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CLINICAL

# Clinical management of idiopathic epilepsy in dogs with homeopathic *Belladonna* 200C: a case series

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**Epilepsy is an important neurological disorder in dogs. *Belladonna* 200C was evaluated in 10 dogs with idiopathic epilepsy. During the seizure phase, 3–4 drops of *Belladonna* 200C were administered orally at 15 min intervals until considerable reduction in seizure activity, then four times daily. Four dogs with head shaking syndrome in addition to seizures were given Cocculus 6C, 3–4 drops orally weekly for 3 months in addition. Numbers of fits reduced to 2–3 during first 2 weeks post-therapy and then became occasional in next 2 weeks. With continuation of *Belladonna* therapy, no fits were observed during 2–7 months follow-up. In two cases epileptic fits reappeared within 15–25 days of cessation of therapy. *Belladonna* therapy was resumed and seizure control was again achieved. Owners were advised to continue the therapy at least twice daily until there were no fits for 2–3 months. Liver specific enzymes were monitored, no abnormalities were observed.** *Homeopathy* (2007) **96**, 46–48.

**Keywords:** belladonna; dogs; epilepsy, enzymes

## Introduction

Epilepsy is a common clinical problem requiring prolonged or life long medication in dogs. It is clinically manifested by behavioural changes during the pre-ictal phase; generalized tonic-clonic convulsions, altered muscle tone, paddling, foaming, jaw champing, involuntary urination and defaecation during the ictal phase; and lethergy in the post-ictal phase. Continuous seizure activity is life threatening and warrants immediate veterinary attention. For the management of severe seizures, cluster seizures, status epilepticus or epilepsy, anticonvulsant therapy with phenobarbital, bromide, primidone, diazepam and or valproic acid alone or in combination is the treatment of choice in modern conventional medicine.[1] These drugs are potent inducers of hepatic enzymes and may cause adverse effects.[2,3] Homeopathic medicines such as *Absinthium, Artemisia vulgaris, Silicea, Calcarea arsenica, Belladonna,* etc have been advocated in the management of epilepsy in humans.[4] The present case series evaluated the efficacy of homeopathic *Belladonna* 200C in the clinical management of idiopathic canine epilepsy.

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## Materials and methods

### Animals

Ten dogs (German shepherd 5, Dobermann 2, Pomeranian 2 and Boxer 1) of varying age (1–8 years old) with an history of 1–3 fits per month referred to our Institute's Veterinary Polyclinic, were investigated for diagnosis and treatment. History of immunisation, deworming, previous illness, trauma, drug administration was recorded (see Table 1).

### Treatment

During the seizure phase, 3–4 drops of *Belladonna* 200C were administered orally at 15 min intervals until considerable reduction in seizure activity was observed. Then *Belladonna* 200c was given orally four times daily for up to 8 months. Four dogs having head shaking

**Table 1** Demographics of dogs with idiopathic epilepsy

| *Sl. no.* | *Breed of dog* | *Age (years)* | *Sex* | *Frequency of fits per month during last few months* | *No. of seizures on the day of referral* | *Head shaking syndrome* | *Seizures reappeared after abrupt ceasing the therapy* |
|---|---|---|---|---|---|---|---|
| 1 | German Shepherd | 1.0 | Male | 03 | 02 | No | — |
| 2 | German Shepherd | 8.0 | Female | 02 | 03 | Yes | Yes |
| 3 | German Shepherd | 2.5 | Female | 03 | 01 | No | — |
| 4 | German Shepherd | 2.0 | Female | 01 | 03 | Yes | — |
| 5 | German Shepherd | 3.0 | Female | 02 | 04 | No | Yes |
| 6 | Dobermann | 3.5 | Male | 03 | 05 | Yes | — |
| 7 | Dobermann | 4.0 | Female | 03 | 02 | — | — |
| 8 | Pomeranian | 1.0 | Male | 02 | 03 | — | — |
| 9 | Pomeranian | 2.0 | Female | 03 | 04 | — | — |
| 10 | Boxer | 3.5 | Female | 01 | 02 | Yes | — |

were also given *Cocculus* 6C, 3–4 drops orally, weekly for 3 months initially in addition to Belladonna.

### Recruitment

The number of animals was not fixed in advance. Cases of epilepsy diagnosed during 2001–2003 were included in this clinical study. After confirming the diagnosis of idiopathic epilepsy, the dog's owners were appraised of the need for lifelong treatment and complications with conventional medicine. With the full concurrence of the owners, the dogs were treated with homeopathy. The duration of treatment was not defined. No other therapy was given except dogs with additional symptoms of head shaking received *Cocculus* 6c also at weekly interval for 3 months.

### Evaluation criteria

The dogs were thoroughly examined clinically, neurologically and subjected to coprological, haematological (Blood smear examination), biochemical (Serum calcium, Blood glucose), liver specific enzymes Alamine transferase [ALT], Alkaline phosphatase [ALP], ophthalmic, electrocardiographic and ultrasonographic examinations as required. In a few cases the skull was also evaluated radiographically. The diagnosis of idiopathic epilepsy was based on history of generalized convulsive tonic and clonic seizures lasting for 1–3 min; negative blood smear and faecal examinations; absence of ophthalmic and cardiac abnormalities; normal skull radiograph; and normal values for blood glucose, serum calcium and liver specific enzymes. The number of fits per week was recorded by the owners and the dogs were evaluated fortnightly. Complete absence of seizures for three months was regarded as cure.

## Results

History revealed behavioural changes before fits and lethargy for 15 min–1 h after fit episodes. At the time of referral all dogs had 1–5 generalized convulsive tonic-clonic seizures per week, lasting 1–3 min, with temporary loss of consciousness, altered muscle tone, jaw champing, salivation, involuntary urination and defaecation and paddling of limbs. Head shaking was also seen in four cases. All the three phases of fits were seen in all cases. In no case was there any obvious precipitating factor or any regularity.

Blood slides were negative for haemoprotozoan (*Babesia gibsoni, or B. canis*) or ehrlichial (*Ehrlichia canis, E. platys*, or granulocytic ehrlichia ) organisms. Blood glucose, serum calcium, ALT and ALP values were within normal ranges. Skull radiographs were normal. Liver sonograms revealed neither hepatic parenchymal changes nor any evidence of intra-hepatic porto-systemic shunts. Electrocardiograms and ophthalmoscopic examination were within normal limits. Coprological examiantion did not provide any indication of the cause of the fits.

In all cases the administration of *Belladonna* 200C at 15 min intervals during the seizure episode was associated with reduction in seizure activity within an hour. The number of fits reduced to 2–3 during the first 2 weeks after starting therapy, further reducing to 0–1 in next two weeks. No fit was reported by the owners during 2–8 months of the therapy except in 2 dogs in which fits reappeared with 15–25 days of cessation of therapy by the owners. With the resumption of *Belladonna*, fits were again controlled. Owners were advised to stop the therapy when there had been no fits for 2–3 months. Liver specific enzyme activities after 2 and 4 months of *Belladonna* therapy remained within the normal ranges.

## Discussion

The clinical manifestations of epilepsy in dogs are as described for canine epilepsy by other workers.[5,6] Various factors such as disc disorders, trauma, metabolic disorders, porto-systemic shunts), electrolyte imbalances, central nervous system disfunction may cause epilepsy.[7] But these were excluded: Babesiosis or Ehrlichiosis (negative blood smears), intra hepatic porto-systemic shunts (ultrasonograms), cardiac abnormalities (electrocardiograms), liver stress (ALT & ALP), hypo/ hyperglycaemia (blood glucose levels), hypo/hypercalcaemia (serum calcium levels) and intracranial lesions (radiographs) were ruled out as a cause of epilepsy and therefore diagnosis of idiopathic epilepsy were made.

In homeopathy *Belladonna* is associated with violence of attack and suddenness of onset of convulsive movements.[8] *Belladonna* seems to be an effective alternative drug in the management of epilepsy: in most cases it controlled seizures within a month and with continuation of the therapy, no further fits were reported by the owners. Abrupt cessation of the therapy sometimes precipitated seizure episodes. It seems that *Belladonna* needs to be continued for quite a long period: at least two to three months.

Contrary to liver enzyme induction by allopathic drugs (Phenobarbital, etc), liver enzyme activities remained within normal limits even after 4 months of *Belladonna* therapy indicating no liver stress. It seems that *Belladonna* is an effective alternative in fits management without induction of liver specific enzymes.

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