



Sepsis is Killing Newborns Because of Antibiotic Resistance

H&W DISCUSSION

<https://www.newsmax.com/health/health-news/infection-bloodstream-newborns/2023/06/12/id/1123233/>

MB: The Banerjis use Pyrogenium 200 for septic infections. I have also seen Gunpowder (3X to 200C) recommended. It might be good to have both of these remedies, in 200C and maybe 1M. Anne, would you recommend higher?

KR: DL, have you observed this?

DL: Since I have been out of the hospital world since September 2021, I am not aware that that is happening in the US or not. I believe we have the best practices for NICU care in this country. In spite of all that is wrong with pharmaceuticals and the medical community, I don't see how that would be compromised in the last few years. I also don't know everything!

JN from R9: Why are babies being born with sepsis? I worked in OB/gyn and peds for years... never heard of sepsis cases.

DL: Two ways babies can be born with sepsis are 1) untreated group B strep during labor and 2) a labor during which the mother develops a fever from an infection in her uterus or bloodstream. It is more common than you might imagine.

MB: Pregnant women who test positive for Strep B and who want to avoid antibiotics can take the homeopathic Strep B nosode to address the infection before delivery. Anne probably carries it. So does Helios, which carries it under the name Streptococcus Agalactiae.

DL: I have been thinking about how to approach this when we come to the point that we don't know if the mother is positive or negative. And we don't meet her until she is in labor. Treat mom or baby? How much time would have to elapse before the remedy would work on mom? Would I own that remedy and give it to everyone who I would care for as soon as I could and then just hope for the best? Is one dose enough? What potency?

MB: My questions are, how common is Strep B in pregnant woman, and what percentage of babies born to Strep-B-positive women end up developing a Strep B infection? The answers to these questions would likely influence the decision whether, as a matter of course, to give pregnant women and newborns the Strep B nosode. I'm not a medical professional, so I'm just spit balling here. But if the grid were down and I ended up having to help women deliver at home, I would want to have the Strep B nosode and Pyrogenium at hand. If I had never met the woman and didn't have a clue of her Strep B status, I would probably give her a dose of Strep B nosode in the 200C potency. I probably wouldn't give it to the newborn; instead, I'd give one dose of Aconitum 200C (given as a matter of

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course, because labor is "shocking" and stressful on the newborn), and I'd wait to see if he developed a fever or any other symptoms. The second the baby manifested any symptoms, I would match a homeopathic remedy to the symptom. If the baby developed any fever at all, I would probably give one dose of the Strep B nosode in the 200C potency, followed by a dose of Pyrogenium 200C. Then I would wait and watch, re-dosing the Pyrogenium if necessary, and giving any other remedy that might appear indicated. I would probably also want to have Pyrogenium 1M on hand. As I said, I'm spit balling; I'd love to hear what Anne would do in a situation like this.

DL: Thank you for responding. This is helpful. I don't remember percentages. I read some labor and delivery notes from Talitha that said that newborns seem to require 1M potencies at birth and so I was wondering about that in respect to this nosode. I once saw a newborn go downhill one hour after birth with sepsis from untreated group B strep so I have been thinking about that.

MB: Yep, DL; as I'm sure you've seen on the national H&W Signal thread, lots of us are noticing that the 30C and 200C remedies often aren't working as well as they did in the pre-Covid world; and some of us are finding ourselves starting with 1Ms instead of with 30s and 200s when treating some acutes. And if I remember correctly, Anne has told us that she and her homeopathic colleagues are using a lot more 1M, 10M, and even 50M potencies than they did pre-Covid. So maybe Pyrogenium 1M would be where to start if one suspected sepsis in the newborn. It would certainly be worth having on hand. If it were me, I still might start with Pyrogenium 200; but if the newborn's fever was still increasing 15 minutes after the first dose, or if other symptoms developed along with the fever within 15 minutes after the first dose, I'd probably dose with 1M immediately and assess whether additional remedies might be necessary.

DL: Okay. One problem is that a newborn with sepsis will be subtle and not always have a fever. That is why I am wanting to get opinions on how to approach this. If they have anything going on with their lungs, they show it well; but sepsis they can hide very well for awhile. And then they just suddenly look terrible.

MB: How would one diagnose sepsis in a newborn, in the absence of fever?

DL: Poor perfusion and color, low blood pressure, O2 sat [saturation] below 90, lack of reactivity to stimulation, low blood sugar, inability to maintain normal temp are some, usually without signs of respiratory distress like grunting and retracting.

MB: If I were to see enough of these symptoms to suspect sepsis, I would start Pyrogenium 200 or 1M. I would also use Carbo veg 200 or 1M (a top remedy for low O2 sat; hypotension; hypothermia; and weak, sluggish, or stagnant circulation) and possibly Opium 200 or 1M (which addresses lack of reactivity to stimulation, hypoglycemia, and hypotension). Again, I'm spit balling (with the help of a good materia medica and repertory).



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DL: Thank you so much. I really appreciate this. I just didn't know how to approach it myself. I just want to have a plan ahead of time because I know how stressful it can be in the moment. And now I can make sure I have these remedies!

MB: Glad I could help, Donna. Thank you for educating me about sepsis in newborns and what it might or might not look like. I'd love to hear what others would do for newborn sepsis in a grid-down situation.

K from R8: Hi MB and DL. This is such a great conversation. I wanted to chime in before I fall asleep that I was Strep B positive for all 5 of my pregnancies. I had a midwife willing to work with me though; so, after my positive test I would douche with [a certain product] and do a 2nd test; so, if going into the hospital as an emergency I would have a negative test. Because I did not want any of the antibiotics, they would force me to have. However, I did also take the strep B nosode during the pregnancy around 6 months, then before birth and after birth to help prevent any issues. In addition, you can (and I did at least once) douche or wash vaginally with yogurt to get some beneficial bacteria in there. It did not change my test. I got my Strep B nosode from Ellen Bench, also she has a birthing homeopathic kit similar but different from Anne's. I used Ellen's kit for all my pregnancies. Her remedies in it are combos. I have to check (it's in the room with sleeping people so I can't see if one applies to this); however, MB the remedies you mentioned were the same ones I thought of: Pyro, Carbo veg, Op, Aconite, maybe also a big Gelsemium like 1M or 10M... I would like to know how you can tell the fever for the woman while she is in labor? That is a pretty busy time; and if you are not in a hospital being constantly monitored, I guess it would maybe need to just be in the notes for the person assisting to be mindful and look out for it? Also, Arnica 1M in a water bottle after birth, and then added Ellen's Injury combo once I learned of it. It's like the Fab 5 and then some but sipped on them after and healed very quickly.

TB: This is the product my midwife uses. If she is concerned about Strep, she puts some on her glove when checking dilation. I can ask her if she has any other tricks. But thought we should add this to the card. <https://www.nhc.com/skin-cleanser-grapefruit-seed-by-nutribiotic>. She did it with my first pregnancy because she did not know me, but none of the subsequent ones.

JN (R6): Buhner has some thoughts on Sepsis in his book. He uses Echinacea angustifolia in large quantities for Sepsis as well.

DL: Before I would purchase the group B strep nosode I just want to know in what circumstances I would use it if the grid is down.

MB: Great question, DL. The only time I've heard of it used is when there's been a positive test; but in a grid-down situation, testing wouldn't be happening. Are there any symptoms of Strep B infection that can be detected without a test?



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DL: No since it is part of her normal flora. The only circumstance that I can think of is if I meet someone ahead of time who previously had a baby who had group B sepsis. After reading online more data the chance that I will run into that is very small and I don't think I will have a use for that. Your comment yesterday about not being able to save everyone but doing our best is how I feel also.

MB: So it sounds like what most of us would end of doing is (in the vast majority of cases) not giving the Strep B nosode to the mother. Regarding the baby, perhaps the approach should be (1) a dose of Aconitum 200 very shortly after birth; (2) watch like a hawk for any symptoms of Strep B infection/sepsis to develop; (3) if any symptoms develop, then... (4) a dose of Strep B nosode, then (5) Pyrogenium 200 or 1M if there's fever, and (6) other remedies consistent with the symptom picture. Does this sound about right, DL?

DL: Yes. So maybe I should get the group B strep remedy for that situation. The sepsis has 7 days to present.

KS: Another thought would be to give the strep B to the mother before birth, and then again after birth as a prophylactic. Because since you're not necessarily going to have the symptoms, but you know that it can potentially be an issue it would be the same as what you do with any other fear of a disease. At the point what you have the symptoms you would be treating those with homeopathy based on how they present.

DL: I like that idea. Because in my head I don't plan on staying with them for 7 days after the birth in case symptoms appear.

