

Homeopathic Treatment of Cancer, Part 3

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Abstract: Manifest cancer is usually preceded by a precancerous state. This state should be recognized and treated early. The author presents the signs of the precancerous state and the most important factors that favor the development of cancer. In many cases precancerous symptoms disappear as soon as the tumor develops; they may reappear in the process of cure. Renewed suppression of an improperly treated symptom can have grave consequences. The author shows that long-term homeopathic treatment has been proven to be particularly effective in cancer prevention.

Keywords: cancer, precancerous state, cancer favoring factors, suppression, cancer prevention

First published in Zeitschrift für Klassische Homöopathie, 1998; 42: 15 – 28

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The Precancerous State

Cancer is currently the second most frequent cause of death and is such a serious threat that we must examine it from all perspectives. In most cases the disease is preceded by a precancerous state which must be recognized and treated early. We are not referring here to the so-called pre-cancerous stage, a preliminary stage in the development of cancer pathology which can be determined cytologically and histologically. Precancerous symptoms may be present many years or even decades before the eruption of manifest cancer pathology.

“Anybody can diagnose an apple-tree when he sees apples growing on it,” writes John H. Clarke, “but the skilled botanist can distinguish between an apple tree, a pear tree, and a plum tree, even when there are no leaves on them. In the same way, the skilled physician should be able to diagnose the cancer organism before any lump has appeared. When this state is treated properly the tendency [to develop cancer] can be cured. However if he is not properly treated the possibility exists that cancer develops sooner or later.”(1) F. Stockebrand who circumscribes the precancerous state with terms like “cancerous terrain” and “cellular disharmony” names the following signs:

“Muddy, lusterless, withered skin of dirty appearance; flat, raised or pigmented warts desquamating slightly or bleeding; red naevi which rapidly multiply; venous web visible on the skin; tendency to adenoma; tendency to herpes or erysipelas beyond age 45; fissures of mucous membranes and their margins of the

skin; corrugated, thickened, and hard nails; tendency to pale red discharges; constipation, with light stool that floats on water.”(2)

In addition, the following hints and symptoms point the homeopath to a precancerous state:

Cancer, tuberculosis, epilepsy, diabetes in the parents or in the family; repeated vaccinations and immune serum injections (3); absence of infectious diseases and repeated use of antipyretics; absence of childhood diseases; fear of cancer; rheumatism, gout; chronic skin diseases such as psoriasis; yellow spots, naevi; numerous warts; benign tumors; history of syphilis or gonorrhea; history of tonsillectomy; history of suppression (4) of a skin eruption or thigh ulcer; chronic headaches or neuralgias; irritable colon; chronic constipation; disorders of the uterus and ovaries; onset of emaciation.

A few comments are in order:

Heredity determines the susceptibility to cancer significantly. A hereditary predisposition to cancer is well-known for cancer of the breast, stomach, and colon.(5)

“Tuberculosis is especially closely affiliated with cancer. Tuberculosis parents frequently have offspring of strong cancer tendencies and vice versa; cancer parents beget TB offspring.” “My experience has been that there is not a case of cancer without a tubercular background. It grows on a tubercular soil.”(6)

According to Grimmer, a direct injection of foreign disease products or proteins through vaccinations does not leave the organism the option to immediately pro-

duce antibodies. As a result the elimination of these foreign substances remains incomplete, which leads to a weakening of defenses. He writes: "Perhaps the most irritating of all the irritants and depressants is the one produced by the almost universal applications of serums and vaccines given for the prevention and cure of acute infectious diseases. These subtle poisons are very far reaching and deep in their effects. ... In many cases, these disastrous effects are never completely removed, and the patient retains ailments for the rest of his life."(7)

Frequently we find in the health history of cancer patients an absence or a history of continuous suppression with antipyretics of inflammatory diseases.(8) The body is strengthened in its defensive functions though confrontation with infectious disease and maintains its biological equilibrium against a variety of factors, including carcinogens.

An investigation of 190 cancer patients found that infectious childhood diseases provided a certain degree of protection against cancer. The cancer cases that were studied showed only very few infectious diseases in their history, and a "lower than usual prevalence of childhood diseases."(9)

According to Clarke, difficult-to-treat rheumatic pains point to a precancerous state. "Patients whose parents or relatives died of cancer often suffer from rheumatism of one kind or another."(10)

Individuals who display a fear of cancer tend to develop cancer. A fear of cancer should therefore be taken seriously and not dismissed as hypochondriasis.

Chronic skin diseases could be precancerous symptoms. E. Schlegel reports on a case of breast cancer which he treated with *Hepar sulphuris calcaream*, *Belladonna*, *Mercurius*, *Carbo animalis*, *Phosphorus*, *Bryonia*, and *Lachesis*: "Breast normal. Comes for her old psoriasis. Intense, burning rash around genitalia."(11)

The presence of several warts, even single warts resistant to treatment can be an expression of a disposition for cancer. J. C. Burnett illustrates the case of a big, hard, but not yet malignant breast tumor: "[The patient] had...many small warts on the surface of the skin. I usually consider these an indication of cancer."(12)

The tonsils are organs of the immune defense mechanisms that play an important role in repelling toxins that infants come into contact with. The current liberal use of childhood tonsillectomies weakens the physical resistance and generates susceptibility to a host of pathogens. Grimmer traces the increase of cancer cases in early adulthood to, among other things, tonsillectomies, along with frequent inoculations. He writes: "If vital organs like the heart and lungs, when infected, are amenable to homeopathic remedies, and clinical experience proves they are, then how much easier is it to cure a small gland near the surface of the body like

the tonsil."(13)

Chronic constipation, especially of years duration, or disturbances of the digestion that are difficult to treat are pronounced precancerous signs. Moreover, constipation itself has a cancer-promoting effect: "We know... that poisons like arsenic, for example... can produce cancer..., and that they can make tissues sick, since cancer develops only... on the basis of such preparation... And the often unknown poisons – should they not be able to develop inside the body; i.e., autointoxication resulting from constipation, resorption into the blood of products of decomposition...?"(14)

The cause of breast tumors, according to observations by Brunette and Clarke, resides mostly in the ovaries and the uterus, and only very rarely primarily in the breast: "Usually [in breast tumors] there is some disease or irritation in the lower part of the body... Wearing pessaries, making intra-vaginal injections ..., the cautery, genesaic frauds and surrogates; all these may result in the formation of tumors in the ovaries, uterus, or breasts."(15)

"We are...of the opinion that...emaciation is one of the best signs [of threatening cancer]...This indicates that general intoxication is the first stage of a palpable tumor."(16)

A Case from the Consulting Room

Treatment of the precancerous state is essentially the same as treatment of other chronic disorders. It consists of a prescription of the currently indicated remedy. Thus any remedy in the materia medica, not only cancer remedies, could be indicated. The elimination of cancer-promoting factors should be emphasized.

The following case may serve to illustrate the practical significance of the above mentioned precancerous symptoms and pointers. In September 1997, I treated a 33-year-old female patient for a hard, hazelnut-sized node in the right breast. The node had formed two weeks after a curettage as a result of a miscarriage in the fourth month – occasional stitching pains in the area of the node, worse from pressure; sensation of a foreign object. In the past few weeks there had been an increasing fear of cancer and ennui. A family history found that the father suffered from colon cancer; her mother had had tuberculosis as a child; and her paternal grandfather had died from tuberculosis. The patient had received all standard childhood vaccines and had significant scarring from the smallpox vaccine. At age 19 she had a dermoid cyst removed from the left ovary. Dysmenorrhea. Small pediculate warts over the entire body. Since about two years, three plantar warts had appeared on the soles of the feet, the larger one causing discomfort during walking. These warts did not disappear during homeopathic treatment by a colleague. Dry cracked corners of mouth. Mammography was not conducted to avoid increasing the patient's anxiety.

I believe these symptoms constituted a precancerous state for the following reasons:

- The fear of cancer,
- The connection between breast cancer and disorders or invasive measures in the uterus or the ovaries,
- The family history of tuberculosis and cancer,
- The burden of vaccination,
- The warts,
- The stitching pains in the node.

On September 30th 1997, with consideration of the symptoms and with a side glance at the so-called cancer remedies, I gave the patient a dose of *Thuja 30C*. At first the node disappeared and was barely palpable four weeks later. The large plantar wart began to fall off; however it remained in this stage after the patient's father died from cancer in October. After a few intercurrent remedies for acute conditions (*Phosphorus*, *Rhus toxicodendron*, *Belladonna*, *Phosphorus*), the patient received *Thuja 200C* and *Silica 200C*, until the node disappeared completely on December 23, 1997. The fear of cancer receded, and several complaints following the curettage disappeared along with an improvement of dysmenorrhea. Nevertheless the treatment is not completely satisfactory so long as the plantar warts remain as a visible expression of the cancer diathesis. Knowledge of the signs of the precancerous state in this case influenced the selection of remedies and the intensity of treatment.

Additional Cancer-Promoting Factors

There is a series of additional factors that must be recognized and considered (see *Organon*, §§ 3,4). The existence of stress factors increases the risk of cancer, especially in patients who show symptoms of the precancerous stage. Several of these factors can also be triggers of tumor development. Prominent among these are: emotional stress, nutritional errors, environmental toxins, heavy metal intoxication, geopathogenic zones, electropollution, and injuries.

Emotional stress and psychological disturbances are known to play a role in the development of cancer. Grimmer notes, "The realm of the psychic, mental and emotional side of life, with the fears, frustrations, resentments, hatreds, compunctions and compulsive drives afflicting the race today is another source of cancer producing forces. When the moral and mental states are normalized in the individual, he can build up a better defense against the destructive agents that are constant concomitants of his environment."(19)

Nutritional habits are also of the greatest importance. Nutrition that is high in fat and meat, and poor in minerals and vitamins promotes carcinogenesis. Especially Grimmer and Schlegel placed great emphasis on a diet low in meat and stimulants and high in whole foods rich in vitamins.

Chemical substances and their role in the development of cancer are widely discussed today for all types of cancers. Patients who are already weakened by other factors are especially susceptible. In the literature various authors have emphasized certain environmental toxins. Grimmer, for example, mentions aluminum from aluminum cookware.(20) As antidote for suspected aluminum intoxication he mentions the cadmium salts, especially *Cadmium metallicum* and *Cadmium oxygenatum*.(21) Grimmer also originated the notion to thoroughly prove known carcinogens, "Workers in cobalt are very prone to develop cancer of the lungs. *Cobaltum muriaticum* is a very active preparation worthy of a real proving."(22)

Heavy metal intoxication, especially with mercury, can play an important role in many patients. H. Szeteli was able to cure many cases of breast cancer after thorough removal of dental amalgam fillings and of metal deposits in the tooth-jaw region and subsequent homeopathic treatment.

Harmful geomagnetic radiation has been cited repeatedly. Because of a pre-existing diathesis the organism may not be able to resist continued stress from ionizing geomagnetic radiation and this leads to the formation of a tumor. By the same token, a complete cure cannot be expected so long as the cancer patient is exposed to a disease-sustaining geomagnetic field.

Electropollution can also contribute to an immune weakness in cancer. Disrupting electromagnetic fields should be removed from the sleeping area; i.e. radio alarm clocks, wrist watches, televisions, etc.). Harmful geomagnetic radiation and electromagnetic pollution can also interfere with the curative action of homeopathic remedies.

To prevent the development of cancer after injuries; i.e., a blow against the breast, Grimmer recommends a dose of *Arnica*.(23)

Modern medicine has found additional cancer-promoting factors linked to certain localities by their center of gravity and included in the overall risk estimate, especially with patients exhibiting precancerous symptoms: Tobacco smoke, even secondary exposure (bronchia, larynx/pharynx, stomach); alcohol (esophagus, pharynx/larynx and liver); diet lacking in fiber and rich in protein and meat (colon); salty, pickled foods (stomach); excessive UV exposure through sun and tanning rooms; diabetes, hypertension, obesity (endometrium); childlessness (ovaries, endometrium); hormone replacement therapy at climacteric (endometrium);(24) oral contraceptives (breast)(25); radioactive exposure (blood, thyroid); previous local illnesses; complicating breast pathology; liver cirrhosis; polyps in colon; obstinate stomach ulcers, polyps of stomach; high number of pigmented moles; actinic keratoses; localized inflammation; chronic hepatitis B or C; chronic gastritis; ulcerative colitis.

The Disappearance and Return of Precancerous Symptoms

Frequently precancerous symptoms improve or even disappear as soon as a tumor develops. Schlegel writes, "Since in many patient histories of mine skin eruptions and also the gouty constitution of a number of cancer patients were repeatedly mentioned that appeared as soon as the main complaint started to improve..., I would like to add that, conversely, rheumatic phenomena in previously vigorous people, as well as the disappearance of a habitual migraine, warn of the approaching danger of cancer.(26) In case of an internal cure of the cancer, or of the cancer diathesis, those phenomena can then reappear."(27)

The reappearance of precancerous symptoms during treatment is a favorable prognostic sign, so long as the patient's general state is not worse; one can conclude that the remedy is having a positive effect.

Renewed Suppression Disastrous

A noteworthy case by G. Resch illustrates what the results can be after returned precancerous symptoms are once again treated inadequately. He reports of a 45-year old patient who in 1973 had the inflammation of his shoulder treated with therapeutic x-rays. Shortly thereafter, an obstinate chronic constipation developed, which got substantially worse about six years later. During a thorough in-patient diagnostic work-up a carcinoma the size of an apple with dense liver metastases was discovered. The condition of the patient deteriorated rapidly after surgery and, as a "last resort," Resch was consulted.

There were very few symptoms: after rectal examination, splinter-like pain, as of needles in the rectum appeared; had been very susceptible to cold air earlier, improved by riding in a car; as far as memory served, the earlier inflammatory shoulder pain had been crushing and radiating down the arm. *Nitricum acidum* 6X was prescribed, five drops three times daily.(28) No response. "In my experience, when a well-selected remedy fails to act, it is commonly due to suppression by x-rays", writes Resch. Injection of a vial of *X-ray* 30C into the shoulder. Within the next fourteen days, increase in temperature and clear improvement in the general state of the patient with every dose of *Nitricum acidum*. Soon he was nearly free from any complaints and could take up his occupation, and the liver metastases disappeared. In spring 1980 during a business trip, the previous violent shoulder pain reappeared. Even though Resch had warned his patient, he took a non-steroidal anti-inflammatory drug and the pain disappeared in a few hours. However the complaints associated with the carcinoma returned and could neither be controlled with a higher potency of *Nitricum acidum*, nor with other remedies. The patient died in 1980.

Resch concludes, "We can ... learn from this case that it is not worthwhile to undertake a suppression, especially using x-rays; and ... that it is absolutely imperative to refrain from again suppressing, even with homeopathic remedies, an old symptom, which reappeared [under homeopathic treatment], after it had been [previously] suppressed."

This case shows how much knowledge and experience homeopathic cancer treatment requires. Even though the patient initially failed to respond to *Nitricum acidum*, Resch never doubted his remedy selection but assumed an obstacle to cure from the previous radiation!

"Many homeopaths have found that metastasis and decline in strength can take a rapid course when a previous symptom is appeased with inadequate treatment. Cancer sufferers have a delicate equilibrium which cannot bear renewed suppression," Spinedi remarked.(29)

Homeopathic Treatment as Effective Cancer Prevention

Cancer cases may be divided into three groups: patients in the precancerous stage; in the early stage and in the late stage. The first stage is the most common by far. Grimmer placed great emphasis on earliest possible treatment of these patients: "The precancerous state is the most favorable time for successful treatment. It is in these situations that our homeopathic medicines can accomplish more than any other method. At least 95% of these cases are cured. With the progression of the disease towards tumor formation it becomes increasingly difficult to bring the cancer growth under control..."(30) The best time to cure cancer is the time interval before the appearance of the first actual cancer symptoms. The earlier the treatment begins the better the chance of a cure. This is our great challenge: cancer prevention.

Grimmer, in fifty years of practice, treated many thousands of chronically ill patients. He writes,³¹ "The homeopathic concept of healing with its logical philosophy is primarily the medicine of disease prevention. It is especially suited to the developing, growing stages of childhood and young adult life... But the important fact relating to this long medical service is the relatively few cases of cancer that developed in the numerous patients... Only three in a hundred who had five or more years of treatment developed cancer in any form... These facts afford convincing proof of the evident value of homeopathic treatment for the prevention of cancer..."(31) "Homeopathic prescribing through early and middle life will reduce the possibility of cancer affliction a thousand fold in the first generation..."(32) "The aspects and possibilities of this phase of homeopathic prophylaxis... must be the goal and ambition of every true [homeopathic] practitioner... There is so much of the precancer stage ... in

which to institute effective preventive measures that might well be the difference between success and failure... We believe if these principles can be extensively applied not only more cancers will be cured but many more will be prevented.”(33)

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Notes

- (1) Clarke, 1991. 35,83. Clarke cites the following case: “A ... lady of cancerous family history was a great sufferer from rheumatism. ... The pain settled in the right hip, and the doctor in attendance, ... prescribed a massive dose of Salicylate of Soda which almost immediately removed the pain, and it never returned. But very soon something else appeared in the shape of a lump on the anterior border of the axilla involving the great pectoral muscle. This was cancer. The rheumatism in this lady’s case was in reality a pre-tumor stage of cancer, and might have been treated as such. The sudden arresting of the rheumatic expression of this constitutional state rapidly determined the tumor formation.” (Cl. 1991.35,36)
- (2) Stockebrand 1976. 96.
- (3) Serum therapy is a passive immunization with a specific immune serum or immune globulin. The ones currently still in use for prophylactic purposes are, among others, the tetanus, rabies, hepatitis A and B, measles immune globulin (human) and the diphtheria immune serum (from the horse).
- (4) On the concept of “suppression”, please refer to Part 2, Note 6 on “metaschematisms.”
- (5) Deutsche Krebshilfe (German Cancer Aid) 1996. 13,19,40
- (6) Grimmer, 1996. 778,813
- (7) Grimmer, 1996. 779,796
- (8) Leroi, 1997. 9
- (9) Schmidt R, in: Schlegel, 1927. 57,58
- (10) Clarke, 1991. 35
- (11) Schlegel, 1927. 166
- (12) Burnett, 1991-a. 63
- (13) Grimmer, 1996. 743,762
- (14) Schlegel, 1927. 41
- (15) Burnett, 1991-a. 67. Clarke wrote, “In keeping this in mind I have had... success in curing many such tumors of women in all stages of life, especially during the climacterium.” (Clarke, 1991. 83,84)
- (16) Fortier-Bernoville, 1937-b. 60. Additionally, the relationship between certain disorders and cancer is discussed in the following citations: Cancer, epilepsy, diabetes in the family: Grimmer, 1996. 748,778. Tuberculosis: Schlegel, 1927. 58; Clarke, 1991. 84. Fear of cancer: Fortier-Bernoville, 1937-b. 60. Rheumatism; gout: Clarke, 1991. 85. Chronic skin disease: Burnett, 1991-a. 83; 1991-b. 89. Spot on skin; naevi: Fortier-Bernoville, 1937-a. 60. W.E. Jackson warns of having liver spots (lentigo) surgically removed. Multiple warts: Burnett, 1991-a. 63. Benign tumors, adenomas: Clarke, 1991. 32,33. History of syphilis or gonorrhoea: Fortier-Bernoville, 1937-b. 59. “Suppressed skin eruptions, “suppressed discharges:” Burnett, 1991-b. 89; Schlegel, 1927. 132. Chronic headaches, “suppressed” neuralgias: Clarke, 1991. 35; Grimmer, 1996. 743; Schlegel, 1927. 154. Irritable bowel syndrome (formerly “colica mucosa”): Clarke, 1991. 84. Constipation: Schlegel, 1927. 156. Diseases of the uterus or ovaries: Clarke, 1991. 83,84. Onset of emaciation: Stockebrand, 1976. 100.
- (17) The homeopathic simile normalizes the disturbed life force (Or g.§§ 9,1 1,12) and strengthens the body’s defense mechanisms; the simile removes the constitutional tendency to cancer.
- (18) Regarding “cancer remedies” I refer to Part 4 of this series; these are remedies that have proven useful in cancer treatment.
- (19) Grimmer, 1996. 763,781
- (20) Today certain water boilers, milk pots for gas stoves and some camping pots are still made of aluminum. (This may be true in Germany; however, in the United States aluminum cookware is still widely used. Transl.)
- (21) Grimmer, 1996. 762,763,809,825. He also considers chlorine in tap water for cooking and drinking a carcinogen. The significance of further environmental toxins (indoor pollution, cosmetics, etc. is beyond the scope of this paper.
- (22) Grimmer, 1996. 819. A pathogenetic trial of *Cobaltum* with five volunteers was published by Herzing.
- (23) Grimmer, 1996. 795
- (24) Lauritzen, 1993. 627
- (25) Arzneimittelkommission (Drug Commission), 1993. 50
- (26) A case by Clarke: “An unmarried lady had for years suffered from low vitality: cold hands and cold ... feet, ... indefinite rheumatic pains in various parts of the body. ... at times, great depression of spirits... At the age when the change of life was approaching there appeared in the right breast a nodule of scirrhus cancer; with the appearance of this, all the other symptoms improved.” (Cl., 1991. 36). Or in the following case of breast cancer in a 41-year old patient: “before the lump appeared, the patient had suffered from stomach complaints, and when the lump developed, the stomach complaints

improved." (Cl., 1991, 62).

(27) Schlegel, 1927. 155

(28) Resch substantiates his selection of remedies as follows (footnotes from Kent, [KK]):

1. Picture with few symptoms, which increases the significance of the localization – carcinoma of rectum (Vol. 3. 622): *Alum., Nit-ac., Ruta, Sep.* 2. The connection to the shoulder pain as causative factor (Vol.2. 574,572,628): Pain in limbs, shoulder, right side: *Nit-ac.*; Pain in limbs, shoulder, rheumatic: *Alum., Nit-ac.*; Pain in limbs, pressing, shoulder: *Nit-ac., Sep.* 3. Connection with anus and rectum: According to Clarke constipation is a prominent indication for *Nit-ac.*; he writes that he cures almost as many cases of constipation with *Nit-ac.* as with any other single remedy. 4. Susceptibility to cold (Vol.1. 503). 5. Amelioration by riding in a carriage (Vol.1. 499): *Nit-ac.* 6. Stitching pains after rectal examination; i.e., pain in anus, stitching; splinter-like pain (Vol.3. 646): *Alum., Nit-ac.*; Abdominal pain < pressure (Vol.3. 543): *Nit-ac.*

Resch chose 6X and not a high potency because "(1) of the psychological picture lacking signs of *Nit-ac.*...; and the organ indications were clear; (2) Because the patient was strong...; (3) because of the localization (carcinoma of the rectum).

(29) He commented on the case as follows: A remedy that is chosen on the basis of tumor symptoms can bring the cancer growth temporarily to a standstill. As a rule, however, in the course of treatment the symptoms of anti-psoric remedies appear. In this case the masses in the liver receded and a regression in the cancer events occurred. Then the old symptom of the shoulder pain reappeared. At this point the case needs to be reassessed (see Org. §§170, 180 and 182). The returning symptom must be given special consideration and must correspond to the currently indicated remedy (important remedies for right-sided shoulder pain include the anti-psoric remedies *Calcarea carbonica, Lycopodium*, and even *Ferrum, Sanguinaria*, and *Medorrhinum*). If the returning symptom is covered by drug already given, we may wait; in Q or low potencies we may pause. In this case the pain should recede gradually."

(30) Grimmer, 1996. 743,765,778.

(31) Grimmer, 1996. 711,753,754,775,790,846,847

(32) In comparison, in 1940 every eighth human being over 40 died from cancer, whereas today it is nearly every fourth.

(33) Based on Grimmer's experience, cancer can be prevented with near certainty with homeopathic treatment and appropriate diet, along with avoidance of other irritating factors, even if a hereditary predisposition exists. (Grimmer, 1996. 779) The

common experience that no cases of cancers appear in the next generation after long-term treatment of members of a typical "cancer family" shows that homeopathic medicines can act deeply on the organism and possibly affect the genetic phenotype.

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