



SUPERWOMAN IN A SLUMP

Virus nosodes for ME/CFS



Diane Solomon was an attractive, successful, powerful woman with a music career and her own television show in England. Then chronic fatigue struck. It was not a blissful sleep like that of the beautiful woman in the photo, but rather an abysmal fatigue accompanied by deep exhaustion, inflammation, swollen glands, sore throat, muscle pain, constant tremors, mental sluggishness, despair and suicidal thoughts.

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SUMMARY: Drawing on her own history of suffering, the artist and later homeopath presents the long-term course of a typical case of chronic fatigue syndrome and the possibilities for treatment. In addition to remedies for drainage and detoxification, virus nosodes play a central role, especially if the disease was preceded by a viral infection. Electrodermal screening can help to find the appropriate nosode. Constitutional remedies are usually only indicated after drainage remedies and virus nosodes.

KEYWORDS: Chronic fatigue, complex remedies, coxsackie, cytomegalovirus, drainage remedies, electroacupuncture, long Covid, ME/CFS, mononucleosis, myalgic encephalomyelitis, nosode, PEM, post-exertional malaise, viral nosode

I am a retired homeopath who recovered from seven years of Chronic Fatigue Syndrome, also known as Myalgic Encephalitis, or M.E. My recovery was thanks to a viral nosode of Coxsackie B4. In fact, it was that dramatic recovery that compelled me to dive deep into homeopathy. I felt I had discovered a magical well of knowledge. And how I wish our mainstream medicine would reach into that well.

I had a great deal of success treating CFS sufferers. I don't claim to have all the answers; I simply wish to share my clinical experience treating those with ME/CFS. One must employ the right tool for the job, which may include nosode therapy, classical constitutional work, organotherapy, nutritional and herbal support, gentle exercise, counselling, and even massage and other bodywork. Different modalities work for different patients, and for me it was summed up nicely by Dr. Margarie Blackie, „The patient, not the cure.“

MY STORY

I was enjoying a successful singing career and living in the UK, when I was hit with a nasty bout of flu. Instead of the usual recovery, I slowly felt worse and worse. The diagnosis of Chronic Fatigue Syndrome was a long time coming, and when it did, I couldn't take it in. I simply couldn't believe it would happen to me. I was a "health nut" and had just achieved a degree from The Institute for Optimum Nutrition in London. I ate organic food, rarely drank alcohol, exercised regularly, meditated daily, and took plenty of nutritional supplements.

That said, I did have a history of Irritable Bowel Syndrome (IBS) and had to be cautious with wheat, other grains, and a variety of other foods. I was prone to occasional migraines, something I inherited from my mother. So, while I couldn't claim perfect health, I was doing all the right things. Or so I believed.

Stress played a major role in my decline. I was in the middle of selling my London home, planning a move to California, preparing for my wedding, and buying a home in Santa Monica. At the same time, my father was dying of pancreatic cancer. During this period, I flew between London and Los Angeles 22 times in two years, with several additional trips to Massachusetts to visit my dad. By the time he passed away, I was utterly depleted.

Helpless doctors, ineffective treatments: I tried nutritional adrenal support, which did not help. Other energy-supporting nutrients and herbs were also ineffective. Rest didn't help. Exercise was impossible and set me back dramatically. Sleep became elusive. I had pushed myself too hard through what I thought was "just the flu," doing everything that needed to be done through sheer willpower, believing, however mistakenly, that it was absolutely necessary to keep going. The „Superwoman“ label fit me all too well.

Over the next few years, I tried every possible modality. I started with orthodox medicine in the form of three different physicians. One told me I was hyperventilating and suggested breathing into a paper bag. Another recommended more rest and handed me a prescription for tranquilizers and sleeping pills. A third spent much of the consultation urging me to get a mammogram, which of course was completely unrelated to why I was there. When I later researched his clinic, I discovered he had a financial interest in the lab to which he wanted to refer me. Unsurprisingly, he offered no real help, only a large bill. He even admitted he didn't know what was wrong with me.

I was desperate for help, experiencing deep exhaustion, inflammation, swollen glands, sore throat, muscle pain, a constant shaky feeling, mental fog, and insomnia, all classic symptoms of CFS. Next, I turned to alternative medicine. I saw naturopaths, acupuncturists, Chinese herbalists, chiropractors, a Doctor of Osteopathic medicine, and massage therapists. I even tried hypnotherapy, wondering if I had somehow brought this on myself and could therefore undo it with my mind. Though many of these practitioners were compassionate, none provided lasting relief. I might feel slightly better after a treatment, be it an herb or an adjustment, but it never lasted. I kept sinking back into the same dark hole.

Years of suffering, profound exhaustion, and suicidal thoughts: I spent a fortune. I couldn't work, my singing career was over, I was too ill to set up a practice as a nutritionist, and I was terrified. These were years of unrelenting misery. I was bedridden for long stretches and often couldn't walk across a room unaided. I lacked the energy to answer the phone. I couldn't sleep, so mornings brought no relief. My first thought each day was, "Oh my God, another day. How am I going to get through it?"

There was no let-up. The headaches, the body and muscle aches, and the profound, inexplicable fatigue never left me. Imagine having the flu, a hangover, and jet lag from a 16-hour flight from LA to Bangkok. All at once. Add to that the jittery feeling of having drunk five cups of coffee without the energy to do anything. When I slept, it was light and disturbed and was filled with vivid, unsettling dreams. I woke repeatedly through the night and never felt refreshed in the morning. I ached all over, as though I'd been beaten with a baseball bat. I truly wished for death. That was CFS.

Those years felt like a lifetime. Thoughts of suicide were constant companions and hope entirely vanished.

Then came Homeopathy: After about three years, I tried homeopathy. Why it took so long to find it, I don't know. A Chinese herbalist who had studied some homeopathy suggested a nosode made from the Coxsackie B4 virus. Three doses of the 30c potency brought me back to about 50% of my former self. That was extraordinary progress. Not a full, rich life, but still a marked improvement. Unfortunately, this practitioner wasn't practiced in the use of higher potencies, so my recovery plateaued.

But I was better enough, and amazed by homeopathy enough, to enrol at the British Institute of Homeopathy. Through my studies, I learned about higher potencies of nosodes and decided to try a 200c. And, oh my, did it ever hit hard. A couple of doses and I suffered a terrifying, full-blown relapse. Whatever fragile balance I had managed to maintain collapsed. I was bedridden again, feeling as if I had the full flu. For ten days, I was worse than ever.

But then, it lifted. Quite suddenly. Around the tenth day, I simply woke up. And everything had changed. The pain was gone. The fog had lifted. The exhaustion had eased. The tender muscle points were no longer sore.

I still had some lingering digestive issues; mild IBS remained, along with the occasional migraine. There was still work to do: healing my gut, restoring adrenal function, and addressing the food allergies that had worsened during those years. But the transformation felt miraculous. Life, which had been drained of colour, returned to vivid technicolor. The curtains lifted. Everything came into focus again. The pain, fog, and despair never returned. For years, I feared they might, but they didn't.

Recovery process: As a homeopath, I believe that the remedy deeply challenged my immune system, possibly activating it to recognize and expel the virus that had initially triggered the illness. Perhaps it made my system address the shadow, the memory of the virus, that in actual fact was no longer there, but my body didn't realize it. Stuck on "ON," as it were. So, the remedy corrected an autoimmune imbalance. I don't know for sure how it worked, but that's my best guess.

I garden, hike, exercise, sing, write books, and am healthy and strong. I still occasionally get mild migraines. But after undergoing constitutional homeopathic treatment, I can honestly say I am healthier now than I have ever been.

Not a single day goes by that I don't feel blessed to have come through those harrowing years. When I get a cold or a stress headache now, I remind myself, "It's only a cold. It's not CFS." Or, "It's only a headache. It's not CFS." Compared to what I endured, those things feel like nothing at all. Recovery felt like being reborn. A true gift.

I see life differently now, as I imagine many do after approaching death and coming back. I'm profoundly grateful to still be here, to enjoy this life I nearly lost, and to share what I've learned through my book: „Chronic Fatigue Syndrome: The Homeopathic Treatment of CFS/ME“. If I help others find hope again, then those years of suffering will have meant something.

THE INITIAL APPROACH TO TREATING CFS

In my practice, I helped many CFS sufferers reclaim their health using remedies similar to the Coxsackie nosode. Sometimes it's another virus: Influenza, Cytomegalovirus, or the Epstein-Barr virus (Mononucleosis). I found that viral nosodes seem to treat a subset of CFS sufferers, but for those whom it works, it is profound. At the very least, viral involvement must be explored and, if necessary, addressed.

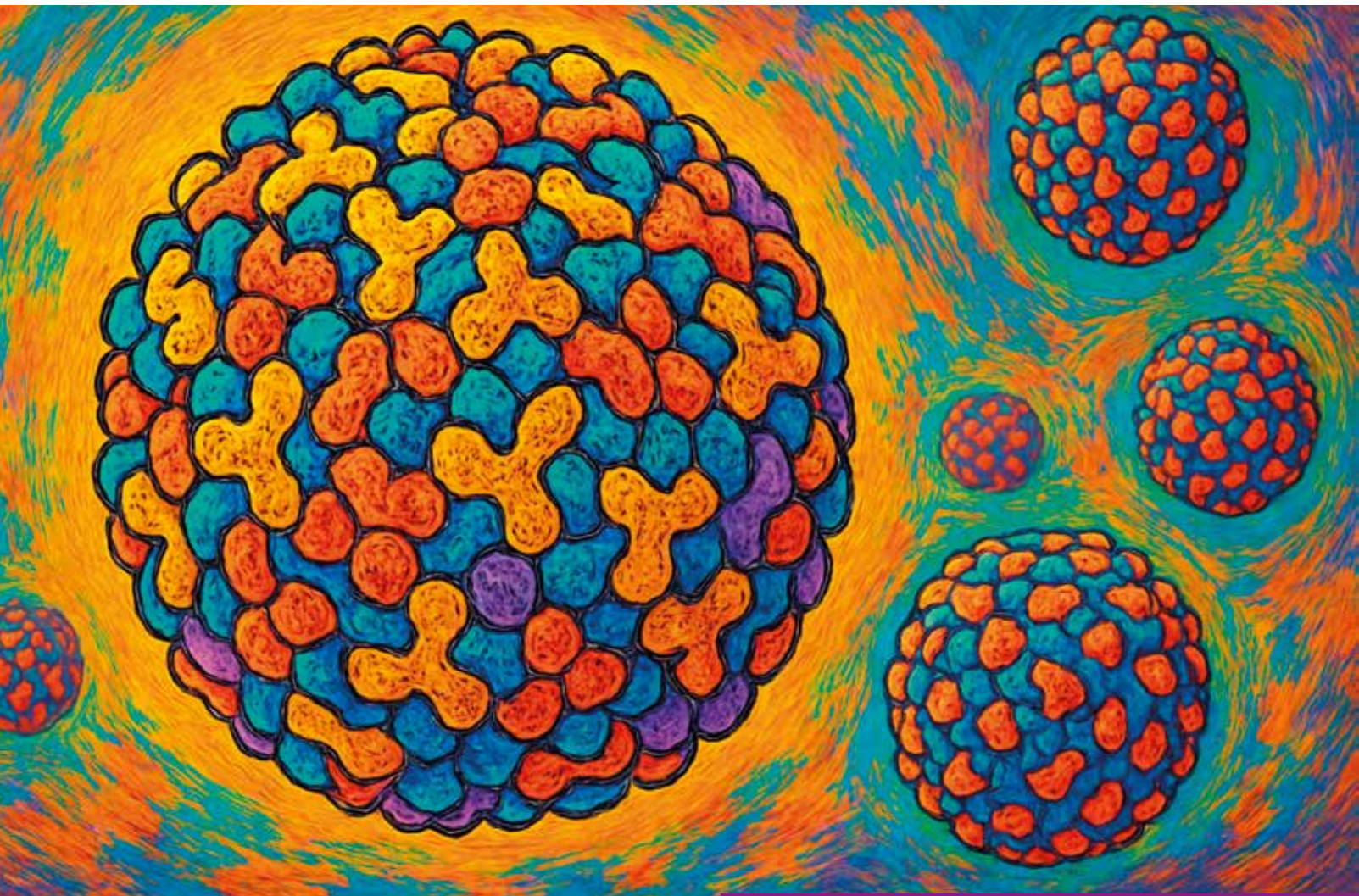
I must repeat: I found it was a subset of cases where viral nosodes would help in the treatment of CFS. I worked with other people who struggled with all the symptoms of Chronic Fatigue Syndrome who did not describe a cold or flu from which they never completely recovered. These patients/clients needed different treatment. However, there were plenty that did benefit from viral nosode treatment.

The first and most appropriate step in treating a patient with Chronic Fatigue Syndrome (CFS) is of course to take a comprehensive case history. This can take hours and may significantly tire the patient. Nonetheless, it's vital to gather a general background, including the patient's health before the illness, how the condition began, what preceded it, and a thorough account of current symptoms. If the patient is extremely weak, it may be advisable, perhaps even preferable, to postpone the full case history until some initial drainage work has been done.

From the perspective of a classical homeopath, this delay may seem unorthodox, given the emphasis on prescribing a single remedy. However, as Dr. James Compton Burnett and my own clinical experience confirm, prematurely administering a constitutional remedy, even in a low potency such as 30C, can seriously aggravate a person suffering from CFS. It's almost as if, working on the 'onion layer' principle, there is a level that needs to be removed before the constitutional remedy can work correctly.

DRAINAGE REMEDIES/COMBINING REMEDIES: „THE WHOLE IS GREATER THAN THE SUM OF THE PARTS.“

I often employed low-potency drainage remedies and organ supports before prescribing a constitutional remedy. This method offers several benefits. It activates the excretory organs and



stimulates biological flow in connective tissue, so to promote cleansing. With drainage remedies supporting them, the organs can detoxify and eliminate waste more efficiently. Stimulating or regulating organ function in this way helps to relieve congestion and inflammation. For instance, the kidneys can be drained and supported with *Berberis vulgaris* (MT, 1X or 3X), making it easier for them to excrete toxins through the urine. Or one could use BHI/Heel's excellent combination remedies, such as Gallium Heel, Aletris, and Engystol, depending on the symptoms presented. (These would be for a suspected viral involvement.) Lymphomyosot is also extremely useful, a Heel combination which includes low potencies of Myosotis, Scrophularia, Teucrium, Equisetum, and others. These help to drain and support the detoxification of the lymphatic system, skin, liver, and kidneys.

Drainage in this way can also help by clarifying the symptom picture. As symptoms of toxification subside, the underlying issues often become more visible. Importantly, drainage often helps the patient feel better quickly. I found that strengthening

Coxsackie viruses are spherical, non-enveloped RNA viruses belonging to the enterovirus group of the Picornaviridae family and are divided into two strains (A and B). Like all human enteroviruses, they are relatively resistant to environmental conditions, which makes them somewhat easy to spread. Coxsackie viruses are found all over the world and are transmitted directly from person to person via the faecal-oral route, droplet infection or smear infection. Indirect transmission is possible via contaminated objects or contaminated food. The name comes from the town of Coxsackie near New York, where pathologist and virologist Gilbert Dalldorf first described these viruses in 1948.

Copyright | The photo of the Coxsackie virus was created with AI.

and detoxifying the organs before constitutional treatment helped the body handle remedies more effectively, reducing the likelihood of aggravations. These gentle remedies may even spark spontaneous healing. When toxins are cleared, the body's own healing mechanisms, "the doctor within," can be reactivated.

During the drainage phase, patients should be informed about the possibility of a "healing crisis" and how to manage it. Acute inflammation, for example, is a natural part of detoxification and should not be suppressed with the use of anti-biotics, anti-pyretics, anti-diarrhoeals, and anti-inflammatories. Severe symptoms are not necessary and can further weaken a depleted system. If a patient reacts strongly, it's wise to pause the drainage remedies for a couple of days, allowing the body to settle. High doses of Vitamin C (such as four to eight capsules of 500 mg Calcium Ascorbate per day) and ample pure water can support this natural clearing process.

ELECTRODERMAL SCREENING

To determine the appropriate drainage and organ support remedies, I found Electrodermal Screening very useful, often invaluable. This term covers Electroacupuncture According to Voll (EAV), Vegatest, and computerized screening systems. This method quickly revealed which organ systems were most involved, the degree of lymphatic inflammation, and the strength of the patient's vital force. Plus, it could identify the nosode I needed to recommend.

EAV was developed in 1953 by German physician Dr. Reinhold Voll. It uses a highly sensitive ohmmeter to measure skin resistance at specific meridian points, usually on the fingers and toes, indicating energetic health. The patient holds a negatively charged brass electrode while the practitioner applies a positive probe to the points. A healthy reading is 50. Elevated values (60, 70, or higher) suggest inflammation; lower readings (35–40) may indicate degeneration, as is often seen in chronic illness. More than 600 such measurement points have been identified. Once problematic organs are identified through these readings, homeopathic remedies can be tested in the EAV circuit using a brass test plate. The energetic interaction between the remedy and the organ can cause measurable shifts in readings. Though science hasn't yet explained this effect, I consistently saw reliable outcomes. EAV can also detect specific pathogens. Just as a nosode of *Helicobacter pylori* (linked to stomach ulcers) can normalize elevated stomach readings if the patient is infected, a nosode of Coxsackie B4 or Epstein Barr might be the remedy that will balance the point for a CFS sufferer.

ADDRESSING THE CONTROVERSY

Electrodermal Screening and Vega testing have been met with controversy. While concerns about reproducibility and practitioner error are valid, I urge you not to dismiss this modality outright. Detractors, such as the "quack watch" websites, often mock without considering the potential benefits. After all, what

harm does EAV do? Even if results are inconclusive, no damage is done to the patient, and I have seen remarkable results in practice.

Some argue that these methods might deter patients from seeking conventional diagnostic testing. In my experience, most reputable homeopaths actively collaborate with the patient's primary care physician and will refer them for conventional diagnostics such as blood tests, ultrasounds, or CT scans when needed. This not only ensures legal protection for the practitioner but, more importantly, provides the patient with a full range of information and care options. Without delving further into the pro and con arguments here, I recommend exploring more balanced perspectives.

VIRAL OR BACTERIAL NOSODE TREATMENT

If using a Voll, Vega or even Kinesiological screening method, a viral match may be found, the most common in CFS being Cytomegalovirus, Coxsackie B1-B6 (B influenza), Epstein Barr (Mononucleosis) or Human Herpes virus Type 6 (HHV6). The results of such measurements are particularly helpful when there is no clear link between CFS and infection with a specific virus in the patient's medical history.

I tried a variety of protocols with regard to taking the remedy. In the end, what worked best was to have the patient take one dose of 30c of the nosode remedy every other day for three weeks. The understanding of past homeopathic practitioners has been to employ the 30c potency of nosodes only once in six months, but in my experience, this is simply not enough. I began my practice in this manner and found that the patient returned in two to three weeks testing just as strongly for the virus. Yet when he took the remedy at more frequent intervals, the symptoms, and the test match disappeared in three to four weeks.

It is always possible that one may have to instruct the patient to take a short break in this treatment, to allow some intermediary detoxification to take place. If a client/patient is extremely sensitive, it is wise to remember the „Less is more!“ mantra and leave time in between doses.

After a month to six weeks, if improvement was experienced by the patient, I'd recommend a single dose of the 200c of the same nosode, and perhaps a dose once a month after that, for several months. This was decided based on the patient's reaction, recovery, sensitivity, etc.

It is often the case that it is simply impossible to ascertain whether a virus is involved in the CFS patient's ill health. Or if you suspect a virus, which one could it be? There is little to be lost by trying a shotgun treatment: a combo of viruses that are most apt to be involved. For example, Reckeweg sells a wonderful viral combo remedy simply called R88, and I often started a patient on this remedy. It includes flu nosodes, Coxsackie, Epstein Barr, Cytomegalovirus, Herpes Simplex and others. In some countries, other homeopathic manufacturers also offer combination remedies made from viral nosodes, which may be worth trying if R88 is difficult to obtain.



The classic symptoms of CFS could not be cured or even alleviated with conventional medicine. Patients with CFS may then seek help from alternative medicine. The author went to naturopaths, acupuncturists, Chinese herbalists, chiropractors, an osteopath, and a hypnotherapist. Then came homeopathy.

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If there is improvement after three weeks on R88 (and two or three weeks after this to rest and review), then it is time to use a 30c of an individual nosode, as per the instructions above. Which one, you ask? If you have no means to diagnose, try the R88 ingredients, in nosode form, one at a time. Yes, this may be time-consuming, but so are years and years of CFS/M.E. But I would start with Coxsackie B4, then Epstein Barr, then Cytomegalovirus.

It may be advisable as well, during and in between this nosode therapy, to continue to employ drainage support, as described above. This can help prevent severe aggravation of symptoms. Also, since CFS patients are often weak, it is definitely safer and easier on them to start with a 30c of the nosode, even though the 200c may test.

Furthermore, although I often found that a single constitutional remedy would test, or was chosen according to standard homeopathic practice, it was better to wait until after nosode treatment. There can be a nasty aggravation if you do too much

at once. Each patient is different and will recover at a different speed.

LONG COVID

And what about Long Covid? This syndrome involves a collection of symptoms that persist long after the acute phase of a Covid-19 infection has passed. It first came to light early in the 2020 pandemic, when patients simply weren't getting better. Alarming, studies suggest that anywhere from 5% to 30% of those who recover from Covid-19 go on to experience Long Covid. However, conventional medicine has yet to identify the root cause of Long Covid or discover truly effective treatments. The focus of this article is on Chronic Fatigue Syndrome, as that is my clinical experience, but I must mention the fact that Long Covid bears striking similarities to CFS. In a nutshell, there is a significant overlap of symptoms between Long Covid and ME/CFS, such as severe fatigue, light-headedness on standing, digestive issues, headaches, and more. For further reading, check out a 2022 NIH study which identified four major subgroups of Long Covid, one of which was closely aligned with ME/CFS.¹ I retired before the pandemic and therefore have no direct experience treating Long Covid. I will be interested to learn if any practising homeopaths reading this have had success with the nosode of Coronavirus.

¹ Zhang, H., Zang, C., Xu, Z. et al. Data-driven identification of post-acute SARS-CoV-2 infection subphenotypes. Nat Med 29, 226–235 (2023). <https://doi.org/10.1038/s41591-022-02116-3>

Additional treatment: Post-exertional malaise (PEM) is the hallmark symptom of ME/CFS (and a frequent feature of long Covid.) It goes far beyond tiredness. Those experiencing PEM might suffer from searing pain, a burning inflammatory sensation, or severe gastrointestinal and cognitive disturbances. Even mild mental or physical activity can lead to a crash that lasts for days or weeks.

I observed positive results in clients using coenzyme Q10 (CoQ10), which supports energy production through the mitochondria and has been shown to be depleted in individuals with ME/CFS. In the anti-inflammatory category, Omega-3 oils were helpful for some people. Guidance around sleep proved beneficial, and dietary changes also played a role. Although high-fibre foods are generally considered healthy, I often recommended trying lower-fibre options—or at least emphasizing soluble fibre—so that less energy was required for digestion.

Most importantly, I always advised clients to pace themselves. As an interesting side note, over the past thirty years, I've noticed a recurring pattern: people who develop ME/CFS tend to be high-energy individuals, those who take pride in how much they do and how productive they are. This makes sense in our culture, especially in America, where productivity is often equated with self-worth. This personality trait often guided me in repertorisation.

Treating CFS patients was difficult and time-consuming, due to the fact that many were so weak, sensitive, and easily triggered. But it was so rewarding when I was able to help. In my experience, a combination of remedies, either drainage remedies, or single remedies combined, nosodes, and constitutional remedies, helped most of these sufferers. Correctly chosen homeopathic remedies gently push the patient's system towards optimum balance, leaving the rest to the wisdom of the body and mind to effect the cure.

A few resources and links

Evidence for infection as cause: Researchers at Stanford University are investigating whether some cases of Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS) might be linked to infection. Although the exact relationship isn't fully understood yet, their research is focused on two main hypotheses.

- 1) ME/CFS symptoms may be caused by the continued presence or activity of a pathogen – such as a virus or bacterium – within the body.
- 2) The second hypothesis suggests that the illness may not be due to the pathogen itself, but rather to the immune system's reaction to it.

Source: Stanford ME/CFS Initiative: <https://med.stanford.edu/chronicfatiguesyndrome.html>

Better understanding of an immune system 'at war':

<https://www.npr.org/sections/health-shots/2024/02/23/1232794456/clues-to-a-better-understanding-of-chronic-fatigue-syndrome-emerge-from-major-st> Feb 2024

The study provides compelling evidence that the immune system is chronically activated: „As if it's engaged in a long war against a foreign microbe, a war it couldn't completely win and therefore had to continue fighting.“

Helpful website/blog for info/new research:

<https://www.healthrising.org/blog/2025/05/15/t-cell-exhaustion-chronic-fatigue-long-Covid/>



DIANE SOLOMON

starred at 21 as a singer in her own BBC TV series, but after fifteen successful years of recording, television, and concerts, Chronic Fatigue Syndrome destroyed her career. She waded through half a life for more than seven years, finally regaining her health thanks to a homeopathic remedy. This launched Diane into

new studies and a second career: homeopath and nutritionist, employing a combination of nutrients, herbs, homeopathic remedies, and diet and lifestyle recommendations.

Now retired as a therapist, and focused primarily on writing, she lives with her husband, Mark, in beautiful New Hampshire, surrounded by flower beds, vegetable gardens, and beautiful forests and streams. With two cats, three dogs, singing and playing guitar and piano, gardening and many more books to write, she wonders how she ever had time to work!

Diane has written seven books: four novels, and three in the healing area. Her book „Chronic Fatigue Syndrome: A Guide to the Homeopathic Treatment of CFS/ME“ reached #1 in Amazon's homeopathic section.

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<https://www.amazon.com/stores/author/B0186OZOVQ>