



**AN EXPLORATION INTO THE STUDY OF THE CORRESPONDING MATERIA
MEDICA REGARDING TRAUMA OF NEGLECT IN CANINES.**

BY

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DECLARATION

I, Oriel Rose Reuben do hereby declare that this dissertation is representative of my own work, both in conception and in execution. Any works used outside of my own has been distinctly acknowledge in the text. The study has not been previously submitted to either The Durban University of Technology or to any other institution.

Signature of student

Oriel Rose Reuben

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Date of signature

Dedication

I dedicate this dissertation to God Almighty. I am grateful for His love, mercy and constant blessings upon my life. It is only through Him that all things are possible.

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Firstly, I would like to thank my parents (Joanne and Mervin Reuben) for their love and support throughout my tertiary studies. Their constant guidance made me the person I am today. Everything I have achieved was because of their mentorship; I owe my success to them both. Thank you Mom and Dad.

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Abstract

This study explores the trauma of neglect presented by canines. It aims to identify the common signs, symptoms and behaviours exhibited, and subsequently to determine the most indicative homoeopathic remedies.

Objectives

The primary objective was to determine signs, symptoms and behavioural patterns of trauma exhibited by canines. The secondary objective was to establish the common themes surrounding traumatised canines. Lastly, the third objective was to conduct a reportorial and thematic analysis to deduce the most indicative homoeopathic remedies.

Methodology

The study was done by means of purposive sampling and snowball sampling from ten suitable research participants. These participants are experienced in the care of neglected and traumatised canines and included members of the Society for the Prevention of Cruelty to Animals (SPCA), veterinarians, and other animal welfare organisations who met the research criteria.

After a brief telephonic conversation to confirm suitability, an appointment was made to meet each participant at a specific animal shelter. Each participant was given a letter with a summary of the study and an informed consent form, which allowed the researcher to observe the canines and interview the participants with probing questions. These interviews were audio recorded.

Data was assessed for common themes using Hycner (1985) data explication process. General and unique themes as well as symptom profiles were repertorised by means of various reportorial methods of MacRepertory (Archibell 2014), which helped to identify emerging homoeopathic remedies.

Results

Data analysis revealed six main themes in traumatised and neglected canines and their correlation to the use of homoeopathic treatment for canines. The results illustrated that canines could benefit from homoeopathic medication to treat physical and mental symptoms, which also lays the foundation for future researchers to further explore this concept.

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Definition of terms

Homoeopathy

Homoeopathy is a therapeutic medical system based on the observation that certain substances (capable of causing disorders of the mind or body) can be used in a dilute form as remedies to treat similar disorders. Samuel Hahnemann (1755–1843) was a German physician who developed the use of the therapeutic principle of similars in 1796; and is better known as the founder of homoeopathy.

The word homoeopathy is derived from the two Greek words *homoios*, meaning like, and *pathos*, meaning suffering. Homoeopathy has the potential to treat any medical condition in any human being of any age. Homoeopathy is safe and effective, which is proven not only by the worldwide support and interest of patients and health professionals, but also by research and clinical trials in related fields of study

Qualitative research

Qualitative research attempts to evaluate phenomena presented by individuals to make sense of their meaning. Qualitative research is generative and is designed to describe and explain the topic at hand; data is often collected through interviews (Blessing and Forister 2013: 159).

Qualitative approach

Qualitative inquiry employs different philosophical assumptions, strategies of inquiry, and methods of data collection, analysis and interpretation (Creswell 2007:303-308). A qualitative approach emphasises the qualities of entities, processes and meanings that are not experimentally examined or measured in terms of quantity, amount, intensity or frequency (Denzin and Lincoln 2000).

In other words, quality refers to something's essence and ambience – the how, what, when and where of it. Qualitative research thus refers to the meanings, concepts, definitions, characteristics, metaphors, symbols and description of things (Berg 2007). The research questions often indicate how social experience is given meaning. The value-laden nature of such an inquiry stresses the relationship between the researchers and subject(s), as well as the situational constraints that shape the inquiry (Denzin and Lincoln 2000).

Qualitative methods

Various research methods and techniques are available for interpretive studies; they draw from phenomenology, hermeneutics, feminism, deconstructivism and may take the form of ethnographies, interviews, psychoanalyses, cultural studies, participant observations and grounded theory, just to name a few. The researcher will select the best method(s) based on the following research question: Will the researcher study individuals (narrative, phenomenology), explore processes, activities and events (case study, grounded theory), or learn about the broad cultural-sharing behaviour of individuals or groups (ethnography)? (Creswell 2007:303-308).

Qualitative data does not look the same as quantitative data. Its form will be a result of the selected methods, which are influenced by a researcher's theoretical orientation. In this way, data is associated with the motivation for choosing a subject, the conduct of study and ultimately the analysis (Berg 2007). Common qualitative data-gathering techniques include interviews, focus groups, ethnography, sociometry, unobtrusive measures, historiography and case studies, among others. Each approach has advantages and limitations, such as level of intrusiveness, opportunity to review during collection process, proximity to natural field setting and amount of bias based on the presence of the researcher. The resulting pieces of data may take the form of text, audio or video files, photographs or field notes.

Law of similars (similia principle)

The law of similars refers to the fundamental principle of homoeopathy, which states that substances may be used to treat disorders whose manifestations are similar to those which they will themselves induce in a healthy subject. The law of similars is expressed as *similia similibus curantur* ("likes are cured by likes") (Swayne 2000:145).

Materia medica

Materia medica describes the nature and therapeutic repertoire of homoeopathic medicines; of the pathology, the symptoms and signs and the modifying factors (modalities), and general characteristics of the patient associated with them, derived from the toxicology, homoeopathic provings and clinical experience of their use (Swayne 2000:145).

Miasm

A miasm is an underlying chronic or recurrent disease state, which may be acquired or inherited" (Gaier 1991: 342).

Modality

A modality is a factor which qualifies a specific symptom and may be expressed as a factor, which either aggravates or ameliorates that symptom. Such factors are associated with times of the day, seasons, locality, position, pressure, perception and touch among others (Gaier 1991).

Nosode

Homoeopathic medicine derived from pathological material that may be of human, animal or plant origin, including micro-organisms, diseased tissue, or the products of disease processes, such as discharges and effusions (Swayne 2000: 145).

Pharmacopoeia

A standard book containing a list of drugs and medicines with information about the sources, habitats, descriptions, collections and identification of the drugs. It also provides directions for their preparation, combining, compounding and standardisation (Hopkins 2000).

Repertory

A repertory is a source used in case analysis to identify the medicine indicated for the patient. This process is called repertorisation. A repertory is a systemic cross-reference of symptoms and disorders to the homoeopathic medicines in whose therapeutic repertoire (materia medica) they occur. The strength or degree of the association between the two is indicated by the type in which the medicine name is printed (Swayne 2000:184).

Repertorisation

The technique of using a repertory to identify the homoeopathic medicines whose materia medica corresponds most closely to the clinical picture of the patient, and from amongst which the most similar remedy (the simillimum) may be chosen (Swayne 2000: 184).

Rubric

The term used in a repertory to identify a symptom or disorder, and its component elements and details as well as the categories of these. A list of the medicines which are known to have produced a particular symptom or disorder in homoeopathic pathogenetic trials (or to have remedied it in clinical practice) is also attached (Swayne 2000: 186).

Simillimum

A term used to describe a specific remedy which best corresponds with the totality of symptoms as experienced by a diseased individual. Such a remedy should be curative or the best palliative remedy in the case of incurable diseases (Yasgur 1997: 234).

Chapter 1: Overview of the study

Introduction and background information

Each year, millions of unwanted dogs arrive in animal shelters after abandonment (Ledger and Baxter 1997). Previous studies have demonstrated that behaviour observed in animal shelters can be related to behavioural problems after adoption (van der Borg, Netto and Planta 1991). The statistics in South Africa for animal cruelty are increasing each year (Fosmire 2013);

Homoeopathic treatment and principles can be applied to humans and animals to treat ailments from diseases to animal behaviour; it is an alternative and complementary therapy that is experiencing a great increase in use. The homoeopathic method involves treatment of the whole individual or patient and is a holistic concept. Yarnall (2011) suggested that homeopathic treatment is more effective than toxic drugs. The homoeopath is able to understand the canine's personality, which assists to distinguish and select the indicated remedies making every case different and unique. Homeopathic treatment can result in significant improvements in pet health.

According to the World Health Organization (2012), homoeopathy is the fastest developing and the second largest system of medicine in the world. Homoeopathy will be equal to the combined medical systems that make up the rest of alternative health care market (*Homeopathy – a gift or con?* 2012)

Problem statement

Historically, animals have been cruelly mistreated and abused; many left abandoned, having to fend for themselves. These incidents increase each year, along with the number of untreated cases (Beirne 1999; Frank 2004; Manning 2013).

According to the American Society for the Prevention of Cruelty to Animals (ASPCA), it is not easy to recognise the signs of animal abuse (Harriet 2009). Aggressive, timid or fearful behaviour does not always tell the whole story of the traumatised animal, because animals may appear to be timid or frightened for many reasons other than abuse. This leads to increasing cases of traumatised animals being misdiagnosed or left untreated, resulting in many animals being left homeless, abused, abandoned or dead (Cain 1983).

Sperling (2013) explained that homoeopathy is a holistic, individual approach to maintaining health and wellbeing. Homoeopathic treatment can be applied to animals with a wide variety of

health benefits (Ernst 2014). Homoeopathy is safe, gentle and effective. It is also suitable for all species; however, a large portion of the South African public is uncertain regarding the understanding of homoeopathy and the use of homoeopathic medicines (Frass 2012). Homoeopathy, as an alternative therapy that may offer great advantages. Some of the disciplines are based on scientifically accepted documentation (Løken 2002). Herbal and homoeopathic remedies for canines are receiving more attention as alternatives and complements to standard veterinary care (Riemer 2020)

Probing questions

The central question in this study was the connection and theoretical proof of the use of human homoeopathic medication in the treatment of canines. Some of the sub-questions included the common signs, symptoms and behavioural patterns of traumatised canines most commonly observed by canine caretakers, and to isolate common symptomatic themes presented by traumatised canines leading to the homoeopathic remedies that corresponded to these themes. A brief discussion was had about each remedy and how it can be beneficial to the case at hand.

Significance of study

This study revealed a strong correlation to the theoretical use of human materia medica in the treatment of abused canines and may assist in describing the role of homoeopathic care in an animal healthcare setting. Due to the lack of research available and insufficient information, it is difficult to promote homoeopathy in animal healthcare. This study aims to broaden the knowledge of homoeopathic treatment in canine care, to reiterate the fact that homoeopathy is beneficial, and to show that there is a future in veterinary homoeopathy.

Limitations of the study

1. There were limited studies available supporting this type of research, which slowed the overall process.
2. Caretakers were hesitant to conduct interviews with the researcher.
3. Many of the caretakers did not know what homoeopathy entailed, which lead to a misunderstanding of symptomology and therefore data leant towards more physical symptoms than mind symptoms.
4. With the high influx of data on symptoms, some of these were still vague, incomplete or indistinct in nature and made it difficult to simulate.

Inclusion criteria

1. The person should be actively and formally involved with welfare and care of canines.
2. The person should have a minimum of five years' experience working with canines.
3. The person taking part in the study must be 18 years or older.
4. The person should have been involved in the care of the specific canine for at least six months.
5. The canine needs to show clear symptoms of abuse of any form as described in the literature review.

Exclusion criteria

1. Organisations and caretakers not in South Africa do not qualify to be part of the study.
2. Persons involved with welfare and care of animals other than dogs.

Outline of the dissertation

Abstract

Chapter 1 - Introduction of the topic

Chapter 2 - Literature review

Chapter 3 - Research methodology

Chapter 4 - Results of traumatised cases of canines

Chapter 5 - Discussion of treatment for traumatised canines

Chapter 6 - Conclusion and recommendations

Conclusion

The data obtained from this study could be used as motivation to consider the integration of homoeopathy into animal healthcare in South Africa. Such a proposal would be aimed at closing the gaps that are caused by the shortage of homoeopathic veterinarians practicing in South Africa, and provide evidence that there is a future for homoeopathy being used in animal healthcare.

Chapter 2: Literature review

Introduction

This chapter will present only the selected literature to give background to the study. This chapter starts by an in depth look at neglected canines and thereafter the behaviour of the neglected canines and symptoms, followed by various studies about homeopathy and homeopathy being beneficial and affordable as an alternate way of treating canines.

Available statistics show that there are hundreds, maybe thousands, of cases related to animal abuse that go unreported (AnimalSake 2017). Animal abuse is a worldwide problem causing an incalculable degree of animal suffering (McMillan *et al.* 2015).

Animal neglect is to deny an animal food, water, or medical treatment, the excessive confinement of an animal, or allowing an animal to live in filth (DeGue & DiLillo, 2009).

Whereas, animal abuse or animal cruelty is non-accidental, socially unacceptable behaviour that causes pain and suffering to animals, or ultimately their death (Ascione & Shapiro, 2001). Animal abuse ranging from purposeful violent behaviour to unintentional neglect, is a long-standing and persistent occurrence within human society (Ascione 2001).

Myminidoxie (2017) The situation in South Africa for homeless, abused, neglected, stray, injured, ill, geriatric and unwanted dogs is dire The animal abuse statistics show a grave and depressing scenario when it comes to the suffering of animals.

Millions of unwanted, abandoned and stray dogs end up in animal shelters and the most common reason for owner relinquishment involves behaviour problems and temperament issues (Bollen and Horowitz 2008).

However, previous research has shown that animals with behavioural problems can benefit greatly from veterinary homoeopathy. While homoeopathy and veterinary homoeopathy of today is highly developed with much greater scope since Hahnemann's original, it has retained its strictly patient-centric approach and is used to bring the patient back to health as rapidly, gently and completely as possible. Homoeopathy differs from conventional drug medicine in that it acts as a healing stimulus rather than attempting to directly counteract symptoms. In individual animals, experience shows that many injuries, acute illnesses, chronic and refractory diseases respond to this where conventional medication may have failed. In groups, herds or flocks of animals, in-water medication can treat large numbers of animals safely, easily, cheaply and effectively (AVMC 2017).

Homoeopathy is currently experiencing a resurgence among mental health clinicians and patients worldwide, in part because of the wide breadth of its many positive effects spanning the psychosomatic continuum. Current evidence strongly suggests benefits over a wide range

of conditions across the field of mental health. It is a safe, viable and cost-effective form of medicine. (Trichard *et al*) compared homoeopathic strategy against antibiotic strategy in the management of recurrent acute rhino-pharyngitis in 499 children aged between eighteen months and four years. Family physicians using homoeopathy had significantly better results in terms of clinical effectiveness, complications, parents' quality of life and time lost from their work (Haller 2009: 1-10).

Investigations into the safety of homoeopathy include randomised controlled trials, observational studies, experimental studies, case reports, systematic reviews, worldwide literature searches, consultation with regulating authorities, and conversations with homoeopathic practitioners. These studies uniformly and consistently demonstrate that homoeopathic treatment is an extremely safe and effective form of medicine. Adverse events, and aggravations from homeopathic treatment have consistently been noted as only "mild and transient", occurring slightly more frequently than those resulting from placebo treatment. Overall, homoeopathy has an excellent safety record and demonstrates many advantages when compared to conventional allopathic treatment (Haller 2009: 1-10).

Numerous studies attest to the value of homoeopathy in the treatment of a wide range of clinical conditions in veterinary medicine. Clinical studies span the management of health conditions in both farm and domestic animals, both in large herds and in individual cases. Positive responses to homoeopathic medicines under these circumstances strongly advocate against theories that the beneficial results of homoeopathy are purely placebo effects. The use of homoeopathy in veterinary medicine is on the forefront and cutting edge of environmentally sustainable, safe and efficient care that demonstrates clinical efficacy in both large and small animals. Homoeopathy appears to be an important medical modality for every member of the animal kingdom, and by extension it is equally important to the field of human health (Haller 2009: 1-10).

Veterinary homoeopathy goes back to the very beginning of the discipline where Hahnemann himself wrote and spoke of the use of homoeopathy in animals. Recently, veterinary homoeopathy has been invoked by medical colleagues in the ongoing argument over the placebo effect and its role in the homoeopathic treatment process. It can be argued that an over-simplistic view has sometimes been taken, and the attitude that any success in the veterinary field automatically validates the specific effects of remedies. However, rigorous investigation of homoeopathy within the veterinary field can be particularly valuable (Saxton 2007).

Neglect of canines

Ascione (2001) reported that cruelty to animals is all too often a part of the landscape of violence. The number of animals that are victims of such abuse is, at present, difficult to estimate. The development of animal abuse assessment and intervention programmes are accompanied by a number of issues related to evaluation and accountability.

A study published in England stated that there is little doubt that people who volunteer or work in animal shelters are there out of concern for the animals. Yet, in far too many cases, their major activity turns out to be killing unwanted dogs and cats. Many research technicians go into the field of animal research to help the animals, yet their day-to-day work ends up being the killing of animals or being complicit in creating pain, distress, disease, and other noxious states demanded by the research enterprise. Equally it has been found that most veterinarians enter the field to treat disease, alleviate pain and suffering, and provide high quality of life for the animals to whom they minister. Historically, veterinarians, like humane society workers, have been called upon to kill unwanted animals for appalling reasons; in what has been called convenience euthanasia (Rollin 2011).

Animals express their distress when they have been neglected and/or abused. There are millions of unwanted, abandoned and stray dogs that end up in animal shelters, the most common reason for owner relinquishment involves behavioural problems and temperamental issues. (Bollen and Horowitz 2008). There are approximately 4.7 million dog bites reported in the USA each year (Sacks, Kresnow and Houston 1996). This makes it critical for animal welfare organisations to make the best possible decisions about the canines in their care.

The first commensal relationship between human beings and the ancestor of the domestic dog has evolved into a form of mutualism, which provides scientific evidence for the fact that the human-animal interaction benefits animals as well as people; positive aspects have been proven for dogs in association with close relationships with humans (Marinelli *et al.* 2007).

From a psychological point of view, the attitudes of modern pet owners towards their pets are hypothesised to be determined primarily by the parental system. Therefore, on the basis of parental behaviour, people often react similarly towards a dog as to a child in analogous circumstances, sometimes eliciting or maintaining behavioural problems in the pet. Even though scientific opinions on this topic vary, it is generally accepted that the human-animal interaction, ranging from negative to pathological bonding, may undermine the life of the dog (Marinelli *et al.* 2007).

Although dogs traditionally were acquired to perform important practical functions, many modern people acquire pet dogs in the belief that the experience will be personally rewarding and that the animal will become a lifelong companion, best friend and protector. The proportion of dog-owning homes is considerable: 40% Australian, 38% American and 34% British households own at least one dog. In South Africa, pet ownership is on the rise due to the growing number of empty-nesters, single professionals, couples who delay having children, or for security reasons. In 2016, there were an estimated 9.2 million dogs living in South African households, ranking as the ninth highest in the world (Yashvir 2017).

Even in today's increasing urbanising society, dogs remain one of the most popular pets. In contrast with the cat population, which has declined since 1994, the canine population has remained relatively constant. The human-canine relationship appears to have been in existence for at least twelve thousand years, and often emotional in nature, many owners feel closer to their pet than to other family members. These findings collectively indicate that the pet can function as a significant family member who often provides emotional support. Current research shows that there are measurable therapeutic benefits associated with successful human-pet bonding, but while most of these relationships are very fulfilling, others fail, resulting in a large number of animals being abandoned or relinquished to animal shelters each year (Marston and Bennett 2003).

A research paper by McMillan *et al.* (2013) looks at the behaviour profiles of sixty-nine dogs with a very strong suspicion of abuse, and compares them to 5239 pet dogs. The abused dogs scored significantly higher on various problem behaviours including aggression and fear towards unfamiliar people and dogs, attachment problems, attention seeking, and repetitive behaviours. At the same time, there was no single profile that reflected all abused dogs. The research is an important first step in understanding the effects of abuse on domestic dogs. Animal abuse is a worldwide problem causing an incalculable degree of animal suffering. A better understanding of the characteristics of abused animals is essential for developing the most effective interventions at every chronological point: before, during and after the abuse occurs.

McMillan *et al.* (2013) also stated that dogs may be affected differently by abuse due to factors such as their personality, the characteristics of the abuse, their age at the time, and how long it goes on for. Scientists asked people with dogs, for which a history of abuse is suspected or known, to complete an internet survey. Out of the 1122 people who responded, 149 cases were

selected, and the responses examined by a team of five experts. Only when at least four of the experts agreed that the dog had been abused, was it selected for the study, which was to ensure that the evidence of abuse was sufficiently strong.

Although the dogs in both samples had been rehomed at least once, it is possible that the abused dogs had changed homes more, and this may have contributed to some of the increased problems. Separation anxiety is more common in dogs rehomed via shelters than in those who have always been in the same home throughout their life. This draws parallels between these results and other research which looks at the effects of abuse on children. Attachment problems are known to be more common in children who have suffered abuse, and the study found them to be more common in abused dogs also (McMillan *et al.* 2013).

McMillan *et al.* (2015) stated that abused dogs demonstrated higher levels of the following twelve characteristics:

1. Dog-directed fear
2. Dog-directed aggression
3. Stranger-directed fear
4. Stranger-directed aggression
5. Bizarre repetitive behaviours
6. Nervous on stairs
7. Rolling in faeces
8. Hyperactivity
9. Persistent barking
10. Shadow/light chasing
11. Tail chasing
12. Urine marking

Of these characteristics, seven were identified as being among the most common behavioural reasons people report for relinquishing their dogs to animal shelters. These include the first four listed above as well as tail chasing, hyperactivity and persistent barking. If the risk factors for abuse are similar to those for animals that are relinquished to shelters, campaigns could be designed to simultaneously prevent both abuse and surrenders. However, the data is correlational, so it is not possible to interpret what is a risk factor for abuse and what the effect of abuse is.

The Canine Behavioural Assessment and Research Questionnaire (C-BARQ) was used to assess dogs' temperaments. One limitation of the study is that the samples were self-selected, so the owners of the abused dogs knew the purpose of the research. The secretive nature of abuse makes it difficult to investigate, but the report ends on an optimistic note. In a follow-up survey of 53 out of 69 of the dogs, 96% of the new owners said they were "very satisfied" with the adoption of their canine friend. This shows that abused dogs can still be suitable for adoption and can still develop a satisfying bond with a new owner, despite what they have been through.

Myminidoxie (2017) suggests that animal cruelty is not that simple to recognise. Aggressive, timid or fearful behaviour does not always tell the whole story of the traumatised animal. Animals may appear to be timid or frightened for many reasons other than abuse, which leads to an increasing number of cases of traumatised animals being misdiagnosed or left untreated. Many animals are left homeless or abused, and most of these are dead or abandoned canines.

A regional shelter study (Salman *et al.* 1998) identified seventy-one reasons for companion animal relinquishment, the most prevalent being accommodation issues and behaviour other than aggression and lifestyle. Further analysis of this data by (New Jr *et al.* 2000), explored those relinquishments where a change of accommodation or moving was the primary reason for relinquishment. Although moving was cited as the primary reason for relinquishment, behavioural issues such as hyperactivity, noisiness, fearfulness and house-training problems were commonly reported as occurring in the month preceding relinquishment.

DiGiacomo, Arluke and Patronek (1998) conducted one of the most complete investigations of relinquishment from the relinquisher's perspective, and has found that shelter intake documents and procedures do not allow for very complex recording of the reasons given for relinquishment. This study found that the most commonly given reason for relinquishment is the presence of problem behaviour.

Most shelters were built many years ago, and funding limitations meant that little attention was paid to anything other than physical containment. It is now known that housing design features can have an important impact on the welfare of many animal species, including canines, as can other aspects of the environment and social milieu (Hubrecht 1995).

Baxamusa (2016) shows that there are two types of cruelty inflicted on animals by humans: passive cruelty and active cruelty. Passive cruelty involves cases of neglect and here it is generally a lack of action to prevent pain and suffering of the animal. Examples of this type of cruelty are starvation, dehydration and improper shelter. Baxamusa (2016) explains that active

cruelty is a malicious act where the abuser intentionally harms the animal; the animal is beaten, whipped, burned or even branded by the abuser. Statistics based on media reports related to animal cruelty cases reveal that around 1880 animal abuse cases were reported in 2007. Dogs were involved in 1212 of these animal cruelty cases (Sophia 2014). An example of such cruelty is when several dogs are kept together under poor conditions to produce puppies, which are then sold off as purebred dogs. Even well-known breeders are guilty of this crime (*ASPCA: How to recognize cruelty* 2017). In the year 2000, it was reported that over 7600 greyhound puppies and 11 400 adult greyhounds were killed, because they were not fast enough for dog races (Baxamusa 2016).

From a legal point of view, the care of animals in South Africa is regulated by three acts: the “Performing Animals Protection Act” of 1935, the “Animal Protection Act” of 1962 and the “Societies for the Prevention of Cruelty to Animals Act” of 1993. This third act governs the organisation and management of animal welfare associations in South Africa. The responsibility for the first two acts (of 1935 and 1962) was transferred to the National Department of Agriculture (DoA) in 1997. Having assumed the responsibility for animal welfare, the DoA then reviewed legislation present in New Zealand and Australia.

Together with the input of a national workshop, and a wide variety of reactive issues relating more to cruelty than proactive animal care, it became clear that South Africa needed:

- a general policy focusing on the care of animals
- specific guidelines, codes, norms and standards to monitor and control the many activities involving animals, including those of animal care organisations
- a National Animal Welfare Advisory Committee (NAWAC)
- an animal care act.

Behaviour of neglected canines

Fox (1976) examined behavioural patterns and emotional needs of humans and animals, concluding that humans are responsible for creating harmony and unity of all living creatures in the natural world. As post-traumatic stress disorder (PTSD) occurs in different ways for dogs, it can only be hoped that early diagnosis will prevent more cases of canine PTSD from being untreated. Some canines develop behavioural problems, incur life-threatening physical injuries, or gain hypercathexis if not properly diagnosed; therefore, being untreated could lead to suffering and possibly, death (Khoshnegah, Azizzadeh and Gharaie 2011).

The term “behaviour problem” is used to describe behaviour shown by an animal that is unacceptable to the owner; these problems are common in the domestic dog population, and it is estimated that up to 90% of dogs may exhibit this type of unfavourable behaviour. The

chances of a dog developing a behavioural problem depends on multiple factors that includes its breed, age, sex, castration status, diet, relationship with owners, mode of acquisition and time spent on specific daily activities (Khoshnegah, Azizzadeh and Gharaie 2011).

However, in non-clinical or “normal” samples, major behavioural problems tend to be relatively rare. In contrast, the most commonly observed behavioural problems in clinical samples are aggression, destructiveness, fearfulness, excessive barking and marking (Khoshnegah, Azizzadeh and Gharaie 2011).

According to Yin (2009) in the current context, the incidence of dog bites is to be expected. Research shows that if an owner is aggressive towards their dog, its response will also be aggressive. Herron, Shofer and Reisner (2009) explained that the major reason why dog owners take their pet to a veterinary behaviourist is to manage aggressive behaviour. This study demonstrated that many confrontational training methods, such as staring down at dogs, striking them, or intimidating them with physical manipulation, do little to correct improper behaviour, and this may even elicit aggressive responses. Veterinary behaviourists, PhD behaviourists and the American Veterinary Society of Animal Behavior (AVSAB) – standing by its position statement on the use of dominance theory in behavioural modification – attribute undesirable behaviour to inadvertent rewarding of such behaviour, and the lack of consistent rewarding of desirable behaviour.

Dogs express physical signs of distress, such as diarrhoea, gastric upsets or epileptic seizures in response to anxiety and tension experienced within the family (Cain 1983). Trauma or stress during neurodevelopment in canines may also result in structural and functional deformities of the central nervous system, and therefore have far more serious consequences than stress experienced later in the life of these same canines (Caldji, Diorio and Meaney 2000).

Dog owners presenting their pets to veterinarians for behavioural problems have often attempted a variety of training methods prior to their visit, because many owners do not initially seek advice from veterinarians (Wynne, Udell and Lord 2008). They are likely to have relied on other resources for information and advice on behavioural modification techniques, but many interventions involve confrontation or positive punishment which can be threatening, sometimes leading to defensive aggression which can put owners at risk of injury (Herron, Shofer and Reisner 2009).

Studies on canine aggression in the last decade have shown that this and other behavioural problems are not a result of dominant behaviour or the lack of the owner's “alpha” status, but rather a result of fear (self-defence) or underlying anxiety problems. Many dog owners, in their attempts at behavioural modification, are faced with recommendations that often include aversive techniques, which can elicit an aggressive response in their pets because these

techniques can increase the fear and arousal of a dog, especially in those that are already defensive (Herron, Shofer and Reisner 2009).

Behavioural problems, including aggression, are the most common reasons that dogs are relinquished to shelters (DiGiacomo, Arluke and Patronek 1998). In order to screen out dangerously aggressive dogs, identify the need for behavioural modification, and successfully match dogs to new homes, shelter organisations first need to collect information about the dog's behaviour (Dowling-Guyer, Marder and D'arpino 2011). A masked control study by Bennett *et al.* (2012) evaluated a group of dogs to determine if the results of two behavioural assessments detected aggression in dogs that had a history of aggression. The study was conducted by means of a validated questionnaire for measuring behaviour and temperament traits in dogs. Groups of dogs with or without a history of aggression were identified from owner-completed questionnaires for sixty-seven dogs. Dogs that had a maximum score of no greater than one, for any question comprising aggression factors, were placed in the "no-aggression" or "low-aggression" group. And dogs that had a maximum score of two or higher on any question were placed in the "moderate" to "severe" aggression group. Two behavioural assessments, Meet Your Match (MYM)TM Safety Assessment for Evaluating RehomingTM (SAFERTM) and a modified version of Assess-A-Pet (mAAP), were administered to each dog in random order by assistants masked to the dogs' behavioural histories (Bennett *et al.* 2012).

In its simplest form, a temperament test evaluates a behavioural response to a specific stimulus at one time in one environment by an individual dog. Test results are then used to predict how that same animal may respond in a similar situation based on its response in the testing situation (Taylor and Mills 2006). The goal of these tests in a shelter setting are firstly to predict an aggressive response, which would allow the shelter to prevent placing potentially dangerous dogs in new homes, and secondly to identify dogs with potentially treatable and manageable behavioural problems (Haverbeke *et al.* 2009).

Behavioural assessments are tools commonly used in shelters to gather information about incoming dogs, however caution should be used when implementing behavioural assessments. The results should be used in conjunction with other information to create a global picture of the dog's behaviour. The information can also be used to strategise the management of potential problems that may arise in the new adoptive home, used to make informed disposition decisions for that pet, and to counsel prospective adopters regarding reasonable expectations of the dog's behaviour, thereby strengthening the developing human-animal bond (Bennett *et al.* 2012).

Animal shelters and other organisations caring for and placing dogs regularly use behavioural test batteries to evaluate a dog's behavioural tendencies in order to make safe and appropriate

placements. These behavioural traits are driven in part by personality; therefore, test batteries should be able to identify patterns of behaviours which reflect elements of canine personality. Dowling-Guyer *et al.* (2011) investigated behavioural traits detected in shelter dogs by means of a behavioural evaluation. The study explored the ability of one behavioural test battery currently used at shelters by examining the results from 668 behavioural evaluations of shelter dogs. Three components, fearfulness, friendliness and aggressiveness, were readily interpretable and consistent with the other research. The fourth component was unique and seemed to reflect a neutral or anticipatory state. Results provided evidence that this test battery does indeed detect elements of canine personality, which may enable identification of stable behavioural tendencies, and so facilitate placement decisions (Dowling-Guyer, Marder and D'arpino 2011).

The Canine and Feline Behaviour Management Guidelines of Hammerle *et al.* (2015) were developed to provide evidence-based information to ensure that the basic behavioural needs of feline and canine patients are understood and met in every practice.

More cats and dogs are affected by behavioural problems than any other condition. Behavioural problems result in animal suffering, relinquishment and adversely affected staff morale. These guidelines use a fully inclusive team approach to integrate basic behavioural management into everyday animal care using standardised behavioural assessments; create a low-fear and low-stress environment for patients, staff, and owners; and create a cooperative relationship with owners and patients so that the best care can be delivered. The guidelines' practical, systematic approach allows veterinary staff to understand normal behaviour and recognise and intervene in common behavioural problems early in development. The guidelines emphasise that behavioural management is a core competency of any modern practice.

The guidelines are as follows:

1. Integrate basic behavioural management into all aspects of clinical practice so that every patient gets the best hands-on care in a low-stress environment.
2. Understand age-specific normal and abnormal behaviour for dogs and cats to ensure developing or existing behavioural problems are recognised and addressed.
3. Promote routine assessment of behavioural development and changes in behaviour through the use of standardised assessment tools.

4. Provide owners with guidance regarding the most common canine and feline behavioural conditions so clients seek help early (if needed).
5. Create cooperative patients and superb client-veterinarian-patient relationships so the patient and client can benefit from a lifetime of the best possible care.
6. Impress upon the entire veterinary healthcare team the importance of making behavioural management a core competency of the practice.

If animals experience early stress such as neglect, abuse, isolation, nutritional compromise, environmental instability, or their mothers experience gestational stress, it's likely that there will be adverse effects on early behaviour. Animals learn to better respond to social and physical environments during specific neurodevelopmental life stages. Responses to stimuli during those periods may be accurate predictors of future behaviour. If dogs and cats are deprived of appropriate exposure during critical sensitive periods, they have an increased risk of developing problematic behaviour (Hammerle *et al.* 2015).

Aggression occurs any time an animal growls, snarls, snaps or bites; fear is one of the most common causes of aggression. Punishment should not be used in aggression cases, because it increases the risk of bites and aggravates this behaviour. Treatment of the underlying cause is key and risk assessment is essential for determining medication. Benzodiazepines (BZDs) can have occasional side effects that render some animals extraordinarily sedated and at risk for self-trauma, while other animals are remarkably aroused and also at risk for self-injury. It is impossible to know if a particular animal will experience undesirable effects, profound changes in appetite, vomiting, diarrhoea that is not transient, and any new problematic behaviours or behavioural changes. Since there are few controlled studies for other medications or indications, most medications are used on an extra-label basis (Hammerle *et al.* 2015).

Signs and symptoms of abuse

The presence of a "sign" does not prove that the animal has been abused. However, when these signs appear repeatedly or in combination, the possibility of animal abuse should be considered.

According to an article on ColoradoLinkProject (2013), the following list contains clear signs of animal cruelty or neglect:

1. Extremely thin or emaciated animals.
2. Wounds that are open or recently healed.
3. Injuries that appear to be ongoing or untreated.

4. Signs of multiple wounds or injuries.
5. Limping, inability to walk or stand normally.
6. Neck wounds from embedded collars or restraints.
7. Skin or fur that is infested with parasites, fleas, ticks.
8. Skin conditions that have been untreated (often hair loss, rashes, dryness-scaling).
9. Matted fur, excessively dirty coat, overgrown nails (due to inadequate care and grooming).
10. Heavy discharge from eyes or nose.
11. Observation of an animal being struck or physically abused.
12. Observation of deliberate animal fighting.
13. Extreme lethargy, disorientation or confusion.
14. Behavioural problems (especially aggression).
15. Dehydration.
16. Obesity.

The four recognised categories of child abuse, as defined by Seksel (2004), could also provide a useful basis on which to classify cases of animal abuse. These categories are as follows:

1. The identified features of physical non-accidental injury in animals include bruising, burns, lacerations, stab wounds, avulsed nails, conjunctival haemorrhage, epistaxis, haematomas, retinal haemorrhage, fractures, ligament damages, spinal injuries and associated neurologic dysfunction, diaphragmatic rupture, brain trauma and paraplegia.
2. Sexually abused animals may present with injuries of the sexual organs, rectum or anus. These can involve lacerations of the organs; ligatures applied to the sexual organs.
3. Emotionally abused animals may show similar signs as emotionally abused children. These signs may be fearful behaviour in the presence of their owner, cowering in their presence, have anxiety disorders, present with panic attacks or show extremes in behaviour.
4. Neglected animals usually present in a very poor physical condition. They may be emaciated, have external or internal parasites, fly-blown lesions or faecal matter around the anus and be generally matted and unkempt.

The fact that we are able to compare the behaviour of neglected or abused animals to that of human children gives us an interesting insight into the psychological and physical similarities between humans and canines (Seksel 2004).

Homoeopathy in veterinary medicine

Homoeopathy is a medical method that respects the knowledge of the body. It is a method that uses medicines to arouse the body's own immune and defence systems in initiating the healing process. It is a system of medicine that is extensively recognised to be harmless. Therefore, it can hypothetically be very effective in treating new types of ailments. As a primary-contact consultant, a homoeopath brings about all aspects of patient healthcare, diagnosis, cure and management, together with referrals and communication with other healthcare professions and organisations.

(Epstein and Hardy 2011) stated that the American Veterinary Medical Association (AVMA) recognised Complementary and Alternative Veterinary Medication (CAVM) as a category of practice meriting separate guidelines. Veterinary homoeopathy falls under the AVMA definition for CAVM. The guidelines apply the same standards to all practices of veterinary medicine and the AVMA believes that all veterinary medicine, including CAVM, should be held to the same standards.

In spite of the differences between mainstream and complimentary veterinary medicine, there is a large number of cases that documents the fact that homoeopathy does offer the potential for veterinarians to expand the realm of therapy for their patients. In the past twenty years, with the rise of veterinary homoeopathy in the United States and Canada, and with the growth of veterinary homoeopathy in South and Central America, Europe, Asia, Australia, New Zealand, Africa and the Middle East, a highly trained and experienced crop of veterinary homoeopaths is emerging (Feinman 2017).

The practice of homoeopathy is currently under great scrutiny in both the medical and veterinary fields, and no other form of treatment appears able to polarise opinions to such an extent (Hill *et al.* 2009). Conventional medical practice dictates that the principle on which homoeopathy is based has no grounding in science, and any response to treatment is discounted as pure placebo effect. However, trained medical and veterinary homoeopaths maintain that their system, although not fully understood from a scientific point of view, yields genuine therapeutic results, often after conventional medical treatment has failed (Seksell 2004).

Two major problems prevent homoeopathy from gaining widespread acceptance. The first, and most compelling reason for disbelief, is the nature of the remedies. To produce standard homoeopathic medications, the source material is diluted repeatedly, often to such an extent that no molecules of it are likely to remain in the final solvent. The second reason is that evidence from clinical trials to demonstrate the efficacy of homoeopathic remedies is extremely

limited, particularly in veterinary medicine, and often hampered by poor trial design. Most homoeopathic prescribing is based on two hundred years of accumulated clinical experience, and reported outcomes can be greatly influenced by placebo and other non-specific effects, random variation, observer bias, regression to the mean and spontaneous recovery. Such obstacles may appear insurmountable, leading some authors to conclude that the practice of veterinary homoeopathy should cease (Hill *et al.* 2009). However, both of the above problems are in the process of being addressed by the scientific community.

Although there is still no plausible mechanism for a pharmacological action of homoeopathic remedies, a fixation on the fundamental problem of “Avogadro’s number” may be inappropriate. There is a lack of clinical evidence for the efficacy of homoeopathic remedies compared to conventional medicines. To date, comprehensive meta-analyses of placebo-controlled trials in human medicine have, in general, suggested that homoeopathy is superior to placebo, but have not demonstrated specific conditions for which homoeopathy is clearly efficacious (Ernest 2014).

Reviews focusing on specific medical conditions have reported both positive (Taylor and Mills 2006) and negative (Ernest 2014) conclusions. In veterinary medicine, there have been few studies to evaluate treatment-specific effects of homoeopathy, and most have addressed herd problems in farm livestock (Hektoen 2005; Mathie *et al.* 2010).

To date, controlled trials of homoeopathy published in the veterinary literature have not shown significant effects (Hektoen 2005; Cracknell and Mills 2008; Hill *et al.* 2009), but beneficial responses have been reported elsewhere.

One obstacle to the performance of clinical trials in veterinary homeopathy is the holistic approach; the whole patient is treated on the basis of the individual signs and constitutional characteristics, rather than just a specific disease. This makes the monitoring of appropriate outcome parameters difficult. However, if veterinary or medical homoeopathy is to gain acceptance by conventional clinicians, it is essential that specific conditions are identified that may be helped by this mode of therapy (Hill *et al.* 2009).

Homoeopathy, as with other alternative therapies, may offer great advantages. Some of the disciplines are based on peer-reviewed research, while others, particularly homoeopathy, are missing such documentation. The justification of including alternative therapy in animal treatment is widely discussed and research into the alternative treatment of animals is greatly

needed, in particular to evaluate therapeutic methods which are in extensive use without any documented effect (Løken 2002).

Homoeopathy includes some basic characteristics and theories that seem very peculiar or unfamiliar to someone educated in a traditional veterinary school. Homoeopathic medicine is composed mostly of an extract or solution that is serially diluted, 1:10 or 1:100 between 10 to 100 times (10^{10-100} ; 100^{10-100}). The higher the dilution, the stronger the effect. To enhance the remedy (which is what homoeopathic medicines are mostly called), it is important that each dilution step is followed by a particular and vigorous shaking, so-called succession (Løken 2002).

How a homoeopathic remedy induces its therapeutic effect is unknown, although there are some theories. One of which proposes that the energy in the patient is balanced or improved. In general, the use of a remedy that effectively contains no substance does not induce an allergic reaction or other side effects. There are no residue problems, no withdrawal symptoms for the product and no environmental pollution. In addition, the remedies are relatively cheap (Løken 2002).

Given these advantages, the acceptance and confidence in homoeopathy should depend on the acceptance of a proven effect. It should be obvious that veterinarians and doctors have to work according to scientifically documented principles and methods of therapy. However, when so-called academic truths and theories differ from many people's experiences and honest conviction, criticism should be tempered (Løken 2002).

There are currently around 80–100 veterinary surgeons in the United Kingdom who prescribe homoeopathic medicines in first-opinion practice. There has been positive research findings in veterinary homoeopathy that have been reported in the peer-review literature, but these are currently limited to non-controlled studies and to randomised controlled trials (RCTs) focused mainly on farm livestock (Mathie *et al.* 2010).

Elliott (2001) claimed that homoeopathy has been described as a medicine that can only be prescribed on the basis of the individual symptoms shown. The aim of his study was to determine whether a standardised approach, using homoeopathically prepared remedies, is a valid system of therapy for a disease. The overall success rate for the therapy was 80% and treatment was found to be inexpensive and easy to administer with no side-effects, therefore making treatment more available to the pet owners, which he concluded can only be good for animal welfare. Hielm-Björkman *et al.* (2009) reported that a homoeopathic combination preparation (HCP) for canine osteoarthritic pain was evaluated in a randomised, double-controlled and double-blinded clinical trial. The intake of extra non-steroidal anti-inflammatory

drugs was also evaluated. The results indicated that the HCP Zeel® was beneficial in alleviating chronic orthopaedic pain in canines.

In another study by Cracknell and Mills (2008), a double-blinded placebo-controlled study was conducted to determine the efficacy of a homoeopathic remedy for fear of firework noises in dogs. Seventy-five dogs that showed a fear response to fireworks participated in the clinical trial to assess the efficacy of a homoeopathic remedy for the alleviation of their behavioural signs.

Yarnall (2011) suggested that homoeopathic treatment is more effective than toxic drugs. The homoeopath is able to understand the dog or cat's personality, which assists in distinguishing and selecting the most indicative remedies in every unique case. Homoeopathic treatment can result in significant improvements in pet health (Vaknine 2014). Some remedies take longer to work than others, but continued use of these remedies can improve the health and functioning of an animal. Although there is no formal cure for traumatised canines with behavioural problems, owners are advised to be patient in treating canines with irrational fears and phobias (Rawlinson 2015).

Clinical research in veterinary homeopathy has some inherent obstacles. The interview-based repertorisation is limited to objective parameters and interrogations of the animal owners. Only a few drug provings in animals exist and few remedies are listed in the materia medica. Most of the time, information from repertories and materia medicas written for humans are used to find the matching homoeopathic remedy for the animal, an approach that is questioned by some scholars.

In 1999 a research project was implemented at the Norwegian School of Veterinary Science on the scientific evaluation of homoeopathic treatment of infections in production animals. In the same year the Norwegian Research Council, through the Norwegian Centre for Organic Agriculture (NORSØK), has funded a four-year doctoral programme, in which this research project is included.

The project is planned in accordance with high scientific standards and international demands for controlled clinical trials in veterinary homoeopathy and represents the first steps in scientific evaluation of homoeopathic therapy for animals (Løken 2002).

A study done by Hill *et al.* (2009) was the first in small animal veterinary medicine to combine conventional diagnostic approaches with individualised homoeopathic prescribing. The aim was to design a pilot study that could be interpreted by both homoeopathic practitioners and conventional veterinary clinicians, which in turn could be used to inform the design of a larger randomised controlled trial. The design was unusual in the way that only dogs showing a

substantial response to the initial treatment were put forward to a randomised controlled phase. This departure from standard clinical trial design, in which blinding, randomisation and a control group would be used from the outset, was examined for a number of reasons.

Firstly, the study relied on true homoeopathic prescribing principles, which might have involved a number of changes in the remedy before optimal treatment was established. Secondly, the time taken to effect a clinical response may have been longer with homoeopathic remedies than with conventional drugs, so the study allowed a degree of flexibility to accommodate this. Thirdly, the dermatologists involved needed to observe the progress of the dogs in an open study to gain a greater understanding of the outcome in a typical clinical setting. This study identified twenty dogs with atopic dermatitis that were successfully treated with homoeopathy (Hill *et al.* 2009).

Treating animals can be difficult because they are unable to communicate with us through speech. Regardless of this there is always a way to overcome this obstacle. As Homeopaths it is our responsibility to acquire as much information from a patient in order to provide the best possible treatment. Medical professionals have been treating patients that are unable to communicate properly for years. We can learn from the methods of treating patients that are mentally challenged or infants and used them in veterinarian homeopathy.

Treating children has always been a challenge for the homoeopath. Infants cannot speak for themselves, which makes it impossible to take a written case of their complaints on a one-to-one basis. This means that we must depend on the mother, father or principal caregiver to describe the symptoms of the child (Sikorski 2010).

In Hahnemann's *Organon of Medicine*, different approaches to case-taking are found. Even if Hahnemann says that he only proposes general instructions, the truth is that he proposes many ways to approach a case. One of the most important things mentioned is that homoeopathic practitioners must remain unbiased, non-judgmental and non-critical during observation and interactions, especially in the case of small children. Homoeopaths need to be able to relate to infants, not only the parents. Observation is usually correct if homoeopaths are unbiased and calm, observing carefully with complete knowledge of repertory and homoeopathic symptoms. Carefully observe as the child interacts in their daily activities as well as interacting with their parents or caregivers (Sikorski 2010).

In the clinical assessment of infants, pre-schoolers and families it is explained that the child develops internal working models of relationships from the quality and nature of early experience with caregivers, which influences ongoing social and emotional development (Mares and Graeff-Martins 2012).

In the International Association for Child and Adolescent Psychiatry and Allied Professions (IACAPAP) *e-Textbook of Child and Adolescent Mental Health*, a comprehensive assessment is based on an understanding of the developmental tasks of the period (period referring to the time that a patient is unable to communicate for themselves.) and observations of the child-caregiver relationship. The assessment includes the following points:

- A clinical assessment interview in which various family members or caretakers are interviewed.
- An observation of child-caregiver/child-parent interaction and their relationship.
- A developmental assessment of the child.

The essential aim of assessment is to identify and understand the problems a family faces, which then helps them to explore the developmental potential of their child. This is mutually beneficial, because information obtained during the assessment may also be used for research in child development.

By the same token, animals can be treated with the help of a similar assessment. Canines can develop an internal working model of relationships from the quality and nature of their owners (Cain 1983).

This concept would theoretically allow a homoeopath to gather information about behaviour, health and lifestyle of the canines from the owner or caregiver. Therefore, the researcher of this study will utilise this type of interview process with the canines' caretakers to obtain all the necessary information regarding case history and current ailments.

Rush (2004:41-45) expands the use of veterinary homoeopathy and asserts that human *materia medica* and remedies may be used in the treatment of animals in correlation with known remedies. A simple example from William Boericke's book is the *Euphrasia officinalis* remedy, also known as Eyebright, which is used to treat many eye infections in humans (Boericke 2004).

Euphrasia officinalis, described by Kent (1984), treats symptoms of the eye, such as copious lachrymation and burning in human *materia medica*, Rush (2004:41-45) has also mentioned it as the top three remedies for an eye infection in which he treated canines. Another example of

human materia medica is when there is inflammation of the lungs. Rush (2004:41-45) describes the dog as having painful panting. The dog remains standing with the forelegs widely separated, seldom lies down and has laborious breathing. The principal remedies here would be Aconite, Phosphorus, Belladonna and Bryonia. But of these four, Aconite (*Aconitum napellus*) should be given first to aid with lung inflammation in the canine. Aconite is generally indicated for early stages of rapid-onset croup and upper respiratory infections in humans, which has similarities in canines (HomeopathyPlus 2014).

These are just two of many examples where the materia medica for humans can be directly translated and applied to canines. It is hoped that academic institutions will eventually employ qualified professionals trained in veterinary homoeopathy so that the evidence pyramid for this field can begin to grow.

Conclusion

The practice of homoeopathy, as a form of complementary medicine, has been developing over time and is a less invasive type of medication available to humans and animals. In recent times, pet owners have shown an interest in natural and homoeopathic ways of treating their animals, and the demand for homoeopathy is increasing as people are becoming more aware of the benefits of homoeopathic treatment. Due to the lack of research available, there is limited information to help promote homoeopathy in animal healthcare. This study aims to widen our understanding of the use of homeopathic remedies with regards to canine care. This will be done by conducting a qualitative exploratory study of the corresponding materia medica regarding trauma and neglect in canines.

Chapter 3: Research methodology

Introduction

This chapter outlines the research methodologies applied to this study. A qualitative design was used to answer research questions as it was well-suited to obtain patient perception and experience of treatment and care within a healthcare system (Holloway and Galvin 2016:95). A qualitative study establishes a pattern (or theory) of the phenomenon under study, and is useful in acquiring knowledge and insight in an area of interest about which little is known (Creswell 2007:303-308). Qualitative research focuses on the subjective experiences of a social reality; it is an inductive and exploratory method which assimilates and analyses contextual data from participants, and is able to uncover meaning (Silverman 2006:100-101).

Research design

Recruitment process

By means of purposive sampling a minimum of ten suitable research participants were selected for participation. These candidates included the canine in question as well as the caretaker; thus, a pair counting as one participant. The reasoning behind this is that the research attempts to create a scenario where the canine is treated as a patient. The caretaker is required because they are able to communicate behavioural patterns, signs and symptoms that occur on a daily basis in the life of the canine. This creates an environment similar to a normal consultation with a human, except the caretaker acts as “translator” for the canine. Therefore, the research did not explore general signs and symptoms for neglected canines, as previous literature had done, but looked at each participant individually.

The final sample size was dependent on the point at which data saturation was reached. After interviewing around eight participants, the data was starting to repeat itself. Once eleven participants were interviewed, all the relevant data was collected and it was surmised that further interviewing would have been immaterial.

The caretakers were experienced in the care of neglected and traumatised canines and included members of the SPCA, veterinarians, and other animal welfare organisations. The first step was to ask for permission to conduct the research (Appendix B), which included a brief explanation about the interview and a summary of the research (Appendix A). Once consent was obtained, each animal welfare organisation was then informed about the interview, after which times and dates were scheduled.

There were ten probing questions (Appendix C), but the researcher was allowed to follow any line of questioning that proved relevant to the study, such as other general questions specific to the canine, rather than being limited to the questionnaire. These interviews were continued until the researcher felt that no more data could be extrapolated. Therefore, interview times and questions differed among participants. Saturation was reached when similar themes and symptoms started forming.

Sampling method, size and distribution

The study used purposive sampling as the method to recruit participants (Etikan 2016). Purposive sampling can be described as a non-probability sampling method, which means that the researcher relied on her own judgement and expertise to determine the appropriate participants. Some of the considerations included the experience of the caretaker and the type of trauma the canine had experienced. The sampling size depended on the saturation point, which was reached at eleven participants. The distribution of the participants was in KwaZulu-Natal, focused in and around the Durban area.

Interview process

The researcher interviewed participants individually, which included members of the SPCA, veterinarians, and caretakers of animal welfare organisations. There were ten main questions following the format of a simple questionnaire (Appendix C), but the researcher was allowed to change or branch off into any line of questioning that seemed beneficial to the research. The interview process took the form of a semi-structured interview: the researcher asked the main questions and if there was a need for elaboration from the participant then this was allowed. The researcher also asked additional questions when she deemed it necessary, which resulted in a unique interview for each participant.

Types of questions

Participants were audio recorded and data was assessed for common themes with respect to behaviour, signs and symptoms. General and unique themes as well as symptom profiles were repertorised using various repertorial methods of MacRepertory to identify the emerging homoeopathic remedies.

Procedure

The study required the researcher to gain the trust of eleven canine shelters and/or welfare organisations to grant her the opportunity to successfully conduct her research through interviews and questionnaires.

Data saturation indicates that everything of importance to the agenda of a research project has emerged in the data; this process is also understood as sampling to redundancy (Holloway and Galvin 2016: 146). Sufficient data is generally collected within six to twelve interviews (Guest, Bunce and Johnson 2006: 59). The saturation point of data collection for this study was reached at the tenth interview.

Before analysing the data, the researcher had to capture the participants' responses as accurately as possible. The best form of recording interview data is through tape recording, because tapes contain the exact words of the interview, inclusive of questions, so that the researcher does not forget any relevant information. This also allows the researcher to focus on the participant instead of being distracted by taking notes or writing down answers (Holloway and Galvin 2016: 95). A time limit of an hour was set for each interview in order to fit into the participants' schedules. Data was then transcribed and organised before isolating common themes from the research.

Lastly, the research was repertorised and thematic analysis was used to determine the most indicative homoeopathic remedies for the affected canines. The data was then used to determine if the homoeopathic remedies would have a clear theoretical grounding and strong beneficial impact as a course of treatment.

Inclusion criteria

Inclusion criteria were needed to provide suitability of participants for the research. The candidates needed to have experience as a caretaker and worked in close relation to the participating canines. The study consisted of the following inclusion criteria:

1. The person should be actively and formally involved with welfare and care of canines.
2. The person should have a minimum of five years' experience working with canines.
3. The person taking part in the study must be 18 years or older.
4. The person should have been involved in the care of the specific canine for at least six months.
5. The canine needs to show clear symptoms of abuse of any form as described in the literature review.

Exclusion criteria

The exclusion criteria were simple and mostly excluded animal caretakers that did not work with canines but focused on, or exclusively worked with, other types of animals. The study consisted of the following exclusion criteria:

1. Organisations and caretakers not in South Africa did not qualify to be part of the study.
2. Persons involved with welfare and care of animals other than dogs.

The consultation process

After a brief telephonic conversation to confirm suitability, an appointment was made to meet each participant at a specific animal shelter. Each participant was given a letter with a summary of the study and an informed consent form to sign, which allowed the researcher to interview the participants.

Data processing and analysis

A qualitative research design was used for this study. In-depth personal interviews were conducted to collect data, which intended to explore the signs and symptoms of trauma of neglect in canines. This helped identify themes and symptom profiles that would allow the researcher to select the appropriate homoeopathic remedies.

An interview guide was used to collect data and a purposive sampling method was used to select a minimum of ten suitable participants. Data collection continued until the point of saturation. Data was recorded via audio tapes and transcribed by the researcher, using (Silverman 2006:100-101).

The audio tapes were evaluated after the interviews, and the information gathered was written down and analysed in the same way that a practitioner would analyse information provided by a patient during a consult (McLellan, MacQueen and Neidig 2003).

Thematic analysis was conducted after entering the data while applying Tesch's "Eight Steps in the Coding Process" (Creswell 2007:303-308):

1. Thoroughly read through the transcriptions and record any interesting points.
2. Choose one interview, review the contents; determine the meaning, content and substance of the information, and write notes in the margin.
3. Repeat the process for all the transcriptions, make a list of all the emerging topics, and group them under similar headings.

4. Take this list of topics and go back to the data; code each topic and insert the codes alongside relevant pieces of data to which they correspond. This may result in the emergence of new topics and categories.
5. Find the most descriptive wording for each topic and then convert them into categories, group related topics under relevant categories to keep the number of these limited. Link related categories together by connecting them with lines.
6. Choose a final abbreviation for each category and alphabetise the codes.
7. Group all the data for each category together in one place and perform a preliminary analysis.
8. If necessary, recode the existing data.

Multiple approaches from Creswell (2007:303-308) were applied in order to ensure the validity of the data. Triangulation was one such approach in assuring the validity of the research. An example of this is the way in which the researcher also made visual observations of the canine participants and their environment as an additional approach to the interviewing process.

Where possible the researcher presented the participants with the refined data for verification to ensure that they agreed and that there was no miscommunication.

The participants' rich descriptions were used to convey findings in order for the researcher to go through each process, step and finding effectively, allowing for a clearly defined conclusion. The researcher aimed to spend as much time as needed to interview the participants for maximum data collection.

Reliability of the research was enhanced by the following steps suggested by Creswell (2007:303-308):

- Check transcripts thoroughly to minimise any errors made by the researcher and supervisor once interviews were conducted and analysed.
- Prevent distortion of code meanings that have been developed, since there was only one researcher.
- Cross-check codes with the research supervisor.







Steps taken during analysis

As outlined above, the grounded theory approach provided a means to analyse the data and present the findings. Although grounded theory was utilised, it was not a complete grounded theory approach, because some aspects of phenomenology were also used. The grounded theory aspect is seen through the use of a general research question and using interviews to

collect data. The phenomenology is present in using other individuals' understanding and experiences to assist with the data collection.

The table below depicts the steps taken by the researcher to analyse the raw data from interviews.

Table 1. Schematic representation of steps taken to analyse the raw data

Different themes were identified in each transcript

All transcripts were correlated with one another

Common themes amongst all the transcripts were identified

The discourse and language used by each participant to describe the theme were acknowledged (including identification of subthemes)

The prevalence of each theme was established

The frequency (high, low, moderate) as well as variation (negative, positive, neutral comments) of frequency was established

The data was interpreted and presented in a descriptive manner

Data storage

The audio recordings' data will remain in storage for five years at the DUT Department of Homoeopathy, after which they will be destroyed. The data will only be accessed by the researcher and her supervisor.

Trustworthiness

It is important for a qualitative study to provide evidence of validity and reliability, as it has an element of subjectivity (Polit and Beck 2012: 174). Trustworthiness is used as an alternative term to validity and reliability (Lincoln and Guba 1985: 289). In qualitative studies, one of the

main criteria to establish validity is contextualising and substantiating the findings within existing theoretical and empirical studies that relate to the research in question. Four criteria were used to ensure the trustworthiness of this study.

1) Credibility

The credibility of a study is important as it deals with the validity of the findings (Shenton 2004: 65). To ensure the credibility of this study, open-ended questions were posed during the semi-structured interviews to portray an accurate reflection of the actual situation. Excerpts from the data are presented verbatim in the study's findings. (Shenton 2004: 65).

2) Dependability and transferability

Dependability is reliant on credibility (Polit and Beck 2012: 585) and related to transferability, which refers to the degree in which the findings can be transferred to another setting or group (Lincoln and Guba 1985: 321). The dependability of a study allows for the production of a prototype model of the research methods, enabling future researchers to repeat a study and gain the same results (Shenton 2004: 71). Qualitative studies do not aim to be replicable in the same way as quantitative studies, especially since examining people's ideas, actions and perceptions may never yield exactly the same results even within two studies that are set up to be similar. However, it is important for all studies to offer transparent details of the study, and clearly describe and explain the analysis and findings so that insight and learnings can feed into other knowledge-building activities. The dependability and transformability of this study was ensured by:

1. thoroughly describing all the steps taken in conducting the study from start to finish as recorded in this chapter;
2. the transcription and analysis phase initiated by the researcher and checked by the research supervisor for any discrepancies.

3) Conformability

To reduce the effects of researcher bias, the research methods of any study should have an element of objectivity (Shenton 2004: 72). The following points ensured conformability:

1. The research methods used to conduct this study were supported by the literature.
2. The research methodology was scrutinised by the research supervisor (who is an expert in the qualitative field).

4) Confidentiality

The participants were assured of strict confidentiality and their rights were safeguarded by means of undersigned consent. Prior to the semi-structured interview, each participant was required to give written consent, as reflected in Appendix B. Participants' personal details were withheld and each was assigned a code that only the researcher had access to, which is why the presentation of the findings in Chapter 4 does not mention any of the participants' names.

Reporting the data

When the data was analysed and emergent categories and themes were determined, these were repertorised with MacRepertory after being translated into a homoeopathic repertorial format. MacRepertory is a program that allows the researcher to insert signs, symptoms and identified themes to generate remedies and information in conjunction with the current materia medica.

The materia medica

Each valid proving symptom was sorted into the relevant categories using the current materia medica format. The Synthesis Repertorium Homeopathicum Syntheticum (edition 9.1) was used as a guideline in compiling the materia medica for the signs and symptoms of neglected and abused canines. Below is a schema of the headings identified in the cases. (Schroyens 1993: 1720)

- Mind
- Head
- Eyes
- Ears
- Nose
- Back
- Respiratory system
- Digestive system
- Skin
- Urinary system
- Extremities
- Genitalia
- Sleep
- Generals

The repertory

After the valid symptoms were organised into the appropriate sections of the materia medica, the equivalent rubrics were established using the MacRepertory employing the Synthesis Treasure Edition (Schroyens 2009). The proving symptoms were recorded in the conventional “rubric – sub-rubric – sub-sub-rubric” format; in the event of a rubric not being found in the existing text, a new rubric was created to include the symptom.

The following grading system was used for the valid symptoms, as adapted from Ross (2011):

- Grade 1 was reserved for all rubrics assumed to be of lowest grade and are reflected in roman type.
- Grade 2 was for rubrics that were experienced by three or more provers and are reflected in *italic* type.
- Grade 3 was for rubrics that were experienced by half or more of the total provers and are reflected in **bold** type.
- No rubrics were considered to be Grade 4, the highest grade, since clinical verification of symptoms was not available.

Related remedies

Once the valid symptoms were recorded, they were repertorised using MacRepertory set on the “sum of symptoms and degrees” setting. A list of remedies with similar symptomology was elicited, which was completed by separately repertorising a key selection of mind, physical and general symptoms recognised as rare, peculiar or specific. The comparison highlighted the similarities and differences of the remedies relating to the signs and symptoms of the canines, and this allowed for greater clarity on the specifications of remedies and themes.

Ethical considerations

Approval was obtained from the Institutional Research Ethics Committee (IREC) at DUT, with reference number “Rec 113/17”. The study was explained in an information letter (Appendix A) and each participant gave written consent (Appendix B). During data collection, participants were given numbers to represent their personal details, which only the researcher had access to; no names were mentioned at any point. Confidentiality was maintained and no form of coercion took place.

Conclusion

The purpose of this chapter was to describe the research methodology of this study, explain the sample selection, describe the procedures used in collecting the data, and to provide an explanation of the data analysis procedures. The results that were obtained from the data will be shown in Chapter 4 and discussed in Chapter 5.

Chapter 4: Results

Introduction

The findings presented in this chapter resulted from the data obtained during observations that were made in line with the methodology described in Chapter 3, raw data was gathered using semi structured interviews and probing questions with each of the 11 cases. This data collection method produced promising results as it preserved the views from members of the SPCA, veterinarians, and other animal welfare organisations and assisted in gaining a holistic view of the phenomena under study.

Theories cannot be made with actual occurrences or activities as observed or reported; that is raw data. The occurrences, events, happenings are taken as, or analysed as, potential pointers of phenomena, which are thereby given conceptual labels (Strauss and Corbin, 1990). Therefore, in analysis the first step is conceptualizing data. Strauss and Corbin (1990) stated that once the particular phenomena in the data have been identified, the researcher can then begin to group concepts around them. These authors refer to the process of grouping concepts that seem to apply to the same phenomena, as grouping (Strauss and Corbin 1990). Henceforth, presentation of the results of the data in this study is therefore organized under the main themes and subthemes (Strauss and Corbin 1990).

The analysis of data was completed using Tesch's eight-step procedure. Data analysis began by transcribing the interviews. The researcher read the transcript and compared them with the audio-taped interviews. The researcher read the transcript for the second time to identify the underlying meaning. The researcher selected the most interesting and informative interviews and notes were made in the margins of the transcribed interviews; the process was repeated for the rest of the interviews. Similar topics were clustered together under topics, from the topics, the researcher formed themes and sub-themes. An experienced person in the field of qualitative research analysed the data separately and then identified themes that were discussed with the researcher and supervisor. The results were obtained by following a convenience sampling method. The results are outlined in a manner which indicates how the objectives of the study were achieved.

The main objective of the analysis was to show benefits in the homoeopathic field and the optimism for homoeopathic treatment in neglected and traumatized canines for the future.

Research findings (demographic data)

Gender

The study revealed that the majority of the interviews during the study period were females and only a few male caretakers:

Participant one: Female

Participant two: Female

Participant three: Female

Participant four: Female

Participant five: Female

Participant six: Female

Participant seven: Female

Participant eight: Female

Participant nine: Female

Participant ten: Male

Participant eleven: Male

Age group

During the research period, the caretakers that looked after the canines were between the ages of 18 and 40 years:

Participant one: Female in her late 40s

Participant two: Female in her early 50s

Participant three: Female in her early 50s

Participant four: Female in her early 40s

Participant five: Female in her late 30s

Participant six: Female in her late 20s

Participant seven: Female in her early 50s

Participant eight: Female in her 30s

Participant nine: Female in her 20s

Participant ten: Male in his late 50s

Participant eleven: Male in his 30s

Educational level

Majority of the caretakers were trained and had a background of previous shelters and the veterinarian's that were part of the study had qualifications from a recognized university for animal healthcare.

Interview 1

Introduction

The first animal shelter is also a foster home for beagles; the lady had adopted two dogs and cared for them on an estate. Both dogs came from dreadful backgrounds involving neglect and abuse, but her interview was optimistic and she believed a great deal in holistic techniques, and also that the majority of physical complaints can be traced to poor nutrition. She believes in being patient and slowly rehabilitating an abused canine to ensure that the animal is loved, shown much affection and supported.

The caretaker stated that she does not feed Dog A any wheats or grains, because she believes that many canines are allergic to it. The caretaker said the following: "Dogs are carnivores and are supposed to eat meat." Dog A was overweight and had problems with the odour from his breath. The caretaker said that these symptoms were due to a lot of fish in their diet, so the caretaker put them on a diet using an animal food product known as Raw, which showed great improvement in both canines. The caretaker said the following about Raw food: "The ratio is perfect, containing the right amounts of vegetables and meat to make sure that they are healthy."

Dog A lived in a kennel sized 2 x 4 m all of his life. The caretaker was contacted by the owner who was giving up breeding and wanted to give her dogs to the SPCA, but because the dogs were older and would most likely be left in kennels, the SPCA had to refuse the offer. The caretaker is also a case worker involved in fostering and finding foster homes, because she does not have kennels for the rescued canines.

Dog A had a torn conveyer belt as a bed and one metallic bowl for food and water. The caretaker said that when Dog A arrived, he did not understand that he had to drink water from a different bowl to his food. The previous owners would go on holiday and have their staff watch over Dog A, but the staff did not always feed the dog, and sometimes they gave him no water; he adapted to those conditions. He lost seven teeth because of his poor diet and his coat was coarse. Dog A was heavy (over 21 kg) when he came to the caretaker, but with good nutrition and exercise he now weighs 18 kg and his coat has become softer.

Dog A was emotionally shut down. The caretaker said: "He looked at you with a blank stare, but now his tail wags when you speak to him. But that's what happens when a dog is in a kennel

for long time, it's called kennel stress." Dog A was so neglected that his hair was falling out; he was in a poor state of health and had constant mouth, gum and ear infections. The caretaker thought he had encephalitis, because he would shake his head forcefully, but that was a sign of his untreated ear infections. He had not been to the vet since birth; all his inoculations were administered by the owner who unethically purchased the vaccines from wholesalers.

The caretaker stated that Dog A avoided eye contact with people and was behaving like a robot. He specifically did not want to go near men, cowering when her husband got too close, which she said was a clear sign of abuse. If you called on Dog A, he would not even register compared to now. In his old home, he lived with five females and was known as a stud for breeding. He was never introduced to males. Generally, males urinate on everything to show dominance, but he was different because he was forced to breed every six months, so there was no competition for territory. Dog A has, since then, not shown any aggression towards males, females or children. He is quite submissive, but still does not like to be turned on his back because he never learned to play, and is particularly uncomfortable if his belly is rubbed.

The first-time Dog A went to a vet, the caretaker was told that the canine had ear mites and that yeast had built up from food containing wheats and grains, which was worsened because he was left untreated in a kennel for seven years. The caretaker explained that ear infections are easy to spot in beagles, because it smells like milk turning sour. Because beagles have large ears and there is no ventilation, their ears need to be checked frequently. The caretaker stated that she has not given any medication to Dog A for emotional abuse, or attempted to treat his trauma and anxiety. Dog A has shown no signs of trauma or side effects from his regular medication.

The caretaker is currently treating Dog A for inflammation with natural herbs, such as Devil's Claw and a flea powder from her local pet shop. She also uses a natural dog shampoo. "They are on worm treatment because of the Lupi disease; it is contagious and deadly. They get it from eating dog or cat faeces that have insect eggs laid in them. So, it is important to pick up faeces." The caretaker explained that canines take time to adjust to their new homes, that people are too impatient, resulting in them feeling like they don't fit in, which in turn causes them to want to return the pet, or send it to another home.

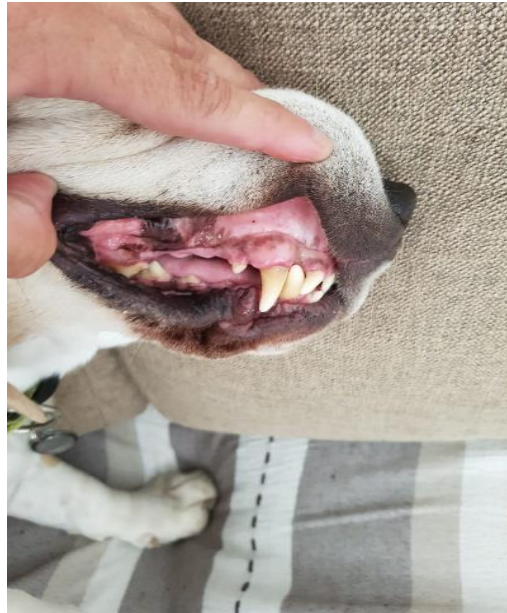


Fig. 1 Canine's teeth before treatment



Fig. 2 Canine's living conditions before being rescued

Conclusion

The canines that were adopted and given a home seemed to be doing well. The caretaker was open to homoeopathy and other alternative treatment, especially when it came to helping the canine's behaviour and personality. Homoeopathy would be greatly beneficial in treating and curing the canine of his trauma.



Fig. 3 Canine with the caretaker

Essence of the case

In this interview, Dog A was abused and neglected. The canine was used for breeding while living in a poor environment before being rescued. The theme of “neglect and abuse” are clearly depicted in this case. This canine was abandoned because animal shelters refused to take him, preferring puppies over old and obese dogs. Dog A was very submissive out of his fear towards men, which could be a symptom of abuse. The canine would cower away to avoid men, which could indicate fear and depression as two overarching themes.

Dog A was emotionless, submissive and frightened. These symptoms were the central focus and main essence of the case.

Interview 2

Introduction

At the second foster home, the caretaker's major concern was that one of the canines displayed an ongoing skin condition while the majority of her dogs showed more physical than behavioural problems. The rescued canines are mostly mothers with their puppies or pregnant dogs that have been abandoned, growing up on the streets by themselves or with a homeless person. At this shelter the canines were not kept in cages, but mixed together in a big yard.

Dog A came to the shelter with three other mothers and their puppies. They originally lived in the sewage and pipes of an abandoned building where no one was feeding them, and the puppies were feeding from their mothers. The caretaker explained that since the mothers did not have a good diet, their breast milk quality was not good for the puppies, so the immunity of these puppies was very weak. When they were brought to the shelter, it was discovered that they had mange, were underweight, and had parasites and worms. Shortly after, the puppies got ringworms and, for the first eight months of their lives, they had to be quarantined and were under medication for a very long time.

Dog A was the worst, her health was a constant problem. She would get better, but after a few days she would get sick again. It seemed to be with the change of season, but the caretaker was unsure of the exact cause. The caretaker stated that dealing with traumatised canines differs from one canine to another. Some are fearful, skittish and difficult to catch, while others are aggressive because they are more fearful. Those that just cower and let you pick them up are terrified to move, so they freeze up, but they adapt easier. "I do deal with a lot of feral dogs and they take a while to be tamed; mostly they tame me. They are difficult to tame and rehome, because they want to run away from home and escape." Dog A has not been able to be rehomed because of her skin condition. However, she has been able to socialise with humans and other dogs. "She is a good weight and a light cream colour, but her skin seems to darken in areas and looks like she has eczema. Some people think it's mange, but it is not, it is more eczema where her skin gets darker and looks almost dry."

Dog A is currently on treatment for her skin condition. The medication is a mild corticosteroid cream that the caretaker applies to the affected area for a certain period of time. The caretaker noted that the skin condition is possibly aggravated by the change of season but is not completely convinced. Owing to the fact that the dog food is donated (occasionally differing in type and brand), it is difficult to determine if the food is actually causing the aggravation. The caretaker then explained that she is unsure about the side effects of the medication. It seemed

to only help Dog A for a while, but this could be because the canine's skin is sensitive as she is dipped during bath time. The caretaker is open to homoeopathy and states that it is a good thing for any animal if it helps them.



Fig. 4 Canine's skin improving with medication

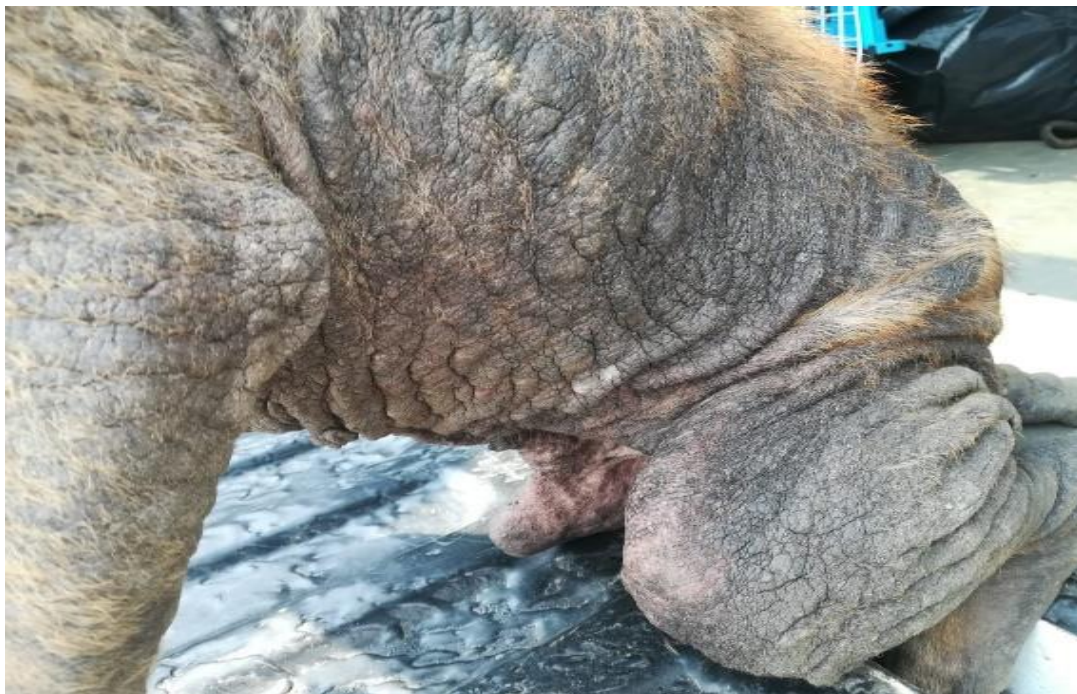


Fig. 5 Canine's skin condition when rescued



Fig. 6 The canine after being rescued



Fig. 7 Canine skin condition while on treatment

Conclusion

Pregnant dogs are the most vulnerable and it can be difficult to judge what they are feeling. Their bodies are constantly under stress to feed their puppies or to give birth to a litter. It is difficult to medicate pregnant canines and their puppies, because the puppies are too young or the mothers' bodies need to recover to be able to withstand the harsh side effects of medication. Homoeopathy would show a significant difference, because it would be safe to administer to the pregnant dogs and puppies, and would have no side effects later on in their lives.

Essence of the case

The main essence of the case was Dog A's skin condition that looked awful after being left abandoned and homeless, which was unsuccessfully treated with orthodox medication. The skin appeared almost black and similar to eczema; the symptoms formed part of the rubrics and were repertorised. The caretaker stated that it is difficult to work with neglected and traumatised canines, because they display different symptoms, such as agitation, nervousness or fearfulness that is attributable to their abuse. The theme that arose from this case was "neglect and abuse".

Interview 3

Introduction

This foster home features open spaces, which the caretaker sees as the most important aspect for a canine; these open spaces encourage dogs to run around and feel like part of the family. It is a small foster home that has five dogs and three puppies as well as other animals that are being taken care of. The participant looks after puppies until they can be adopted, and is also involved in rescuing animals from the streets in her area.

She is dedicated to giving her canines and the other animals the best treatment that is natural and holistic. One can clearly see the difference between this caretaker's canines and those that are sheltered in cages, because her foster dogs are loving and well-behaved. She strongly believes that with enough affection and love, rehabilitating a canine becomes easier and more rewarding.

According to the caretaker, Puppy A's owners wanted the mother, not the puppies: "We fostered them until they were old enough to be given to another home." The caretaker explained that unwanted puppies adjust easier, because they have not experienced trauma or been neglected, which makes it easier to train them. Puppy A was timid, scared and very quiet in the beginning, but as the puppy grows she is becoming more confident and simpler to train. The caretaker feels that with her dogs there is no need to worry about aggressive behaviour, because of the open environment open and her calm approach. Once the canines sense that there is no danger, they become calm themselves and are better able to adapt and adjust to their new surroundings.

The caretaker spoke about Dog A, who has a background of abuse and neglect. She was rescued from a tavern where she lived in a box with her mother and four other puppies. When the caretaker took Dog A home, she was one month old, but full of worms and fleas. "It was quite severe at the time, but now Dog A is a happy chap. She is our oldest dog and did not show signs of aggression. However, she is an alpha who wants to oversee the other dogs and will show dominance towards the other canines."

Dog B ended up in a foster home because he was a 13-year-old watchdog whose owners didn't want him anymore in his old age. Dog B has a skin problem that seems to have been caused by excessive licking. The caretaker explained that she gave Dog B joint supplements and other

natural products, but believes that there is also a place for pharmaceutical medication, especially when a skin condition is worse and needs to heal faster.

The caretaker explained that a few years ago, Dog C had a rotten tooth that became neurotic in his jaw and had to be removed. He was on Clavit for two weeks before going back to the vet to ensure that the wound was healing and was not infected by the rotten tooth. However, the antibiotic had troubled Dog C's stomach, so the caretaker gave him psyllium husk and general probiotics, which worked well. The caretaker prefers natural and homoeopathic products, because they are affordable, feeling that the vets would rather make a profit than actually helping the animals. She has been using colloidal silver for all the canines under her care and pointed out that her dogs were hardly sick, and that it was a good way of boosting their immune system, especially so for the puppies. The caretaker asserted that her canines quickly adapt to their surroundings both physically and psychologically.



Fig. 8 Caretaker with Dog A on the left, Dog B on the right and Dog C on the far left



Fig. 9 Dog B after rehabilitation and treatment



Fig. 10 Puppy A getting ready to be rehomed

Conclusion

This foster home has a 100% success rate in its animal rehabilitation. The owner believes in using holistic treatment and is very open to homoeopathic treatment. However, her view that there is a place for pharmaceutical medication when a condition has worsened stems from the limited scope of holistic and complementary medication, and her belief that many people do not possess the knowledge to treat canines.

Essence of the case

In this third interview, each of the canines and puppies were abused, neglected and left homeless. These canines developed social anxiety and were described as timid, shy and frightened, forming the theme of “attachment, indifference and depression”. In each of the

cases, the canines were either abandoned or lived in a rural area with no food or water and were unwanted due to their age. The dogs were rejected by the community and had to fend for themselves before being rescued. The interview brought up physical complaints that focused on skin conditions; the canines each developed a skin disorder owing to malnourishment and neglect, which became part of the physical rubrics that were repertorised.

Interview 4

Introduction

At the fourth interview, most of the canines were in separate cages, because there was either a psychological issue or an emotional condition. These canines were from the townships in rural areas, some being older and unwanted, or left on the streets for an animal shelter to rescue. The lady at this dog shelter knew each of her dogs personally (there are around fifty), trying to understand them and give them the best treatment she can afford; she also tries to make her own remedies. Her canines are not easy to rehome because of their special needs, so most remain in her care for much of their lives. She and her helpers cater to the dogs on a daily basis, ensuring that they are fed and healthy.

The caretaker describes Dog A as strange, because he exhibits social anxiety towards other canines while inside his cage with them. He is unable to behave naturally towards other canines, so the volunteers often leave Dog A alone in his cage. Some of his behaviour includes drooling excessively, which irritates him, digging or escaping to cause trouble, and he will lunge and bark constantly if another canine is in the same cage with him. The caretaker is unsure of Dog A's age, but the vet estimated him to be about 8 years old. The caretaker is also unsure of his past, but thinks that the strange behaviour could be from abuse and neglect, and having to scavenge for food, fighting with other canines and being threatened by people.

The shelter was first contacted by the township to take Dog A, because there were reports that he was tearing bin bags and people were throwing rocks at him. "People have no tolerance for these dogs. He has been through much trauma being attacked by people and canines." When Dog A was rescued, he had dog bites around his neck that healed, but the skin was white with little hair growth. He also displayed severe signs of food aggression, but apart from that, Dog A has always shown sweetness towards the caretaker and does seem to want to make a friend.

Dog B has had constant skin problems and is currently on corticosteroid cream treatment as well as being dipped during bath time. However, it is incredibly difficult to deal with township dogs, because there are so many of them. They often run away, so the caretaker ensures that treatment is strong and fast-acting, regardless of the price. "Dog B didn't respond to Bravecto, so Advocate was used along with MSM (methylsulfonylmethane), omega-3, zinc and coconut oil. He isn't eating pellets because the maize aggravates his skin condition," explained the caretaker. The skin condition has been around for a year and most of the medication from the vet don't work.

Dog B is a very passive mixed breed who has been at the shelter for two years. His skin condition first started on the ears when he was in Johannesburg. Treatment continued, but the caretaker then moved to Durban with twenty other canines after which the condition flared up and got worse. The caretaker thinks that it could be the humidity, because the skin condition can often spread to his entire body, making him itch and worsening when he then scratches.

Dog C is an epileptic basset. "She is currently on treatment that has to be taken three times a day, otherwise she has severe seizures. Dog C is hyperactive and will fight or irritate the other dogs even when they walk away, which leads to a seizure afterward. At times she will get extremely excited, start barking and run up and down the fence before a seizure starts."

During an episode, she starts to shake, foams at the mouth and finally falls over while her eyes roll back. When she recovers from the seizure, which lasts about ten minutes, she usually vomits and is then exhausted, sleeping for an hour after the ordeal.

The caretaker said that when Dog C is overwhelmed with excitement, it triggers an epileptic attack. The vet explained to the caretaker that Dog C could have been born with epilepsy or developed seizures from a traumatising experience, such as a serious head injury. The caretaker feels that natural medicine would be better in the long run and would especially consider over the corticosteroid treatment. "I don't know a lot about homoeopathy, but I would be open to learn more about it and try it."



Fig. 11 Dog A in his cage



Fig. 12 Dog B with caretaker



Fig. 13 Dog C in her cage

Conclusion

Unlike most pharmaceutical medication that aims to treat physical symptoms, homoeopathy treats the underlying causes, which, in this case are various psychological disorders; homoeopathy would certainly benefit these canines.

Essence of the case

This interview was intriguing in the way these cases mostly focused on mind and physical complaints. All three canines had psychological issues or an emotional condition that was uncommon, which highlighted themes of fear, abuse and jealousy. Dog A was extremely aggressive and jealous after his constant fights before being rescued. The canine also expressed social anxiety and could not relate to other canines or humans without displaying strange behaviour, leading to the theme of “jealousy and aggression” as well as “indifference”. Dog B showed physical signs of a skin condition apart from being emotionally timid and withdrawn. Dog C was epileptic with seizures triggered by heightened emotions and would also compete for physical affection, becoming very jealous if she did not receive it; this highlights the theme of attachment, jealousy and aggression. Skin disorders were also present in these canines as a result from the abuse and neglect before they were rescued, forming part of the rubrics.

Interview 5

Introduction

This animal shelter rescues, fosters and rehabilitates canines, and is also a non-profit project that actively seeks funding. The shelter consists of a team of volunteers who assists in helping rescued dogs and travel to surrounding areas helping other dogs. The team also sterilises canines to help control the number of homeless dogs that are born in rural areas. The dogs were friendly and social at this animal shelter. The lady that runs it aims to make the canines as social and healthy as possible so that they can be adopted and rehomed. If a dog is not adopted, the caretaker does so herself. The shelter has a large network that communicates with other animal shelters around Durban in an effort to reduce overcrowding in shelters by helping with adoption.

Dog A is about 5-6 years old; she was neglected and malnourished. Dog A's owners handed her to their domestic worker, but the worker did not want the dog and couldn't afford to look after her, so she was mostly left chained outside and given very little food and water. "Dogs act differently depending on the type of dog and abuse. She often displayed symptoms of aggression, antisocial behaviour and jealousy, especially towards food, which she became protective over," explained the caretaker. Dog A was severely emaciated, there were marks on her face and body as well as signs of dehydration. Her hair was dull and would fall out; there were hairless patches on her skin because of poor nutrition and dehydration. The caretaker noted that the domestic worker had a lack of interest and a general disregard for the animal's life.

The caretaker is now trying natural remedies for the canine's skin using Hill's Pet Nutrition food for proper nutrition. "She has regular baths and is treated with a special shampoo along with tea tree oil and colloidal silver." The caretaker has not noticed any side effects in the dog's skin, but has instead noticed an improvement since using natural remedies. The caretaker is open to homoeopathy and would consider this for her canines because it is affordable and helps the dogs in a natural way. She feels that using pharmaceutical medication would have devastating effects the longer they are used.



Fig. 14 Dog A with her caretaker

Conclusion

This shelter has a vast network of communication and tries its best to rescue every dog from any part of South Africa. They are willing to work in a team with other animal shelters to rescue any canine. They are dedicated and open about their work in rehabilitating and rehoming canines under their care. Most of their dogs are successfully socialised after rehabilitation, regardless of their backgrounds.

Essence of the case

The theme of “neglect and abuse” are clearly established in this case. The canine was left abandoned with a domestic worker that lacked the knowledge to care for Dog A, and did not have the proper resources to do so, which lead to neglect and abuse. Owing to the circumstances, the canine became aggressive, displaying jealousy towards food and for attention, so the other two themes were “jealousy” and “forsaken”. Dog A’s skin symptomology was used in the rubrics and were repertorised along with the mind symptoms of feeling forsaken, jealousy and of being neglected and abused.

Interview 6

Introduction

At this foster home the owner adopted four dogs. We mostly spoke about her oldest dog who had the most issues, but has since rehabilitated; Dog A is now friendly and social towards the other dogs. The owner's wanted to rehabilitate the dog in a family environment so that she could learn to properly interact with people and to trust them. Once this was achieved, adopting other dogs would not cause problems, because she could then trust that her home was not being taken from her. The owner believed that once the canine found stability, there was no need to feel threatened by, or jealous of, another dog. She is now able to share her home calmly and peacefully, and knows that she is safe.

Dog A was very thin because of malnourishment after being abandoned as a puppy. She also had issues with her skin and had very little hair growth. She has five other siblings that were also separated from their mother and were looking for good homes. The foster parent explained that Dog A was tiny and covered with ticks and fleas when she was brought home. She also had a few bite marks from fights as well as a slight rash on her nose. Dog A was frightened of being touched, which made it difficult at first because the owner needed Dog A to trust her, otherwise she might have tried to run away or hide. "She would get aggressive if we touched her food or touched her by surprise, but after a while she became quite clingy." Dog A does not always follow the rules, but she has made improvement and doesn't bark at people too much. She does not show signs of aggression anymore, except when it is her mealtime.

The foster parent has also adopted three more dogs. So far, Dog A has not fought with any of them. The skin rash on Dog A's nose was treated with a corticosteroid cream from the vet, because she would sometimes continue scratching until it bled. She was a weak puppy in the beginning, and would only eat her food when she was alone. When the foster parent raised her voice, Dog A would involuntarily urinate and her bark also sounded more like a cry or a whine than a real bark. "I think, at the time, her mother had passed away, and all the puppies were alone and had to fend for themselves."

The foster parent noticed that the rash on the canine's nose would flare up and sometimes affect her paws. Dog A has since been on treatment to prevent her skin condition from spreading. The treatment included a flea collar, general vaccinations and glucose water when Dog A look tired or if flu was suspected.

Dog A is on a strict diet that allows two healthy snacks a day for good behaviour. She is given the same amount of attention as the other pets to prevent any jealous behaviour. “We use natural creams for the skin rash, such as calendula and tea tree oil. She also takes natural antibiotics that help with her vitality and to fend off any infections from playing with the other dogs.”

The foster parent states that she would consider homoeopathy because its more affordable. She believes that canines would benefit from its holistic approach and because it is non-invasive. She understands that it is gentler than orthodox medicine, which does not focus on the underlying condition like homoeopathy does.



Fig. 15 Dog A with her owner

Conclusion

It is difficult for a foster parent to adopt a dog if their past is unknown or how the dog will be in their new home. Many dogs are sent back to a shelter for this reason, and Dog A was no different. The owner continues to show affection and work through the behavioural problems so that the canine will be open to complete rehabilitation. There has been significant improvement and the owner is now able to anthropomorphise her pet.

Essence of the case

Themes of “neglect”, “jealousy” and “attachment” were identified in this case. The canine was adopted from an animal shelter and was suspicious of her foster parents; the canine was either very attached or wanted to escape. Dog A had trouble socialising with other canines, showing indifference towards them. Sometimes she would refuse to be touched when she was alone,

bringing about the theme of indifference. As the canine continued to develop, she became territorial over food, aggressive when touched and jealous when another dog was given attention, leading to the theme of "jealousy". Lastly, the canine had physical and urinary symptoms that were linked to the emotional symptomology used in creating the rubrics and identification of remedies.

Interview 7

Introduction

This shelter deals with canines that have been severely abused and that have severe psychological conditions. Most of their dogs are vicious and are not looking for attention or affection from people; they are either frightful or very aggressive and could attack at any given moment. They are not trusted to be on their own or with unfamiliar people, because these canines were used for either home security or for illegal dog fights. The main goal at this shelter is to rehabilitate the dogs so that they can be rehomed as pets that are able to receive love; potential owners are made aware of a canine's history to help them understand how to care for these abused dogs. The volunteers at this shelter are not afraid of being bitten when handling the dogs as it is a common occurrence.

The caretaker said that Dog A has been at the shelter since January 2018 after he was rescued from a security company by a lady. He loved the lady, but, unfortunately, the lady moved into a smaller apartment and could no longer keep him, so she asked the caretaker to find him a new home. As soon as the caretaker put him in a cage, Dog A became his old frightening self again. "We hardly went near him for the first six months. The only one that could get near him was the handler, because he fed him," explained the caretaker. The shelter has an excellent handler who is like a dog whisperer, and has been with them for about two years helping to train the dogs that come in.

Dog A is now able to play and be in the kennels with children, so the caretaker is hoping to rehome him again soon. Once Dog A is put behind a fence, he would become the security dog again, but after being rehabilitated, he was less menacing. Dog A was very stressed when he came to the shelter, but thankfully he did not bite any of the volunteers. The caretaker explains that they aim to socialise all their canines so that the dogs can have a better chance of being rehomed. Dog A has a temper, but is generally able to get along with other canines, except when he is shown aggression from another dog. Then Dog A becomes aggressive himself and switches to fight mode.

"Dog A looks like he has got hip dysplasia and, at times, is a bit grumpy, which I think is from the pain." Dog A is only given pain medication when the caretaker notices him in pain or when he is grumpy towards the volunteers and other the canines. Dog A is not on natural medication, but the caretaker believes in homoeopathy. "We had a homoeopath that did a course in

veterinary science, and I have used little white pills for almost anything, so I do believe in it, but the rescue committee is not very keen on it. I have seen a difference with homoeopathy, but it is difficult to convince people.”



Fig. 16 Dog A and caretaker



Fig. 17 Dog A scared to move closer

Conclusion

Homoeopathy would be a good start to help the canines, because it would deal with the deeper issue at stake, not merely the symptoms. The themes are clear in this case: pain, fear, jealousy, anxiety, anger and depression. Dog A has had a rough past and is constantly on guard as a result. His severe behavioural disturbance can be corrected with homoeopathy to help with his rehabilitation and give him a chance to be successfully rehomed.

Essence of the case

The theme that stood out the most in this interview was “anger and rage”. The canine has a history as a security dog and was therefore trained to bite, attack and bark, leading to aggression towards unfamiliar people. After being abandoned by the security company and the foster lady, the canine became even more aggressive towards people and other canines, which highlights the theme of “jealousy and aggression”.

Interview 8

Introduction

This shelter was the biggest in comparison, consisting of branches all over South Africa. It is run as a business that deal with adoptions and rescues on a daily basis. The rescued dogs are allocated a kennel where they have a set amount of time for adoption. Although it was a friendly environment and with helpful people in charge, they were uncertain about the dogs' histories to properly answer the questionnaire.

At the end of the day they had a choice to make if a dog was not rehomed or adopted after a certain time they were euthanized. These canines were either strays or put up for adoption by their owners. Each canine undergoes the same procedure: a trip to the vet for vaccinations as well as neutering/spaying. The volunteers then wash the dog and put them in their kennel in preparation for the next open day when dogs can be adopted and the community is asked to donate. Therefore, the canines at the shelter need to be friendly and display affection to get adopted. They are not named, but they are regularly fed by the volunteers and have their kennels hosed down every weekend so that they are presentable to potential owners. The cleaners are the ones that mostly spend time with the dogs, because they also feed them.

The dogs at this shelter are classified by coloured collars:

- Yellow tag – unwanted dog that was given up for adoption by former owner
- Pink tag – stray dog found on the road whose rescuers didn't want to adopt the dog

If a dog is a stray, they are taken to the clinic for a check-up, and to get their vaccinations and necessary medication. The volunteers then upload an image of the stray to the shelter's account for an owner to hopefully claim their lost pet. But if unclaimed after eight days, the dog is put up for adoption. Each canine has an information form that is kept by the shelter, which states the dog's health, medication and the person that found the canine.

Dog A was found in Phoenix, wandering the streets as a stray. One of the volunteers explained that, if a canine is aggressive and prone to attack, they are not put in a kennel for adoption. Instead, the canine is taken to the vet to get medication for their behaviour.



Fig. 18 Dog A with caretaker

Conclusion

Homoeopathy would definitely help these canines with attachment problems and other behavioural disturbances so that adoption can become a possibility for them. However, these canines need love and affection from the shelter's volunteers for effective rehabilitation. These are the only people that work with the dogs, but their interactions are restricted to feeding, medicating and cleaning.

Essence of the case

In this interview, canines are rescued and caged until a foster parent is found. This canine was found wandering around the town and seen as homeless. The caretaker said that aggressive canines are given behavioural medication to keep them calm and relaxed. The theme of "neglect and abuse" are clearly depicted in this case as well as "restlessness and nervousness". Canines are often very nervous and restless when they are caged and can become aggressive as a form of protection of their new surroundings; these signs and symptoms were added to the rubrics and repertorised.

Interview 9

Introduction

This organisation does not have designated kennels for their canines, so they rescue dogs and look for a temporary foster parents to care for them until permanent rehoming is possible. They are a small rescue team that is self-sufficient and who put great effort into caring for the rescued canines until they are adopted. They go out of their way for these canines, ensuring that they go to reliable homes. They are loving and affectionate towards their dogs and go the extra mile in helping them emotionally and physically.

The caretaker spoke about one stray that was particularly difficult to rescue, because the dog would continually escape into a sugar cane field to hide: "I got a call from another animal shelter about this dog I had seen walking around, but couldn't rescue, so a week after I had to ask for help. The other animal shelter I phoned couldn't get it either, so I went to try again."

The caretaker then described the events leading up to the canine's rescue: "It was early in the morning and traffic was busy. I saw a dog dart across the road, so I had to stop the cars to get across, but the canine then ran up the bank to the sugar cane field." The caretaker said that the canine had eventually gotten closer to her, after which she named her to get her close enough, but a truck came past and scared her away. However, the caretaker was patient and waited for about twenty minutes until she finally crawled to her. "The dog put her head on my lap and just slept until we reached the vet."

The canine got treatment for her disease after the vet had done a full check-up. "She had a TVT (transmissible venereal tumour) that she got from other dogs mounting her and it was clear she had just recently given birth to a litter. We didn't know where her litter was. Her breasts were big and you could tell she had just stopped feeding; she had a huge gash on her leg as well." The caretaker with her team of volunteers then formed a search party to find the puppies, but the locals never saw the puppies, so it was possible that someone wanted the litter only. "When the canine first came in, she just held onto you, she didn't want you to let her go; she wanted a human to love her again." At the foster, she followed the caretaker like a shadow and was quite clingy. "She was not an aggressive dog, but emotionally she was so scared. It is about being with the right people."

When the canine arrived at her new foster home (that had already adopted three dogs), she displayed antisocial behaviour, so it took time for her to adapt. "She knew that this was the end

of her battle with this family.” The canine had some scars that had to be stitched up on her arm and face, which looked as though someone had kicked her, but it is difficult to know what actually happened because of her unknown past.

The canine had gone to the vet to be spayed before she could be sent to a foster home, but she was attacked by other dogs after that visit, and so had to be taken again. She was affected in a bad way and became depressed, which rendered her motionless at the vet, so the caretaker had to move her around; she was also urinating on herself. The dog had just gone through surgery, so she was still recovering and groggy from the strong medication. The caretaker mentioned that the canine had a habit of urinating in certain spots: “She would mark territory, but randomly; I think it is because of having been spayed. Those hormones are still in the body and she recently gave birth. It takes time for the body to adjust.”

In the first few days, the canine would not come into the house, but go around the house instead and cry for her puppies. The caretaker realised she was looking for her puppies, because when another dog barked she would run to look for her puppies and whine. “We could tell she was a family dog. Maybe the family could not afford care for the dog and dumped her to sell her puppies. This dog was on the bed, on the couch and enjoying treats, so she wasn’t a stray. With stray dogs that are abused, they are scared of these things, because it is all new, but not with this dog.” The dog was tame and understood how to be a good pet.

The canine was on cancer medication, which helped because the tumour had gotten smaller; no side effects were noticed. “We use cannabis creams to shrink tumours and Serenity Power is given to calm dogs, which is a natural product we use.” The caretaker said that her team has not tried homoeopathy. There was a lady that did natural treatments as well as homoeopathy for pets, but did not have space. If any dogs cannot be rehomed, then they are sent to this lady to help with their rehabilitation. “I would consider homoeopathy for my dogs, because it is cost-effective. I would want to find out more about it.”



Figs. 19 and 20 Dog A after being rescued



Fig. 21 Dog A: Fully grown and healthy after being adopted

Conclusion

This shelter is enthusiastic about its canines. The energy and optimism is felt and the team works like a family. When their dogs are adopted, they remain in contact with their new families and offer assistance and advice on how to love and care for the adopted canine(s). They make potential owners aware of a canine's background to aid understanding and willingness to help. They believe in alternative and holistic treatment and have been using it for many years for their canines, because it is much safer, affordable and less invasive.

Essence of the case

In this case the canine was picked up as a stray and later identified to have been a pet. The canine was deserted and left roaming the streets until she was taken in by the caretaker. She showed signs of fear towards the caretaker, which meant that the themes of “neglect and abuse” as well as “forsaken” arose in the case, owing to abandonment. The next theme was attachment: the canine showed symptoms of being overly attached, timid and weepy while searching for her litter. She had many scars from previous fights, underwent surgery for cancer and was spayed. The canine suffered from depression and would urinate involuntarily; these symptoms were used in the rubrics and repertorised.

Interview 10

Introduction

This veterinary practice resembles a surgery room, which has a clean table for canines to be vaccinated or for operations. The vet was very friendly, but was constantly busy with pets and other rural animals that need to be sterilised, vaccinated or sometimes euthanised. He is a dedicated professional who assists all types of pets in the best way that he can. He does not deal with canine behavioural problems, so he refers families with such cases to an animal behaviourist if they haven't already decided on euthanasia. His practice is pet-friendly, features open spaces and has some cages that are used for post-op recovery; this vet also does sterilising and vaccination of dogs rescued by shelters.

The vet was in surgery busy removing a dog's tumour while the interview was conducted.

The vet explained that canines are first vaccinated and dewormed, focusing on preventative medication before he treats them. "Because skin conditions are long term, we monitor the canines, dip them and then give them medication for mange." The vet added that skin conditions are normally the worst before tick bite fever and parvovirus, which are the two main diseases that kill most dogs.

"People normally do their annual vaccinations, but then forget to continue with these. This neglect causes canine distemper, which there isn't really a cure for, and it comes in waves accompanied by rabies. There was once an outbreak where people would do the vaccinations as a preventative measure, but then they lapse again, leading to another outbreak.

"We don't use any holistic medication here, but I am open to it, like the cannabis oil that we are using in medicine now. At the very least, we would like to be part of it for the sake of the animals."

Conclusion

Holistic medication is not taught in veterinary medicine, so it is a vet's decision to explore alternative medication. This vet is open to the idea that homoeopathy and other complementary medication would be beneficial to his practice.

Essence of the case

With this case, the vet listed many physical complaints with canines. Most of these are associated with skin ailments, such as rabies and worms, that cause itching and other symptoms; this information was used in the rubrics.

Canine distemper is a virus that mainly affects wildlife, but is easily transmitted to canines, especially if they have not been vaccinated. It starts with cold or flu symptoms that leads to seizures, convulsions and finally, death.

Interview 11

Introduction

This veterinary practice has a large team of vets that were willing to discuss various procedures regarding their treatment of canines. The practice is regularly sterilised and dedicated to pharmaceuticals for canines that have experienced notable changes in their lifestyles and/or food routines. Most of the canines treated here come from good backgrounds; their owners are dedicated to their pets' well-being, ensuring they have the best medication and food.

The vet explained that the animals they work with do not have traumatic or neglected backgrounds, unless it was a canine involved in a car accident. This vet also refers families to a behavioural specialist if their pet is wildly aggressive, but will prescribe pain medication if the aggression is a result of pain.

"We have not used any natural treatment or heard if any of the natural treatment is effective." The vet noted that there have been cases of skin problems, but these are seldom because the owners take good care of their pets. "We mostly deal with private owners whose complaints focus around diarrhoea, allergies and mild skin conditions." These owners generally bring their dogs in before their conditions get worse.

"We use cortisone tablets or creams for itching, and every year we give them a rabies vaccine." The canines encounter minimal side effects. Once or twice in a year they can develop an allergic reaction, like a small bump on their body, but it is minor and usually sorts itself out. When an owner complains about their canine's behaviour, we have certain medication that seems to help. One of them is for anxiety, but only helps in the long term." The vet added that this medication has no side effects.

The vet pointed out that there has been very little proof to show that natural and holistic medication is effective, and none of their clients have specifically asked for this type of treatment. "I don't think it would work better than pharmaceutical medication. I have not read up or been taught much about it in vet school." The vet believes that because there isn't much proof, it leads him to believe that homoeopathy does not work for canines.

Conclusion

This vet mainly invests in the best pharmaceutical medication on the market. Generally speaking, the vets at this practice do not believe in homoeopathy and holistic medication because of the limited research promoting homoeopathy and other complementary medication.

Essence of the case

In this last case, the veterinarian does not treat behavioural conditions, the canines are not neglected or abused and are properly cared for by their owners. The side effects may be minimal and possibly caused by orthodox medication.

The canines are rarely treated for anxiety and usually only if aggression was present. In these cases, pharmaceutical medication is used to calm the canine by inducing a comatose state. The canines are sent to a behavioural specialist if their aggression is uncontrollable, or given painkillers if it was found to be a result of pain. The symptoms were physical, mostly skin-related, which were used in the rubrics.

Themes identified from interviews

Theme one: Forsaken

When the interviews were conducted, it was found that all the canines were mistreated and abandoned before they were reported to the shelters. The theme arising here was that of feeling forsaken. Each canine was rescued from terrible circumstances that lead to feeling forsaken and hopeless recovery.

A canine's symptoms manifests both emotionally and physically if neglected and abused.

Interview 1 – Dog A was used for breeding and kept in a kennel for most of his life with one bowl for both food and water.

Interview 2 – Canines had ring worms and skin conditions that looked like eczema.

Interview 4 – Dog A had experienced much trauma and was unable to function on an emotional level, displaying strange behaviour towards people and other canines. Dog B battled with recurring skin infections that were seemingly untreatable, while Dog C suffered from epilepsy.

Interview 5 – The canine was left chained outside with minimal food and water, because the domestic worker to whom the dog was given did not want her.

Theme two: Restlessness and nervousness

While interviewing the caretakers, it became apparent that canines with neglected and abused backgrounds had many difficulties being reintroduced into society. These canines had become emotionally dysfunctional and therefore displayed strange, distant or unacceptable behaviour.

Interview 4 – Dog A showed strange behaviour patterns. He wants to be social, but is simply unable to do so. This interview was the perfect case to demonstrate social and anxiety problems, because Dog A's trauma had left a permanent mark causing the canine to be unadoptable and not trusted around other canines.

Dog C was overly social, begging for attention. The canine would become hyperactive, run to another canine or human and become extremely excitable, leading to a seizure that needed special medication for her to recover.

Theme three: Anger and rage

It was found that canines that were rehomed multiple times or came from a physically abused background tend to show severe signs of anger and rage towards people and other canines. This is a defence mechanism to protect themselves from further harm.

Interview 7 – The canine had been rehomed several times after life as a security dog. The canine was so aggressive and frightening to work with that he ended up mostly isolated to prevent issues with canines or humans.

As soon as the caretaker put him behind a cage again, Dog A became his old frightening self again. “We hardly went near him for the first six months. The only one that could get near him was the handler, because he fed him,” explained the caretaker. Dog A has a temper, but is generally able to get along with other canines, except when he is shown aggression from another dog. Then Dog A becomes aggressive himself and switches to fight mode.

Theme four: Jealousy and aggression

When canines are physically abused they become scared, protective or aggressive, which usually leads to them wanting to escape or hide. In some situations, they will resort to attacking a person to protect themselves.

In each of these cases the theme was aggression, which can lead to social anxiety. A common observation was when the dogs were especially aggressive and protective around mealtime. Aggression seemed to be the main theme that manifested in these cases, making the dogs extremely dangerous and difficult to be rehabilitated or rehomed. Each canine had an underlying issue that had not been dealt with, and therefore displayed physical symptoms because of the constant fights they were involved in.

Interview 4 – Dog A had severe food aggression and Dog C was comfortable with humans, but aggressive towards other dogs.

Interview 5 – Dog A displayed symptoms of aggression, antisocial behaviour and jealousy, especially around food.

Interview 6 – Dog A was aggressive when touched.

Interview 7 – Dog A was quite aggressive.

Theme five: Attachment, depression and indifference

Canines that have experienced traumatic abuse protect themselves instinctively and tend to develop close bonds with their caretakers. This is the most common theme in cases of animal abuse.

Interview 1 – Dog A was emotionally shut down and followed the caretaker everywhere, which depicts depression and indifference.

Interview 6 – The canine was close to the owner and became attached to the point where she would ignore everyone else around her. She refused to socialise with humans and other canines at first, so it took time for the foster parent to fully rehabilitate her.

Theme six: Neglected and abused

When canines are constantly exposed to violence and neglect they easily slip into fearful, angry and jealous behaviour, and these become increasingly difficult and frustrating to treat over time.

Interview 2 – Dog A originally lived in the sewage and pipes of an abandoned building fending for her litter. She was protective over her puppies and would become aggressive and start barking loudly, sometimes attempting to attack a caretaker that came too close.

Interview 3 – Dog A had a background of abuse and neglect. She was rescued from a tavern where she lived in a box with her mother and four other puppies. She is an alpha who wants to oversee the other dogs and will show dominance towards the other canines.

Interview 4 – Most of the canines were in separate cages, because there was either a psychological issue or an emotional condition. These canines were from the townships in rural areas, some being older and unwanted, or left on the streets for an animal shelter to rescue.

Interview 5 – Dog A is about 5-6 years old; she was neglected and malnourished. She often displayed symptoms of aggression, antisocial behaviour and jealousy, especially towards food, which she became protective over.

Interview 6 – Dog A was very thin because of malnourishment after being abandoned as a puppy, and she was frightened of being touched. She would become aggressive if the caretakers touched her food or touched her by surprise, but after a while she became quite clingy.

Interview 8 – These canines were either strays or put up for adoption by their owners.

Interview 9 – The caretaker spoke about one stray that was particularly difficult to rescue, because the dog would continually escape into a sugar cane field to hide.

Presentation of themes and sub-themes

The results of this study are presented along the themes and sub-themes derived from the analysis of interviews. The themes that emerged out of this study are presented in the table below.

Table 2. Overview of themes and sub-themes from rubrics

Themes and sub-themes	
Theme	<u>“Forsaken”</u>
Sub-theme	Canine displays symptoms relating to abandonment causing abnormal social behaviour.
Theme	<u>“Restlessness and nervousness”</u>
Sub-theme	Identifying the behaviour abnormality in activity levels and anxiety.
Theme	<u>“Anger and rage”</u>
Sub-theme	Understanding the canine's history with regards to the emotional and physical abuse the canine endured, manifesting into anger and rage towards people and canines.
Theme	<u>“Jealousy and aggression”</u>
Sub-theme	The behaviour of canines as a result of insecurities created from their neglect and trauma.
Theme	<u>“Attachment, depression and indifference”</u>
Sub-theme	Identifying behavioural patterns, such as lack of enthusiasm, decreased physical activity and isolation.
Theme	<u>“Neglect and abuse”</u>
Sub-theme	1. Understanding the themes and cases over and above the signs and symptoms depicted, and the long-lasting effects that abuse and neglect will continue to have on each canine. 2. Learning how to treat a canine that is in rehabilitation, so that rehoming becomes a possibility.

Identification of major themes

The themes were identified after data analysis and were then translated into the following rubrics:

Mind symptoms

1. Forsaken feeling
2. Restlessness, nervousness
3. Jealousy
4. Jealousy; ailments from, aggression
5. Abuse aggression, ailments from
6. Psychological themes; rationalizing, lack of feelings, depression
7. Psychological themes; anxiety, fear
8. Attached, very
9. Anger
10. Indifference, apathy

Physical symptoms

1. Bladder; involuntary urination
2. Generalities; ulcers; cancerous
3. Generalities; heaviness
4. Generalities; convulsions, spasms.
5. Convulsions, spasms; excitement, emotional, aggression
6. Convulsions, spasms; epileptic; before epileptic paroxysm, aura
7. Ears; discharges
8. Ears; eruptions
9. Ears; discharges; offensive
10. Ears; wax altered; sour odour
11. Mouth; froth, foam
12. Mouth; glands, salivary
13. Teeth; caries, decayed, hollow
14. Teeth; black
15. Skin; roughness, scraped
16. Skin; eruptions; rash
17. Skin; dryness

Repertorisation of rubrics

A repertorisation of the **characteristic rubrics** produced the following top remedies:

Pulsatilla pratensis (Puls.), *Lachesis muta* (Lach.) and *Hyoscyamus niger* (Hyos.) were the first three remedies that emerged from the rubrics followed by *Nux vomica* (Nux-v.), *Apis mellifica* (Apis.), *Actaea spicata* (Act-sp.), *Staphisagria* (Staph.), *Lycopodium clavatum* (Lyc.), *Ignatia amara* (Ign.) and *Phosphorus* (Phos.).

- Lach. is the bushmaster snake's venomous poison, while Apis. comes from the venom of a bee's sting. Both of these emerged as the prominent remedies from the animal kingdom.
- Puls., Hyos., Nux-v., Act-sp., Staph., Lyc. and Ign. are from the plant kingdom.
- Phos. is from the mineral kingdom (also part of the periodic table) and is found in bones and teeth.

A repertorisation of the **mind rubrics** produced the following remedies:

Pulsatilla pratensis (Puls.), *Hyoscyamus niger* (Hyos.), *Lachesis muta* (Lach.), *Nux vomica* (Nux-v.), *Apis mellifica* (Apis.), *Stramonium* (Stram.), *Platina* (Plat.), *Lac caninum* (Lac-c.) and *Phosphorus* (Phos.) were the remedies highlighted in the repertory.

- Lac-c is also known as dog's milk and is from the animal kingdom along with Lach. and Apis.
- Plat. is a homoeopathic remedy prepared from the platinum metal. Both Plat. and Phos. are part of the periodic table and come from the mineral kingdom.
- Puls., Hyos. and Stram. are very strong homoeopathic remedies that are part of the plant kingdom.

A repertorisation of the **physical rubrics** produced the following remedies:

Actaea spicata (Act-sp.), *Calcarea carbonica* (Calc.); *Silicea terra* (Sil.), *Mercurius solubilis* (Merc.), *Sulphur* (Sulph.), *Arsenicum album* (Ars.), *Sepia officinalis* (Sep.), *China officinalis* (Chin.) and *Belladonna* (Bell.).

- Sep. is a reddish-brown colour, named after the rich brown pigment derived from the ink sac of the common cuttlefish.
- Sep. also emerged as the prominent remedies from the animal kingdom.

- Calc. is the chief representative of the calcium compound.
- Merc. is a chemical element with the symbol Hg and atomic number 80, and is also known as quicksilver, which forms part of the mineral kingdom along with Sulph. and Ars.
- Chin. is a homoeopathic remedy made from a tree called Cinchona that was used for malaria treatment in the early 1630s.
- Bell., Lyc., Chin. and Act-sp. form part of the plant kingdom.

Conclusion

The data presented in this chapter allowed the researcher to examine the information derived from the interviews in order to identify common themes. These themes, along with their remedies, will be discussed and analysed in relation to the literature presented by the following chapter.

Chapter 5: Discussion

Introduction

This chapter aims to discuss the results and emerging themes identified from the interviews. This chapter will amalgamate the interviews and recordings in order to provide a clear, descriptive and comprehensive understanding of the common themes prevalent amongst traumatised canines; the most prominent themes experienced by these canines will be deliberated upon. The characteristic signs and symptoms will then be repertorised to highlight the most applicable remedies, which will then be discussed and compared to these signs and symptoms.

The essence of the remedies will be used as the basis for a comparative study of remedies yielding the highest numerical values and total number of rubrics on repertorisation of symptoms. The main objective of the study was to isolate common themes from the interviews and to determine the most-indicative homoeopathic remedies for traumatised canines.

MacRepertory was used to establish the most common remedies that relate to each symptom, shown in Appendix D, which uses a numerical system to express the most applicable remedy. This system scales from 1 (least applicable) to 4 (most applicable), and where there is no number present in a box, it is not applicable at all.

If there was a large amount of remedies applicable to a symptom, then the researcher focused on those that were most relevant according to the latest materia medica. Below is a table of the remedies that were discussed:

Table 3. Themes and their remedies

Theme	Remedies discussed
1. Forsaken	<i>Pulsatilla pratensis</i> , <i>Psorinum</i> , <i>Aurum metallicum</i> and <i>Lachesis muta</i> .
2. Restlessness and nervousness	<i>Pulsatilla pratensis</i> , <i>Silicea terra</i> , <i>Hyoscyamus niger</i> , <i>Arsenicum album</i> and <i>Camphora officinalis</i> .
3. Anger and rage	<i>Pulsatilla pratensis</i> , <i>Silicea terra</i> , <i>Hyoscyamus niger</i> , <i>Lachesis muta</i> , <i>Nux vomica</i> , <i>Lycopodium clavatum</i> and <i>Staphisagria</i> .
4. Jealousy and aggression	<i>Lachesis muta</i> , <i>Hyoscyamus niger</i> , <i>Apis mellifica</i> and <i>Ignatia amara</i> .
5. Attachment, depression and indifference.	<i>Pulsatilla pratensis</i> , <i>Lycopodium clavatum</i> , <i>Stramonium</i> , <i>Kali carbonicum</i> and <i>Calcarea carbonica</i> .
6. Neglect and abuse	<i>Pulsatilla pratensis</i> and <i>Lac caninum</i> .

Discussion of themes and sub-themes

The themes and sub-themes are interpreted below and validated with relevant literature to support the interpretation of findings.

Theme one: Forsaken

The theme “forsaken” was identified in each interview, which is defined as deserted or abandoned. (Quadagno and Knapp 1992) It is a reasonable response, because each canine had a neglected and abused background, cast aside by their owners from their homes with some left out on the street. This theme developed in many canines due to the lack of empathy from their communities and owners who had once loved them. The rubric used was “mind-forsaken feelings”, which identifies 275 remedies that share this commonality.

The first remedy appearing on the repertory sheet with a rating of 4 (Appendix D) was the plant remedy *Pulsatilla pratensis*. This remedy paints a picture of a tearful disposition and is described as being mild, gentle and caring, which leans more towards a female disposition. Canines share the same mildness as the remedy in this rubric. A *Pulsatilla* personality is a timid, lachrymose (tearful) disposition with a tendency to inward grief and silent peevishness, or at all events a mild and yielding disposition (Hahnemann 2002).

The essence of *Pulsatilla* is that of softness. It is compared to the windflower which bends to every gust of wind in order to survive. There is an inner weakness in the *Pulsatilla* patient, which is not able to face the hardness of the world, and tries to cover it up by finding soft and gentle people that would be affectionate and caring. It is also a remedy for constant weeping and is sympathetic. If they are not able to get what they want, such as love or support, the person feels extremely forsaken, as if alone in the world (Sankaran 2002).

Pulsatilla can be servile, mild and submissive in a way that is similar to the dogs described in Interview 1 and 9. *Pulsatilla* is easily confused with other remedy types, such as *Silicea*, *Phosphorus*, *Lycopodium* and *Calcarea*. All of these types can be emotional and passive, but the difference is in the degree of emotionality.

Phosphorus can be highly emotional at times, but its principal focus is more active, curious and adventurous than *Pulsatilla*, which is more concerned with being loved than with exploration. This preoccupation with personal emotional satisfaction is the cornerstone of the *Pulsatilla* personality, around which all other attributes revolve. *Pulsatilla* is always looking for emotional security and very easily feels rejected, as this rubric portrays (Bailey 1995).

In Interview 1 the remedy *Pulsatilla* is clearly depicted through the canine's need for consolidation and affection. The canine constantly follows the owner around and weeps for fear of abandonment. This insecurity matches the remedy, because the canine is fearful of humans and of being left alone. This is similar to *Lycopodium*, which does not want people in the same room, but does not want to be alone either. There is also a strong desire to be around company in the remedies *Pulsatilla* and *Lycopodium*. Just as the canine can be servile, mild and submissive, there is also greed, jealousy and the desire to get all the attention, as can be seen in the interview where the canine tries to steal attention away from other canines by starting fights.

Interview 4's Dog C was overly energetic. The canine is epileptic, so an attack can be brought on from excitement or hyperactivity. The canine was abandoned and the caretakers were unsure when the epileptic fits started. Dog C is very sensitive and enjoys having company, whether canine or human. This canine has unpredictable moods of joyfulness that can easily change to aggression when affection is not given.

Lastly, it is clear why *Pulsatilla* is well-suited as a remedy for feeling forsaken. A person that depends so much on others for emotional support would live in constant fear of abandonment; even the fear of abandonment can result in feeling forsaken: "Any action which may be interpreted as a lack of support or being let down will evoke a strong feeling of being forsaken in *Pulsatilla*" (Bidani 2014).

The next remedy was *Psorinum*, which had the second highest rating on the rubrics page (Appendix D). It is generally the first remedy that homoeopaths are taught due to its vastness and strong forsaken feeling. *Psorinum* is prepared from the fluid of blisters formed by scabies, which is a highly contagious skin disease caused by the infestation of an itch mite that burrows under the skin. This disease has a history of over 2500 years, at a time when Aristotle spoke of "lice in the flesh" resulting in a vesicle; the mite itself has remained relatively unchanged, without mutating, since then. Once potentised, none of the original fluid remains so that the energetic effects of the remedy can treat a range of complaints; *Psorinum* is classified as a nosode remedy as it is derived from diseased tissue.

This remedy is largely associated with skin eruptions and covers a wide range of skin ailments as described in this study's interviews. The remedy is also named "the great unwashed" due to its appearance and odour. In most cases, a patient may complain of itching, scratching and/or warmth. The rubrics in the repertory relating to this remedy are skin-roughness, scraped, skin, eruptions, rash and skin-dryness (Mondal *et al.* 2016).

Psorinum is also described being a deeper remedy, which tends to peel away layers of emotion and pain in its aim to identify the only truly vulnerable (causative) emotion that arises from physical and mind symptoms. One of the main themes of *Psorinum* is that of feeling abandoned or being forsaken. A *Psorinum* patient often displays symptoms of poverty, sadness and hopelessness, so the patient is overwhelmed by dejection.

Canines who need *Psorinum* usually lack vitality and are prone to mental disturbances, such as depression, anxiety and indifference. They also get infected easily and recover slowly. Skin complaints are common and if left unattended will become dirty and problematic, as seen in Interview 2: “Dog A originally lived in an abandoned building with other pregnant and homeless canines. It has not been possible to rehome Dog A because of her skin condition.” In this interview, there were signs of vulnerability expressed by these canines with their puppies, because they were unable to fend for themselves; they showed signs of fear and would cower. Their symptoms of “freeze up” or “cower” shows their lack of trust towards humans (Boericke 2004).

Psorinum is often indicated in chronic cases where another indicative remedy does not work, when improvement is temporary or when recovery seems hopeless. It can act as an intercurrent remedy to clarify the underlying symptom. *Sulphur* is the indicative remedy in acute cases that do not resolve as long as no other remedy is indicated, but when *Sulphur* does not work, *Psorinum* may be indicated. As with all nosodes and remedies of the materia medica, *Psorinum* must be diagnosed according to the individual’s symptoms. *Psorinum* is useful when there has been suppression of skin eruptions, diarrhoea or emotions.

As indicated by Interview 2, Dog A was on orthodox medicine for her skin condition, but this did not solve anything, because it kept recurring and spreading: “It seems to help Dog A for a while, but then stops.” *Psorinum* is described as “slowed down” in all of its functions; as a state of paresis. This remedy is perfect if all else fails; there are many layers of emotions to peel away in a canine that has been neglected and abused, and has skin infections that are slow to heal. Canines would benefit from *Psorinum* as they are rarely on anti-depressant medication to suppresses their emotions (Boericke 2004).

The third highest remedy in the rubrics for “mind-forsaken” is *Aurum metallicum* with a rating of 4, which is a remedy made from gold. According Sankaran (2002), its location on the periodic table relates to responsibility, power, leadership and performance. Gold is both indestructible and malleable, and is used for the finest jewellery for gods, kings, clergy and aristocrats (Kar *et al.* 2017).

Vithoulkas (1996) describes the theme of *Aurum metallicum* as “doom and gloom with suicidal impulses”, whereas Sankaran (2002) describes the serious and responsible side of the remedy, suggesting that the most characteristic aspect of the remedy is that of someone who cannot let down the person or the task that has been entrusted to them: “As soon as *Aurum metallicum* is unable to live up to its responsibility, it is inclined to drop everything. Eventually they will drop themselves, preferably from a great height.”

The essential features of *Aurum* are depression and self-loathing, which manifests as self-destructiveness. In *Aurum*'s reality, patient are only accepted by society if they can maintain their duties. As seen in the seventh interview, Dog A was loyal and dutiful as a security dog, but fell into a combination of depression and rage after he was abandoned by the security company as well as the owner. Dog A became aggressive and antisocial, and wanted to be left alone: “Dog A became his old frightening self again. We hardly went near him for the first six months. The only one that could get near him was the handler, because he fed him” (Boericke 2004). Therefore, *Aurum* is predisposed to feeling forsaken and is prone to feeling alone in this responsibility.

In the case of *Psorinum*, this state of mind develops because of feeling inadequate regarding stamina, money and/or beauty; this is mostly seen in old age, which is portrayed in most of the interviews where the older canines, with their emotional baggage, can be viewed as inadequate. *Platina metallicum* shares in this forsaken feeling as a minor remedy, which may also be considered along with *Aurum*. Both remedies have high standards that may be ambitious and found in positions of responsibility and authority. *Platina*, on the other hand, is much more concerned with personal image and feels deserted and isolated due to being haughty and arrogant. The remedy displays signs of pride with a high opinion of oneself and contempt for others, and is the opposite of *Psorinum*. This remedy is better represented in the mind rubrics for the theme “jealousy and aggression” (Boericke 2004).

The last remedy, *Lachesis muta*, had a rating of 3 in the rubrics. It is prepared from the venom of the bushmaster snake that is native to Central and South America. Its venom can paralyse the heart and central nervous system, and disrupt the blood-clotting process.

The main themes of this remedy include feeling forsaken leading to an intense jealousy, envy and fear, which all contribute to a highly charged state. The remedy can live in a state of passionate jealousy and will be a very intense force in a romantic relationship. On the other side of the spectrum, there is sometimes a more introverted presentation of this remedy that is much quieter and dwells on feelings of inferiority and low self-esteem. This is the polarity between these remedies (Bailey 1995).

This remedy has qualities of competitiveness, aggressiveness, attractiveness and sexuality common to the animal remedies which can also match interview seven. These symptoms from interview seven relates strongly to the remedy *Lachesis muta*. (Boericke 2004)

Lachesis has an intense jealousy that becomes extremely violent and ready to fight, similar to Dog A in Interview 7. *Lachesis* can also be compared to the remedy *Lyssin*. Although it is not mentioned in the rubrics, it tends to be similar to *Lachesis*. *Lyssin* is also known as Hydrophobinum meaning “saliva of a rabid dog”, and was first introduced and proven by Constantine Hering in 1833. It has an affinity towards the nervous system and shares many symptoms regarding the remedy *Lachesis* (Farrington 2005).

This proves that the remedies *Pulsatilla*, *Psorinum*, *Aurum* and *Lachesis muta* would theoretically be beneficial in the treatment of this forsaken feeling in canines.

Theme two: Restlessness and nervousness

Restlessness, like many other symptoms of anxiety, is a direct result of the “fight or flight” response being activated. Anxiety disorders are characterised by a variety of symptoms and the most common of these is excessive and intrusive worrying that disrupts daily functioning. Other signs include agitation, restlessness, fatigue, difficulty concentrating, irritability, tense muscles and trouble sleeping. These symptoms are identified in the following remedies and seen in Interviews 1-11. (Tyrer and Baldwin 2006)

The first remedy in the rubrics for mind and physical symptoms is *Pulsatilla* with a rating of 4. The softness is the central essence of *Pulsatilla*, which primarily makes it a feminine remedy. It is when a person needs support and affection. There is also a strong desire for the need of consolation which is common in most of the interviews. The canines are all looking to be loved and cared for, especially those that were physically abused. A major portion of *Pulsatilla*'s symptoms have to do with eliciting support from other people. *Pulsatilla*'s many fears express a deep-rooted foreboding anxiety, fear of the dark, death, disaster, etc. (Sankaran 2002).

Although the remedy is very trusting, it can also be very suspicious of strangers, and will not necessarily be won over by a show of friendliness. The jealousy is described as behaving petulantly and spitefully. *Pulsatilla* is particularly prone to all manner of fears, especially of being insecure as a result of inadequate attention or a change in circumstances. Like *Calcarea*, *Pulsatilla* is fearful of change and reacts anxiously to relatively minor threats to personal security. Being alone usually makes *Pulsatilla* anxious, which tends to be co-dependent. Aggression is especially threatening to *Pulsatilla* and will cause weeping.

The canines in Interviews 1 and 6 could benefit from *Pulsatilla*, because both were submissive, fearful and sought attention. *Pulsatillas* enter into relationships impulsively, in a desperate attempt to find the emotional security they crave. They may need much reassurance and support from others (Boericke 2004).

Pulsatilla is an appropriate remedy for sadness and despondency, a state of nervous depression, a disposition to brood over real or imagined trouble, negativity, misery, mild restlessness, and a state of mental unrest generally understood in broad terms as “nervousness”. A *Pulsatilla* patient weeps easily and is yielding, which as a condition represents nervous depression on the whole.

As stated in theme one, *Pulsatilla* and *Silicea* are two completely opposite states; they complement each other. *Silicea* is indicated for weakness and lack of resilience of the physical and emotional areas (seen in the rubrics with a rating of 4), and features high with the theme “restlessness and nervousness”. A *Silicea* patient becomes self-conscious, insecure and suffer from anticipation anxiety and have lost that protection (Boericke 2004).

Silicea patients are mild and easy to get along with, but prefer attention and company; they are also sensitive to their feelings, like *Pulsatilla*, and therefore do not know how to protect themselves. The main concept of animal remedies is the concern for survival, life and death, competition, sexuality, violence, extreme negative self-image, activity and movement. From a physical standpoint there are often distinguishing structural and functional pathologies that are seen in conjunction with mental states (Pitt 2015).

In Interview 9, Dog A was a stray described as timid and scared. When Dog A was rescued, the caretaker said: “She just held onto you, she didn’t want you to let her go; she wanted a human to love her again.” In this case, *Pulsatilla* would be appropriate because of the need for consolidation and support. The canine was not only submissive and emotionally dependent, but also timid, which relates to the yielding nature of *Silicea*. Dog A had little resilience and lost her support structure, which made her incapable of coping with her new environment, so this also indicates *Silicea* as a remedy. With *Silicea*, there is a unique feature of restlessness when falling sleep to the point where one wakes feeling frightened (Gibson 1987).

Silicea often seems to lack emotion and unable to communicate warmth and affection unless this too is a part of the image. Eventually they become unable to accept affection just as they are unable to give it. Thus, the essential features of the “cooped-up” state of *Silicea* are fixed ideas, obstinacy, fixed image and rigidity. In the uncompensated state the main symptoms are yielding, irresolute, desire to be nervous, timid and self-conscious (Boericke 2004).

Silicea develops tremendous anxiety and apprehension with a strong fear of failure. *Silicea* may appear like *Lycopodium* (similarly rated 4), because it also lacks confidence. Just as a *Lycopodium* person's survival depends on achieving a goal, *Silicea* is dependent on survival and fulfilling a specifically "accepted" image (Gross 1999).

Insecurity and cowardice are general symptoms for *Lycopodium* patients and are typically concerned with the opinions of others and also have many fears, particularly of death, the dark, crowds or new situations. They may try to hide their fears by becoming haughty or domineering. In Interview 3, Dog A had an abusive and neglected background, who was rescued from a tavern where she lived in a box with four other puppies. Over time, Dog A became an alpha who would dominate the pack, overseeing the other canines, which might have been a result of insecurity owing to her abuse. Individuals likely to respond to this remedy feel anxious from mental stress and suffer from a lack of confidence, so they might be self-conscious and feel intimidated by people they perceive as powerful. Taking on responsibility can cause deep anxiety and fear of failure, although the person is usually able to cope well (Sankaran 2002).

The next two remedies that rated 4 in the rubric "mind-restlessness, nervousness" were *Hyoscyamus* and *Lachesis muta*. *Hyoscyamus* is a plant remedy that is associated to the remedy *Stramonium*, and is a remedy for mania and schizophrenic states. The remedy is also comparable to *Lachesis*, except that *Hyoscyamus* is more intense. *Lachesis* and *Hyoscyamus* share similar features of paranoia and jealousy, which makes them difficult to differentiate. The main feeling of *Hyoscyamus* is that of suddenly being let down, disappointed, betrayed or deserted by a person one is dependent upon.

In Interview 4, there are various similarities between the remedy and Dog C. The canine is being treated for epilepsy to cope with her seizures. Dog C is described as hyperactive and will unexpectedly start fights with other canines for attention from the caretaker. "Dog C is hyperactive and will fight or irritate the other dogs even when they walk away, which leads to a seizure afterward." During an episode, she starts to shake, foams at the mouth and finally falls over while her eyes roll back. When she recovers from the seizure, which lasts about ten minutes according to the caretaker, Dog C usually vomits and is then exhausted, sleeping for an hour after the ordeal. *Hyoscyamus*, *Stramonium* and *Lachesis* are seizure-focused remedies in the materia medica and are possible matches for this case. This situation causes acute fear and panic in the canine as well as a variety of reactions, which can be either attractive or threatening, but it is clear that there is a tremendous fear of being alone (Boericke 2004).

In the same interview, Dog A is described as strange, because he craves company but has difficulty socialising with other canines. This acute feeling creates a kind of foolish insanity that

results in excessive drooling and obsessive antagonising of the other the canines, which sometimes causes him to bark hysterically at either canines or people. The canine tries to get attention through foolish behaviour, which is so ridiculous that it elicits laughter, much like the remedy *Hyoscyamus*. This remedy can be described as a person or canine that continuously seeks attention through foolishness, but if this fails, there is usually violent and threatening behaviour that follows. The “*Lachesis* personality” tends to be egocentric, unstable, and jealous, and may be possessive of the owner (as seen in Interview 4) or any new visitor.

Another remedy that arose regarding the rubric “mind-restlessness and nervousness” is *Arsenicum album*, and is generally considered the top remedy. It has a rating of 4 and is very important for anxiety, nervousness and restlessness. *Arsenicum album* is a homeopathic remedy that is prepared by diluting aqueous arsenic trioxide until only minor amounts of Arsenic remain. It is a classic remedy; its general characteristics are well-known to all homoeopathic practitioners. Originally proven by Hahnemann himself, *Arsenicum* has since been exhaustively described in every materia medica. The classic description in Kent's materia medica (2007) covers all the essentials in both the acute and chronic states of anxiety, and restlessness. The “*Arsenicum* personality” remedy has a deep sense of insecurity in the mind. There is always a feeling of being vulnerable and defenceless in a seemingly hostile environment (Boericke 2004).

The fastidiousness in *Arsenicum album* originates from this sense of insecurity. As a result, there is an obsessiveness with order and cleanliness in their aim for less anxiety and insecurity. Each canine displayed these feelings of insecurity because of their emotional and physical abuse. Some canines would continually lick their wounds until the skin bled, while others would only drink or eat if their bowl was in a certain area. In Interview 4, Dog C was diagnosed with epilepsy, where the seizures were brought on by nervous excitement in the presence of new people. Dog C is a social canine that uses nervous and excited energy to prompt human attention, but she is aggressive towards other canines (Betti *et al.* 1994). Most *Arsenicums* are in control of their life and can handle a lot of stress before their defence mechanisms break down.

Arsenicum is closely related to *Sulphur* and shares in self-confidence to some extent. However, under continual stress *Arsenicum* will develop anxiety to a far greater extent. Since *Arsenicum* individuals tend to be self-disciplined and in control of their lives, they are liable to break quite suddenly when they can no longer cope with stress. As seen in most of the interviews, each canine experienced anxiety, but with different triggers and varying symptomology. In the first interview, Dog A become anxious and nervous if the foster parent moved a few feet away and

would be terrified and submissive (or show small signs of aggression) if someone other than the foster parent got too close. Dog A developed this anxiety because of his co-dependency to the caretaker. In Interview 2, Dog A became anxious and freeze up in the presence of the caretaker, or could become skittish and difficult to move, which is similar to a nervous breakdown that is common in *Arsenicum*; there are in fact fourteen rubrics for in Kent's repertory (2007) for *Arsenicum* under the heading "Anxiety".

The most obvious thing about an anxious *Arsenicum* person is his restlessness, or as Kent puts it: "Anguish driving him from place to place". He becomes extremely agitated and cannot keep still for a moment. Unlike an agitated *Phosphorus*, an agitated *Arsenicum* is very hard to reassure. The paranoia of the agitated *Arsenicum* is an exaggeration of the suspiciousness. The suspiciousness of *Arsenicum* is simply another expression of insecurity, which leads to control of their environment on a more physical plane than that of *Pulsatilla*, who are looking for emotional security (Bailey 1995).

Another remedy further down the list of rubrics, with a rating of 4, is *Camphora*. It is a small, rarely used remedy, but is specific to the rubric "mind-restlessness and nervousness" and the rubrics for physical symptoms such as "convulsions, spasms, excitement, emotional". It shows potential and displays symptoms common to the interviews, and is suitable to some acute complaints of nervous excitement, frenzy, spasms and convulsions, especially for canines that have post-traumatic stress disorder (PTSD). The convulsions and coldness are common to the *Camphora* state. In its most acute state of *Camphora* excitement, the frenzy and irritability are extreme. There is loss of sensation and consciousness, and a feeling of coldness; the patient experiences two extremes with *Camphora*, one earlier and the other later. The patient may go from an extreme of mental excitement, violence and rage to one of prostration and exhaustion. In the mental state, there is anxiety and extreme fear of persons and the dark (Gibson 1987). The remedy indicated for physical symptoms or symptoms that may look similar to irritable bowel syndrome, (IBS) is caused by nervousness, excitement or anxiety, that is equal to that in *Arsenicum album*. There is burning, rending and tearing pain in the stomach alongside retching and vomiting. Cramps in the stomach and bowels spread to other parts of the body until there are convulsions, opisthotonos and anguish at the pit of the stomach. There is a cold feeling in the stomach and the abdomen is filled with colic and a burning sensation (Gibson 1987).

From these five homoeopathic remedies we can see the theme of restlessness and nervousness as symptoms of neglect and abuse. This also identifies that symptoms of nervousness and restlessness can be due to a variety of reasons manifesting in a canine and

can worsen over time. With the help of homoeopathic remedies, it may be possible to calm or even cure a canine's anxiety and stress, and indeed without any adverse side effects.

Theme three: Anger and rage

Anger is "an emotional state that varies in intensity from mild irritation to intense fury and rage", according to Charles Spielberger (PhD), a psychologist who specialises in the study of anger. Like other emotions, it is accompanied by physiological and biological changes; when you get angry, your heart rate and blood pressure go up, as do the levels of your energy hormones, adrenaline, and noradrenaline as can also be seen in canines (Tavris 1989).

Most remedies experience symptoms of anger and rage. In this repertory there are 580 remedies that depict signs of anger, but we will only be covering a handful of relevant remedies that match the interviews.

The first is *Pulsatilla* with a rating of 4 in the rubrics. On an emotional level, *Pulsatilla* displays timidity that is similar to *Silicea* and *Lycopodium*, and is known for its weepy disposition. Their tears can inspire sympathy in others and a desire to console them, but weepiness does not have to be present if other symptoms fit the case. The remedy is trademarked with having changeable moods: crying one moment and laughing the next (Boericke 2004).

Pulsatilla is emotionally sensitive and can experience shock, grief, disappointment, excitement, fear, sorrow, indignation, jealousy, mortification, sexual excesses and tiring mental work. This remedy also has a mild and yielding disposition similar *Silicea*, and the desire to please. Anger, however, is not a stranger to *Pulsatilla*. It is listed for anger towards trifles, sudden anger, temper tantrums, and they can be indisposed to talking while angry as well general rigidity (Farrington 2005).

Silicea and *Pulsatilla* are opposite to each other in expression, although both share the internal yielding characteristic. *Silicea* is obstinate and hard, whereas *Pulsatilla* is soft, passive and submissive. *Silicea* is averse to consolation when *Pulsatilla* craves it.

Silicea is a mineral, belonging to Group IV of the periodic table positioned below carbon, and is also rated 4 in the rubric "mind-anger". In the second interview, the canines were mostly mothers that had recently given birth; they became hard and rigid in order to protect their young. Just as *Silicea* tries to maintain a specific shape or fixed image, so did the canines in this case. *Silicea terra* is indicated when there is a strong tendency for feeling fragile, and this remedy is inclined to feel that others will abuse this weakness. It is also indicated when there is abuse, particularly from a close relative or loved one, resulting in a feeling of neglect (as with Dog A). This remedy has difficulty with relationships and trust, developing selfish tendencies and fearing

life because of abuse and abandonment, so the canine becomes hostile and unable to socialise. *Silicea* can also be dependant like *Pulsatilla*, but the contradiction is that dependency can cause the authority figure to leave. Interview 2 shows the canines' dependency on their caretaker, but they still remain cautious. Summarily, *Pulsatilla* and *Silicea* are two completely opposite states that complement each other (Lilley 2009).

The next remedy was *Hyoscyamus* with a rating of 4 in the rubric "mind-anger". Morbid jealousy is characteristic of *Hyoscyamus*, usually accompanied by rage that transforms into a biting, screaming and kicking maniac like *Stramonium*. *Hyoscyamus* harbours powerful sexual and violent urges in the subconscious mind, which may erupt dramatically during transient periods of insanity. *Hyoscyamus* individuals are prone to feelings of intense anger, but they are likely to control their rage unless they have entered a phase of frank psychosis, or have been rendered temporarily mad by jealousy, as can be seen in Interview 4. Dog A had severe food aggression after being part of many fights along with other strange behaviour. Dog C also displayed extremely jealousy by starting fights with other canines when not given attention (Bailey 1995).

The characteristics of *Hyoscyamus* are less disguised by social conditioning, which means that sexual and aggressive tendencies can be seen even in the absence of delirium. Like *Stramonium*, *Hyoscyamus* tends to be hyperactive and disruptive, lashing out violently when opposed, but to a lesser degree. The principal features of these cases were intense jealousy, feelings of rage and panic attacks. *Hyoscyamus* is generally less extroverted than *Lachesis* and is more prone to rage and panic. The anger of *Lachesis* is sudden and intense; an eruption that is short-lived, but powerful. Jealousy is a likely cause for this anger, but it is not the only one. The tense *Lachesis* individual can become more irritable and demanding, sometimes even furious and vengeful. Most of these canines had unresolved anger and vulnerability from past experiences. In Interview 7, Dog A was angry and aggressive towards the caretakers at first, and only after six months were the caretakers able to step into his cage to feed him properly, because he was blinded by an intense rage. *Lachesis* could help with this raging paranoia. Dog A did not crave attention, preferring to be alone; this is common to *Silicea*, which does not seek consolation or attention. The experience of paranoia becomes so overwhelming that patients lose all perspective of reality in an attempt to protect themselves, which can also be seen in *Arsenicum*, whereas *Hyoscyamus* is more likely to have extremely bizarre thoughts compared to the exhibitionism of *Lachesis* (Sankaran 2002).

The third remedy in the rubrics was *Nux Vomica* (also rated 4). This remedy is commonly used for a variety of symptoms and disorders and comes from an evergreen tree of the same name, which is native to China, East India, Thailand and Australia. Its raw seed is nicknamed “poison nut” for its toxic nature; the medicine is prepared from these dried seeds. *Nux vomica* contains a poisonous alkaloid known as *Strychnia*, which causes restlessness, trembling of the limbs, stiffness of the neck and jaws, constriction of the throat and tetanic convulsions with opisthotonos (Boericke 2004).

Dr Hahnemann said “*Nux vomica* is chiefly successful with persons of an ardent character; of an irritable, impatient temperament, disposed to anger, spite or deception.” It is best suited to an irritable and nervous temperament that is prone to indigestion and haemorrhoids; the *Nux vomica* individual is impatient, competitive and ambitious, where the major focus is work and achievement. People of such temperament have a focused nature and often have strong, aggressive personalities, which is characteristic of *Nux vomica*. The patient can be irritable, at first only sporadically, but as he becomes more compulsive the irritability turns into anger, followed by rage and outright violence. He becomes infuriated at the slowness and inadequacy of his co-workers; even inanimate objects can anger the patient (Farrington 2005).

Nux vomica patients are highly competitive in all aspects of life. They must win even at the cost of health, so they find it difficult to accept limitation and refuse to resign from circumstances. To keep up with work pressures, stimulants are used for their initial boost as a coping mechanism, but later toxicity develops, which overwhelms the nervous system and makes them oversensitive. These patients easily fall prey to collapsing at work on account of this substance abuse, or from indulgence and excess. This remedy would be suited to canines such as those identified in Interview 11: canines with aggressive tendencies were given pharmaceutical medication or sent to a behavioural specialist in cases where medication did not work. *Nux vomica* would be beneficial for complaints about diarrhoea, dog allergies and mild skin conditions that were mentioned by this vet.

Apart from *Nux vomica*, there are many remedies to consider for aggression and anger with mild urticaria, such as *Psorinum*, but unfortunately this vet does not believe in holistic or complementary medicine for treating physical and emotional ailments in canines: “I don’t think it would work better than pharmaceutical medication, and I have not read up or been taught much about it in vet school.” *Nux vomica* is also fastidious and anxious in nature like *Arsenicum album* and would help with anxiety in these canines, unlike the long-term medication used at this practice. It is regrettable that veterinary practice chooses long-term anxiety medication that cause side effects over patience and understanding for a proper diagnosis (Boericke 2004).

Issues coinciding with *Lycopodium* are usually a result of anger, horror, chagrin, disappointment, grief and fear. Typical patients of this remedy are timid and fearful adults with an irritable and domineering nature, and mental symptoms include dullness, confusion, poor memory, amnesia, anger, hypersensitivity to noise, sadness and anxiety upon waking. They frequently suffer from performance anxiety and are nervous in social situations. They do not prefer the company of others, and although they dread the presence of new people, friends or visitors, they are afraid to be alone. Insecurity and cowardice are general symptoms, because *Lycopodium* patients are typically concerned with the opinions of others, which can cause haughty or domineering reactions. In Interview 3, Dog A was subjected to neglect after being abandoned as a puppy where her only form of shelter was a cardboard box. As a result, Dog A developed a dominating personality as an alpha dog (Sankaran 2002).

The unique symptom of *Lycopodium* reveals an essential quality of this remedy, because it reflects a sort of rear-guard defence against diminishment, both physically and psychologically; this defence mechanism underlines much of the symptomology of the remedy. In early stages, it will produce the authority, power and control compensated for in the remedy. This power can present itself in many ways as it often needs to be expressed, such as being the boss at work, or whenever a position of authority and power is sought, including spiritual authority. This resembles Sulphur, which can be found in the rubric “mind-dictatorial”. The struggle to perform will only reveal itself at a later stage; this degeneration is important for many remedies (Bailey 1995).

When the underlying issues of the lack of confidence and cowardice are revealed, *Lycopodium* has a strong fear of being alone, a desire for company, and ailments are brought about by worries, cares, mortification and anticipation. There is an impression of fearfulness in general, although in *Lycopodium* this generally coexists with a broken-down state, where the patient is no longer able to compensate for controlling, intellectual and superior demeanour (Pitt 2015).

Staphisagria was the next remedy (with a rating of 4), which is important in the way that it needs emotional suppression, making this remedy wonderful for mental health. *Staphisagria* is prepared from the seeds of the plant and suits those who are mild, submissive and regularly suppress their emotions. It helps with emotional recovery from PTSD, anxiety, depression and suppressed anger (Anser *et al.* 2020).

The core theme of *Staphisagria* revolves around victimisation and abuse. Patients of this type get trapped in cycles of abuse where they are unable to say no or assert boundaries, but who then immediately regret and resent their lack of control over the actions of their abuser. Even

in temporarily abusive situations, *Staphisagria* results from suppressed anger, which indicates a core feeling of injustice and of being at the mercy and whims of others.

The classic physical symptoms of *Staphisagria* concern infections or cysts of the bladder and kidneys. These symptoms are the physical embodiment of repressed frustrations that are eventually provoked into action. Many digestive issues, including chronic IBS can also be a result of this suppressed energy; any medical condition which first began after an incident of suppressed anger or humiliation can be reversed with this remedy (Boericke 2004).

Staphisagria consists of three types. The first type is defined as a patient who has taken the time to develop an extremely sweet character that is gentle, shy and never allows themselves to feel anger or similar dark emotions for fear of shame. In spite of this suppression, the patient remains kind and gentle without negativity or bitterness brewing inside (Boericke 2004).

The second type is where there has been much suppression of emotions that the patient is unable to express, especially when faced with insult or abuse; the patient feels dignified against fighting back, but is deeply affected by the injustice of the situation.

Type three has a history of emotional suppression and pent-up energy that continually builds and unexpectedly explodes in expressions of anger, but not with violence like *Nux vomica* and *Lycopodium*. The first interview displayed this suppression of anger: Dog A became submissive because of his abuse, but his emotional suppression kept him submissive. When related to *Staphisagria*, Dog A is still gentle in nature despite his abusive background. Interview 8 is another good example: canines were forced into small cages to be showcased for adoption over weekends. If these canines were not adopted after a certain time or were too old, then they were euthanised. Canines at this shelter were either homeless or relinquished by their owner, and as a result these canines are depressed and isolated. The staff are rarely attached to the canines and don't show any affection for the canines under their care, for fear of attachment. Most of these canines show symptoms of depression and are submissive, which might be a consequence of suppressed emotions (Farrington 2005).

Anger and rage are both vicious emotions for a canine to experience, and if left untreated over a long period, it will manifest in a way that labels the canine as a danger to the public, which, more often than not, leads to another euthanised dog; canines are simply not given a fair chance at rehabilitation. The homoeopathic remedies discussed in this third theme would give abused canines a second chance at rehabilitation and permanent rehoming.

Theme four: Jealousy and aggression

Jealousy generally refers to thoughts and feelings of insecurity, fear, concern over a relative, lack of possessions and/or safety. Jealousy can consist of more than one emotion, such as anger, resentment, inadequacy, helplessness and disgust. The rubric used to identify the remedies was “mind-jealousy”, which consisted of 125 remedies, while the rubric for “mind-jealousy” (ailments from aggression) had 81 remedies. From these rubrics, three remedies were identified as being the most important alongside a few smaller remedies that shared commonality with the rubric (White and Mullen 1989).

The first remedy that came the closest to jealous feelings was *Lachesis muta*. Jealousy is a pathological symptom that contrasts love as is seen in *Pulsatilla*, which craves affection and constant consolidation from a loved one. *Pulsatilla*'s jealousy is envious, but also expects slights, so there is a general sense of mistrust towards people. There may be silent grief paired with much weeping, whereas *Lachesis* is present when love fails, combined with envy and vengefulness (Fernandes *et al.* 2004).

Rooted since antiquity in paradox and polarity, duality is the very essence of the snake, they are in contention with themselves – the lower self opposes the higher, the animal nature views with the human, deceit confronts sincerity, egotism struggles against selflessness, arrogance competes with indifference and perversity challenges morality. Conscience and desire strive for dominance. The spiritual conflict is the battlefield for *Lachesis muta*. The venom from which the remedy is prepared is immensely powerful and destructive, so the *Lachesis* individual is always in danger of being possessed by passions and feelings. They are aware of the struggle within, their labile emotions and thoughts and their unpredictability, between their thoughts and feelings and between desire and guilt. If they are unable to express their desires or redirect their emotions through creativity, it will have disastrous results leading to emotional turmoil or physical ill-health (Lilley 2009).

The next important point is the mental state. Nothing stands out more boldly than the self-consciousness, the self-conceit, the envy, the hatred, the revenge and the cruelty of humans. These are a result of self-consciousness and lack of self-love. The mental state is large: jealousy without reason, unwarranted jealousy and suspicion; the patient also experiences periods of violence. In most of the interviews at the shelters, each of the canines had either hatred or fear of men because their abusers were likely men (Fernandes *et al.* 2004).

In many cases a close connection between the mental symptoms and the heart symptoms will be noticed in the remedy *Lachesis muta*, especially in people who have been met with disappointment and there is prolonged melancholy, mental depression, hysterical symptoms,

weeping, mental prostration and despair, with pain in the heart, with a gone sensation or sensation of weakness in the heart, with difficult breathing and finally settles back into an apathetic state, in which there is an aversion to everything. When it continues for extended periods of time it can literally eat away at the soul. All types of positive emotions are suppressed by the unrelenting hate. When hate rears its head it can never do a person or animal any good. All sorts of ailments may arise as seen in Interview 7 where the canine had an intense hatred towards men, and it took the caretakers six months before they could go near the canine (Fernandes *et al.* 2004).

Lachesis ranks with *Hyoscyamus* as being the most prone to intense feelings of jealousy of all the constitutional types. They are similar in jealousy. The more intense a person's desire, the more liable they are to feel jealous of others who have what they want. Therefore, we can understand the jealousy of *Lachesis* as a natural consequence of strong desire. Sexual jealousy is the most common in *Lachesis* people, since sexual desire is usually their most intense attachment. In some cases, this jealousy can be totally unrealistic and can dominate the relationship to the point where it threatens its very existence; intense jealousy can lead to intense anger, and this is not uncommon in *Lachesis* (Fernandes *et al.* 2004).

The next remedy for jealousy is *Hyoscyamus*, which is similar to *Belladonna* botanically, and from a pathogenic point of view these two drugs are similar in their main features, but when examined closely they have marked differences. *Hyoscyamus* is a form of narcotics and if it is not utilised properly it can be dangerous. All narcotics are poisonous if carelessly administered. When *Hyoscyamus* is used medicinally it can be calmative, anodyne and antispasmodic, and the leaves can be utilised to make fine external preparations for multiple uses. *Hyoscyamus* originates from Europe and has been naturalised in America. It commonly grows well in waste grounds. The roots, seeds and the leaves can all be used for medicinal purposes. The mental state of delirium is the best part of *Hyoscyamus*. It is of a low, muttering type, whilst that of *Belladonna* tends to be violent and furious (Boericke 2004).

Hyoscyamus is known for intense delirium and suspicion, which leads to violent jealousy, and also has fits of ungovernable rage, but the violence is not so sustained as that of *Belladonna*. *Hyoscyamus* has a great variety of melancholia and one specific characteristic is suspicion, so frequently met with in cases of insanity or of those on the border of *Hyoscyamus*, which is suited to nervous, irritable, excitable, sanguine people. *Hyoscyamus* is full of convulsions, contractions, trembling, quivering and jerking of the muscles; convulsions are found in vigorous people present with severe violence. A state of irritability and excitability, suspicion runs through

acute sickness and intensifies in a way that there is no longer trust, which therefore makes it impossible to form a bond or any type of relationship. Many canines have a difficult time with rehabilitation because of their pasts (Boericke 2004).

These canines continuously live in the past and are very careful of their owners or caretakers that they do not want to be touched and would sometimes be suspicious of their food and not eat until the canine felt comfortable and started to trust their caretakers. Dogs that have been abused are severely protective or jealous of affection and love especially with other canines that they would become aggressive and fight. There is also severe food aggression towards other canines, which would lead to dangerous fights with canines and caretakers. There is a delusion that the person is going to abandon them or abuse them that most canines are protective and would run away or try to escape, which is a natural response when there is a feeling of impending danger or lack of trust (Boericke 2004).

The next remedy *Apis* is rated 4 in the rubrics. The remedy is prepared from the poison of the honeybee. It was first introduced into our materia medica by Dr Frederick Humphreys of New York. The preparation is very simple: live bees are put into a bottle and shaken violently. Upon them is poured five times their weight of dilute alcohol. After saturation and shaking, the tincture is poured off and strained (Bigagli *et al.* 2014).

Jealousy in *Apis* is as marked as in *Lachesis*. All her ideas and actions are centred around this. This frequently leads her to be suspicious of everybody while she entertains ideas of being poisoned. The natural pose of her mind, thus lost, brings on a terrible awkwardness. She drops everything out of her hand and breaks them. Impatience gradually makes itself manifest and she gets extremely restless, constantly changing about from one kind of work to another (Boericke 2004).

Apis is the queen bee and is the most jealous thing in nature. In its proving's *Apis* has developed two profoundly different manifestations, one is a profound indifference, the other an overwhelming jealousy. But this jealousy has been noted only in the female. The indifference is not only an emotional reaction, it extends into the mental sphere and affects the nervous control of the body so that the patient cannot walk or handle things without awkwardness. When the jealous phase is active, there is nothing of this passivity or indifference about them. There is anger and the desire to kill; all her ideas turn around jealousy and she is very talkative. There may be insanity with violence amounting almost to frenzy, either the indifference or the hyperactivity of mind often comes on after fright, rage or jealousy, this remedy can be another differential compared to *Lachesis* for Dog C of Interview 4 (Farrington 2005).

The Homeopathic remedy *Ignatia* consists of a grinded down bean to the point that it becomes a powder. This powder is then steeped in alcohol, which is then diluted into a non-toxic substance. The mixture is succused into the completed preparation. *Ignatia* is mainly a spinal remedy, as with *Nux vomica*, which seems to intensify the impressionability of all the senses, perhaps even more than that remedy does. Under *Nux vomica*, this over-excitability is exhibited by anger, vehemence and irascibility; in *Ignatia*, by melancholy with tendency to weeping. Now, while there is this melancholy with the tearful mood, the patient smothers his or her grief. The *Ignatia* patients keep their sorrows, keep them from others; while with *Nux vomica*, the patients are vehement and angry; they strike anyone who may oppose them; they are so overbearing that one can scarcely live with them. *Ignatia* is a remedy of contradictions. It is used to treat symptoms that are often paradoxical and erratic. For example, symptoms of nausea are relieved by eating, a sore throat is better from swallowing solids, and simple foods are harder to digest than heavier foods. *Ignatia* is the first remedy to consider in the case of emotional shock. It is best used for the treatment of emotional upset, especially depression, grief, anxiety and stress. *Ignatia* works well when there is rather hysterical behaviour that evolves into physical symptoms (Anser *et al.* 2020).

Those who turn to *Ignatia* as a homoeopathic remedy tend to be experiencing some sort of loss or emotional hardship. There may be grief in their life associated with a death or loss, and this may cause them to become a totally different person as they try to cope. They can be fragile and though they try to suppress their emotions, this can counteract and cause them to become manic in nature. Whether natural or induced by emotional stress, the individuals who need *Ignatia*'s support are sensitive, idealistic, sometimes secretive. Their moods may alternate frequently – tears turning to laughter and back again. They may internalise their feelings so well that only their sighs let you know what is beneath the surface. Over time, they can become very defensive, touchy, suspicious, jealous and even rude. In the ninth interview, Dog A was found abandoned in a sugar cane field and hid there for a long time until a caretaker arrived and waited for Dog A to come out of hiding. The canine displayed signs of emotional shock and was timid and scared, similar to the remedy *Ignatia*. The canine presented signs of grief and emotional distress according to the caretaker and seemed to be grieving for the previous owners: "In the first few days, the canine would not come into the house but go around the house and just cry for her puppies all the time. We could tell she was a family dog; maybe the family could not afford the dog and dumped her and sold her puppies." *Ignatia* could be a beneficial remedy for Dog A as the canine has experienced an immense amount of grief by losing her puppies and being abandoned by the previous owners. However, the canine did not present with much anger or jealousy or shows signs of being depressed and would prefer being

alone but still want consolidation from the caretaker. The differential remedy to consider for Interview 9 would be *Pulsatilla* due to the affection and dependence towards the caretaker apart from the constant whining, and that Dog A was also a mother, searching for her puppies. The remedy *Pulsatilla* can also present with submission and depression. Unfortunately, Dog A was more stuck with grief than jealousy and aggression (Boericke 2004).

There are many homoeopathic remedies for aggression and jealousy as seen in the rubrics. However, only a handful were discussed that were relevant to the interviews. Each of the remedies discussed had a personality to them and were able to identify with the canines' cases. Each remedy also has an emotional picture pertaining to the abused canines and were able to identify the feelings depicted or the reason for the jealousy and aggression. The homoeopathic remedies identified have been used for abuse and trauma in many human cases and would be beneficial to the abused canines due to the remedies being gentle and easy to administer.

Theme five: Attachment, depression and indifference

The rubric "mind-attached" had 48 remedies pertaining to this theme. Seven of the highest remedies will be identified and discussed regarding feelings towards attachment, indifference and depression.

The first remedy identified with both rubrics of indifference and attachment, which was *Lycopodium* and is known as "vegetable" *Sulphur*, because *Lycopodium* is a plant remedy. The important feeling that arises with the *Lycopodium* remedy is that if the person remains small, his or her survival will be difficult, it will lead to humiliation and they will have nowhere to go. This results in the main theme of this remedy to be focused on ambition, desire to grow and a lot of effort into becoming more powerful (Kent 2010).

Lycopodium is a part of the *Calcareae* – *Lycopodium* – *Sulphur* cycle. *Calcareae* represents the human need for stability and security, which translates into having a family, stability and protection. Stability can also include a lack of movement, adventure and growth. The original situation from which a *Lycopodium* state may have arisen is probably that of a person who feels he has no power. He is therefore aggravated with anything that concerns loss of power, while anything to do with acquiring power will make him feel better. People matching *Lycopodium* tend to be extremely ambitious and are willing to go above and beyond to achieve success. They can dictate, dominate, and will take the help from anyone that they can, but have one big fear: undertaking new challenges, facing new situations and meeting new people. All of these situations are necessary to achieve success, but in the face of these situations *Lycopodium* lacks confidence; he feels incapable. He develops an anticipatory anxiety from this lack of

confidence. This may appear like *Silicea*, but the difference is that in *Silicea*, it is not whether he is actually capable of doing the task that bothers him, rather it is that his image should be protected at all costs. So *Silicea* is afraid to go on stage, and *Lycopodium* is afraid to speak. In the adult *Lycopodium* person however, this cowardice may be hidden by an outward show of bravado. This becomes necessary to protect his ego. He may take recourse to talk tall, and boasting with bravado, which may eventually produce in him a fear of being discovered (Kent 2010).

Lycopodium thus represents a constant struggle between cowardice and egotism, between lack of confidence and haughtiness, between timidity and a dictatorial attitude. The person fears those in authority, but to those for whom he can represent it, he is rude and contemptuous. *Lycopodium* tends to have a large fear of being alone when they are around people that are unfamiliar to them; he can't do without people, he needs them. This may make him appear sentimental, affectionate and sympathetic like *Phosphorus*, but the contrast is that while *Lycopodium* depends on and dictates to people, the situation of *Lycopodium* is that of a man who feels that he is not loved as he is, but only if he achieves something in his life. He must reach a goal that is not easy, one that is very difficult. However, *Lycopodium* can also be very sensitive and sentimental. In many of the cases, the canines are submissive and quiet. After years of neglect, a canine will still be loyal to the owner, but in a few of the cases the canines were taken advantage of and left homeless, leading to more complications.

In the sixth interview, Dog A was left abandoned at a shelter and was then adopted. The owner had to continue to be patient until Dog A could eventually learn to trust the owner and not be scared. Dog A suffered from isolation and desired to be left alone and pulled away from people out of fear of commitment which is similar to the remedy *Lycopodium*. Dog A eventually trusted the owner, but became clingy and developed an attachment to the owner that caused the canine to create a barrier against other canines and people, because Dog A needs to socialise and reduce aggressive behaviour, be less timid and scared of new challenges (Kent 2010).

The other remedies *Lycopodium* to be compared with are *Phosphoricum* and *Lachesis muta*. The physical characteristics can help identify the remedy – fine features, elegant and refined, the face having an open and delicate quality, or a vulnerable fragility in a way that is generally very open, but not necessarily extroverted. This vulnerability, openness, sensitivity, and often refinement creates the foundation for the remedy and its stages of development. When in the intrinsic state, the person can be enthusiastic, passionate, open, responsive, engaged, sympathetic, often artistic and full of life. They are sensitive to what is happening around them and can respond to people and situations in a full way. They can be a bit too vulnerable and

even naïve in their relationship with people and become easily anxious and fearful. As the compensated stage develops, they can become too sensitive, too sympathetic, and their boundaries are not clear. They can get spacey, easily tired, and not have enough stamina to do things for a long time. They need to withdraw to recoup their forces as they easily feel burnt out. Their fears can become stronger, and their imagination can run wild. Physically they may have a vulnerability in the respiratory region, their digestion or nervous system. As the decompensated stage develops, they become much more broken down, especially physically with degenerative changes. They become mentally unstable, fearful, angry, and full of rage; they lose all boundaries and become seriously depleted (Banerjee *et al.* 2014).

Lycopodium ailments are frequently the result of anger, horror, disappointment, grief, or fright. Typical *Lycopodium* patients are, timid and fearful or irritable and domineering who are strong in mind, but weak in body. Mentally these persons are irritable, restless, quarrelsome, sensitive, weepy, melancholic and depressed. Other mental symptoms include dullness, confusion, poor memory, amnesia, anger, hypersensitivity to noise, sadness and anxiety upon waking. They frequently suffer from performance anxiety and are nervous in social situations. They do not prefer the company of others and although they dread the presence of new persons, friends or visitors, they are afraid to be alone (Boericke 2004).

Insecurity and cowardice are general symptoms; *Lycopodium* patients are typically concerned with what others think of them and have many fears, particularly of death, the dark, crowds, or new situations. They may try to hide their fears by being domineering. Lacking in power, *Lycopodium* may seem to be confident, but they have a huge belief that they are lacking in power. They do not have faith in their capabilities, they have a lack of self-confidence. They might have one dominating owner who was abusive and neglected the canine rather than praising him. He is always being compared to his elder sibling or others. This results in the shyness, timidity and bashfulness in *Lycopodium*, because he will go out of his way to please his peers. They pretend to be extroverted and outgoing. This can go to such an extent that a *Lycopodium* becomes a sycophant because of the fear of punishment; he fears social rejection. Keeping the timidity and lack of confidence aside, *Lycopodium* is also egotistical; they look down on everyone. He is hungry for power and starts dominating people, hurting them. They are extremely competitive and manipulative. When this inflated balloon of ego bursts, their fears come out. They fear being alone, having a nervous breakdown and failing to reach their destination (Master 2003).

The next remedy *Stramonium* is the most dramatic of the remedies and seen in the rubrics of the mind which correspond to states of insanity, and it bears close resemblances to

Hyoscyamus. The causative aetiologies of *Stramonium* is being in terror and witnessing violence or abuse. In canines it could be of witnessing an owner abusing other canines. In Interview 1, Dog A is scared of men and looks down, whining, which could be because of the canine's abuse from men in the past. A *Stramonium* patient is fearful and was likely trapped while witnessing violence. The fear manifests as a violent reaction due to fear. The remedy personality has four fears: darkness, being alone, water and closed space as seen in most of the interviews. The dogs are scared of the dark or scared to be left alone. In Interview 1, Dog A was very shut down, depressed and showed no emotion as stated by the caretaker: "He looked at you with a blank stare." The canine was neglected and had many physical symptoms such as the canine's hair would fall out and had recurring ear infections. The canine was submissive and would avoid eye contact or would be described as a robot, showing no emotion or feeling. There was also a fear of being alone, fear of the dark and a fear of men, which could be a sign of abuse. "He was forced to breed every six months." There is also a feeling of being abandoned, forsaken and left in a terrifying place. Only in *Stramonium* is the state of tremendous terror and violence a result of feeling lost and forsaken in a dangerous place (Farrington 2005).

The other part of *Stramonium* is that they witnessed the frightful terror and become violent that the remedy picture is that of violence, breaking things, biting and kicking in a rage followed by violence and mania. There is no holding back when *Stramonium* loses control. The rage is quite insane and accompanied by a definite desire to maim or kill in many cases; they want to kill when they are angry and have no control at times. The rage in *Stramonium* individuals often feels unfocussed, so the anger is not directed at anyone. It appears as if they are possessed by a force that is entirely impersonal. The same can be said of the terror that is felt, which is often unrelated to a specific fear (Sankaran 2002).

In the fourth interview, Dog C is a clear depiction of this. *Stramonium* is also a remedy for manic and schizophrenic disorders similar to the epileptic seizures of Dog C. This canine is also very dramatic, especially when in need of attention. The canine will be hyper and excitable, leaping, jumping and barking to try and attract any kind of attention from anyone. However, when Dog C becomes angry, the canine will aim her anger at whatever is closest, canine or human. Dog C loses it and gets into a frenzy of anger, striking and biting. Dog C is generally the cause of the fight or irritates other canines and will intentionally irritate the dogs and run after them even when they have walked away. *Stramonium* would be the best fit for Dog C especially for the anger and tantrums, the differential remedy that comes close would be *Hyoscyamus*, because of its resemblance to rage (Boericke 2004).

Stramonium patients are described as wildly delirious, with red face and great loquacity, yet experience feelings of loneliness, panic and tries to escape from this situation. There is a desire and need to be in a safe and secure place. *Stramonium* has a fear of darkness and constantly anxious and nervous (“mind-psychological themes, anxiety, fear” and “mind-restlessness and nervousness”). Darkness represents uncertainty, hopelessness, and any such situation. In darkness there is a possibility of danger. In Interview 6, the canine displays similar behaviour: the canine would attempt to run away or hide from the foster parent and would often want to be alone or become clingy to a person because of the unfamiliar environment. This is also seen in Interview 2 where Dog A came to the shelter with three other mothers and their puppies that had originally lived in an abandon building inside the sewage and in the pipes. Dog A was fearful, skittish, and difficult to catch with a tremendous fear of being moved, which made it difficult to tame and rehome, because Dog A would try to run away from the foster home and escape like *Stramonium*. Being in a new place, surrounded by other canines and unfamiliar people can easily lead Dog A to feeling terrified and helpless, wanting to go back home and in the pipes that were supposedly safer than at the shelter (Boericke 2004).

Kalium carbonicum, which is a carbonate of potassium, is known for rigidity, obstructions and closing off on the physical, emotional and mental levels. The rigidity or closing off may also be seen on the emotional/mental plane. First and foremost, is the conscientiousness of this remedy. They want to get everything done right: perfection and correctness are paramount. This is not just for show, not just the big things, but also the smallest detail. They become inflexible emotionally, not able to see things from others’ point of view. They know what they want and the reason why they want it. If you do not see it that way it’s too bad, here seeming like *Nux vomica*, and at times *Calcarea carbonica*. The reason for the rigidity here has more to do with perfection. They do not take positions to get fame or to put others down, but to do the right thing. Proper, correct, exact, conservative, orderly, work-oriented and duty-bound are all descriptions for this aspect of *Kalium carbonicum* patient (Farrington 2005).

The retentive quality leads to the hypersensitivity found in the remedy. The person is not only oversensitive to weather changes, but to noise, pain and touch, be it emotional or physical. Therefore, the remedy is listed in aversion to consolation. He is self-contained, tight, controlled, and official. Things are going to be done, and they will be done correctly. When someone tries to enter into their realm or tries to touch them emotionally, they become aggravated. This weakness leads to a need for containment, a need to figure out how to protect themselves and replenish themselves. This is where the idea first comes to create some order out of this weakness. This is where the idea of looking for a stronger partner, someone who would tell you

what to do at different times. This is likely where *Kalium* first turns to religion as a way to access a strong definite structure for themselves. Physically we find it in arthritis, which is so well known for this remedy. The arthritis leads to stiffness and rigidity and tightening or clenching of any muscle. Emotionally, their rigid inflexibility or façade has broken, and they let their emotions free, but mostly at this point the emotions that led to the freedom are not that pleasant; irritability, anger, yelling, shrieking, and at times even violence (Boericke 2004).

The discharges lead to weakness on all the levels of the *Kalium* patient. The weakness is found in the physical plane, such as vision, but also weakness of integrity in a person. They may have an exhausted look on their face and weakness of memory as well as diminished libido. Just as their joints may give way, their emotions let loose. This is why there is a lack of confidence, irresolution and timidity. There is also lack of protection, a diminished guardedness, where they are sensitive to drafts and cold air. They develop fears that something is going to get them, that they are weak and that they will become ill. As seen in this interview *Kalium carbonicum* is generally seen as being dogmatic and inflexible. This can be the same for canines that especially need structure and routine, such as military and guard dogs. These canines are duty bound, follow routine and are able to function optimally in their environment. However, if this is threatened then a *Kalium* personality suffers and falls. Causative factors of failure for *Kalium* is lack of structure and routine, which can manifest physical symptoms, leading the patient into depression and insecurity. However, with the right support and comfort the patient is able to grow and become better. In Interview 7, it could be that the guard dog matched this remedy from the canine's history of being duty bound as a guard dog, but once the canine was put into foster care, without any structure and rules, the canine became depressed, anxious and alone as is common of *Kalium*. The canine also presents physically with ailments on joint pain and was diagnosed with hip dysplasia, which is the medical term for a hip socket that doesn't fully cover the ball portion of the upper thigh bone. This allows the hip joint to become partially or completely dislocated, and because of this the canine becomes grumpy and aggressive from the pain. This is another indication for the remedy *Kalium carbonicum*, especially for patients displaying signs of arthritis (Boericke 2004).

Calcareo carbonica, is a homoeopathic remedy that is manufactured from the middle layer of shells. It is rated 4 in the rubric ("mind-indifference, apathy"). It is an impure calcium carbonate that differs from other homoeopathic remedies due to it not being made from substances that are soluble in water or alcohol. *Calcareo carbonica* must be prepared through trituration (Colin 2006).

Triturated material is ground or pounded until it is reduced to a fine powder (Kent 2010). *Calcarea carbonica* is a mineral remedy. The feeling of the remedy of *Calcarea* is the need for stability and security. Calcium offers protection not only to humans in the form of bone, but also in earlier forms of life in the form of shell, exoskeleton. The central theme of the carbonate is of a vital reaction, the main theme of *Calcarea carbonica* is a need for protection. There is a feeling of being too weak to face the cruelty and roughness of the world. So *Calcarea carbonica* tries to build a protective wall of defence, which will ensure safety and security (Sankaran 2002).

There is a slowness and ponderousness about *Calcarea carbonica*. The metabolism, the thyroid, the glandular development, the mental, emotional and physical growth and maturation, the venous and lymphatic circulations, the resistance to infection, the ability to repair and convalesce and the digestion are all slow and tardy. The intellectual constitution of *Calcarea carbonica* patients is marked by the same slowness and lack of energy that characterises their physical movements. Emotionally, *Calcarea carbonica* patients tend to be afraid of the dark, isolation and of getting sick. They are terribly sensitive, self-conscious, shy and timid, easily take offence and fear being mocked or ridiculed. *Calcarea carbonica* dislikes being watched, has trouble with public performance and is used for phobia and abuse of both a sexual and non-sexual nature (Kent 2010).

In the first interview, the physical appearance apart from the emotional appearance did match the remedy profile: Dog A was found in a kennel and was used to breed with other female canines. He was severely overweight and had been living in a small space with one bowl for food and water. One of the reasons that indicated abuse and neglect was that Dog A would not look at the caretakers, especially if one of them were a male. Dog A would cower and become distant or avoid men completely. Another reason was dogs are loving and would beg for affection, but Dog A was the opposite and was mostly just shut down and submissive leading to a depressive state and would just look downwards. Dog A is unable to socialise with other canines or be with male dogs and battles to develop a relationship with canines or owners because of trust. It took the caretaker a long time for Dog A to trust her and during that time, Dog A had become extremely attached to the caretaker similar to the remedy *Calcarea carbonica*, especially when there has been a history of abuse and neglect leading to fearful, timid and depressive tendencies (Boericke 2004).

Calcarea is a sensitive type and when her feelings are hurt, she is most liable to resort to pettiness. *Calcarea* is a little less emotional than *Pulsatilla*. Nevertheless, *Calcarea* is still emotional, in the sense of being soft, nurturing and sentimental. *Calcarea* can easily be mistaken for *Pulsatilla*, since both are mild and nurturing by nature. The principal difference lies in *Calcarea*'s earthiness, which prevents the constant flux of emotions that *Pulsatilla* is subject

to, and makes *Calcarea* more stable, and less dependent on others *Calcarea*'s soft heart cannot bear to hear of cruelty, similar to the remedy *Phosphorus*. It is when *Calcarea* is hurt that the remedy profile will withdraw into the shell and refuse to have anything to do with the person who caused the upset; *Calcarea* can then be resentful and even bitter. When *Calcarea* is upset she tends to react irrationally. Again, this is true of most of the emotional types *Calcarea* avoids, feeling anxious most of the time by sticking with the familiar (Farrington 2005).

If we consider the state of *Sulphur*. The feeling of *Sulphur* is of being disconnected to others and of being treated like you are no one, which is common in the interviews. Many of the abused and neglected canines are often antisocial and tend to pull away from humans, preferring to be left alone, while on the opposite side the canines that have been abused seek a companion, but are unable to socialise and display strange behaviour that leads to the canine being caged and separated from the other canines due to pack fights and lots of barking (Lilley 2017).

The description of the *Sulphur* state is very much of the person wanting to become someone. *Sulphur* is indicated for impulsiveness, forsaken feeling, attachment to specific things, lost and direction and fear especially left alone in dark, unknown places. There are issues of complete and implicit trust, understanding, familiarity, comfort, communication and confidence. In *Sulphur*, these feelings are well established and expressed as selfishness or self-centeredness; it's a more advanced development of a sense of self (Lilley 2017).

Next to *Sulphur* is the element of *Phosphorus*. The feeling of the *Phosphorus* is more severe than *Sulphur*. It is more like being treated like you are less than no one, like you are inferior to others. It is much easier to see this in the descriptions of *Arsenicum*. Many descriptions of *Arsenicum* are of someone treating others like they are inferior. With *Phosphorus* there is a disconnectedness to others, *Silicea* feeling of being distant, away from others and yet *Phosphorus* can also be very friendly, sympathetic and attractive in their behaviour (Farrington 2005).

The next remedy *Pulsatilla*, this remedy is very affectionate and loving when things are going well. Negative moods may be relatively infrequent unless there is emotional insecurity causing an upset. *Pulsatilla* is very sensitive to any withdrawal of affection and is prone to all manner of emotional states, the majority of which are brought about by a threat to relationships with loved ones, or by a lack of a loving relationship. If there is a feeling of being loved, then the remedy is mild and gentle, but if this is threatened, then the flip side there is no discipline, automatic defences, or rather than suppressing the sadness, she will cry. Rather than suppressing the anger, the remedy will become violent. When things are not quite so bad, but there is some

disturbance in the relationship, *Pulsatilla* may be edgy or constantly irritable and tends to become very attached to people or animals. After bereavement or separation, she may break down in hysterical weeping (Boericke 2004).

Pulsatilla is just as prone to positive emotions as negative ones and gets excited easily. At such times she may be so excited that she exhausts herself. *Pulsatilla* can also be jealous and will try to steal attention back or become selfish with being in the spotlight and find ways to remain the center of attention and consolidation. In most of the interviews, each of the canines have symptoms that matched the remedy *Pulsatilla*. In the first interview, Dog A develops an attachment towards the owner and constantly weeps and follows the owner. The canine is also mild and submissive and craves attention and consolidation as mentioned in theme one in the third interview. Puppy A is described as timid and scared, but with proper care, love and support Puppy A was able to become confident to adjust to the new surroundings. *Silicea* would also be a differential that is similar to *Pulsatilla*, but does not constantly need reconfirmation and much consolidation or attachment. Each of the canines in shelters or foster home became attached to the caretaker or foster parent over time, mostly because the canines were neglected and would want to be loved and taken care of. Some of the canines, however, needed time to trust because of the insecurity and having been moved before or abandonment more than once. The underlining issue is that most of the canines want love, confirmation, support and attention. *Pulsatilla* could be the perfect remedy to start with in any case to see the bigger picture and treat the canine. In theory, the canines could have more of an emotional insecurity than of physical symptomatology (Farrington 2005).

Canines that come from a background of abuse, neglect and trauma will present with behavioural problems, but not every canine is treated. There is a high number of neglected and abused canines not being diagnosed or simply not being treated as pharmaceutical medication can be expensive, difficult to administer and lastly, rehabilitation is not successful. These canines have two options, either the owner relinquishes them, and they are euthanised, or the canine goes on heavy drug medication that completely numbs and disorients the canine to the point where the canine becomes addicted to the medication. Fortunately, there is a third option available. Homoeopathic remedies are shown to aid in recovery and are useful in treating cases that present with depression, attachment disorders and indifference in people and would be useful for canines with similar issues. The remedies are also affordable and does not contain any harmful substances. Homoeopathic remedies are deep-acting and tend to heal the emotional and mental from which physical symptoms manifest.

Theme six: Neglect and abuse

Abuse and neglect are the most common and important themes that are able to summarise the entire chapter. In each of the interviews in Chapter 4, neglect and abuse were present. The signs depicted from neglect and abuse were abandonment, anxiety, anger, depression and aggression that the canines had to endure before they were placed in a foster.

In the first interview, the canine was forced to breed, sharing food and water bowl, to rarely having food and living in a hostile environment with no comfort and necessities for a pet. This is classified as psychological and physical abuse. There are many types of abuse such as physical abuse, this type of abuse does not just mean punching, hitting, slapping, kicking, strangling or physical restraint, but can also include invading physical space or feeling unsafe (Simone *et al.* 2016).

This abuse is seen in the fourth interview where Dog A was left homeless with no information regarding the past. The canine was physically and emotionally abused on the street, being screamed at by people and eventually beaten and thrown stones at. Emotional and verbal abuse includes insults and attempts to scare, isolate or control someone. It is also often a sign that physical abuse may follow. Emotional and verbal abuse can have short- and long-term effects. Interview 4's Dog C has either had a traumatic accident from physical abuse or the behavioural disorder along with seizures could be a manifestation of emotional abuse. Dog C has no recollection of past owners and was neglected regarding treatment for the seizures until she went into foster care. Emotional abuse to a canine can also create long-lasting effects and cause depression and anger (Simone *et al.* 2016).

Lastly, psychological abuse although it is very difficult to diagnose. Canines can experience behavioural disorders due to an owner's emotional abuse and physical abuse by demonstrating a sense weakness within the canine and showing dominance. Psychological abuse is common with people due to being able to easily communicate with health professionals. With canines it is difficult to detect psychological abuse as they are unable to communicate the way normal patients would. A physician can diagnose the abuse, but with a canine it can be misdiagnosed. Psychological abuse in canines can be identified when there is an abnormal relationship between the owner and pet. The pet being overly dependent on the owner and fearful of every move. The canine is isolated with showing signs of fear and vulnerability, but unfortunately the pet cannot express the abuse or speak about it. Signs of psychological damage to a canine includes extreme fear, aggression towards people and animals, anxiety or indifference. These symptoms are seen in most of the interviews. Dog A in Interview 1 was depressed, quiet and fearful towards men. In Interview 2, the canine showed behavioural disturbances from abandonment and neglect. The fourth interview with Dog A displaying particular behaviour

disorder with other canines and people: “His strange behaviours include drooling excessively, irritating the canine , digging or escaping to trouble any canine that in the same cage and finally he lunges and barks constantly” (Simone *et al.* 2016).

The first remedy in the rubrics (“mind-abuse-agg, ailments”) is *Pulsatilla* also known as the pasqueflower or wind flower. The remedy has a tendency towards the female sex. It is generally a good remedy for abuse. *Pulsatilla* personality is one of tearful disposition as described in earlier themes (Forsaken theme) the remedy seeks an unimageable amount of consolidation, affection and attention. These are the traits that abused victims would identify with, as most of the interviews depict, many canines strive for attention, affection and love from their owner especially after neglect and abuse. It is a twisted and complicated relationship where an abused victim strives for love. The remedy is also described as having changeable symptoms due to feeling happy or loved to immediately change and becoming aggressive. However, this is also a common characteristic in abused victims. In a study, abused victims tend to have unhealthy relationships that develops into insecurity and becomes an attachment disorder to the abuser. The same can be said about canines, they develop unhealthy relationships and become attached to the abuser, canines in the interviews show signs of weeping, whining and become competitive for affection, which is a common for the remedy *Pulsatilla* and seen in abused victims. Even after the abuse is over, the canines become needy and the need for consolidation increases. The canines also become extremely jealous and aggressive if they have to compete for attention or affection from the owner as seen in Interview 1 and 6 discussed in the theme forsaken.

Pulsatilla is indicated when there is abuse, sadness, feeling forsaken or continuous amounts of love to feel protected and be completely dependent on someone else. Many victims of abuse and neglect do not do well being alone or fear of the dark. The same can be said for most of the canines in the interviews and are characteristics of the remedy *Pulsatilla*. The remedy has a strong affinity towards not being loved and would manipulate or try their best to be loved; canines depict similarities to this. From whining to depicting the emotion sadness or being weepy and timid in hope that the owner would love and care for them (Boericke 2004).

Even though *Pulsatilla* is the first rubric for abuse the next remedy is significant and worth mentioning in the mind rubric page, but is not seen in the physical and mental symptoms. The remedy *Lac caninum*. This remedy depicts many of the themes such as rage anger, feelings or forsaken, and aggression that are from the main theme of abuse and neglect (Farrington 2005).

The themes of the milk remedies center around dependence and independence, nurturing and a lack of nurturing, a feeling of having suffered wrong and the suppression of natural instincts in order to be able to harmonise with the group to which one needs to belong which again is common in the interviews conducted. The primary function of mammal's milk is to nurture the vulnerable, dependent baby. It is not only a food, but also a child's need to grow, thrive and be strong. When things go wrong here for the mother and baby, it can lead to issues with food that can manifest throughout the life of the child and on the adult life (Pitt 2015).

A theme of bonding between the mother and baby and the holding of the baby also plays a part here. The remedy pictures represent all the things that can go wrong in the lactation period, when the milk is sparse or bad the baby can fail to thrive and arrest in growth. When the bonding between the mother and baby is not fulfilling for the baby then this can lead to feeling of separation, forsakenness, isolation and estrangement. All relationships may suffer later in life leading to inability to bear touch and intimacy. This can also lead to fear of narrow or confined spaces, which was an issue in Interview 7 where the canine could not be in small spaces and didn't want to be touched to the point that he was caged for six months, because he would bite or attack people. The canine was abused and made into a security guard dog and eventually he was abandoned by a previous owner and now in a shelter. Thus, creating the forsaken feeling that had started from the time he was separated from a family and made into a vicious security dog (Sankaran 2002).

David Lilley (2012) states that for thousands of years, dogs and humans have walked the same path as intimate companions in love and devotion, in kindness and cruelty, in work and play, in adoration and contempt and often in suffering and death. Their entwined destinies have shared emotions, experiences and images into universal memory of the collective canine unconscious which reflects these parallels and are dynamically imprinted in the milk of dogs. Therefore, *Lac caninum* is often used more as a prototype. This remedy has a very violent opposition from prejudice and ignorance. This results in amazing therapeutic powers.

Due to the medicine being derived from a domestic dog we should expect it to portray characteristics like loyalty, courage, self-sacrifice, obedience, forgiveness and unconditional love to appear. Instead, we see a testimony of degradation, ignominy and abuse resulting in retaliatory resentment, rage and hatred. The nobler traits are there, but so recessive they constitute a mere glimmer in the surrounding gloom. The picture is threaded with evidence of humility, a pervasive sense of inferiority, failure, guilt and shame, a feeling of being diminished and degrading. The self-denigration can reach such a high level that it can turn into revulsion, disgust and intense loathing (Pitt 2015).

Lac caninum is forgetful and impulsive. It is a remedy of anger and rage that is generally directed at self rather than others. *Lac caninum* can burst into rage with anger from the slightest provocation, they cannot control their impulses which relate to aggression and rage and those represent a history of abuse. *Lac* remedies are made from mammals. The word abuse in this sense is strictly related to the animal kingdom. They are taken from their natural environment and domesticated to adjust them to the human sociality. During the process of domestication animals are often hurt, maltreated, forsaken or killed. Certain animals are able to resist for a short period of time, but will eventually break down and submit to their masters, or die because the master is always stronger than the servant (Pitt 2015).

The animal then gives in at the cost of freedom. It can also happen that at some point they will no longer accept the abuse and they will revolt against the master, jumping to the opposite state and becoming wild again. All domesticated animals have learnt to keep instincts under control, but it will have a constant antagonism between civilised behaviour, and the animal instinct *caninum* may feel hindered in expressing their own needs, assertiveness and anger. They may actively suppress this part of who they are, because they don't have a strong sense of self, and basically subjugate themselves in service to their family. This can lead to anger and frustration, but they're too afraid to let it out for fear that it will injure the other person or permanently damage essential relationships (Pitt 2015). Most of the interviews have depicted this.

Canines have been neglected and most have been abused by their owner or from being homeless, and it is because of these circumstances that the canines in the interviews have unsettling feelings towards humans. They have an enormous amount of pain and frustration that gave rise to their feelings of being scared, fearful and angry, especially towards men. In most of the interviews, rage and anger are shown with repeated episodes of attacks and foster being wary to be close to the canine.

In Interview 4, Dog A had been in many fights that his scars are visible on his neck and from the past trauma of being attacked by other canines and being neglected. Dog A is constantly on edge and will attack a dog or person if they are too close, similar to Interview 7. The caretakers could not go near the canine for six months because they were so afraid, and that the canine would attack. In Interview 7, the canine was trained to be a security dog and was tortured and abused to become frightening and aggressive towards dogs and people. He was then abandoned by the security company and given to an owner that also could not keep him as a result, over the year the canine has built up and been through much anger and pain that rehabilitation has been difficult, because the canine refuses to trust or let anyone be close to him. The canine is extremely violent and separates himself, he is also constantly caged to avoid fights with other canines and for the caretaker's safety, but unfortunately the canine cannot be

adopted until his rage and anger is under control. He refused to be touched or feed and becomes extremely angry when there is a man around that he starts to bark aggressively and prepares to attack if too close. The symptoms match *Lac caninum* the remedy and would be beneficial especially that it is from a canine (Pitt 2015).

Lac caninum is one of the most dependent of all the milk remedies. People matching this remedy tend to be closely tied to the maternal image in their life and feels that they must morph to be whatever the family requires, which leads to feeling insecure and that they cannot possibly survive in life without the support and structure of the original family. When decompensated, they may feel emotionally blackmailed and may have symptoms of being constricted and uncomfortable. This could lead to feeling as if one's identity were suffocated (Boericke 2004).

Lac caninum is one of the most adaptable and submissive remedies of the materia medica. He makes himself completely submissive to his family, yielding to their power and authority and dutifully attending to their every need. He may vigilantly attune to others' desires, trying to anticipate what they want before it is even expressed, so obsequious to others impedes his ability to evolve into a differentiated individual.

Lac caninum tends to be deeply enmeshed with their family and fears any potential abandonment from them; they may be too insecure to manage on their own. In general, they believe that they must please others and avoid conflict or their family might abandon them. If such a loss were to occur, they would be doubly devastated by the inability to give back to their family. In general, they feel a burden to repay all that was done for them and would feel awful guilt if unable to do so (Boericke 2004).

Another common theme is lack of trust stemming from a possible lack of bonding or warmth from the mother. There is a lack of trust in the life and in the patient themselves and this comes from the lack of feeling of security occurring during the diminutive bonding in lactation. Mothers' milk allows growth and grounding so there can be a sense of disconnection and lack of grounding and the themes needing to escape the body because they feel imprisoned in it. There are themes of indifference or lack of feeling. There is also a sadness and depression that they are always trying to please people because there is a history of abuse which leads to lack of trust and abandonment. Any loss can be especially difficult for them. If a family member dies or goes away, they often suffer terribly for a very long time, all the while having no idea what to do with themselves. As a result, they are not only overwhelmed about the loss itself, but by the fact that they have such a poor ability to cope with it. In other words, it reminds them how truly deficient they are, and it may seem to them as if they are always losing someone along the way.

Each interview had a lack of trust towards owner or caretaker and battled to accept the love in support from them, the canines had been abused and neglected leading to distant feelings or being emotionally closed off from the world or aggressive towards everyone. *Lac caninum* does match the majority of the interview cases and would be a good remedy to start with, because most of the canines were abandoned or sold while they were still a pup and placed in harsh situations and had to fend for themselves or find a coping mechanism to deal with the abuse which lead to behaviour disorders ranging from depression, submission, indifference or attachment issues which can be difficult treating especially to be rehomed later or to rehabilitate the canines (Boericke 2004).

Lac caninum can be deeply impacted by loss, particularly losses associated with family members, such as when children leave home. Any loss seems to get stuck in his system, and so it seems impossible to ever address or resolve his grief and move forward. The *Lac caninum* state has a great lack of confidence. That they feel ugly and imagines that they are being insulted and compounding feeling of worthlessness. David Lilley (2012) stated that it is common for *Lac caninum* to have had a difficult past and that the difficulties can give rise to a great lack of confidence. There is a feeling of not being needed by the family and being looked down. That from the abuse and feeling unwanted that they develop self-disgust, therefore giving in the feelings of inadequacy and low self-confidence. This remedy also abounds in nervous symptoms, it is deep and long acting. The mental symptoms are prolonged and distressing. The remedy is also very sensitive and overexcited due to nervousness. The remedy depicts anxiety and fear from traumatic events similar to abused victims of repressed traumatic memories. People that respond well to Lac-caninum are very passionate and can be very aggressive and defensive (Gibson 1987).

They have a strong hatred for the person that's responsible for their abuse in the past, which is seen very clearly in Interview 1 where the canine is very submissive towards a man and cannot bear look or be touched by a man, and with Interview 4 the canine has extreme social anxiety and restlessness that the canine is unable to socialise with a human or with other canines and due to the anxiety. Dog A in interview four has been described as having a strange and weird behaviour and tends to scare other canines when ultimately the canine is trying to make a friend or be in a pack with other canines. The main reason for this and that explains the behaviour was due to past events where Dog A in Interview 4 was homeless and scavenged for food from dustbins and people would throw rocks and physically abuse Dog A, and most of Dog A's behaviour was a result of an incident that resulted in a cranial fracture, which he was then put

into a canine shelter and is now looked after and cared for until he is adopted or be rehabilitated (Gibson 1987).

Lac caninum can be extremely uncomfortable with his instinctive desires and aggressive impulses. He tends to suffocate both and submissively defers to what other people need. In general, to show aggression is much more complicated and problematic for *Lac caninum* compared to the other milk remedies. Being blocked from expressing this part of himself can lead to decompensation and the development of diseases, like rheumatism, that block the body from natural movement (Gibson 1987).

In conclusion, it is not easy to identify neglect and abuse in canines as well as treating canines for the abusive history. There are also many disadvantages with rehoming an abused and abandoned canine due to the fear of the canine displaying disturbing behavioural disorders. Many owners would rather abandon the canine than work through and be patient with a traumatised dog. Homoeopathy has a variety of remedies relating to abuse and neglect as discussed in this theme. The remedies mentioned could aid the canines in successfully being rehabilitated and being rehomed in the future.

Objectives

The first three objectives of this study focused on finding and assessing traumatised canines and then trying to find common themes with regards to signs, symptoms and behavioural patterns. This information was then analysed and connected to various homoeopathic remedies that would be indicated for these symptoms if the subject was a human. These objectives were clearly fulfilled throughout the research and the previous chapters go in depth on how this was done, and which results were concluded.

Objective four and five are directly connected to one another, and if objective four, which was, to create a clear theoretical correlation with the possibility of utilising homoeopathy in the treatment of canines, was not properly established, then objective five would not be possible. However, it is clear throughout the research that the traumatised canines depict a direct correlation between their actions and symptoms as that of a normal human. When the symptoms were uploaded to the MacRepertory software, it immediately provided a clear indicator of which remedies should be used to treat the animals. These findings provide clear and credible theoretical indicators that homoeopathy can be directly applied to canines. This paves the way for future research to carry out the necessary clinical trials necessary to prove that homoeopathy can be applied in the treatment of canines. Therefore, when looking at the

research as a whole it is clear that the objectives were accurately and clearly met in every aspect.

Conclusion

This chapter discussed and detailed the main themes of this research study, drawing from the knowledge and perceptions of the homoeopathic materia medica relating to the neglected and abused. It is clear that certain critical points occur in a similar pattern in canines as it does in humans.

Chapter 6: Recommendations

Introduction

This final chapter will focus on the outcomes of the research in order to draw conclusions and provide recommendations as far as possible for future research. It will display that theoretical application of various homoeopathic remedies to treat abused canines, paving the way for future researchers to apply practically. The chapter will discuss the limitations experienced throughout the study and how it affected the final outcome.

Limitations experienced during the study

Although comprehensive training instructions were provided to the interviewees explaining exactly what was needed, i.e. Letter of Information (Appendix A), some of the described symptoms were still vague, incomplete or indistinct in nature. This could possibly be attributed to their limited knowledge and understanding of homoeopathy. It could prove useful to provide caretakers with reading material that contains basic information and knowledge of homoeopathy allowing them to have a better understanding of what information the researcher would need.

The baseline period of the study served as a basis for comparison of data. This allowed for elimination of unqualifying symptomology. With the high influx of symptoms during data collection, the researcher recommends that the baseline phase be extended so that the interview questions are more precise, allowing for a more clear set of symptoms and therefore providing a distinct remedy picture.

Limited studies available supporting this type of research causing shelters to be hesitant in allowing the use of homoeopathy as well as allowing homoeopathic research to be done on their premises. The solution to this is not an easy one and can only be done by more homoeopaths furthering the research on utilising the materia medica on canines and thus increasing its popularity.

There have been many discrepancies between different materia medica and the repertory for canines to divulge their symptoms. It can be argued that using human materia medica for the canines is not recommended. However, in earlier research it is stated that animals would most probably benefit from homoeopathic treatment, although their anatomical bodies differ from that of a human being, symptoms were similar and so were the emotions expressed by the canines.

Although there were multiple restrictions and hurdles throughout the course of this study, these issues were overcome, and the researcher was able to conduct sound and reliable research.

Recommendations

It is important to use all available resources to try and help neglected canines instead of just focusing on what is currently being used. Given the general lack of public knowledge of homoeopathy in animal care highlighted by most of the participants, it is suggested that the profession embark on campaigns to promote homoeopathic treatment for animal healthcare. The campaigns should initially be directed to veterinary schools to educate them on the options available for animal healthcare and holistic treatment provided, and later for the public at large. A symbiotic relationship with the allopathic profession could assist with further promotion of homoeopathy in the animal care sector, creating more opportunities for future homoeopaths while benefiting the animals.

Before these campaigns are done, it is important that extensive practical trials are researched to see the results of applying the human materia medica to canines. This is important to protect the integrity of the homoeopathic field as negative side effects of homoeopathic remedies without supported research and clinical trials may result in damaging the reputation of homoeopathy. Therefore, it is the responsibility of homoeopaths to run clinical trials on how homoeopathic remedies affect canines.

Conclusion

This study is to widen our knowledge and create a foundation for veterinary homoeopathic treatment and awareness for canines, to establish affordable holistic treatment for the canines' physical and emotional distress. The results suggest that homoeopathy for canines has significant potential for the future of animal care, it is thus highly recommended that the government and practitioners use the resources to invest into the broadening and awareness of homoeopathic treatment for neglected canines, to initiate programs that allow homoeopaths to explore the possibility to further their understanding in animal healthcare, and to allow homoeopaths to practice their science in shelters to help with neglected and traumatised canines. This would benefit many communities and rural areas that have problems with the increased number of homeless and abandoned dogs on the street and bring down the numbers of euthanising costs in the country to give dogs a chance to be rehomed.

Reference list

- Animal abuse – learn, report and fight. *MyMiniDoxie* (blog). 2011. Available: <http://myminidoxie.com/dachshund-health-and-safety/animal-abuse-learn-report-and-fight/> (Accessed 17 April 2017).
- AnimalSake. 2017. *These animal abuse statistics are sure to shock you to the core*. Available: <https://animalsake.com/animal-abuse-statistics> (Accessed 21 October 2017).
- Anser, H., Ikram, R., Khatoon, H., Naeem, S., Khan, S. S., Nazim, U., Imam, S., Shafiq, Y. and Ishaque, S. 2020. Comparison of the antidepressant like activity of homeopathic remedies (Argentum nitricum, Staphysagria and Ignatia amara) and their effect on the behavior of rodents. *Pakistan Journal of Pharmaceutical Sciences*, 33(3): 937-945.
- Archibel. 2014. *RadarOpus 1.39*. Available: <http://www.archibel.com/radaropus139.html> (Accessed 21 October 2017).
- Ascione, F. R. 2001. *Animal abuse and youth violence*. Washington, DC: US Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.
- Ascione, F.R. and Shapiro, K., 2009. People and animals, kindness and cruelty: Research directions and policy implications. *Journal of Social Issues*, 65(3), pp.569-587.
- ASPCA: How to recognize cruelty. 2009. *Harriet* (blog). Available: <https://harrietb.wordpress.com/2009/03/29/aspca-how-to-recognize-cruelty/> (Accessed 21 October 2017).
- AVMC. 2017. *Homeopathy for animals*. Available: <https://www.alternativevet.org/homeopathy.htm> (Accessed 21 October 2017).
- Bailey, P. M. 1995. *Homeopathic psychology: personality profiles of the major constitutional remedies*. Berkeley, California: North Atlantic Books.
- Banerjee, J., Biswas, S., Madhu, N. R., Karmakar, S. R. and Biswas, S. J. 2014. A better understanding of pharmacological activities and uses of phytochemicals of *Lycopodium clavatum*: a review. *Journal of Pharmacognosy and Phytochemistry*, 3(1): 207-210.
- Baxamusa, B. N. 2016. *These animal abuse statistics are sure to shock you to the core*. Available: <http://www.buzzle.com/articles/animal-abuse-statistics.html> (Accessed 17 April 2017).
- Beirne, P. 1999. For a nonspeciesist criminology: animal abuse as an object of study. *Criminology*, 37(1): 117-148.
- Bennett, S. L., Litster, A., Weng, H.-Y., Walker, S. L. and Luescher, A. U. 2012. Investigating behavior assessment instruments to predict aggression in dogs. *Applied Animal Behaviour Science*, 141(3-4): 139-148.

- Berg, B. L. 1995. A dramaturgical look at interviewing. 2nd ed. *Qualitative research methods for the social sciences*. Boston: Allyn and Bacon, 89-143.
- Betti, L., Brizzi, M., Nani, D. and Peruzzi, M. 1994. A pilot statistical study with homeopathic potencies of arsenicum album in wheat germination as a simple model. *British Homoeopathic Journal*, 83(4): 195-201.
- Bidani, N. 2014. Avoidant Personality Disorder. *Homœopathic Links: International Journal for Classical Homœopathy*, 27(4): 227-229.
- Bigagli, E., Luceri, C., Bernardini, S., Dei, A., Filippini, A. and Dolara, P. 2014. Exploring the effects of homeopathic Apis mellifica preparations on human gene expression profiles. *Homeopathy: the Journal of the Faculty of Homeopathy*, 103(2): 127-132.
- Blessing, J.D. and Forister, J.G. eds., 2013. Introduction to research and medical literature for health professionals. Jones & Bartlett Publishers.
- Boericke, W. 2002. *Pocket Manual of Homoeopathic Materia Medica & Repertory: Comprising of the Characteristic and Guiding Symptoms of All Remedies (clinical and Pahtogenetic [sic]) Including Indian Drugs*. New Delhi: B. Jain Publishers 2004. *Homeopathic Materia Medica Vol 1*. Whitefish, Montana: Kessinger Publishing.
- Boericke, W. 2016. *Pocket Manual of Homoeopathic Materia Medica & Repertory: Comprising of the Characteristic and Guiding Symptoms of All Remedies (clinical and Pahtogenetic [sic]) Including Indian Drugs*. B. Jain publishers.
- Bollen, K. S. and Horowitz, J. 2008. Behavioral evaluation and demographic information in the assessment of aggressiveness in shelter dogs. *Applied Animal Behaviour Science*, 112(1-2): 120-135.
- Cain, A. O. 1983. A study of pets in the family system. In: Katcher, A. H. & Beck, A. M. eds. *New perspectives on our lives with companion animals: Proceedings of the International Conference on the Human-Companion Animal Bond*. University of Pennsylvania, Philadelphia, 5-7 October 1981. Philadelphia: University of Pennsylvania Press, 551-588.
- Caldji, C., Diorio, J. and Meaney, M. J. 2000. Variations in maternal care in infancy regulate the development of stress reactivity. *Biological Psychiatry*, 48(12): 1164-1174.
- Clausen, J., Albrecht, H. and Mathie, R. T. 2013. Veterinary clinical research database for homeopathy: placebo-controlled trials. *Complementary Therapies in Medicine*, 21(2): 115-120.
- Colin, P. 2006. Homeopathy and respiratory allergies: a series of 147 cases. *Homeopathy*, 95(2): 68-72.
- ColoradoLinkProject. 2013. *Signs and Symptoms of Animal Maltreatment*. Available: <http://coloradolinkproject.com/animal-maltreatment-2/> (Accessed 17 February 2018)
- Cracknell, N. R. and Mills, D. S. 2008. A double-blind placebo-controlled study into the efficacy of a homeopathic remedy for fear of firework noises in the dog (*Canis familiaris*). *The Veterinary Journal*, 177(1): 80-88.

Creswell, J. W. 2018. *Research design: qualitative, quantitative, and mixed methods approaches*. 5th ed. SAGE Publications Inc.

Creswell, John W., and Abbas Tashakkori. "Differing perspectives on mixed methods research." (2007): 303-308.

DeGue, S. and DiLillo, D., 2009. Is animal cruelty a "red flag" for family violence? Investigating co-occurring violence toward children, partners, and pets. *Journal of Interpersonal Violence*, 24(6), pp.1036-1056.

Denzin, N. K. and Lincoln, Y. S. eds. 2011. Methods of collecting and analyzing empirical materials. *Handbook of qualitative research*. 4th ed. SAGE Publications Inc, 415-427.

DiGiacomo, N., Arluke, A. and Patronek, G. 1998. Surrendering pets to shelters: the relinquisher's perspective. *Anthrozoös*, 11(1): 41-51.

Dowling-Guyer, S., Marder, A. and D'Arpino, S. 2011. Behavioral traits detected in shelter dogs by a behavior evaluation. *Applied Animal Behaviour Science*, 130(3-4): 107-114.

Elliott, M. 2001. Cushing's Disease: a new approach to therapy in equine and canine patients. *British Homoeopathic Journal*, 90(1): 33-36.

Epstein, S. and Hardy, R. 2011. Clinical resolution of nasal aspergillosis following therapy with a homeopathic remedy in a dog. *Journal of the American Animal Hospital Association*, 47(6): e110-e115.

Ernst, E. 2014. Homeopathy, does it really work in animals? *Edzard Ernst* (blog). Available: <http://edzardernst.com/2014/01/homeopathy-does-it-really-work-in-animals/> (Accessed 16 April 2017).

Etikan, I., Musa, S.A. and Alkassim, R.S., 2016. Comparison of convenience sampling and purposive sampling. *American journal of theoretical and applied statistics*, 5(1), pp.1-4.

Farrington, E. A. 2005. *Comparative Materia Medica*. New Delhi: B. Jain Publishers.

Feinman, J. 2017. *Is homeopathic veterinary medicine scientific?* Available: <https://www.homevet.com/is-homeopathic-veterinary-medicine-scientific/> (Accessed 29 October 2017).

Fernandes, D. S., Franco, F. L. and Fernandes, R. 2004. Systematic revision of the genus *Lachesis* Daudin, 1803 (Serpentes, Viperidae). *Herpetologica*, 60(2): 245-260.

Fosmire, L. 2013. Animal abuse statistics difficult to track. *Statesman Journal Salem, OR*,

Fox, M. W. 1976. *Between animal and man*. New York: Coward, McCann & Geoghegan.

- Frank, J. 2004. An interactive model of human and companion animal dynamics: the ecology and economics of dog overpopulation and the human costs of addressing the problem. *Human Ecology*, 32(1): 107-130.
- Frass, M., Strassl, R.P., Friehs, H., Müllner, M., Kundi, M. and Kaye, A.D., 2012. Use and acceptance of complementary and alternative medicine among the general population and medical personnel: a systematic review. *Ochsner Journal*, 12(1), pp.45-56.
- Gadisseur, A., Hermans, C., Berneman, Z., Schroyens, W., Deckmyn, H. and Michiels, J.J., 2009. Laboratory diagnosis and molecular classification of von Willebrand disease. *Acta haematologica*, 121(2-3), pp.71-84.
- Gaier, H. 1991. Thorsons Encyclopaedic Dictionary of Homoeopathy. London: Thorsons - An Imprint of HarperCollins Publishers.
- Gibson, D. 1987. *Studies of homeopathic remedies*. Beaconsfield: Beaconsfield Publishers.
- Gross, H. 1999. *Comparative materia medica*. New Delhi: B. Jain Publishers.
- Guest, G., Bunce, A. and Johnson, L., 2006. How many interviews are enough? An experiment with data saturation and variability. *Field methods*, 18(1), pp.59-82.
- Hahnemann, S. 2002. *Organon of medicine*. New Delhi: B. Jain Publishers.
- Haller, J. S. 2009. *The history of American homeopathy: from rational medicine to holistic health care*. New Brunswick, New Jersey: Rutgers University Press.
- Hammerle, M., Horst, C., Levine, E., Overall, K., Radosta, L., Rafter-Ritchie, M. and Yin, S. 2015. 2015 AAHA Canine and Feline Behavior Management Guidelines. *Journal of the American Animal Hospital Association*, 51(4): 205-221.
- Harriet. 2009. ASPCA: How to Recognize Cruelty. Available: <https://harrietb.wordpress.com/2009/03/29/aspca-how-to-recognize-cruelty/> (Accessed 15 September 2018)
- Haverbeke, A., De Smet, A., Depiereux, E., Giffroy, J.-M. and Diederich, C. 2009. Assessing undesired aggression in military working dogs. *Applied Animal Behaviour Science*, 117(1-2): 55-62.
- Hektoen, L. 2005. Review of the current involvement of homeopathy in veterinary practice and research. *Veterinary Record*, 157(8): 224-229.
- Herron, M. E., Shofer, F. S. and Reisner, I. R. 2009. Survey of the use and outcome of confrontational and non-confrontational training methods in client-owned dogs showing undesired behaviors. *Applied Animal Behaviour Science*, 117(1-2): 47-54.

- Hjelm-Björkman, A., Tulamo, R.-M., Salonen, H. and Raekallio, M. 2009. Evaluating complementary therapies for canine osteoarthritis—part II: a homeopathic combination preparation (Zeel®). *Evidence-Based Complementary and Alternative Medicine*, 6(4): 465-471.
- Hill, P., Hoare, J., Lau-Gillard, P., Rybnicek, J. and Mathie, R. T. 2009. Pilot study of the effect of individualised homeopathy on the pruritus associated with atopic dermatitis in dogs. *Veterinary Record*, 164(12): 364.
- Holloway, I. and Galvin, K. 2016. *Qualitative research in nursing and healthcare*. 4th ed. Hoboken, New Jersey: Wiley-Blackwell.
- Homeopathy – a gift or con? Available: <http://www.health24.com/Natural/Natural-living/Homeopathy-a-gift-or-con-20120721> (Accessed 21 October 2017).
- Homeopathy for animals. 2017. Available: <https://www.alternativevet.org/homeopathy.htm> (Accessed 21 October 2017).
- HomeopathyPlus. 2014. *Know Your Remedies: Aconitum napellus (Acon.)*. Available: <https://homeopathyplus.com/aconitum-napellus-acon/> (Accessed 19 February 2018)
- Hopkins, C.R. 2000. Homoeopharmaceutical notes (Unpublished handout). Durban University of Technology. Durban, South Africa.
- Hubrecht, R. 2016. The welfare of dogs in human care. *The domestic dog: Its evolution, behaviour, and interactions with people*: 271-299.
- Hycner, R. H. 1985. Some guidelines for the phenomenological analysis of interview data. *Human Studies*, 8(3): 279-303.
- Kar, S., Chakraborty, M., Nandy, P., Basu, R., Das, S., Bhar, D. S., Manchanda, R. K., Khurana, A. and Nayak, D. 2017. Characterization and haemocompatibility of Aurum metallicum for its potential therapeutic application. *Indian Journal of Research in Homoeopathy*, 11(1): 41.
- Kasai, K., McCarley, R.W., Salisbury, D.F., Onitsuka, T., Demeo, S., Yurgelun-Todd, D., Kikinis, R., Jolesz, F.A. and Shenton, M.E., 2004. Cavum septi pellucidi in first-episode schizophrenia and first-episode affective psychosis: an MRI study. *Schizophrenia research*, 71(1), pp.65-76.
- Kelley, L. C. 2016. Does PTSD cause brain damage in dogs? How to restore brain plasticity in dogs with PTSD. *Canine PTSD: its causes, symptoms & treatment* (blog). Available: <http://canineptsdblog.blogspot.com/2016/05/does-ptsd-cause-brain-damage-in-dogs.html> (Accessed 15 October 2018).
- Kent, J. T. 2007. *Repertory of the homoeopathic materia medica*. New Delhi: B. Jain Publishers. ———. 2010. *Lectures on homoeopathic materia medica: together with Kent's "new remedies" incorporated and arranged in one alphabetical order*. New Delhi: B. Jain Publishers.

- Khoshnegah, J., Azizzadeh, M. and Gharaie, A. M. 2011. Risk factors for the development of behavior problems in a population of Iranian domestic dogs: results of a pilot survey. *Applied Animal Behaviour Science*, 131(3-4): 123-130.
- Know your remedies: *Aconitum napellus* (Acon.). 2020. Available: <https://homeopathyplus.com/aconitum-napellus-acon/> (Accessed 18 October 2020).
- Ledger, R. A. and Baxter, M. R. 1997. The development of a validated test to assess the temperament of dogs in a rescue shelter. In: Mills, D. S., Heath, S. E. and Harrington, L. J., eds. *Proceedings of the First International Conference on Veterinary Behavioural Medicine*. Birmingham, UK. 1-2 April 1997. Potters Bar, UK: Universities Federation for Animal Welfare (UFAW).
- Lilley, D. 2009. *Phosphorous*. Available: <https://hpathy.com/materia-medica/phosphorus-4/> (Accessed 22 September 2019).
- Lilley, D. 2017. *Sulphur*. Available: <http://69.164.208.4/files/Archetypes%20of%20the%20Homeopathic%20Materia%20Medica:%20Sulphur.pdf> (Accessed 22 September 2019)
- Lilley, D 2012 Archetypes of the Materia Medica: Lac caninum. Available: <https://hpathy.com/materia-medica/masterclass-archetypes-of-the-materia-medica-lac-caninum/> (Accessed 22 September 2019)
- Lincoln, Y.S. and Guba, E.G., 1985. Establishing trustworthiness. *Naturalistic inquiry*, 289(331), pp.289-327.
- Løken, T. 2002. Alternative therapy of animals – homeopathy and other alternative methods of therapy. *Acta Veterinaria Scandinavica*, 43(1): S47.
- Maharaj, Y. 2017. *Is the humanisation trend wagging the SA pet care market?* Available: <https://www.insightsurvey.co.za/blog/humanisation-trend-wagging-sa-pet-care-market> (Accessed 13 April 2019).
- Manning, B. 2013. Animal cruelty on the rise. *Rotorua Daily Post*, 20 May. Available: http://www.nzherald.co.nz/rotorua-daily-post/news/article.cfm?c_id=1503438&objectid=11099735 (Accessed 16 April 2017).
- Mares, S. and Woodgate, S. 2017. The clinical assessment of infants, preschoolers and their families. In: Rey J. M. ed. *IACAPAP e-Textbook of Child and Adolescent Mental Health*. Geneva: International Association for Child and Adolescent Psychiatry and Allied Professions.
- Marinelli, L., Adamelli, S., Normando, S. and Bono, G. 2007. Quality of life of the pet dog: influence of owner and dog's characteristics. *Applied Animal Behaviour Science*, 108(1-2): 143-156.
- Marston, L. C. and Bennett, P. C. 2003. Reforging the bond – towards successful canine adoption. *Applied Animal Behaviour Science*, 83(3): 227-245.
- Master, F. J. 2003. *Homoeopathy in cancer*. New Delhi: B. Jain Publishers.

- Mathie, R. T., Baitson, E. S., Hansen, L., Elliott, M. and Hoare, J. 2010. Homeopathic prescribing for chronic conditions in feline and canine veterinary practice. *Homeopathy: the Journal of the Faculty of Homeopathy*, 99(4): 243-248.
- McLellan, E., MacQueen, K. M. and Neidig, J. L. 2003. Beyond the qualitative interview: data preparation and transcription. *Field methods*, 15(1): 63-84.
- McMillan, F. D., Duffy, D. L., Zawistowski, S. L. and Serpell, J. A. 2015. Behavioral and psychological characteristics of canine victims of abuse. *Journal of Applied Animal Welfare Science*, 18(1): 92-111.
- McMillan, F. D., Serpell, J. A., Duffy, D. L., Masaoud, E. and Dohoo, I. R. 2013. Differences in behavioral characteristics between dogs obtained as puppies from pet stores and those obtained from noncommercial breeders. *Journal of the American Veterinary Medical Association*, 242(10): 1359-1363.
- Mondal, J., Samadder, A. and Khuda-Bukhsh, A. R. 2016. Psorinum 6× triggers apoptosis signals in human lung cancer cells. *Journal of Integrative Medicine*, 14(2): 143-153.
- Myminidoxie. 2017. *Animal abuse - Learn, report and fight*. Available: <http://myminidoxie.com/dachshund-health-and-safety/animal-abuse-learn-report-and-fight/> (Accessed 17 April 2017)
- New Jr, J. C., Salman, M. D., King, M., Scarlett, J. M., Kass, P. H. and Hutchison, J. M. 2000. Characteristics of shelter-relinquished animals and their owners compared with animals and their owners in US pet-owning households. *Journal of Applied Animal Welfare Science*, 3(3): 179-201.
- Pitt, R. 2015. Comparative Materia Medica Using a Thematic Categorization of Symptoms. *American Journal of Homeopathic Medicine*, 108(1): 19-24.
- Polit, D.F. and Beck, C.T., 2012. Planning a nursing study. *Nursing Research. Generating and Assessing Evidence for Nursing Practice (9 edn, pp. 174–199)*. Philadelphia, PA: Lippincott Williams & Wilkins.
- Quadagno, J. and Knapp, S. J. 1992. Have historical sociologists forsaken theory? Thoughts on the history/theory relationship. *Sociological Methods & Research*, 20(4): 481-507.
- Rawlinson, S. 2015. *Fearful anxious and timid dogs*. Available: https://www.doglistener.co.uk/fearful_dogs/fearful_dogs.shtml (Accessed 17 April 2017).
- Riemer, S., 2020. Effectiveness of treatments for firework fears in dogs. *Journal of Veterinary Behavior*.
- Rollin, B. E. 2011. Euthanasia, moral stress, and chronic illness in veterinary medicine. *Veterinary Clinics of North America: Small Animal Practice*, 41(3): 651-659.
- Rush, J. 2004. *Veterinary homoeopathy*. New Delhi: B. Jain Publishers.

- Ross, A.H.A. 2011. An appraisal of homoeopathic proving methodology as a bridge between the indigenous and rationalist-scientific understandings of medicinal plants: the case of *Strychnos henningsii*. D.Tech., Durban University of Technology, Durban, South Africa.
- Sacks, J. J., Kresnow, M. and Houston, B. 1996. Dog bites: how big a problem? *Injury Prevention*, 2(1): 52-54.
- Salman, M. D., New Jr, J. G., Scarlett, J. M., Kass, P. H., Ruch-Gallie, R. and Hetts, S. 1998. Human and animal factors related to relinquishment of dogs and cats in 12 selected animal shelters in the United States. *Journal of Applied Animal Welfare Science*, 1(3): 207-226.
- Sankaran, R. 2002. *An insight into plants*. Mumbai: Homoeopathic Medical Publishers.
- Saxton, J. 2007. The diversity of veterinary homeopathy. *Homeopathy*, 96(1): 3.
- Schroyens, F., 1993. Synthesis repertorium homeopathicum syntheticum. In *Synthesis repertorium homeopathicum syntheticum* (pp. 1720-1720).
- Scott, D. 2013. Eyebright: Euphrasia officinalis. *Dogs Naturally* (blog). Available: <http://www.dogsnaturallymagazine.com/euphrasia-officinalis/> (Accessed 19 February 2018).
- Seksel, K. 2004. The behavioural manifestations of animal cruelty/abuse. Available: https://www.researchgate.net/publication/254347693_The_behavioural_manifestations_of_animal_cruelty_abuse (Accessed 15 November 2019)
- Shenton, A.K., 2004. Strategies for ensuring trustworthiness in qualitative research projects. *Education for information*, 22(2), pp.63-75. (Accessed 15 November 2019)
- Signs and symptoms of animal maltreatment*. 2013. Available: <http://coloradolinkproject.com/animal-maltreatment-2/> (Accessed 17 February 2018).
- Sikorski, K. 2010. *Homeopathic pediatrics*. Available: <https://hpathy.com/homeopathy-papers/homeopathic-pediatrics/> (Accessed 6 April 2018).
- Silverman, D. 2006. *Interpreting qualitative data: methods for analyzing talk, text and interaction*. 3rd ed. SAGE Publications Inc.
- Simone, L., Wettstein, A., Senn, O., Rosemann, T. and Hasler, S. 2016. Types of abuse and risk factors associated with elder abuse. *Swiss Medical Weekly*, 146: w14273.
- Sophia, G. 2014. *Barking up the right tree*. Available: <http://sophiagretasv.wixsite.com/serviceproject/the-issue> (Accessed 21 October 2017).
- South Africa, Department of Agriculture, Forestry and Fisheries. 1935. *Performing Animals Protection Act 24 of 1935*. Pretoria: Department of Agriculture, Forestry and Fisheries. Available: <https://www.gov.za/documents/performing-animals-protection-act-8-may-1935-0000> (Accessed 17 October 2017).

South Africa, Department of Agriculture, Forestry and Fisheries. 1962. *Animal Protection Act 71 of 1962*. Pretoria: Department of Agriculture, Forestry and Fisheries. Available: https://www.gov.za/sites/default/files/gcis_document/201505/act-71-1962.pdf (Accessed 21 October 2017).

South Africa, Department of Agriculture, Forestry and Fisheries. 1993. *Societies for the Prevention of Cruelty to Animals Act 169 of 1993*. Pretoria: Government Printer.

Sperling, K. 2013 *What is homeopathy?* Available: <http://drkellysperling.blogspot.com/#:~:text=Tuesday%2C%2030%20July%202013,to%20maintaining%20health%20and%20wellbeing> (Accessed 17 April 2017).

Strauss, A. and Corbin, J., 1990. Qualitative research.

Swayne, J. 2000. *International dictionary of homeopathy*. London: Churchill Livingstone.

Tavris, C. 1989. *Anger: the misunderstood emotion*. New York: Simon & Schuster.

Taylor, K. D. and Mills, D. S. 2006. The development and assessment of temperament tests for adult companion dogs. *Journal of Veterinary Behavior*, 1(3): 94-108.

These animal abuse statistics are sure to shock you to the core. 2017. Available: <https://animalsake.com/animal-abuse-statistics> (Accessed 21 October 2017).

Trichard, C., Martinot, J.L., Alagille, M., Masure, M.C., Hardy, P., Ginestet, D. and Feline, A., 1995. Time course of prefrontal lobe dysfunction in severely depressed in-patients: a longitudinal neuropsychological study. *Psychological medicine*, 25(1), pp.79-85.

Tyrer, P. and Baldwin, D., 2006. Generalised anxiety disorder. *The Lancet*, 368(9553), pp.2156-2166.

Vaknine, L. 2014. *Walking the dog*. Available: <https://www.britishhomeopathic.org/bha-blog/walking-the-dog-for-the-bha/> (Accessed 08 april 2017)

Van der Borg, J. A. M., Netto, W. J. and Planta, D. J. U. 1991. Behavioural testing of dogs in animal shelters to predict problem behaviour. *Applied Animal Behaviour Science*, 32(2-3): 237-251.

Vithoulkas, G., 1996. Aurum muriaticum. *Simillimum*, 9(1), pp.56-64.

White, G. L. and Mullen, P. E. 1989. *Jealousy: theory, research, and clinical strategies*. New York: Guilford Press.

Wynne, C. D. L., Udell, M. A. R. and Lord, K. A. 2008. Ontogeny's impacts on human–dog communication. *Animal Behaviour*, 76(4): e1-e4.

Yarnall, C. 2011. *Homeopathy for pets - safer and more effective than toxic drugs*. Available: http://www.naturalnews.com/033853_homeopathy_pets.html (Accessed 17 April 2017).

Yasgur, J. 1997. *Homoeopathic Dictionary and Holistic Health References*.

Greenville, USA: Van Hoy Publishers.

Yashvir, M. 2017. *Is the humanisation trend wagging the SA Pet Care Market?* Available: <https://www.insightsurvey.co.za/blog/humanisation-trend-wagging-sa-pet-care-market> (Accessed 13 April 2019)

Yin, S. 2009. *New study finds popular "alpha dog" training techniques can cause more harm than good.* Available: https://drsophiayin.com/blog/entry/new_study_finds_popular_alpha_dog_training_techniques_can_cause_more_harm_t/ (Accessed 17 April 2017).

Appendix A: Letter of information



LETTER OF INFORMATION

Title of the Research Study

An exploration into the study of the corresponding materia medica regarding trauma of neglect in canines.

Principal Investigator

Oriel Rose Reuben

Supervisor

Dr Cornelia Hall

B.Sc., MTech: Homoeopathy

Brief introduction and purpose of the study:

Outline of the procedures: (Responsibilities of the participant, consultation/interview/survey details, venue details, inclusion/exclusion criteria, explanation of tools and measurement outcomes, any follow-ups, any placebo or no treatment, how much time required of participant, what is expected of participants, randomisation/ group allocation)

Risks or discomforts to the participant: (Description of foreseeable risks or discomforts to for participants if applicable e.g. Transient muscle pain, VBAI, post-needle soreness, other adverse reactions, etc.)

Benefits: (To the participant and to the researcher/s e.g. publications)

Reason/s why the participant may be withdrawn from the study: (Non-compliance, illness, adverse reactions, etc. Need to state that there will be no adverse consequences for the participant should they choose to withdraw)

Remuneration: (Will the participant receive any monetary or other types of remuneration?)

Costs of the study: (Will the participant be expected to cover any costs towards the study?)

Confidentiality: (Description of the extent to which confidentiality will be maintained and how will this be maintained)

Research-related injury: (What will happen should there be a research-related injury or adverse reaction? Will there be any compensation?)

Persons to contact in the event of any problems or queries: (Supervisor and details) Please contact the researcher (tel no.), my supervisor (tel no.) or the Institutional Research Ethics Administrator on 031 373 2375. Complaints can be reported to the DVC: Research, Innovation and Engagement Prof S Moyo on 031 373 2577 or moyos@dut.ac.za

General: Potential participants must be assured that participation is voluntary and the approximate number of participants to be included should be disclosed. A copy of the information letter should be issued to participants. The information letter and consent form must be translated and provided in the primary spoken language of the research population e.g. isiZulu.

Appendix B: Consent form



CONSENT

Statement of Agreement to Participate in the Research Study:

- I hereby confirm that I have been informed by the researcher, _____ (name of researcher), about the nature, conduct, benefits and risks of this study - Research Ethics Clearance Number: _____,
- I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
- I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
- I understand that significant new findings developed during the course of this research which may relate to my participation will be made available to me.

_____	_____	_____	_____
Full Name of Participant Thumbprint	Date	Time	Signature / Right

I, _____ (name of researcher) herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

_____	_____	_____
Full Name of Researcher	Date	Signature
_____	_____	_____
Full Name of Witness (If applicable)	Date	Signature
_____	_____	_____
Full Name of Legal Guardian (If applicable)	Date	Signature

Please note the following:

Research details must be provided in a clear, simple and culturally appropriate manner and prospective participants should be helped to arrive at an informed decision by use of appropriate language (grade 10 level - use Flesch Reading Ease Scores on Microsoft Word), selecting of a non-threatening environment for interaction and the availability of peer counselling (Department of Health, 2004)

If the potential participant is unable to read/illiterate, then a right thumb print is required and an impartial witness, who is literate and knows the participant e.g. parent, sibling, friend, pastor, etc. should verify in writing, duly signed that informed verbal consent was obtained (Department of Health, 2004).

If anyone makes a mistake completing this document e.g. a wrong date or spelling mistake, a new document has to be completed. The incomplete original document has to be kept in the participant's file and not thrown away, and copies thereof must be issued to the participant.

References:

Department of Health: 2004. *Ethics in Health Research: Principles, Structures and Processes*
<http://www.doh.gov.za/docs/factsheets/guidelines/ethnics/>

Department of Health. 2006. *South African Good Clinical Practice Guidelines*. 2nd Ed. Available at:
http://www.nhrec.org.za/?page_id=14

Appendix C: Questionnaire

Instructions

1. Please read the questions clearly before answering them.
2. Please ensure that you answer all the questions.
3. Your answers to the questions will be regarded as strictly confidential and your name will not be linked in any way to these questions.
4. By answering the questions, you are giving consent to partake in this survey.
5. Please note that the interview will be audio recorded.

Thank you for your participation.

Basic Canine Information and case study

Date:	Name:	Age:
Type of abuse:		
Brief patient history:		

Interview Questions

1. Please tell us about your experience when dealing with traumatised canines?
2. Could you please describe the behaviour of the traumatised canine?
3. Could you please describe the physical description of the canine?
4. What was the cause that lead to the canine being abused or neglected?
5. Has there been any unique symptoms or strange behaviour while caring for the canine?
6. Has the neglected canine been on any medication and what is the medication treating?
7. Have there been side effects from the medication, and if so what are the side effects from the medication?
8. Are there any other approaches being taken or done to treat the neglected canines? (Diet changed or holistic therapy)
9. Would you consider treating the neglected canine with homoeopathy?
10. What is your view regarding homoeopathy in canine abuse?

Appendix D: MacRepertory rubric

Mind symptoms

	Puls.	Hyos.	Lach.	Lyc.	Nux-v.	Apis	Phos.	Stram.	Ign.	Plat.	Aur-m-n.	Camph.	Lac-c.	Ph-ac.	Cench.	Staph.	Caro.	Kali-c.	Gels.	Lil-t.	Calc-p.	Thu-j.	Aur.	Psor.	Plut-n.
Total	36	28	29	27	26	28	29	27	28	20	23	22	24	21	24	23	23	22	22	21	22	21	22	21	16
Rubrics	10	9	8	10	8	7	9	9	8	8	9	9	9	7	7	8	8	8	8	8	8	6	6	6	8
Kingdoms																									
Traditional Miasms																									
mind; FORSAKEN feeling (275)	4	1	3	1	1		1	3		3	2	2	3				1	1	1	1		2	4	4	1
mind; RESTLESSNESS, nervousness (919)	4	4	4	4	4	4	4	4	4	4	3	4	3	4	4	4	3	4	4	4	4	4	4	4	2
mind; JEALOUSY (125)	4	4	4	3	4	4	3	3	3	4	2	1	1	3	3	3	3	1	1	1	1	1			
mind; JEALOUSY; ailments from, agg. (15)	4	4	4	1	4	4	3		3		2	1		3	3	1					1				
mind; ABUSE agg., ailments from (81)	3	1		1			1	1	1			2				1	2				1	2			2
PSYCHOLOGICAL themes; rationalizing, lack of ... (825)	4	3	3	4	3	3	4	4	4	4	4	3	4	3	4	4	3	3	3	3	4	3	3	3	2
mind; PSYCHOLOGICAL themes; anxiety, fear (950)	4	4	4	4	4	4	4	3	4	4	3	3	4	3	3	3	4	3	4	3	3	3	4	4	2
mind; ATTACHED, very (48)	1			3			1	3			1	1	1				3	3	3						1
mind; ANGER (580)	4	4	3	4	4	3	4	4	4	4	1	4	4	3	4	4	3	4	3	3	4	4	4	3	4
mind; INDIFFERENCE, apathy (622)	4	3	4	4	3	4	4	4	4	4	2	3	1	4	1	4	3	4	3	4	3	3	3	3	2

Physical symptoms

	Act-sp.	Calc.	Sil.	Merc.	Sulph.	Ars.	Chin.	Bell.	Con.	Staph.	Fl-ac.	Nit-ac.	Petr.	Lach.	Phos.	Lyc.	Hyos.	Kreos.	Ign.	Thu.J.	Puls.	Cham.	Ant-c.	Pib.	Cupr.	Kali-p.	Apis	Nux-v.	Arg-n.	Caust.	Cic.	Merc-c.	Bufo	Psor.	Squill.	Aur.	Stram.		
Total	7	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	
Rubrics	7	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	
Kingdoms																																							
Traditional Miasms																																							
bladder; INVOLUNTARY urination (429)		4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	3	4	4	3	3	4	2	4	4	4	4	4	4	4	4	4	4	4	4	
generalities; ULCERS; cancerous (119)		2	4	4	4	4	3	1	4	4	3	1	4	3	4	3	4	3	3		3		1		1		3	1	3	1		3	1	3	1	3	1	3	1
generalities; HEAVINESS (916)		1	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	3	4	4	4	4	4	3	4	3	4	4	4	4	4	4	4	4	4	4	4	
generalities; CONVULSIONS, spasms (687)		1	4	4	4	4	4	4	4	4	4	1	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	
CONVULSIONS, spasms; excitement, emotional, ... (83)		4	3		3	3	2		3	1	3		2	4	1	1	4		4		3	4	1		4	3	3	3	3	3	3	3	3	3	3	3	3	3	
CONVULSIONS, spasms; epileptic; before epileptic ... (87)		4	4		4	4	1	3	4	1		1		4	1	3	4		1	1		1	3	4	1	3	4	3	3	3	3	3	3	3	3	3	3	3	
ears; DISCHARGES (249)		1	4	4	4	4	4	4	4	4	3	4	4	4	4	4	3	1		4	4	3	3		1	3	3	1	4	3	3	1	4	3	3	1	4	1	
ears; ERUPTIONS (199)		4	4	4	4	4	4	4	4	1	3	4	3	4	4	4	4	4		4	3	4		4		1	3	3	4	4	4	4	4	4	4	4	4	4	
ears; DISCHARGES; offensive (83)		1	3	4	4	4	3	1	3	3	1		3	3	4	3	1	4	1	1		3	1		1		4		3	3	3	3	3	3	3	3	3	3	
ears; WAX altered; sour odor (1)		1																																					
mouth; FROTH, foam (116)		3	3		1	3			4	1	3		1	3	3	3	4	1	3			4	1	1	4		3	3		3	3	3	3	3	3	3	3	3	
mouth; GLANDS, salivary (273)		1	4	4	4	4	4	4	4	3	4	1	4	3	3	3	4	2	3	3	3	4	4		3	3	1	3	3		1	1	3	3	4	1	4	3	
teeth; CARIES, decayed, hollow (192)		1	3	3	4	3	1	4	4	4	3	4	3	1	3	3	3	4	3	3	4	4	4	4	4	1	3	1	3		4	2	3		1	1	1	1	
teeth; BLACK (32)		1	2	4		1	1	4		3	4	3		1			3	3	3	1		1	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
skin; ROUGHNESS, scraped (141)		4	2	2	4	3	4	1	3	1		3	2	4		2	3		1	2	1	1	3	3		3		3		1	1	1	1	1	1	1	1		
skin; ERUPTIONS, rash (433)		4	4	4	4	4	4	4	4	3		4	3	4	3	3	3	3	3	4	4	4	4	1	4	1	4	4	1	4	1	1	1	1	1	1	1	1	
skin; DRYNESS (384)		4	4	3	4	4	3	4	4	2	3	3	3	4	4	4	4	4	1	1	3	4	1	4	1	1	3	3	1	3	1	3	1	3	1	3	1	1	

Mind and physical symptoms

	Puls.	Lach.	Hyos.	Nux-v.	Apis	Act-sp.	staph.	Lyc.	Ign.	Phos.	Sil.	Merc.	Sulph.	Ph-ac.	Calc.	Sep.	Chin.	Camph.	Bell.	Ars.	Thu.j.	Calc-p.	Petr.	Con.	Nit-ac.	Stram.	Psor.	Fl-ac.	Aur-m-n.	Cench.	Cham.	Kali-c.	Aur.	Kreos.	Caustr.	Cupr.	Kali-p.	Bufo	
Total	77	81	87	88	88	13	87	82	81	73	78	72	77	54	78	24	68	51	74	79	63	46	66	63	68	62	59	49	29	28	60	62	56	50	67	50	46	54	
Rubrics	23	22	21	21	21	11	20	25	20	25	23	19	22	19	24	23	21	19	21	24	22	19	21	22	20	20	19	17	13	10	18	22	18	20	22	17	19	21	
Kingdoms																																							
Traditional Miasms																																							
mind; FORSAKEN feeling (275)	4	3	1	1			1		1	1	3	1		1	1	1	2		3	2		1		1	3	4		2			1	4					1	1	
mind; RESTLESSNESS, nervousness (919)	4	4	4	4	4	1	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	2	3	4	4	4	4	4	4	4	4	3	
mind; JEALOUSY (125)	4	4	4	4	4		3	3	3	3			1	3	1	1	1	1	1	1	1	1	1	1	3			2	3	1	1			1	1		1	1	
mind; JEALOUSY; ailments from, agg. (15)	4	4	4	4	4		1	1	3	3				3				1				1							2	3									
mind; ABUSE agg., ailments from (81)	3		1				1	1	1							1				1	2	1				1									1			1	
PSYCHOLOGICAL themes; rationalizing, lack of ... (825)	4	3	3	3	3	3	4	4	4	4	3	4	4	4	3	3	3	4	3	4	3	4	4	3	4	4	3	3	4	3	3	3	3	3	3	3	3	1	
mind; PSYCHOLOGICAL themes; anxiety, fear (950)	4	4	4	4	4	1	3	4	4	4	4	4	4	3	4	4	4	3	4	4	3	3	2	4	4	3	4	4	3	3	4	3	4	3	4	4	3	3	
mind; ANGER (580)	4	3	4	4	3	1	4	4	4	4	4	4	4	3	4	4	4	4	4	4	4	4	4	4	4	4	4	3	2	1	4	4	4	4	3	4	4	3	3
mind; ATTACHED, very (48)	1						3		1	1				1			1									3			1		1	3		1	1				
mind; INDIFFERENCE, apathy (622)	4	4	3	3	4		4	4	4	4	4	4	4	4	4	4	4	3	4	4	3	3	4	4	4	4	3	4	2	1	4	4	3	1	4	3	3	4	
bladder; INVOLUNTARY urination (429)	4	4	4	4	4		4	4	3	4	4	4	4	4	4	4	4	3	4	4	4	3	4	4	3	4	4		3	3	3	2	4	4	2	4	4		
generalities; ULCERS; cancerous (119)		4		1	3		3	4		3	4	4	4	3	2	3	1		4	4	3		3	4	4		1	1	1		1	3	3	1	1			4	
generalities; HEAVINESS (916)	4	4	3	4	4	1	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	3	4	4	4	3	3	4	3		4	4	4	4	4	3	4	4
generalities; CONVULSIONS, spasms (687)	4	4	4	4	4	1	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	3	1	1		4	4	4	4	4	4	4	
CONVULSIONS, spasms; excitement, emotional, ... (83)	3	4	4	4	1		3	1	4	1	3		3	1	4	2		3	3	3			2	1		3	1			4		2		3	4	3	3		
CONVULSIONS, spasms; epileptic; before epileptic ... (87)		4	4	4	3		3	1	1	4			4	1	3	1	4	4	1			1	1	3					1	1	3		4	4			4		
ears; DISCHARGES (249)	4	4	3	1	3	1		4		4	4	4		4	4	4		4	4	4	4	4	4	4	4	4	1	4	3		3	4	4	1	4	1	3	1	
ears; ERUPTIONS (199)	4	4		3	3		4	4		4	4	4	4	1	4	4	4	1	1	4	3	2	4	3	4		4	3				4	1	4	4		1	3	
ears; DISCHARGES; offensive (83)	1	3	1			1	4		1	4	4	4		3	1	3		3	3	3		4	1	3		4	3				1	4	1	3			4		
ears; WAX altered; sour odor (1)					1																																		
mouth; FROTH, foam (116)		3	4	3	3		3	3	3	3			1	1	3			3	4	3			1	1		4					4	1		1	3	4		3	
mouth; GLANDS, salivary (273)	4	3	2	3	3	1	4	4	3	3	4	4	4	1	4	4	4	3	4	4	3	3	3	3	4	3	4	1	1		4	4	4	3	1	3	1	3	
skin; ROUGHNESS, scraped (141)	1				3		3	2	2	2	2	4	1	4	4	1		3	3	1		4	1	2	1	3	3		1		1	1	1	1					
skin; ERUPTIONS; rash (433)	4	4	3	4	4		3	4	3	3	4	4	4	4	4	4	4	3	4	4	4	2	3	4	4	4	3				4	4	1	3	4	4	1	2	
skin; DRYNESS (384)	3	4	4	3	3		3	4	1	4	4	3	4	3	4	3	4	3	4	4	1		4	2	3	4	3	3		1	4	4		1	3	1	1	1	
teeth; CARIES, decayed, hollow (192)	4	3	3	4		1	4	3	3	3	3	4	3	3	3	4	4		4	1	3	3	1	3	3		1	4			4	3	1	4	3		1	1	
teeth; BLACK (32)	1				1		4		3	1	2	4			1	1	4			1	3			3	3		4								3			1	

Appendix E: Proof of editor

Editing certificate

Re: Oriel Rose Reuben

Master's dissertation – An exploration into the study of the corresponding materia medica regarding trauma of neglect in canines.

I confirm that I have edited this dissertation for clarity, consistency, layout and style. Correspondence between myself and Oriel took place per email to ensure uniformity with her and DUT's academic style. The completed document was sent to the author with edits clearly marked via the "track changes" feature in Microsoft Word. Any changes and clarifications requested in the body of the text as well as those of the reference list are the sole responsibility of the author.

I am a freelancer specialising in substantive editing and proofreading of academic and business documents. Please find my most recent certificate below.

Wayne Swart

18 December 2020

