the field (Reilly, et al. 1986). Thanks to major attention from European universities, we are beginning to see that at least low-potency homeopathic agents create some of their beneficial effects by very conventional, scientific means (stimulation of cellular receptors and enzyme induction in accordance with the Arndt-Shultz and Michalis-Menton principles).

Perhaps we would be better served to discuss this new field as nanopharmacology, the study of the effects of low doses of substances on physiological systems. Such a change in semantics would likely end most of the misunderstandings between conventional medicine and homotoxicology. The new field that arises from these discoveries is rightly called “regulation medicine,” and it seeks to handle disease by assisting the body in its efforts to properly regulate itself.

In the past, however, this information was not known, and even now it is not widely disseminated. Therefore, and quite understandably, conventional medicine, with its attention concentrated on cellular mechanics, tended to reject homeopathic thinking and its terminology of “vital force.” Because classical homeopathy tended to be disagreeable to conventional practices of the late 1700s and dangerous medications (mercury and blood letting) due to their destructive and harmful natures, and because classical homeopathy depended upon only one remedy being given at a time, there was natural disharmony between allopathic medicine and homeopathy.

The 2 fields separated early on, and the financial power lines followed allopathic research and development and the fundamental biological principles of enzyme suppression by large doses of biochemical agents. Pharmaceutical companies endowed modern medicine with billions of dollars to develop current medical practices based upon allopathic agents. Homeopaths, though, because of their ability to achieve results on seemingly difficult individual cases, weathered the storm and survived a period of extreme suppression. As research is conducted, more and more evidence exists to support the practice of homeopathy. Many clients seek out homeopathic doctors as their first choice because they feel they recover faster, better, and more naturally using this form of medicine.

Researching homeopathy is difficult, because no two identical patients exist. The allopathic method of diagnosis is not valid in homeopathy, because remedies are selected based upon symptoms and not classical Western pathological or etiological diagnosis. This makes it most challenging to design double-blind, controlled studies involving classical homeopathy.

In 1991, Kleijnen, et al. reviewed the literature and performed a meta-analysis of studies involving homeopathy. They examined 105 clinical trials involving homeopathic medicines and found positive results in 81 of the studies. Strong responses were identified in the treatment of respiratory disease (13/19 studies showed positive response) and trauma and pain management (18/20 studies indicated positive responses). A fairly large body of knowledge is building that shows some effects attributable to homeopathic agents in both humans and animals (Bellavite and Signorini 2002). Such studies are far from a final answer but indicate why clients seek out homeopathic doctors for their healthcare needs.

Something is working in these patients, and bearing in mind the safety records of homeopathic remedies, using homeopathics in the field of pain management becomes a very tempting impulse. Clients and professionals are well informed about the risks of NSAIDs and actively pursue alternatives (Barnard, Lavoie, Lajeunesse 2006; Lascelles, McFarland, Swann 2005). The most common way that conventional veterinarians enter the field of CAVM is in searching for safer, more effective ways to manage their patients’ pain. This is another example of how truth spreads through good results, even in the absence of concrete understanding of a modality’s method of action. This is good medicine, using a field with some clinical evidence and improved safety before using a method that is known to be potentially damaging and dangerous. Although classical homeopathy might not easily integrate with conventional allopathic medical practice, such studies should serve to indicate that homeopaths deserve respect...