

Borrelia – in dogs, cats, horses, and ferret too

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I have now been running my own practice for 22 years.

Inspired by our good farm vet, Dr. Herbert Kampik, a former East Prussian who, early on, was already an excellent homeopath, I have worked right from the start with alternative, as well as conventional, medicine. Methods of alternative medicine that I have been using are:

- Homeopathy
- Naturopathy
- Bach flower remedies
- Magnetic field and laser therapy
- UV light treatment.

Unfortunately I only came across bioresonance therapy at a very late stage about four and a half years ago and have been using it increasingly often since then. What I particularly appreciate is the possibility of making a rapid diagnosis and of subsequently treating the patient quickly so that valuable time is not lost.

The issue of Borrelia infection has also been gaining in significance amongst our four-legged friends too in recent years. According to the latest findings, it is assumed that, on average, 1 in 3 or 4 ticks here in Germany is infected with Borrelia.

The incidence of ticks varies from one region to another. *Ixodes ricinus*, the common sheep tick, which, like all other species of tick, belongs to the Arachnid family and is found most frequently here in Germany, is primarily responsible for Borrelia infection. It becomes active when the external temperature reaches 10°C and above. The so-called tick season runs from March to November. Ticks can be expected to be particularly numerous in late spring and early autumn. In hot dry weather these

blood-sucking insects prefer to hide away in the moist cool earth. *Ixodes ricinus* can transmit both meningoencephalitis and Borrelia infection to humans and animals.

My first case, a patient with an identified Borrelia infection, was over 15 years ago. This was a black stable cat with a pronounced limp whose general condition was poor. After treating a suspected distortion unsuccessfully with homeopathy for about two weeks, I got the owners' consent to a blood test for Borrelia infection. As this was positive, there ensued the, then usual, 4-week therapy with an apparently suitable antibiotic. Success was limited however. The animal's general condition improved slowly but its lameness never completely disappeared. The cat then learnt to climb the stable ladder limping.

I subsequently kept hearing tragic reports of Borrelia infection in horses. These were usually diagnosed and treated much too late so that the horses were injured for life, becoming unfit for riding and, in the end, mainly being sent to the knacker's yard.

Since becoming a Bicom therapist, I am fortunately now able to perform a diagnosis for Borrelia infection very quickly from a blood sample consisting of 2 drops of blood, even in the presence of the animal and its owner in suspected cases. If the result is positive, I then have the opportunity to start the necessary therapy without delay.

I carry out the testing according to the proven method (Fiedler). I often encounter a response with program 970, which supports toxin elimination. The liver and kidneys often also need support, as does the lymphatic system. This problem is often apparent in the form of listlessness, loss of

appetite, gastrointestinal problems with diarrhoea, high temperature or oedema in the region of the infection portal, that is to say, the site of the tick bite. Lameness cannot always be detected. In addition I observed in some cases that, in the course of the weakened defensive condition, parasites such as ear mites had become established (in dogs as well as in ferrets) and also biting lice (in horses).

I use appropriate biological methods against these.

In the cases I treated I needed between 1 and 5 sessions to rehabilitate the infected animals. As far as it is possible to trace, almost all the patients can be considered to be cured. Only in the case of the ferret did a recurrence occur one year later without a further tick infestation. Depending on the particular situation, I occasionally supported bioresonance therapy by injecting a homeopathic remedy I specifically tested to support the animal's powers of resistance such as Belladonna logoplex or Lachesis compositum or even PlantaMun, for example.

I have the impression that this accelerates the infection's retreat, which has a positive effect both on the animal's general condition and also on the owner's attitude to this kind of therapy.

CASE STUDIES

Case 1: Dog Bruce

The nine-month-old Rhodesian Ridgeback was brought to my surgery on 11.7.06 with the preliminary report that he had been listless for some time and had lost his appetite that day. A blood sample was taken from his ear and tested immediately.

Testing

- ▶ The Borrelia ampoule in the CTT set for bacteria tested positive.

We began therapy immediately:

Basic therapy tested: 132
Follow-up therapy:
Intestinal detoxification: 565
Lymph oedema: 610
Gastric complaints: 910
Borrelia: 197

Bruce was also given one Belladonna logoplex injection as well as 25 ImmuStim H tablets.

The 2nd therapy session took place three days later on 14.7.06:

Follow-up therapy with support for infection resistance: 950
Releasing immune blockages: 582
Chakra therapy 5th to 7th Chakras: 940
Borrelia therapy: 999

In addition, the animal was given another Belladonna logoplex injection as well as a Scalibor collar to protect against ticks.

Four days later on 18.7.06 the dog still had little appetite yet showed much more vitality.

3rd session:

Basic therapy: 132
Follow-up therapy:
Toxin elimination: 970
Renal detoxification: 480
Pyloric complaints: 200
Infection resistance: 950
Borrelia therapy: 999

On 22.7.06, another four days later, Bruce was already in fairly high spirits but he was still fussy about his food. He was given the same treatment as before, as well as another 30 ImmuStim tablets.

Another five days on, on 29.7.06, we observed a marked improvement but the ear mite otitis he had suffered in May had flared up again. This was treated with Dermatol spray and cured.

5th session:

Basic therapy: 133

Follow-up therapy:

Liver detoxification 431

Lymph stimulation: 201

Infection resistance: 950 / 951

Borrelia therapy: 999 (8 mins.)

Bruce was brought to the surgery regularly up to September 2007. During this period no new problems occurred which were attributable to the old infection. He then moved out of our area with his owner and I have since lost contact with him.

Case 2: Cat Luna

The 12-year-old female cat was brought to the surgery on 17.7.07 with motor disturbance and severe weight loss.

According to the preliminary report, Luna had had several very persistent ticks in the neck area about 8 weeks previously and the current problems had already been noted for about two weeks.

Testing

- ▶ Consequently I immediately took a blood sample from the animal's ear and Borrelia tested positive here too.

I tested the following programs:

- ▶ Toxin elimination: 970
- ▶ Renal detoxification: 480
- ▶ Intestinal detoxification: 565
- ▶ Sacral/coccygeal blockage or impaired gastric secretion: 211
- ▶ Borrelia: 191

Therapy

1st session:

Basic therapy after testing:

133 (for patients with blocked reactions)

Follow-up therapy: 970, 565

191 (Borrelia, amplification 1.9, time 4 mins.)

The follow-up appointment 3 days later on 20.7.07 was cancelled because the cat was

already better and her owner did not feel further therapy was necessary.

The cat's state of health improved over subsequent weeks so that today she can be considered cured (confirmed by the owner by phone).

Case 3: Cat Sammy

The two-year-old neutered cat was brought to my practice on 20.7.07 with a feverish infection, listlessness and loss of appetite. His body temperature was 39.9°C.

Due to shortage of time, a blood sample was taken because of our suspicions of Borrelia infection but the testing was delayed until the following day.

Sammy was initially injected with Coffea praeparata and with PlantaMun to support his defence system.

Testing

- ▶ Next day's testing confirmed the suspected Borrelia infection.

The following programs tested positive:

- ▶ Liver detoxification: 430
- ▶ Lymph oedema: 610
- ▶ Removal of scar interference: 910
- ▶ Temporomandibular joint/ hyoid bone blockage: 530
- ▶ Immune blockage: 953
- ▶ Infection resistance: 951
- ▶ Borrelia: 191

Sammy's body temperature was still 39.7°C on 21.7.07.

He was given the following therapy:

Basic therapy: 130

Follow-up therapy: 430 + 610 as well as 191 (Borrelia, amplification 5, time 4 mins.)

He was also given another PlantaMun injection.

The second bioresonance therapy session took place three days later. By this time, according to his owner, the cat had already been eating again for three days and also

no longer had a temperature. His body temperature was 38.5°C.

Follow-up therapy: 430, 610, 910, 530, 951, 191 (Borrelia, amplification 2, time 5 mins.)

The 3rd and final bioresonance therapy session took place on 31.7.07 and was aimed at generally stabilising the animal. By this time Sammy's behaviour and general state of health had returned to normal.

Therapy

Basic therapy: 130

Follow-up therapy: 610, 910, 530, 951 191 (Borrelia, amplification 1.55, time 5 mins.)

BRT minerals were also oscillated and administered at the same time as well as *Frontline Spot On* for protection from ticks.

According to a recent comment from his owner, Sammy has been in top form since then and has not had any further health problems.

Case 4: Cat Lissy

She was a five-year-old cat who had had problems moving about and a pronounced limp for three weeks.

Testing

- ▶ A blood sample was taken on 30.7.07 and tested immediately. Here too suspected Borrelia infection was confirmed.

Therapy

1st session on the same day:

Basic therapy: 133 (for patients with blocked reactions)

Follow-up therapy:

Toxin elimination: 970

Lymph activation: 201

191 (Borrelia, amplification 9, time 7 mins.)

2nd session on 2.8.07

Follow-up therapy:

as before progs.: 970 and 201

Elimination of interference from internal scars: 900

Energetic fixation: 918

191 (Borrelia, amplification 5, time 5 mins.)

3rd session on 9.8.07

Basic therapy: 130

Follow-up therapy: as before, the amplification for Borrelia was 1.8, time 5 mins.

4th session on 13.8.07

Follow-up therapy: 201, 900, 918

191 (Borrelia, amplification 1.5, time 7 mins.)

A good two weeks after the first therapy session the motor disturbance had all been cured and, according to a recent comment by the family, there have been no further problems which were attributable to this infection.

Case 5: Ferret Max

Was brought in on 12.7.07 suffering from diarrhoea and loss of appetite since the previous day. I treated the gastrointestinal problems with homeopathic injections as usual.

When, two days later, this had still had no effect, I investigated the animal's medical history and discovered that Max, although treated with *Frontline Spot On*, had had several tick bites.

Testing

I then took a blood sample and tested it immediately. The following programs responded:

- ▶ Toxin elimination: 970
- ▶ Renal detoxification: 480
- ▶ Elimination of scar interference: 910
- ▶ Temporomandibular joint/ hyoid bone blockage: 530
- ▶ Borrelia: 191

Immediate 1st therapy:

Basic therapy: 130

Follow-up therapy:

Toxin elimination: 970

Renal detoxification: 480

Removal of scar interference: 910

Intestinal infection: 461

191 (Borrelia, amplification 1.5,
time 5 mins.)

He was also given Nutrical paste to provide vital nutrients.

At the 2nd session on 17.7.07 it was reported that, since then, he had been eating much better in the mornings.

Follow-up therapy:

Renal detoxification: 480

Temporomandibular joint blockage: 530

191 (Borrelia, amplification 1.35,
time 6 mins.)

At the 3rd session on 20.7.07 he was in a good general condition and his appetite was restored.

Basic therapy: 130

Follow-up therapy:

Toxin elimination: 970

Temporomandibular joint blockage: 530

Intestinal infection: 461

191 (Borrelia, amplification 1.15,
time 4 mins.)

One week later at the 4th session on 28.7.07 further improvement in his state of health was observed.

Basic therapy: 132

Follow-up therapy:

Toxin elimination: 970

Temporomandibular joint blockage: 530

191 (Borrelia, amplification 0.85,
time 5 mins.)

On 2.8.07 Max was brought in again suffering from diarrhoea.

He was given a 5th session of treatment.

Basic therapy: 133 for patients with blocked reactions

Follow-up therapy:

Intestinal detoxification: 565

Stomach complaints: 331

Small intestine chronic degenerative: 291

In the subsequent period Max displayed no clinical abnormalities until early March 2008.

Then he was brought in again with motor problems in both hind legs. His pelvic extremities were paralysed atonically although his interdigital reflexes were still partially intact.

The 1st therapy was performed on 7.3.08:

Basic therapy: 131

Follow-up therapy:

Liver detoxification: 430

Spinal blockage: 915

Post-vaccinal blockage: 991

191 (Borrelia)

Bacteria and toxin elimination: 192
(amplification 9, time 1 mins.)

The 2nd therapy was performed on 11.3.08 with the following programs:

Liver detoxification: 430

Spinal blockage: 915

Elimination of scar interference: 900
191 (Borrelia, amplification 1.7,
time 4 mins.)

Bacteria and toxin elimination: 192
(amplification 2, time 1 mins.)

One week later he was already occasionally able to put weight on his hind legs. Unfortunately Max never fully regained the use of his legs.

He died about 6 months ago.

What is remarkable in this context is that, in the course of tackling Borrelia the second time, an ear mite infection was able to spread again. This was then tackled biologically with Auriclean and Aurisan.

Max has so far been the only patient who has had to fight a recurrence of Borrelia infection.

Case 6: Horse Red

On 15.5.08 Red's owner informed me that for 2 days the animal's left foreleg had been extremely swollen from the elbow distally yet the horse was not lame. She had also detected an infestation of biting lice and suspected a fungal infection due to several bald patches.

Testing

As I had been treating Red with bioresonance over the previous two months for a chronic eye condition, I already had a blood sample from him and was able to test straight away.

The following programs responded:

- ▶ Renal detoxification: 480
- ▶ Lymph support: 201
- ▶ Cervical spine blockage: 538
- ▶ Spinal blockage: 915
- ▶ Immunity blockage: 582

In addition several ampoules from the CTT test set for bacteria tested positive:

- ▶ Borrelia
- ▶ Eliminating bacteria and toxins
- ▶ Stopping M protein
- ▶ Cell protection against bacteria

Therapy

Therapy consisted of the following programs:

Basic therapy 130

Follow-up therapy:

Lymph stimulation: 201

Cervical spine blockage: 538

Immunity blockage: 582

Borrelia: 999

Bacteria and toxin elimination: 192

Red was also injected with Lachesis compositum and his owner was given 2 more ampoules to administer later.

Three days later on 18.5.08 I received a call from Red's owner that his leg was totally clear and further therapy was not necessary.

However, 4 days after that, on 22.5.08, the same leg was swollen again following another tick bite.

We arranged for this to be treated straight away using the same programs as in the last session. Only program 915, for the spinal blockage, was no longer needed. Once again only one session was needed to treat the infection.

Finally, I produced some special anti-tick drops using additional ticks which had been collected and program 999 which I left to be used as further preventive treatment.

By administering these drops each day throughout the summer Red remained free from further ticks and subsequent problems.

According to a recent comment from his owner, Red is on top form and healthy.

In summary it can be seen that prompt diagnosis and therapy is crucial for the further development of the disease throughout the body following Borrelia infection.

Particular attention should be directed at preventive measures which should be performed for 8–9 months each year with appropriate remedies.

With Bioresonance I have the option of both using special drops (produced using ticks from the area) and also using reworked anti-tick stickers (e.g. tic clip).