

This module was prepared for members of the New Westminster Beekeeper's Association and is intended to be augmented by hands-on experience in a classroom.

Bee Venom Therapy

Bee Venom therapy has been used for about 3,000 years as a complementary and alternative therapy to modern medicine. Currently, it is used to treat approximately 40 autoimmune illnesses, including fibromyalgia, chronic fatigue, multiple sclerosis, Lyme disease, and arthritis. Practitioners use live bees or an injection of venom in specific locations in the body to treat specific maladies. The number of bees used, or number of injections, and the duration of the treatment varies for each disease.

Other than with Lyme disease or Rheumatoid Arthritis in young women, there is little evidence that BVT will reverse the disease, however, it is common for patients to experience a higher quality of life during and after BVT treatments.

Issues for discussion:

1. Live bees, vs bee venom injection
2. How to collect and care for live bees
3. How to apply bee stings
4. How to dispose of dying bees
5. Treatment regimen for common illnesses
6. Legal liability

Live bees, vs bee venom injection

Bee venom injection is prepared by mixing bee venom from thousands of bees in a saline solution, and often adding a local anesthetic like Procaine (used in dentistry) to mitigate the pain. Each dose is equivalent to one adult bee sting; thus, the treatment has a better reliability than using live bees. Considerations with live bees is the older the bee, the stronger the venom, and the more protein a colony is fed, the stronger the venom.



Having said that, any 'injection' treatment is the domain of the medical profession, and non-physicians are subject to malpractice lawsuits brought on by the College of Physicians and Surgeons of BC, the licensing body.



So, we are using live bees!

Collection and Caring for Live Bees

Collect live bees safely using vacuum suction and store the bees in a dark place at room temperature in a jar with food. Collect bees from large, well-fed colonies, and do not collect more than 2,000 bees from one colony over winter. Use more than one colony if needed.



Applying Bee Venom Therapy

Remove one bee at a time from the collection jar using reversing tweezers. Alternatively, let one bee out of the jar and it will fly to the window. Then pick it up by the wings.

Touch the bees' abdomen on the pre-determined sting site and the stinger will automatically release. Pull the bee away leaving the sting sack attached to the skin. Leave the stinging assembly pump for five full minutes before removing with tweezers.



Disposing of Dying Bee

Within two minutes of the bee sting, the bee will die. Dispose of the bee by either crushing it with your fingers or placing it in a dish of soapy water.



Treatment Regimen

NOTE: Before starting a regimen of bee venom therapy, to mitigate the chance of an anaphylactic reaction, the patient must:

1. Have an EpiPen on hand
2. Have had a full meal, no coffee, within a few hours of treatment
3. Have had a 'test' sting to determine allergy level, within the previous two weeks
 - a. Test sting is a 5-second sting using an adult bee
 - b. Wait for 20 minutes
 - c. Check for itchy palm or scalp, and/or moving red blotches. If either symptom appears, do not do BVT treatment. Wait a week, then conduct a test sting again, until there is no reaction, other than a small red welt at the sting site.

Arthritis

1. Test sting, six-week treatment, two-week rest, repeat if necessary
2. Sting in arthritic site
3. One sting every third day for two weeks
4. Two stings every third day for two weeks
5. Three stings every third day for two weeks

Common Wart

1. Test sting, one sting at the base of the wart
2. Wait six weeks and repeat if necessary

Chronic fatigue, Fibromyalgia, Multiple Sclerosis

1. Test sting, six-week treatment, two-week rest, repeat if necessary
2. Sting along the spine, on both sides, from the base of the neck to the bottom of the spine
3. One sting every second day for one week
4. Three stings every second day for one week
5. Six stings every second day for one week
6. Ten stings every second day for remaining three weeks

Note: After several years of treatment, some MS patients require up to 50 stings every second day to experience a benefit.



Legal Liability

If you perform BVT as a free service, or by donation, you are acting as a 'good Samaritan', and are not likely to be responsible if the patient has an anaphylactic reaction. If you open a clinic and charge for the service like a medical professional, you will require liability insurance.

Whether your charge for service, or not, it is a good idea to follow medical clinic protocols, which include:

1. Initial consultation to discuss the pros and cons of BVT
2. Ensure the patient understands that he/she must conduct their own research and consult with their own physician before starting BVT treatments
3. Patient to sign an Informed Consent form to exempt you from liability
4. Keep full records of treatments, including
 - a. Treatment Regimen plan
 - b. Record of dates, number of stings, and reaction, for each session
 - c. Record of follow up phone calls or in-person sessions to determine efficacy of treatments

Informed Consent Form

This is an example type of informed consent form for projects not dealing with medical research, children & young adults, people with learning difficulties, crime, internet research and/or research within organisation/workplace.

I, the undersigned, confirm that (please tick box as appropriate):

1.	I have read and understood the information about the project, as provided in the Information Sheet dated _____.	<input type="checkbox"/>
2.	I have been given the opportunity to ask questions about the project and my participation.	<input type="checkbox"/>
3.	I voluntarily agree to participate in the project.	<input type="checkbox"/>

End.