Veterinary Services for Organic Farms ALTERNATIVE VETERINARY MEDICINE CENTRE Information Sheet (Lecture) WS127/07 Christopher Day - Veterinary Surgeon

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Veterinary Services for Organic Farms

A paper to accompany a talk, illustrated with slides and overheads, given to veterinarians who serve organic livestock units

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It is hoped that, by the end of this session, you should be sure of the meaning of the term <u>homeopathy</u>. You should be acquainted with the way it is used, know some useful and easily applied remedies and understand the case for its use and its rôle in <u>Organic Livestock Farming</u>.

Introduction

Organic farming is the direct descendant of intelligent and élite pre-war and prechemical farming. Without the introduction of hi-tech, of chemical inputs, of 'mono-culture' and of agri-business, we would not have the 'division' that we see now.

For whatever reason, farmers are currently turning to organic methods in increasing numbers, joining the ranks of the traditional members of the organic

community and filling the supermarket shelves with more and more organic produce. Organic food is now widely available as a result.

The add-on value of the product to the farmer is very attractive, in these difficult times for agriculture. The consumer appears, in my opinion very wisely, to be prepared to pay the necessary premium for his or her food. Again, there are many reasons for this, including fear of chemicals, desire for better welfare of our food animals and wish for more sustainable husbandry of our land resources and environment. The argument that we shouldn't have to pay more for 'proper' and unadulterated food has yet to hold sway. I don't see this bubble bursting for the foreseeable future, since the more that is available and on display, the more the public sees and wants. My family, for one, only buys organic produce, whether it be fruit, staple foods, processed foods, ready meals, sauces, wines, drinks or any consumables.

The *Soil Association* is our insurance and assurance that the food, for which we pay a significant premium, is indeed honestly produced, according to more sustainable and cleaner philosophy and methods. There are other creditable standards, in the UK and worldwide, but there are also some 'cuckoos' in the nest. The buyer must be careful and discerning, if he or she is not to fall into traps set by less scrupulous labelling.

The challenge

The modern farm veterinarian is faced, not only with a farming community at large, which is finding it difficult to survive, let alone protect animal welfare and pay veterinary bills, but also with a large-scale rejection of modern 'traditional' (conventional) medicines and drugs. This rejection is coming from considerations such as price, expensive loss of product as a result of withholding times and consumer-driven demand for residue-free food.

What this means is that the medical skills we learnt at college are now facing a great challenge. They are in danger of being rendered obsolete on the farm, unless we can adapt as a lively and up-to-date profession should. That process of adaptation and the necessary willingness on your own part to adapt is demonstrated by your presence at a meeting such as this. The animals in the care of organic husbandry systems need our care and skill and we must not deny them the vital input of veterinary attention.

The great challenge facing us is therefore twofold. Firstly, can we adjust our mindset sufficiently to keep pace with the philosophical and actual changes occurring on our clients' farms, thus providing valuable and appropriate help and advice? Secondly, can we learn the necessary skills to provide properly for the animals' welfare, without creating unsustainable losses from the large

penalties an organic producer must endure, consequent upon the use of avoidable chemical medicine? What is certain is that, if we can't achieve these changes, we are in grave danger of emulating the dinosaurs, because there are plenty of people out there who are willing to flout the Veterinary Surgeon's Act (1968) and to do our job for us! The fact that they operate illegally and do not have indemnity insurance appears to represent little bar to their activities.

The possibilities

What, then, are we able to do, faced with this dilemma? As a result of political, commercial and 'scientific' forces at work we have not been well-appraised, in veterinary school, of the possibilities presented by non-drug medicine. The main modalities available to us are Homeopathy, Herbal Medicine and Acupuncture (as an integral part of Traditional Chinese Medicine - TCM).

Homeopathy is going to be the subject of my talk today, for several reasons. The first is that my invitation was on that basis. The second is that it is the most practical of your options. The third is that it leaves no tissue or product residues. This is in stark contrast to herbal medicine, in that the latter, although 'natural', uses material quantities of sometimes pretty unpleasant agents, residues of which neither the public nor the MAFF should wish to see appearing in food. The fourth is a very pragmatic one, that of the cost of the input. Herbal medicines on a farm scale are very expensive and acupuncture is intensive of professional labour.

Conversely to what is currently officially accepted by the veterinary community, homeopathy is not only an effective system of medicine, operating according to very logical, scientific and consistent principles and philosophy, it is also able to provide relief for a wider set of conditions than can 'conventional' drug medicine. It is 'bigger' than conventional medicine, by a very large margin. The down-side is that it demands a vast learning effort, in order to use it effectively for all conditions.

Commitment to learning homeopathy properly is no mean undertaking. I have been using it on myself for 42 years, studying it for 30 years and using it in veterinary practice for 28 years (at the time of writing in 2000). I am still learning! It is my intention today, however, to show you an overview of the subject and to introduce you to some of the easier and more predictably effective applications of the medicines.

A few common farm conditions, which we would feel **reasonably confidently** able to tackle, are listed alphabetically below, along with some of the more challenging ones:

Condition	Treatment	Prevention
Big Bale Eye	Yes	Yes
BVD	Yes & No	Yes & No
Coli diarrhoea	Yes	Yes
Digital Dermatitis	Yes	Yes
Dystocia	Yes & No	Yes
Ear necrosis	Yes	Yes
Foot Rot	Yes	Yes
Foul in the Foot	Yes	?
IBR	?	?
Infertility	Yes	Yes & No
Joint ill	Yes	Yes
Ketosis	Yes	Yes
Laminitis	Yes	Yes
Leptospirosis hardjo	No	No
Mastitis	Yes & No	Yes
Meningitis	Yes	Yes
MMA	Yes	Yes
Navel ill	Yes	Yes
New Forest Eye	Yes	Yes
Orf	Yes	Yes
Ovine Enzootic Abortion	No	Yes
Pasteurellosis	Yes	Yes
Photosensitisation	Yes	N/A
Pneumonia	Yes	Yes
Ringwomb	Yes	?
Ringworm	Yes	Yes
Rotavirus	Yes & No	Yes & No
SMEDI	Yes	Yes
Strawberry Foot Rot	Yes	Yes
Tetanus	Yes	N/A
Twin Lamb Disease	Yes	Yes
Warts	Yes	Yes
Watery mouth	Yes	Yes

Caption:

Yes - Confident :: Yes & No - Uncertain :: No - Unconfident :: N/A - No experience

This list is by no means exhaustive but gives an idea of the capabilities of homeopathy, usually supported by diligent dietary and management efforts where appropriate.

The tools

The tools of the trade, in homeopathy, are the several thousand homeopathic medicines available to the prescriber. These are drawn from the Plant, Animal and Mineral worlds (and from chemicals and disease material) and are usually prescribed in extreme dilutions. This last point at once provides the benefit, the power, the economy and the greatest cause for scepticism of homeopathy.

We must not forget the essential underlying tools of management and <u>dietary</u> <u>work</u>, which form the basis of all good medicine, if we are properly to fulfil our animal welfare duties and responsibilities. This paper will not dwell on these, since it is taken for granted that any therapeutic strategy will incorporate 'state of the art' in this regard and will be subject to constant review and updating.

The preparation of medicines involves serial, methodical dilution (and succussion) of the substance, usually on the centesimal (1:100) scale, to stages well beyond those at which there can be any expectation of molecules in solution. A common dilution (referred to as a 'potency') is 30c. This represents a dilution of one-in-one-hundred, thirty times over. The final theoretical concentration of the substance is therefore 10^{-60} ! What this means is that we are dealing with *energy medicine*.

It is wise to put this apparent paradox, hitherto unexplained by science, to the back of your mind at first, for otherwise you might 'turn off' at this point. Allow your clinical mind to observe the effects of homeopathy before making judgement. There follows a short list of readily available and easily usable medicines with their simple applications. This list will allow you to prove the worth of homeopathy, both to yourself and to your clients (in the unlikely event that the latter should prove necessary). It has not been 'edited' especially for farm application.

Aconite A sudden shock mentally or physically, or sudden fever, can

respond very well to this remedy,

also ill-effects of chilling or sudden profuse hæmorrhage.

Apis mell. Fluid swellings improved by cool bathing respond to this, eg:

windgalls, urticaria, œdema, etc.

Arnica Use for **any injury**, including falls, bruising, overwork, etc. Use

with confidence as soon as possible after injury.

Arsenicum Diarrhœa (and vomiting in relevant species), chilly, coldness,

collapse. Thirst for small quantities of water with restlessness.

Bryonia Stiffness/rheumatics/arthritis remedy where **any** movement

aggravates and continued movement aggravates further.

Carbo veg. A remedy which helps flatulence and may also be of great benefit

in collapsed animals.

Hepar sulph. Use in cases of sepsis or cellulitis. Can prevent sepsis of wounds.

Hypericum A great **pain** remedy, it can be used topically or internally.

Injured nerves will benefit too.

Ledum A remedy to use in **puncture** wounds. Reputed antitetanus

properties.

Nux vomica Use in cases of overeating, when digestive problems arise.

Rhus tox. A remedy to help the healing of muscular tissues and stiffness

characterised by: early stiffness on first movement, from which the patient "limbers up" and becomes much improved with exercise. The signs usually return with a vengeance **after rest**

after exertion.

Ruta grav. Helps the healing of ligaments, tendons, joint capsules and other

fibrous structures including periosteum.

Silica Use in cases of chronic suppurative processes, including

penetrating foreign bodies.

Symphytum A remedy to help healing of all **bone** injuries.

Urtica Suits oedematous swellings which are ameliorated by warm

applications (e.g. urticaria, etc.).

Hypericum/Calendula

Lotion Apply (diluted 1:10) topically to all wounds, abrasions,

contusions etc. Promotes healing and immediately soothes pain.

What should be immediately obvious from this list is that the medicines contained therein allow treatment of some conditions for which there is no direct conventional option. The incredible scope of homeopathy starts to show, therefore, from the outset.

For the treatment of a wider range of conditions, as shown in the first list at the start of the paper, a much wider selection of medicines will become necessary. It is useful, however, to try out the method and the dilute medicines on safer and easier territory, prior to embarking on wide use on the farm. The old principle of learning to walk before running was never more apt, if animal welfare and prescribing confidence are not to be the casualties.

The evidence

The simple fact of the extreme dilutions means that the medicines are time-consuming to produce. Furthermore, only small quantities are used at a time. These factors mean that homeopathy is thereby providing no massively lucrative returns on the scale of the modern pharmaceutical industry. The result is that funds are not there to be ploughed back into research and there is a paucity of properly conducted research at your disposal, to help the belief process.

Some clinical trials have been performed by the author, under practice conditions with all that implies. They are detailed below, with results and a brief discussion or clarification of each. Much more needs to be done, in order to convince a reluctant establishment and to turn back the tide of vested interest.

Bovine Mastitis (1) 1984

In this example, 'nosode' was given, via the drinking water, to the 'treatment' group, on a 'twice weekly' basis. The control group was 'treated' similarly from a bottle of unmedicated tincture. The two different bottles were indistinguishable, apart from the coded labelling.

The two different 'treatments' were labelled 'A' & 'B', with the allocation being 'blind' and the breakdown of the code being stored in a safe until the end of the trial.

Cows were selected randomly for the two groups.

- 11	Control Group	Treatment Group (nosode)
No. of cows in group	41	41
No. of cases in Winter	19	1
No. of cows affected	10	1

Ave. no. of quarters affected	1.16	1
Ave. severity (1-3)	2.16	1
Ave. duration of cases (days)	4.5	4
% of group affected	47.5 (25)	2.5

Bovine Mastitis (2) 1991

In this second example, we have simply collected data from the herd, of incidence of mastitis (number of cases per month) from the season before treatment and from the season of treatment (with nosode). Nosode was introduced on the 1st February, during the second season.

	Dec	Jan	Feb	March
Season prior to treatment				
No. of cases:	12	8	20	20
Season of treatment	IV			
No. of cases:	9	20	3	4
			Nosode introduced on 1st Feb	

Friesian Heifers – Dystocia Study 1984

Number in group: 25

Table 1

At outset of test:

Number calved to date 18

Number needing assistance 18 (100%)

Number of caesareans performed 1 (5.6%) (too few judging from

the next data)

Number of calves dying at birth 7 (38.9%) Number of maternal deaths 3 (16.7%)

Of the surviving 15 heifers:

Number with subsequent metritis	10 (severe)	(66.7%)
Number with subsequent mastitis	9 (severe)	(60%)
Number eventually held in calf again	3	(20%)
#7 1	(or 16.7% of the o	riginal group!)

Table 2

After Caulophyllum treatment:

7
2 (28.6% - in fact help turned out
to be unnecessary, since they calved
easily)
0
0
0
4 (slight) (57.1%)
0
7 (100%)

Discussion

The initial data (Table 1) showed a disastrous situation, with only one in six of the original 18 (16.7%) returning to the herd the following year.

After the 18th heifer had calved (it was yet another traumatic birth) the farmer sought homeopathic help and we administered *Caulophyllum* 30c via the drinking water, to the remaining seven heifers. The following data were then collected (Table 2).

Sadly, in this case, the only information we have is before or after treatment. No proper statistical 'control' can therefore be applied. However, it is stretching the arm of coincidence too far to assume that another factor was involved in the dramatic turn-around in the disease situation in this heifer group. The lack of difficulty in calving, the resultant saving of stress and injury to the dams and calves and the reduction in disease which followed, all seem to show very clearly that *Caulophyllum* had a very positive effect.

This story appears to demonstrate (a) the ability of *Caulophyllum* to help in cases of calving difficulty and (b) the effect of the traumatic births on the dams, which brought on severe metritis and mastitis problems in the untreated animals. The problem may even have been presented as a mastitis problem in the first place had the farmer not realised the cause for himself. This was not a mastitis problem, *per se*, but a manifestation of response to the disease situation imposed upon the dams at calving. Removal of the stress situation removed the 'mastitis' problem.

Canine Tracheobronchitis (Kennel Cough) 1986

1	Re	fore	nosode	treatment:-
1	ושעו	UIC	nosoue	ii cuiiicii.

1) Dejore nosode tredin	Total	Vaccinates	Non-vaccinates
No. of dogs in kennel	40	18	22
No. of dogs affected	37	18	19
% affected	92.5	100	86.0

2) After no so de treatment:-

a) Frank disease:-

a) Frank disease	Total	Vaccinates	Non-vaccinates
No. of dogs in kennel	214	64	150

No. of dogs affected	4	3	1
% affected	1.87_	4.69	0.69

b) Minor symptoms (ie: mild & transient):-

	Total	Vaccinates	Non-vaccinates
No. of dogs in kennel	214	64	150
No. of dogs affected	91	51	40
% affected	42.52	59.69	26.67

The above data appear to show:

- a) A remarkable response to nosode preventive therapy
- b) A negative effect from prior vaccination with kennel cough vaccine, on all parameters measured
- c) A continuing infective presence, as witnessed by the appearance of mild and transient symptoms in some of the dogs throughout the trial period. This means that the good results can not be attributed to disappearance of the infective agents, concurrent with homeopathic input.

Porcine Stillbirths (1983)

In this case, there was a disastrous stillbirth rate, which proved refractory to long-term energetic input from every kind of advisor the farm could call in. Homeopathy was tried as 'a last resort'. The results of the first trial, carried out in April of 1983, speak for themselves. The series of figures for the following months, when the whole herd was treated consistently, show a remarkable effect of treatment. The treatment was homeopathic *Caulophyllum 30c*, given during pregnancy to the sows.

There is also a very interesting effect observable when the treatment was (unwisely as it transpired) altered in mid -September and restarted in mid -November.

The results were published in the *Veterinary Record*, in March 1984.

Table 1

	Control	Treatment
No. of sows in group	10	10
No. of live births	103	104
No. of stillbirths	27	12
No. of sows with stillbirths	8 (80%)	3 (30%)
% stillbirths	20.8	10.3

Table 2

Stillbirth rates in the herd for the rest of the year

Month	No of Sows	Stillbirth %
March and before	15 - 40	18 - 22
April (month of the trial)	N/A	N/A
May	31	8.5
June	26	8.2
July	19	3.5
August	20	2.6
September	19	5.6 (alteration)
October	22	11.4
November	21	14.4 (reversion)
December	29	8.1
January	38	1.9

General comment on all the foregoing sets of results:

Although these few studies cannot be described as incontrovertible evidence, they do make potent inroads into the fog of doubt that surrounds this form of therapy. Taken in conjunction with those experiences which you will inevitably accumulate in your own practice, they amount to a very persuasive and convincing body of evidence.

The benefits (the bonus!)

I list below a few of the obvious benefits of homeopathy, in no particular order. Some of these inevitably overlap or are inter-related, owing to the common reasons behind some of the points. Some of the benefits will appeal more to the farmer, some to the consumer and others more to the prescriber. They are not all farm-related but, together, they add up to a very weighty set of positive reasons for using homeopathy on the farm, whether it be an organic unit or not.

There is no equivalent list for negative factors provided, mostly because I can think of none!

It does not encourage or stimulate antibiotic resistance in bacterial populations It strives to effect a cure

It creates no drug residues in tissue or in secretions

There is no risk of doping of competition animals

There is no 'suppression' of disease, if prescribed properly

There are massive financial benefits

No laboratory animals are required to develop the medicines

Mercy and welfare factors

Salvage considerations

It is natural

Political and PR factors

It is safe in pregnancy

It is safe during suckling

It can provide benefit, even where there are no conventional options

There can be no side effects

It works!

Training

In order to become effective in veterinary homeopathy, days such as these, interesting instructive and beneficial though they are, will not do the business. Happily, there are courses run specifically for veterinary surgeons, under the accreditation banner of the Faculty of Homeopathy.

These courses are generally three-year, part-time and run alongside courses for physicians. The latter factor injects a variety of benefits, including benefits of

scale and cost. The courses can serve as a learning experience or they can be used to lead to the Faculty's examinations and qualifications.

There are currently three Faculty-Accredited teaching Centres in the UK, at Bristol, Oxford and Glasgow. These provide varying courses, since there is some flexibility in the system, but they work to a common syllabus or curriculum. If you are to become really effective practitioners in veterinary homeopathy, you are urged to attend one of these course cycles. The details of the Teaching Centres and their courses are obtainable from *The Faculty of Homeopathy* at: 15 Clerkenwell Close, London, EC1R 0AA

Availability & sourcing

Because of the learning commitment required, the decreased profit from medicines and the prevailing veterinary culture, there are only 25 veterinary surgeons in the UK with the homeopathic qualification, at the time of writing. Of these, there are sadly only three with wide experience in farm practice. The demand from the farming community is increasing exponentially, so this situation must change.

It is clearly wise to consult a veterinary surgeon on homeopathic medicine, just as in the case of conventional medicine. Not least among the reasons for this are veterinary awareness of farm diseases along with the factors affecting them and the indemnity insurance carried by all veterinary surgeons. It is also illegal (Veterinary Surgeons Act 1968) for non-vets to prescribe or to give advice based upon a diagnosis.

Sourcing of medicines and advice can, therefore, present a dilemma, complicated by the serious shortage of proper professional expertise and the vigorous marketing employed by several non-veterinary enterprises. It is my job to explain the situation, not to tell an organic farmer how to run his or her business. I do, however, warn farmers and veterinary surgeons to be very careful how to proceed in the homeopathic management of disease on the farm and in the sourcing of advice and medicines. Homeopathy is an unorthodox treatment and, if things go wrong, we can rest assured that the establishment is likely to be very critical and judgemental in its dealings.

Conclusion

Homeopathy is a system of medicine which 'treats like with like'. It usually employs medicines of extreme dilution (potency), thus depending upon bio-energetic mechanisms for its effects. It draws upon the animal, plant and mineral worlds for its medicines and adds, to these, derivatives of various

modern drugs and chemicals, in extreme dilution. There is also the use of nosodes, to combat infectious diseases.

Homeopathy is a gentle, safe, rapid and effective form of therapy, providing answers to many medical on-farm problems, even for many conditions for which there is no conventional therapy available.

Because of the lack of residues, and because of its holistic nature, it fits in very well indeed with organic farming methods. It is not, however, exclusively for use in such units, also providing many benefits to the commercial conventional farmer and his or her animals.

At all times, it is worth stressing that the use of homeopathy, effective though it is, must not be used as an alternative to good husbandry and welfare practices on the farm. It should be considered more as a capable tool for overcoming immediate problems and as only part of an enlightened holistic management and dietary approach to ongoing disease prevention.

I hope that you have enjoyed this brief excursion into the fascinating and challenging world of homeopathy. I further hope that this all-too-short introduction to the system and its capabilities will draw you deeper into study and endeavour, to the great benefit of your patients and clients.

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- **N.B.** MAFF is now DEFRA, renamed after the Foot & Mouth debacle **N.B.** The Faculty of Homeopathy has since moved to Luton.

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