lower essences and homeopathic cell salts are natural remedies commonly used for the treatment of various disorders, yet less is written about them than conventional homeopathic remedies. This article will examine both types of remedies.

**Flower Essences: Background**
The British doctor, bacteriologist and homeopath Edward Bach discovered flower essences back in 1930. Bach’s interest in developing this system of medicine was grounded in his experience of both conventional medicine and of homeopathy. He described 38 remedies elaborated with flowers and shoots, each one corresponding to an emotional pattern or a typical personality. He also developed remedies for emergency situations.¹ Flower essence remedies are designed to be a system of emotional healing. Put succinctly, flower essences are selected by or for a patient with the intent of addressing issues associated with that person’s psyche. Outcomes are achieved through changes in attitude and awareness, resulting resolution of the physical manifestation of illness. Flower essences are safe, do not appear to interfere with any other medication, and are dispensed in homeopathic dosages.² As such, they are popularly thought to be homeopathic remedies—but that is not strictly correct.

**Homeopathy and Flower Essences**
According to an article published in the *British Homeopathy Journal*³ in 1999, homeopathy and flower essence remedies have similarity and differences. Regarding similarities, they’re both controversial, treat the patient (not the disease), prescribed on the basis of a series of symptoms, and utilize the self-healing vital force. The differences are that homeopathy tends to be a more complicated healing system whereas flower essences are simpler, and homeopathy is more deeply acting as opposed to a mild, gentle healing response from flower essences. The author of the article also indicated that homeopathy and flower essences could complement one another.

It might also be stated that another commonality is that, like homeopathy, there are those who think that flower essences are nothing more than placebos.

**Is it Real, Or is it a Placebo?**
Some health care professionals believe that any benefit from the use of flower essences is due to the placebo effect.⁴ Others have expressed uncertainty as to why exactly flower essences are effective.⁵ Nevertheless, there are a surprising number of health care professionals who have integrated the use of flower essences into their therapeutic regimens. For example, in a survey sent out to complementary/alternative medicine organizations, respondents indicated that flower essence remedies were recommended as suitable treatments for stress/anxiety.⁶ In fact, nine hospitals in Australia have used the flower essences in their complementary therapy practice.
where patients were treated for stress and pain management. Perhaps the best evidence of efficacy are case studies and clinical studies, which have been conducted on flower essences.

**Case Studies**

A published case study reported the results of using flower essences on sleep patterns (i.e., sleep perception and objective sleep) and menopausal symptoms. The participant was a 53-year-old woman, at the postmenopausal stage, who had been diagnosed with insomnia according to the criteria of the American Academy of Sleep Medicine and complained of climacteric symptoms. The patient underwent treatment with a flower essence blend for four months. Based upon sleep questionnaires and polysomnography measurements, results showed that both sleep perception and objective sleep were improved. The patient’s anxiety and menopausal symptoms were also reduced after the treatment.

Another published report described the case of a 78-year-old man who suffered from multiple disorders, including herpes zoster. The patient was treated with flower essence therapy. The result of the treatment was a short recovery time for the different disorders, and a reduction in anxiety for the patient.

A case-study analysis was conducted to explore the potential of flower essence remedies as a means of pain relief. The results were that, of 384 subjects, 41 suffered pain. Of these, 46 percent felt treatment had relieved their pain; in 49 percent the physical outcome was unknown. About 88 percent of all subjects reported an improvement in their emotional outlook. Researchers concluded that flower essence remedies as a means of pain relief. The results were that significant drops in pain; in 49 percent the physical outcome was unknown. About 88 percent of all subjects reported an improvement in their emotional outlook. Researchers concluded that both sleep perception and objective sleep were improved. The patient’s anxiety and menopausal symptoms were also reduced after the treatment.

A 14-month study conducted on flower essence remedies for various physical and emotional disorders, in a primary health care center from a nurse trained in this therapy. Patients (n=119, 78.15 percent female) were enrolled in this therapy based on a request by the medical/nursing consultants treating patients or by a patient’s own request to participate. The time period between the first and the last visit varied according to each case and the individual’s personality. Four hundred and five visits took place—an average of 3.4 per patient. Results were that 87.4 percent of those patients who received treatment reported good or very good results. Researchers concluded that flower essence therapy appeared to be a good alternative to psycho-pharmacocuticals, showed efficacious results with fewer secondary effects, and less than 2 percent of patients evidenced gastric intolerance.

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**Clinical Studies**

This section will examine the results of a dozen clinical studies on flower essence remedies. This includes studies on physical and emotional disorders, depression, anxiety, environmental light stress, carpal tunnel syndrome, overdue pregnancy, tantrums in children, and ADHD (attention deficit hyperactivity disorder) in children.

**Physical and emotional disorders**

A 14-month study was conducted on a group of patients who received flower essence treatment for various physical and emotional disorders, in a primary health care center from a nurse trained in this therapy. Patients (n=119, 78.15 percent female) were enrolled in this therapy based on a request by the medical/nursing consultants treating patients or by a patient’s own request to participate. The time period between the first and the last visit varied according to each case and the individual’s personality. Four hundred and five visits took place—an average of 3.4 per patient. Results were that 87.4 percent of those patients who received treatment reported good or very good results. Researchers concluded that flower essence therapy appeared to be a good alternative to psycho-pharmacocuticals, showed efficacious results with fewer secondary effects, and less than 2 percent of patients evidenced gastric intolerance.

**Depression: five studies**

Five independent clinical studies on flower essence remedies were used in the treatment of depression. The results of these studies were measured using the Beck Depression Inventory (BDI) and the Hamilton Depression Scale (HAM-D). Therapists in Cuba under the Cuban Ministry of Public Health conducted four of the studies. The first study tracked about 50 patients who completed therapy over a period of five months. The results were a significant reduction in depressive symptoms. Twenty patients participated in the second and third studies over a two-month and three-month period. Results were that significant drops in depression scores were noted during the first month, with further decreases during the second and third months. Both studies show reductions of the BDI total score of 76-77 percent. The fourth study utilized 24 cases over a three-month period. Results showed significant decreases in depressions in the first two months, with stabilization at a 60 to 80 percent reduction during the third month. The fifth study took place in the United States, and included 12 depressed subjects included a one-month baseline followed by three months of treatment that entailed usual care along with flower essence therapy. Results showed a 50 percent reduction in depression scores when flower essence therapy was introduced. This clinical change was maintained over a period of three months.

**Anxiety and depression**

In an open study, 91 patients suffering either anxiety (including stress) or depression were treated with flower essences. They were followed up with regular assessments over several months (up to 16 for a proportion of patients) by therapists and outcomes were reported as either “nil,” “partial” or “complete” recovery. Although the natural history of minor psychiatric disorders is that they are often transitory, the results were nonetheless interesting: 89 percent of this group of patients made a partial to complete recovery. For the majority that made a partial to full recovery, this took place within the first 18 weeks.

**Environmental light stress**

A randomized, double-blind, placebo-controlled study examined the effects of flower essence formulas on the intense environmental stimulation of fluorescent lights and its accompanying electromagnetic fields (EMF). Twenty-four subjects were monitored using EEG, along with the activity of six surface electromyographic (sEMG) sites, including thoracic (T6 Paraspinals). The study assessed baseline activity, reaction to the flower essence or placebo, reaction to the high intensity light stimulation, and concluded with a recovery period. The results of the study show EEG activation of the frontal lobes area to the light stimulation, but only for those individuals who received the placebo. Likewise, activation of the T6 paraspinals was also noted, but only for
only the placebo group as well. This demonstrates that the stress response was seen only in the placebo group, whereas the two flower essence groups showed no similar stress response. The conclusion is that flower essences demonstrated an antidote effect on environmental stressors.

**Carpal tunnel syndrome**
A randomized, pilot, placebo-controlled clinical trial was conducted to evaluate the effectiveness of a cream based on flower essence remedies on 43 patients with mild to moderate carpal tunnel syndrome. Patients were treated during 21 days with topical placebo or a cream based on flower essences. Results were that those patients using the flower essence cream experienced significant, self-reported improvements in symptom severity and pain intensity. In addition, all signs observed during the clinical exam showed significant improvements among the groups, as well as symptoms of pain, night pain and tingling. In conclusion, the flower essence cream was an effective intervention in the management of mild and moderate carpal tunnel syndrome, reducing the severity of symptoms and providing pain relief.

**Overdue pregnancy**
In a randomized, controlled study of 24 pregnant women who were at least five days overdue, subjects received flower essences, “attention,” or no intervention (control). Results were that medications usage (i.e. orthodox medicines to control pain and nausea) was significantly less (p=0.032) for the group receiving flower essences when compared with the other two groups. Indeed, seven of the eight subjects in the flower essence group used no medication. Furthermore, the investigator reports that these mothers tended to deliver with less assistance, suggesting less anxiety.

**Tantrums in children**
Fifty-eight children aged 2-5 years whose parents reported frequent tantrums, participated in a study in which flower essences were tested for efficacy. Tantrum frequency, tantrum severity, and parental mood were measured on five occasions over eight days before treatment and on a further five occasions over 10 days after the start of treatment. Compared to the period before treatment, there was a continuing reduction in tantrum frequency (p = 0.002) and severity (p = 0.003) over the eight days of treatment. Not surprisingly, there were significant day-to-day correlations between parents’ mood and tantrum frequency and severity.

**ADHD in children**
In a randomized, placebo-controlled pilot study, flower essences or placebo were used in 10 children (5 to 12 years) with a diagnosis of ADHD. The results were that the flower essences were effective in reducing inattention and hyperactivity as measured by the Childhood Attention Profile (p=0.02). In addition, there was almost a doubling of improvement in global functioning compared to control subjects as measured by the Columbia Impairment Scale. The flower essences used were Rescue Remedy or Calming Essence (a combination of impatiens, clematis, star of Bethlehem, cherry plum and rock rose), vervain, crab apple and walnut.

**Cell Salt Therapy: Background**
Cell salt therapies use a set of specific minerals, also known as the 12 tissue salts or cell salts, to correct symptoms arising from metabolic deficiencies. A German physician, W. H. Schussler, developed cell salt therapy in the 1870s. He studied cremated human bodies, and found that these 12 substances made up the bulk of the remains. His research, eventually called that these 12 cell salts are responsible for the harmonious functioning of the human organism, and that disease follows when a person becomes deficient in any of the 12 salts. The cell salts are not dietary supplements, but instead are prepared following the principles of homeopathy (using plant or mineral sources)—so the salts are prepared by a process of continued dilution and shaking or pounding (succussion) to concentrate energetic or vital principles.

As with flower essences, there are select case studies and clinical studies to substantiate efficacy.

**Case Studies**
Published case studies on cell salts include their use for back pain, throat cancer, allergies and headache.

**Back pain**
In a case study, a lumbar condition causing pain and curvature of the vertebral skeleton was treated with Calcarea phos in an adolescent boy who had undergone treatment with orthodox Western medicines, but did not get any relief from the ailment. Results were that the symptoms were effectively treated with Calcarea phos. X-ray and magnetic resonance imaging (MRI) supported recovery and a change in the skeletal curvature that was accompanied by removal of pain and other acute symptoms of the ailment.

**Throat cancer**
In a case study, a 70-year-old male with carcinoma of the larynx had been receiving homeopathic treatment after the diagnosis. He was advised to have surgery, radiation and chemotherapy, which he underwent immediately. This treatment was followed by homeopathic constitutional treatment. Ferrum-phos was prescribed. There was a good response. The patient was symptom-free at three-year follow-up. This suggests that tissue salts such as ferrum-phos prescribed on constitutional grounds may play a useful role in supportive and palliative for patients with malignant disease.

**Allergies**
A physician reported clinical verification of homeopathic treatment of patients, especially in various allergic conditions with primary care practice. This included the use of cell salts. For preventive treatments in hay fever
patients, silica and *Natrum muriaticum* was effective. For asthma patients, silica was effective.

**Headache**
The use of complementary alternative medicine (CAM) in pediatric populations is considerably increased, especially for pain and chronic conditions, as demonstrated by epidemiological surveys both in Europe and in the U.S. In this study, CAM was used in 76 percent patients of a cohort of 124 children affected by headache. CAM was used as preventive treatment in 80 percent cases. One of the CAM therapies was homeopathy, which was utilized by 47 percent of patients. Among the homeopathic remedies include silica and calcarea phos cell salts.

**Clinical Studies**
Published clinical studies on cell salts include their use for chronic sinussitis and ear infection.

**Chronic sinusitis**
A multicenter observational study was conducted with 550 patients to ascertain the therapeutic usefulness of homeopathic medicine as tissue salts in the management of chronic sinussitis (CS). Symptoms were assessed using the chronic sinussitis assessment score (CSAS). Regimes and adjustment of regimes in the event of a change of symptoms were pre-defined. Results were that there was a statistically significant reduction in CSAS (P = 0.0001) after three and six months of treatment. Radiological appearances also improved. The cell salts found to be most useful in promotingmarked healing stage in the children treated, 70.7 percent were free of recurrence within a year in group A and 29.3 percent were found to have a maximum of three recurrences. In group B, 56.5 percent were free of recurrence, and 43.5 percent had a maximum of six recurrences. In group A, only five subsequently received antibiotics, though homeopathic treatment was carried through to the healing stage in the remaining children.

**Mixing Flower Essences and Cell Salts**
Flower essences and cell salts are natural medicines with a history of safe use. Furthermore, research suggests that these nature-based remedies have a broad range of effective applications for human health. Given that flower essences correspond to emotional patterns, while cell salts are more specific to metabolic deficiencies, there is no redundancy to their respective mechanisms of action. Furthermore, since they both have relationships with homeopathy, there may be value in their concurrent use. In fact, a market trend seems to be developing toward mixing flower essences and cell salts together, which may offer a safe and effective addition to the natural medicine repertoire.

**References:**