

The Academy Of Veterinary Homeopathy

Anxiety In Puppies Case 2

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CASE 2 (*Case 1 published previously*)

Patient Name: Xavier

Signalment: Four-month-old male intact Afghan puppy. Not under any current allopathic treatment.

Chief Complaint: Asocial, fearful, and extremely submissive.

History: Xavier arrived in upstate New York from Norway in mid-October of 2008. He was given a rabies vaccine immediately upon arrival (required by import law) at the age of barely 16 weeks. Prior to this vaccination he had a multivalent vaccination at the age of 5 weeks in Norway. He has been home with the client almost a month. He has not settled in and is extremely fearful. by a person or another dog he “screams and hits the floor,” sometimes urinating as well. His energy is low and he tends to cower and sleep hidden under furniture. He does have periods where he is “sweet and cuddly” and eager to please. He will occasionally attempt to mount the cats in the household.

Intake 11/7/08: The intake was long-distance by telephone, so a physical examination was not possible. I have worked with the client extensively on other homeopathic cases.

Unlike other puppies the client has had, Xavier is not playful and has a hangdog demeanor. Whenever he is approached

Xavier is gaining weight normally. His digestion is fine and he is on a balanced raw food diet. The client says he has no eye or ear discharge although he has a slight intermittent thick white penile discharge. He has fleas. He has no specific phobias. His tail-tip was chewed during transport, either by himself or by his litter mate in the same crate. This is not healing well although he is not apparently chewing it.

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During the intake, the client shared that she had viewed videos of Xavier and his litter mates filmed in Norway, and that he had been outgoing, energetic, and not submissive—“not the same dog.” She also told me that his flight to the States was delayed, very long, and that he seemed traumatized afterwards. He seemed tired, fussy, and not at all playful.

Assessment: Xavier is “stuck” in an extreme fear state, with mere hints of underlying miasmatic psoric or syphilitic disease, as evidenced by the susceptibility to fleas and the penile discharge in a sexually immature male. Mounting cats may be inappropriate early sexual behavior or an attempt at social dominance. He does not seem to know how to behave around other animals or people.

Homeopathic diagnosis: Acute flare-up of miasmatic disease, vaccinosis, possibly primary mental/emotional disease. Given his youth, vitality, and the early stage of his disease, his prognosis for cure is excellent.

Case discussion: The client’s first thought was that Xavier’s vaccines had affected him adversely. She had considered giving Xavier *thuja occidentalis* but deferred

pending our discussion. We had not elected to give Xavier a remedy prophylactically immediately after his rabies vaccine, choosing instead to watch and wait and treat if necessary with an individually indicated remedy. Although it is tempting to give *thuja occidentalis* to any anxious young patient that has been vaccinated, it is a stronger prescription when there are confirmatory symptoms. Xavier did not appear to be emotionally affected after his earlier vaccines as seen on his video from Norway and does not exhibit any of the phobias or physical symptoms characteristic of the *thuja occidentalis* patient.

Vaccines have the potential to exacerbate underlying miasms, or introduce vaccinosis. The rabies vaccine especially has an unpleasant and well-documented tendency to produce serious behavioral and physical changes in our patients. Xavier’s problems began right around the time of his rabies vaccine, and may have been caused or compounded by its administration. However, absent are any objective physical or emotional symptoms characteristic of this miasm in dog. Fascination with, or fear of, water or lights; aggression or mania; reverse sneezing, watery nasal discharge; hind-limb weakness, or diarrhea.

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Just before Xavier was vaccinated with rabies, he endured a long and potentially traumatic journey. The client remarked that he was visibly affected even before his rabies vaccine. It seems as if he never recovered from this state, even after a month in a supportive and well-structured environment. This is ample time to see at least the beginnings of adjustment. The initial approach to Xavier's case should address the temporal challenge of his journey and the extreme fear state that followed. My impression, shared with the client, was that Xavier's problems were triggered by the traumatic journey, but that his rabies vaccination certainly wasn't helpful and may have been harmful.

A repertorization was not done at the time of the first prescription. *Aconitum napellus* was prescribed based on the extreme fear state in a young individual, and the recent travel history. *Aconite* is a very helpful remedy in animals with fear of travel (e.g. MIND; fear; general; riding in a carriage (18)). It was expected that sulphur could eventually be appropriate for the poorly healing tail injury, and the flea condition. We were also aware that indications of other miasms could surface.

Reviewing rubrics retrospectively, *Aconitum napellus* is the only remedy listed in *Complete Millennium* for BLADDER; urination; involuntary; thirst and fear, with (1). Submissive and/or fearful urination may be more common in our animal patients than in humans, as other remedies such as *Pulsatilla nigricans*, *Silica terra* and *Lycopodium clavatum* can address this symptom (personal experience), but even if a rubric is too small to include in a broader repertorization, a remedy thus highlighted is worthy of careful consideration. *Aconitum napellus* is also grade 1 for URETHRA; discharge; gleet (108) and grade 1 for GENERALS; vaccination after, the latter which might or might not be applicable in this case.

Prescription: *Aconitum napellus*, 1M. The client prefers to take and give liquid remedies, so she dissolved a few pellets in a glass of water and administered 1 tsp of the solution.

12/18/09: The client reported gradual improvement within the first 3-4 days after administration of the remedy, and complete resolution of all emotional symptoms a week after the remedy was

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given. Xavier now asks for attention from the older dogs and displays no inappropriate fear or submissive behavior although he is respectful of his elders. He is no longer “screaming and hitting the floor” and there is no further submissive or fear-based urination. He is very playful, “gets into stuff,” is highly energetic, and not nervous whatsoever. The client also observed that his tail is completely healed and he no longer has fleas. His penile discharge cleared within the first week. No counteraction or aggravation was noticed.

Assessment: This is a favorable response, although it is a little soon to tell whether the remedy is palliative or curative, in the absence of an observed counteraction. Given the broad spectrum of mental and physical improvement, a curative response is likely. **Recommendation:** Watch and wait for recurrence of symptoms, or new symptoms. Expect to need repetition of the remedy and eventual antimiasmatic prescribing.

1/29/09: Xavier was bitten deeply on the muzzle in an unprovoked attack by another household dog (with issues of her

own). He is now a little skittish, especially of this dog and in the area of the house where he was attacked, although not as generally fearful as before. The client has noticed Xavier nibbling on his legs and sides, but does not see an eruption. There has been no return of the penile discharge. His behavior was fine until the attack.

Assessment: There is a return of the fear state to some degree, although caution with regard to his attacker is entirely appropriate. His itching is psoric. Since *Aconitum napellus* worked very well for an extended period of time, the first step will be to repeat the remedy.

Prescription: *Aconitum napellus* 1M, to be followed with sulphur 30c or 200c in 1-2 weeks. It is appropriate to address psoric symptoms, especially skin symptoms, with a lower potency than mental and emotional symptoms, in the interest of avoiding an unnecessarily harsh counteraction.

Comments: The client is experienced with homeopathy and her sensitivity to her dogs and her understanding of chronic disease led her to be very proactive with

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Xavier. She was deeply concerned that his emotional state, if not addressed, would lead to physical problems, an eventuality described by Hahnemann in Aphorism §225: “. . .there are certainly a few emotional diseases that have not simply degenerated from somatic diseases. In these cases, the emotional disease develops in an inverse manner. With but little infirmity, it develops outward from the emotional mind due to persistent worry, mortification, vexation, abuse, or repeated exposure to great fear or fright. While initially there is but little infirmity, in time emotional diseases of this kind often ruin the somatic state of health to a high degree.”

While Xavier’s miasmatic disease has yet to be addressed, his initial response to homeopathic treatment has been very gratifying. He is well settled into his new household and shows every promise of being a happy, healthy dog,

Comparison of Emmy (see Fall 2009 issue) and Xavier: Both puppies exhibited a chronic disease pattern of fear and terror, although Emmy’s expression was intermittent and Xavier’s was more continuous. In Xavier’s case we have a “never well since” which was helpful, his transcontinental trip, which could certainly qualify as a

“frightful experience” as described in the Concordant Materia Medica as an indication for *Aconitum napellus*. In Emmy’s case her characteristic symptom picture defined the remedy choice although the beginnings of her disease are not known. In both cases the apsoritic remedy *Aconitum napellus* was curative; and in both cases, antipsoric treatment was subsequently indicated and will be necessary for the patients’ complete cure.

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