

Does Vitamin B₃ Really Reduce Adrenochrome?

To the Editor:

I read with great interest your editorial that questions vitamin B₃'s reduction of adrenochrome, and, indeed the adrenochrome hypothesis itself (*J Orthomol Med*, 2011; 26(4): 155-156). Although I agree that far more research into vitamin B₃ mechanism(s), the adrenochrome hypothesis, and other topics of orthomolecular medicine is imperative, I would still consider the hypothesis seriously, and furthermore the most plausible, since they delve from the tremendous scientific expertise of Drs. Pauling, Hoffer, Osmond, Smythies et al. You possess the luxury (the patina of the contemporary) of asserting after Pauling and Hoffer's demise; were these devoted scientists alive, they might have refuted your interpretation of the pertinent research, which I am sure must at least correlate strongly enough to authenticate orthomolecular scholarship. Pauling, Hoffer et al were above all rigorous: they would not have expounded casual similarities, unfounded generalizations, or other fallacies. Your questioning is healthful, but I encourage you to champion further research into orthomolecular medicine, not to play cynic. I recognize that the hegemony of the New Psychiatrists, who themselves cannot prove that their first- and second-generation antipsychotics benefit schizophrenics (i.e., do more good than harm), makes the absence of cynicism difficult; but even though orthomolecular physicians may be less politically and economically powerful, they will triumph, through dedication to the scientific method and human welfare, over propaganda and demagoguery. Let us not forget that the New Psychiatrists have damaged millions of lives with their "miracle drugs," whereas orthomolecular physicians have naturally healed the same number.

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Author Responds:

Thank you kindly for your letter. I was not playing the role of "cynic;" instead, I was suggesting that vitamin B₃ might help schizophrenic patients by mechanisms that have nothing to do with its effect on adrenochrome production. I cannot simply agree to the merits of an unsubstantiated theory (i.e., the adrenochrome hypothesis), even if developed by giants like Osmond, Smythies and Hoffer, when the published data does little to prove that schizophrenic patients over-produce this psychotomimetic compound. There are numerous potential causes of schizophrenia; Hoffer et al's theory is simply one of many that have not been proven to be scientifically accurate or substantiated by sufficient and current evidence. The very tenuous dopamine hypothesis is another example of a theory that has insufficient scientific evidence linking the symptoms of schizophrenia to an over-production and/or over-activity of dopamine within the central nervous system (Moncrieff J: A critique of the dopamine hypothesis of schizophrenia and psychosis. *Harv Rev Psychiatry*, 2009; 17: 214-225).

From my interpretations of orthomolecular history, Pauling had nothing to do with the adrenochrome hypothesis. He was a steadfast admirer, friend and collaborator of Hoffer and clearly regarded Hoffer's work as very important. In fact, his interest in micronutrients and psychiatry and the development of the word, "orthomolecular" were the direct result of having read Hoffer's and Osmond's book, *How to Live with Schizophrenia*.

I do not take for granted the fact that Pauling, Hoffer, and Osmond are no longer alive. I do not believe Pauling would have refuted or even objected to my editorial. I am also doubtful that Hoffer or even Osmond would have found my editorial objectionable, but they most likely would have sent a rebuttal. Hoffer and Osmond were used to debate, and were often viciously attacked; that tone was not apparent in my congenial (and deferential) editorial.

You encourage me to "champion further research into orthomolecular medicine." I know you have read this Journal for many

years. Please review my published articles. My hope is that you will quickly ascertain that I am a passionate advocate of orthomolecular medicine, and when possible, I have conducted and published research on the merits of specific orthomolecular treatments. I have not taken my role of editor for granted; rather, I have used my role as editor since 2010 to shed light on issues in orthomolecular medicine and beyond, to attract new authors and readers to the field, and to publish accurately on the merits of orthomolecular treatments and theory.

As for your criticisms of modern psychiatry and the contemporary management of schizophrenic patients, I concur overall with the statements you made. However, I wish to build bridges with our mainstream colleagues, rather than antagonize them or limit the possibility of finding common ground.

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