

An Unusual Gathering—1968

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In January, 1968, the author attended an SA conference organized by the late Father Joe R. at Fordham University in New York. It was an impressive occasion which we tried to preserve on paper for future historians. 1977 is the 25th anniversary of the psychiatric research which was first begun in Saskatchewan by Dr. Abram Hoffer and Dr. Humphry Osmond. This article describes an important event in this research.

On January 12, 1968, 300 people gathered at Fordham University in New York City. They were housewives, businessmen, and professionals. On the surface there was nothing distinctive or unusual about them. But the majority represented a phenomenon of the times. They were schizophrenics who had escaped the trap which lies in wait for most schizophrenics and the professionals who had helped many of them along the way.

Patients and professionals alike had come from various parts of the United States and Canada to exchange ideas at a conference sponsored by Schizophrenics Anonymous, with assistance from the American Schizophrenia Foundation. For the first time since Dr. John Conolly's

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time, schizophrenics were finding it possible to tell their stories to professionals who were willing to listen and understand.

Mingling with them were relatives of schizophrenics, some of whom had found help and others who hadn't but hoped to find it there.

As Father Joe, chairman and organizer of the conference, himself an admitted alcoholic and schizophrenic, put it, "We are here to find out what doctors and patients thought about this terrible perceptual distortion disease."

The schizophrenics were a new breed who would no longer be silent, apathetic, and fearful of a punitive and prejudiced society. They had something to say because no one knew better than they what it is like to be schizophrenic.

Hanging on the walls of the ballroom, the lounges, and the coffee room were several striking oil paintings exhibited by Vincent C, a handsome, quiet-spoken young man, who had not long before been discharged from a mental hospital.

"It's good to be working again," was all Vincent said about his job as a clerk. He had bought his own art material and spent his leisure hours painting. He was hoping to be able to exhibit his work in an art gallery. The paintings demonstrated Vincent's

feelings while he was very sick and later as he began recovering.

"I was quite ill when I did that one," he said, pointing to a painting pervaded by an overwhelming feeling of depression and violence. A disembodied hand and a bleeding eye were embedded in violently swirling, sweeping colors of red, browns, black, blue, and white, all done in heavy strokes.

"I had the feeling at that time that someone was trying to get me," Vincent explained. "I was quite depressed. The others, you can see, are more realistic. I did those when I was getting better. That one was done during a period of recovery, but I was still feeling very turbulent."

The painting he referred to radiated a feeling of upheaval, with swirling colors of green, red, and blue, but with better-controlled movements. The colors seemed quite heavy and perhaps even glaring. Then Vincent made a surprising statement.

"Colors look brighter to me now that I am well."

Vincent was quite well when he painted the boat on a stormy sea against a blue and black sky. This was a calmer picture and more comfortable to be with.

Later he admitted that it was difficult to remember what stages of the illness his paintings represented.

"As far as these paintings go," he told the conference, "I can't remember when I did any of them. All I can say to you is that I did these paintings while I was sick, but while I was sick I wasn't always sick. Some days I was fairly good, and I enjoyed painting. Many times I thought of painting. I'd get halfway done with it, and I'd get sick. So I changed the painting according to the way I felt. So many of them have been done over three or four times until they became the way you see them now. I did these things to express my feelings. Most of these paintings were done before I knew what the hell was wrong with me. So I had to express myself and this was the way I did it."

Vincent's story, like the story of all schizophrenics there, was one of a life battered by an illness which he did not understand and did not know how to cope with.

"Right now, today, I feel very well. I don't think I felt better in my whole life, even though I was drunk about seven days ago. So it proves the day-at-a-time program to me.

"I believe firmly that there is a great deal of hope for all us schizophrenics and alcoholics. I know there is a lot of hope because a lot of hope has been shown through my life. And there's a lot of help, as the doctors here are proving.

"As a child, I was very much introverted, and I had difficulty relating my feelings to anybody, to my family, my friends, people I came in contact with at school, and every other area. I had a great deal of difficulty in school. I didn't do very well in marks, particularly in mathematics. I still don't know the times table today, but I'm not worried about that right now.

"One of the things I was obsessed with as a real small child was prehistoric times. I think I was always obsessed with other times and the times I was involved in. I got out of grammar school with the help of nuns who said, 'I think, well, he's a nice boy anyhow,' so they sort of pushed me through. In high school I had a good deal of difficulty, but I did manage to get through that as well. Some of those years were very painful because I had some teachers who didn't understand me. Amazingly enough I did very well in algebra, I don't know how. I always liked to draw and paint. I didn't paint too much, but I did a lot of drawing as a child.

"I started drinking when I was in high school, in about my sophomore year. I had always disliked the effect alcohol had on other people I knew, not only members of my family but relatives I saw come to the house, and different people I saw in general. It seemed to take them away from things, and although I seemed to be away from things myself, I didn't want to be. So I didn't like what alcohol did to people until I drank it. And then I

loved it. I loved everything it did for me.

"It made me able to relate to people, it made me comfortable, the perfect tranquilizer. The only thing was, I just got drunk. Almost every time I drank, I got drunk. If I didn't get drunk, I was kind of disappointed. And now with niacin on the scene it's almost impossible to drink, because I've tried it. The last three times I drank I got nothing out of the bottle except depression, and I immediately went back on my bottle of niacin again. So if anybody is thinking about a drinking problem, I recommend niacin very highly to him.

"When I got out of high school, I had a very fortunate chance to go to sea, and I worked on a research vessel for about a year. At each port I hit I invariably went to shore and got drunk. During this time I was getting no therapy whatsoever, and I felt whenever I had a chance to drink, I would. I felt good when I drank. I didn't feel good when I was sober.

"After I got back from that trip, I went into the army and served two years in Panama. I spent one period down there when I was sober for four months. And believe me, this was one of the worst periods I spent in my life. I was a complete nervous wreck. My face broke out, I broke out all over with different sores, I was terribly nervous, I couldn't sleep, and I took the pledge from a priest in church, and wrote a letter home and told my folks I'd quit drinking. And they were very happy about this.

"It wasn't until I came home from service that they saw I was drinking again. I'd started drinking about a week before I left Panama. So I got home and went back to sea again on a small tugboat and lasted there for 20 months until I went onto the wine. I got a job on shore through an ad in a newspaper with the Metropolitan Life Insurance Company, and I lasted there for about nine months. After that I got an invitation to work on tankers in New York harbor so I worked as a deck hand there on these tankers. I was doing very well there. Things seemed to be opening up. A good friend of mine who was a skipper

on one of the boats asked me if I'd like to be a partner on one of the tankers. So I became involved in the ownership of a small tug in New York harbor. This lasted fine for about a month when I started drinking on weekends and then I started drinking on the boat again, so I just left this as though it were nothing. It was shortly after this that I was sitting in the apartment of a friend of mine, with no job, and I was drinking, and I was in a severe depression. I must have been because this friend was a drinking friend and he recognized there was something wrong with me. And he said, 'Do you want some kind of help?' I said, 'I'll do anything to feel better, I don't care what it is.'

"He said, 'Why don't you call up AA?' I said, 'Okay you call them and see what they can do.' He called up AA and found out where the meeting was, and he went down with me. He stayed outside and I went inside. I don't remember too much what went on, but I asked an AA guy after the meeting, I don't remember his name, if there was any hope in this existence, and he said 'Yes, just' come back tomorrow night.'

"I promptly went over to a bar and had three drinks. I told this girl I had just joined AA and showed her my brochure. She seemed very happy about the thing, and I invited her to the next meeting which was a closed meeting the next night, and she didn't show up so I went to the meeting myself. And thank God I did. I don't think I'd be here today.

"It was at this meeting that I met Father Joe and a whole bunch of other guys in the AA program. Father Joe introduced me to a friend who became my sponsor. I had a good deal of difficulty with the AA program. I believed it was doing a lot of good for a lot of people, I saw they were much better and much happier, but I had no feelings. I just couldn't feel. I was totally depressed all the time. Although I did go to functions, I did try to speak, I did almost everything that was recommended, I just didn't feel it. I had no feeling. I was in the program about 18 months

when Father Joe went to Canada to meet Dr. Hoffer. He came back with the famous HOD test and I started seeing all these fellows going off one at a time into the room, and coming out a little happier, and I thought there was something else new on the scene. I started sort of avoiding these guys because, I said, now what are they up to?

"Apparently Father Joe didn't think I was in the category of these other fellows. So I felt kind of happy about that. One night I said to him, 'Do you think I might have what these other guys got?' And he said, 'No, I think you're fine.' I went along for a couple more weeks, and I saw these other guys going to another special little meeting. I felt I was missing out on things. So I said, 'Gee, Father, I'd like to take that test whenever you want to give it. It looks like the other guys are having fun.' So he said, 'Okay, go into the room and take it.' And when I came out he looked at me and said, 'You made it. You're one of them. You got a score of 111.'

"I was extremely happy at this point because not only had I passed a test but it added another facet to my existence. I knew damn well there was something else going on with me. Although I went along and seemed to function normally as other people, I seemed to do this like—you know, you look at someone and look at how he does things—and you just do them the same way everyone else does. If I had my own way in this life, I'd stay in bed.

"I think the thing that's going to save my life, and many others like me, is the AA program and the SA program. Both of these programs have to assume the same depth, I have to believe firmly in both of them in order to exist properly. I have to follow these steps all the way down the line. I've tried doing it my own way, and it just doesn't work. Without these people I wouldn't be here today. I believe very firmly in the 24-hour program. I think if you can limit your existence to a 24-hour program or less if necessary that you can be quite versatile in living. With the help of God, in these programs, there is not a

hell of a lot of trouble you can get into as long as you take your medication and you keep moving. It is very important just to keep moving. No matter how you feel, you keep moving.

"I am thoroughly grateful to all you people, the conference, and the life I am having now with all this help."

"I have known Vincent C. for nearly four years," Father Joe said, "and I've never known him better than he is right now. He had three months of torture and he's come through. He had depression, paranoia, perception distortions. About three or four weeks after shock treatment the break came completely." **History of SA**

Father Joe related how he had first heard of Schizophrenics Anonymous. The idea began with Gregory Stefan (a pseudonym), author of **In Search of Sanity**,[^] although Stefan claims others were already thinking along the same lines about that time. Stefan had just been discharged from the VA Hospital in Ann Arbor, in the fall of 1963, and was still quite ill. He went to an AA meeting and there met two people who were not alcoholics. He told them he was not alcoholic either, but schizophrenic. They replied that they, too, were schizophrenic, but they had found something in AA that they had not found in any other group—the spirit of fellowship.

Stefan mentioned his idea to Dr. A. Hoffer and Dr. H. Osmond who greeted it enthusiastically. They phoned their friend, the late Bill W., cofounder of AA. After speaking to Bill, Stefan went to Flint, Michigan, and tried to get a group going there. The group didn't survive because of the lack of leadership and support from doctors. Stefan then tried to start a group in Ann Arbor and that, too, failed.

Dr. Hoffer then decided to try something in Saskatoon, Saskatchewan. Among his patients were a *number* who were both alcoholic and schizophrenic,

2 In Search of Sanity, The Journal of a Schizophrenic. Gregory Stefan, University Books, New Hyde Park, New York.

and some who were already members of AA. On October 15, 1964, he met with eight schizophrenics and explained his proposal to them. He then left them to decide whether they would establish such a group. That day the Saskatoon group of SA came into existence and later became incorporated as Schizophrenics Anonymous International, serving groups in many countries.

Father Joe was visiting Guest House near Detroit, Michigan, as a graduate of this unusual treatment home for alcoholic priests when Dr. Hoffer came to speak.³

"Dr. Hoffer spoke about schizophrenia and its relationship to alcoholism, and about the use of nicotinic acid, nicotinamide, and vitamin C, and the rest of the chemotherapy.

"I went to Saskatoon shortly after that to visit him. Besides having the very precious opportunity of talking to him about his medical conclusions and psychiatric findings, I was able to attend an SA meeting and easily able to identify myself as a schizophrenic."

SA was then already three years old. Dr. Hoffer wanted Father Joe to establish a Chapter of the American Schizophrenia Foundation in New York, but he refused because of other commitments. Instead he promised to establish, if he could, an SA group. It started out in a private home, with about five or six alcoholics who were suffering from schizophrenia and were getting well.

"The first group were totally alcoholic, and after awhile, because of help which we received from Dr. David Hawkins and other people, we were able to establish a much larger group and we began to meet at Fordham University. We have been meeting here for the last year and a half, with reasonable success," Father Joe said.

"One of the chief obstacles in the foundation and continuance of SA is that it seems that about half the patients are principally interested in getting hold of

the chemotherapy which involves vitamins B3, C, B1, B6, and E, and one or more of the phenothiazines. Once they start to enjoy reduction of symptomatic changes which are caused by schizophrenia, many of them fall away from the group. The other difficulty is the business of dealing with paranoid schizophrenics. It's very difficult in conducting an SA group, particularly if they are severely paranoid. This can be very disrupting.

"We have about 50 percent success which I consider to be very high. What happens to the rest is questionable. Some have had relapses into severe schizophrenia as a result of not being willing to continue with the meetings and with visits to the doctor. This has been a severe problem.

"Another problem is that the psychiatric world and the psychoanalytic world, both in psychiatry and psychology, are strongly opposed to the biochemical approach. The only way that I can find to counter them is to run more meetings of this kind.

"In the hospital I was never told I was schizophrenic. I was not told > I was schizophrenic until I met Dr. Hoffer and Dr. Osmond, with whom I talked two hours apiece about my symptoms of personality and body. And both of them agreed that I had suffered from schizophrenia. At one time I was labeled manic-depressive and cyclothymic personality. Neither of the two psychiatrists who took care of me on previous occasions succeeded, and I find this is very common among sick schizophrenics."

The chief value of SA, he thought, was the identification process. Secondly was the need for the schizophrenic to be grateful for his recovery to the extent that he is willing to bring the message to others.

"This, of course, we find very difficult because most schizophrenics who have been severely ill are not grateful people. They suffer from a lack of gratitude, they don't realize the dynamics of gratitude, and it is my personal opinion no schizophrenic can really recover without being

3 For a description of Guest House, Detroit, see Hoffer, A., and Osmond, H.: New Hope for Alcoholics, University Books, New York, 1968.

grateful.

"You hear a great deal of talk today in existential psychology about the need of the person to give to the other that he may grow. The only thing that you can give is who you are, and if you are a schizophrenic, and if you are recovering, you can give this marvelous message. You can also learn to recognize that basically the law of gratitude is the most dynamic law in the knowledge of man. This is a very difficult thing to teach the schizophrenic, because he has been so long habitually responding in a deviant way to elements in society whether they were people, places, or situations, or whatever. So this is one of the reasons why I feel that the schizophrenic ought to become involved over a much longer period of time, perhaps some of them for the rest of their lives. I think that the deviant changes that occur in the personality of the schizophrenic are so deep that it's unreasonable to expect that he could change so rapidly."

In his address to the conference, Father Joe defined SA as a "fellowship of men and women who share their experience, strength, and hope with each other that they may solve their common problems, and help others to recover. The only requirement for membership is the illness, schizophrenia, and the desire to get well. There are no dues or fees; we are self-supporting through our own contributions.

"SA is not aligned with any sect, denomination, politics, organization, or institution. It does not wish to engage in any controversy. It neither endorses or opposes any causes whatsoever. Our primary purpose is to stay well and to help other schizophrenics achieve well-being."

Father Joe's Story

Father Joe's story was much the same as the others—disruption, suffering, bewilderment, and fear. In his 'teens he had had a nervous collapse, but no one knew why. He felt that the world was unreal, that God was unreal.

"I didn't hate Him, I loved Him, but he was kind of an, unreal Being. I didn't understand human relationships. I was highly sensitive. All kinds of teachers were telling my mother that I was very bright, and I couldn't stay still. In the classroom I was continually going from my seat to the pencil sharpener, making sure I kept active. I was extremely jittery. I didn't do well in school, I couldn't concentrate, I didn't have the power of retention that my twin brother—an eye surgeon—had."

He joined the Society of Jesus at the age of 19 and was determined to remain a Jesuit in spite of migraine headaches and nose bleeds. As the pressure of the rigorous training became more severe, he became suspicious of other people.

"The most severe torture I went through in those days was the suspicion of the ones I loved. I couldn't tell anybody. I know how the schizophrenic feels. Can you tell someone who will understand? My twin brother would say, 'You're half crazy.' Well, it's not very pleasant to be told that you're crazy. I wouldn't mind being told I was crazy if they had an answer for my craziness. But I think it's very unkind to say this unless you're willing to help."

The headaches lasted six years. They were so severe he tried to run from them. He thought if he walked real fast he could get rid of them. He never got enough sleep.

"I had inability to concentrate; words falling out of pages; smelling odors that were not there; feeling that I was taller than I really am; loss of the sense of time. And I found booze."

Alcoholism was rife in Father Joe's family. Later he found out that several relatives were schizophrenic.

"I never really knew why a sister of mine and I really loved one another so much. She was the only one in the family who remained true to me in my terrible suffering with alcoholism.

"She said, 'I know what's happening to you, Joseph, because I lost my identity long, long ago. And you don't have to explain anything to me, I feel better now.'

"She had 18 shock treatments in one session and no therapy. She had one of these crazy psychiatrists that believes in shocking patients, and you leave them, like a dead animal. And you know who gave her therapy? Another sister, who listened to her all summer long, that summer, for three months. Now I can say to her, 'You know damn it all, you're a schizophrenic paranoid. You know we both suffer from this disease. Get off your rear end and take this niacin, and never mind the damn nonsense. So she's taking it. And I'm the only one who can get to her; the only one who can make any dent into her life is myself, and I'm very grateful. And now I know why.'"

Father Joe recovered in Guest House to some extent before niacin or vitamin C was known there. But when he came back to New York, in the middle of Manhattan, he suffered terrible panic, fears that everything was coming at him. He would take a taxi all the way from Manhattan to Fordham University to prevent himself from taking a drink.

"When you are schizophrenic and alcoholic," he pointed out, "you get to the point where you have a choice either to commit suicide or" to take a drink." And he didn't want to get to that point. He would go to his room and close the door, and then he would feel another panic. He was alone!

When he started taking niacin, on the advice of a friend who had heard about it from a friend in AA, he felt that in the first two weeks his head came together. He was able to sleep after suffering insomnia for 17 years. When he met Dr. Hoffer he said, "Are you Doctor Niacin?" And Dr. Hoffer said, "Yeah, are you Father Niacin?" And Father Joe said, "Yeah."

It was shortly after that that he went to Saskatoon and met Dianne C. and Lila F., wife of Don F.

Lila and Don

Lila was secretary of Schizophrenics Anonymous International in Saskatoon while looking after schizophrenic boarders and her

own four children. Don F. was a board member of the Schizophrenia Foundation of Saskatchewan, forerunner • of the Canadian Schizophrenia Foundation, and president of SAI.

Lila was unable to finish high school because of her illness. As a young farm wife she worked very hard, above and beyond the call of duty. Then she discovered that strange things were happening.

"I heard voices on television and when I got there to turn the noise off, it was off.

"I couldn't stand seeing my stove burners turn red hot and when I got over to turn them off, they were off and the burners were cold. I couldn't stand my own thoughts or my self-hatred. So I worked. At the same time I was doing this my husband was becoming very ill. I didn't know this.

"He went back to the doctor who had originally referred him to the Munroe Wing where Dr. Hoffer was at the time, and this time the doctor sent him back to Yorkton where they have a new psychiatric center. Don started on treatment. I wasn't going to a doctor. Why should I? I was fine. What was he going to do, give me some more junk that wasn't going to do me any good?"

"Don wanted me to go to a doctor with him. I started psychiatric treatment. I became worse, and one day, boom! My nervous energy was gone. I ended up in bed and that's where I remained for three weeks. The depression was so great that I couldn't even cry because there was nothing to cry about. I couldn't continue because I had nobody to* continue for. Nobody needed me any longer. And I didn't care. If they had told me they needed me I would have told them to go to hell because I didn't have strength or energy to help them. When my husband took me into hospital April 1, 1965, my little five-year-old son said to me, and this is all I remember of that day, and for quite a few days prior to that, and for quite a long time after that, but this sticks out in my memory, 'Mummy, are you really going to a hospital? Or are you

just playing an April Fool's joke on me?"

"When I got to the hospital apparently I didn't know who I was, where I was, and I didn't care. I had ECT treatment, sodium amytal treatment to make me talk. On April 28, my husband came up to hospital to see me. He was very, very upset. My mother was with him. They showed me pictures of my children. From what they told me, and this is all hearsay, I don't remember it, they told me the children were mine. I said, 'No, they're not mine. I'm 12. A girl of 12 can't be married and have four children. I babysit with them only.'

"I was discharged that night, just after the doctor told Don and my mother I would be in for nearly six weeks to two months. This added more confusion to the home, and what went on I don't remember. I know my mother had told me I didn't know how to cook, I acted like a spoiled brat, I acted like a 12-year-old and even worse than when I was 12. Two weeks later Don took an overdose of pills. The Royal Canadian Mounted Police (RCMP) took him into Yorkton hospital, and there he underwent insulin plus ECT.

"This was the start of 1965. The rest of the year went on much the same way. I get quite a kick out of the summer in some aspects, because I can see the awful funny parts of it. They had advocated we should separate because they said Don was making me ill, I was making him ill, therefore we didn't belong together, and Don and I, because we hated each other so much, wouldn't give in to each other. Why should I satisfy that one and leave, because he wanted me to? And Don, why should he satisfy me, because I told him to? Therefore we were staying together just out of sheer hatred, because who wanted to give in to the other guy?

"But we were advised to take a trip to California and possibly this would settle matters. Get away from it all! So we packed up, put our schizophrenia in the car, along with us, and away we took off merrily to California. Our children were being looked after by my parents, and

the neighbors I guess. I don't know who all they were looked after; they weren't my children. We have 80 beautiful slides. The scenery is gorgeous. I wish I'd seen it. I wish I'd really been there on that trip, instead of with my schizophrenia. I can't remember anything we saw unless I see a name in the slides. We were now entering Banff, or entering the Redwoods, or whatever. There were a couple of humorous incidents along the way. One in particular I get a great kick out of today. We were driving along in the mountains with construction, and there were signs, detour for 50 miles, and there was no gas along the way due to construction. I was driving, and we stopped at a gas station, and I said, 'Don, I need some gas. Can I get some money from you to get the gas?'

"You're not getting any of my money!' he said. He had it all in travellers' checks.

"I said, 'Don, the car is out of gas.'

"I don't give a damn. Start the car and get going!' he answered.

"I tried to argue with him, and then I decided it was pretty ridiculous to try and argue with him. He was convinced I could drive a car without gas, so I was going to prove I could! And I took off, and within 10 miles, putt, putt, putt, and we were out of gas. He then proceeded to give me bloody blue blazes because I'd been such a fool and hadn't stopped and got gas. Today we get a kick out of this, because when we are well, we never act this way. I sometimes wonder, though, why the psychiatrist didn't give *us* each a loaded shotgun, tell us to face each other, and pull the trigger. We were sick enough, we'd have done it. It would have been far safer for the rest of humanity, because I can assure you that on that trip we were a danger to everyone driving on the highway. And how we came back, without killing anyone else, or ourselves, I can only attribute to the good grace of my Higher Power.

"When we came back we *found out* our credit was completely cut off. Once we went to get groceries and the guy said it had to be cash: It was a miserable summer altogether, and the next thing

was, 'Sell your farm and clear out.' The psychiatrist had concluded that our joint illness was caused by the community and therefore we must leave. We started proceedings for an auction sale to sell our cattle and our machinery. We didn't want to sell our farm until we were well and knew what we were doing. We went over to a so-called friend to ask if he would give us some help in setting this all up. He jumped up from the kitchen table and slammed back. What he called Don I won't repeat; what he called me I won't repeat; but we were told to get the hell out of his house.

"Don went home and for three days he stayed in bed and then he got up and proceeded to get ready for the auction sale. He set up quite a bit of the stuff on Friday and Saturday, and Sunday he worked all day and Sunday night he asked me to take him to a doctor. He had blood poison in his finger so I took him.

"When I got him to the hospital he told the doctor what he had done. He had taken rat poison. After all, if you are a rat, you die like a rat. He was sent back to the farm by the RGMP because the doctor didn't really believe him, but he didn't want him in the hospital either. And after talking to me and my grandmother for two hours, he finally convinced us he had taken rat poison. I phoned the doctor in Yorkton and he said, 'Get him in here immediately.' But Don was not going.

"I phoned the doctor back and said, 'I can't do anything with him. What should I do now?' He said, 'Get the RCMP to bring him in, or get an ambulance.' So I phoned the RCMP and they said, 'Get an ambulance.' So I phoned an ambulance, and they said they were both out. I phoned the doctor and said, 'Now what do I do? The RCMP won't help, the ambulances are out, he won't come.'

"He said, 'Wait until daylight and try to do the best you can.'

"I made the 45 miles in less than 20 minutes in the morning. My daughter held him in the back seat, along with my grandmother, to keep

him from jumping out.

"At that time we were placed under the Administrator of Estates. They took all our money, property, everything we had, and they put us under allowance. They were really good to us. They gave us a choice of picking out our home in Saskatoon and they would pay the rent. Saskatoon was settled upon because neither of us knew anyone there, and this was a good situation. If we didn't do as they advised, they wanted us to separate, put our children in foster homes, never see each other again, nor the children, nor the family, my parents, Don's parents. Seeing we wouldn't do this, then we should go to a place where we knew nobody. So we did. We went there, broke, very very ill, four small children, and started again, with \$150 a month living allowance. And this was to pay utilities, etc.

"This went on until December, 1965, when finally Dr. Hoffer came into the picture. My guilt, my hatred had become worse all the time. We saw Dr. Hoffer because we had told all of our troubles to a wonderful psychiatric nurse who happened to be supervisor of a White Cross Center in Saskatoon. She arranged the appointment.

"We saw Dr. Hoffer December 28, and it didn't take him long to re-diagnose Don as schizophrenic and diagnose me as schizophrenic. He started us both on niacin. The last two years have not been easy, but we've worked at trying to get better again and at establishing our family.

"We started in SA, and SA taught me how to live with myself, how to accept myself as a human being that was a little bit important to somebody, somewhere. What importance it is doesn't matter. But now I can truthfully say I like myself—a little. I don't love myself, but I do like what I am—a little. I learned to live with my husband, my children, the rest of my family. And last August I learned to make amends with my father-in-law, so that he is now part of our family relationship again.

"SA is a growing-up project. It teaches, as we want to learn. I do not believe that

there is a schizophrenic anywhere in this world who does not want to get better. Down deep inside of every schizophrenic there is that desire, but they have to make that choice. I can't say I ran out of Dr. Hoffer's office saying, 'Hallelujah!' I'm a schizophrenic!' I didn't. I could accept the fact Don was a schizophrenic. I could accept the fact that I was a schizophrenic. But it took me over six months "to accept the fact we were both schizophrenic, that we had one schizophrenic son at that time, and two children with malvaria. Today I can accept the fact we have two schizophrenic sons and a daughter with malvaria. I don't feel sorry for my children. I think they are fortunate because they can learn from us and our experiences in SA, and our associations with the wonderful people we have known in SA."

Later Dr. Hoffer wrote the Yorkton Psychiatric Centre asking that Don F. be declared competent. The reply was that the same psychiatrist who had declared him incompetent would have to do it, and he would have to see Don first. After seeing Mr. F., the psychiatrist declared him to be competent, and they were given back their property and money.

The Professionals

Also at the conference were Dr. Osmond, who talked about how to judge a mental hospital, Dr. Hoffer who described "what it's like to be inside the skull of a schizophrenic," and Dr. Russell Smith, an internist with a special interest in alcoholism. Dr. Smith is consultant to Guest House and to Brighton Hospital for alcoholics.

Dr. Smith's trial of niacin was on very severe alcoholics who had combined years of drinking with years of unsuccessful therapy. At the conference he reported 87 percent response to nicotinic acid treatment. He had used it by then for one and a half years and had more than 500 alcoholics on the treatment, whether they were schizophrenics or not, or had liver damage or not, using up to 20 g a day when they complained of sore mouths, itchy skin, and

dryness.

Dr. Smith reported that he had a number of instances where alcoholics with evident liver damage stopped drinking and recovered their liver function, thus making it unlikely that niacin produced liver damage. He added that hypoglycemia, a low blood sugar condition, is present in 100 percent of the acute alcoholics.

Dr. David Hawkins, Associate Attending Psychiatrist at Brunswick Hospital Center, and Director of The North Nassau Mental Health Center, Manhasset, N.Y., presented a paper on a study made possible by the cooperation and permission of Dr. Aaron Bortin, Director of Psychiatry, Brunswick Hospital Center, Amityville, N.Y.⁴

The study showed "the dramatic change that has taken place and also the response to modern treatment methods of a group of 140 patients who were severely ill and had failed to respond to previous outpatient treatment."

The group employed the HOD test' which they discovered to be the "most useful tool" in the "diagnosis, management and evaluation of schizophrenic patients." The advantages of the test, the authors stated, are that it is "simple to administer and score, inexpensive, suitable for office and outpatient as well as inpatient use, and correlates with the patient's degree of illness ... It can be administered by trained, nonmedical personnel, and is, therefore, a very efficient tool. It is more reliable than projective testing which is cumbersome, expensive, time consuming, and often yields variable interpretations by different psychologists."

Because the HOD does not differentiate between schizophrenia and organic brain syndromes, the Organic Integrity Test, another useful and efficient test, was employed in this study to rule out

⁴ Schizophrenia: Response to Intensive Hospital Treatment as Monitored by the HOD and OIT Tests, by Francesco Chiossone, M.D., Frank Furfaro, David Hawkins, M.D., and Richard P. Runyon, Ph.D.

the patients who may have had an organic brain syndrome.⁵

The HOD diagnosis and the clinical diagnosis on admission were compared with the diagnosis on discharge. It was found "that the extent of agreement of the HOD with final diagnosis is higher than the extent of agreement between diagnosis on admission and final diagnosis."

It was concluded that "the HOD test proved to be an inexpensive efficient and reliable tool for establishing the diagnosis of schizophrenia, and it proved to be more reliable than the initial psychiatric diagnosis."

Of the 140 patients, 55 served as controls to evaluate the effectiveness of ECT used to treat the other 85. All received other treatments such as intensive pharmacotherapy which included, where indicated, phenothiazines, antidepressants, high-dosage niacin with ascorbic acid, and the minor tranquilizers and stimulants. In addition all received occupational therapy, recreational therapy, and individual and group psychotherapy where indicated.

"On the HOD test," the report stated, "88 percent of the EGT patients showed a favorable change as compared to 91 percent of the control patients. This was not statistically significant. Of these, 87 percent of both groups showed a favorable change on the paranoid score and both groups showed a comparable improvement on the perceptual scale. The patients in the ECT group, however, obtained a higher HOD score than the control group and this was at a statistically significant level, so that ECT patients as a group scored higher on the HOD test and, therefore, showed greater improvement. This was evidenced by more than 60 percent of the ECT group scoring above the median, whereas only 34 percent of the control subjects did so. On the schizophrenia scale, 93 percent of all patients showed a change in a favorable direction, and here again the ECT group

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showed the greatest improvement with 66 percent above the median as compared to 33 percent for the control group .

"All but two of the 140 patients showed improvement and all were discharged . . .

"Intensive, short-term hospital treatment for schizophrenia proved to be highly effective in bringing about substantial improvement in the great majority of patients, and this improvement was substantiated by objective testing."

Dr. Hawkins discussed his interest in megavitamin therapy in an interview.

He first heard about the use of vitamin B3 in treatment of alcoholics and schizophrenics through Bill W. who wrote a tract which was sent to all physicians who treat a large number of alcoholics. At the time Dr. Hawkins was specializing in alcoholism and after reading the tract he did some research on its background and immediately started using the vitamin for his patients.

As director of an outpatient clinic and attending psychiatrist in an intensive treatment hospital, Dr. Hawkins had by then seen many hundreds of inpatients on megavitamin therapy.

"I am using this method because of the enormous benefit I have seen in the patients who are alcoholic or schizophrenic or both," he said. "Also it's been useful in half a dozen cases of LSD psychosis. It is very economical, easy to administer, has practically no side effects to speak of. Many of my patients operate under severe economic limitations and I find that by using this treatment method I only need to see them once a month, which is about what they can afford. This is very practical because with a more expensive treatment approach they would either not cooperate or not go for it because it would be beyond their means.

"I felt that schizophrenia had a biochemical basis before I heard of the vitamin B3 treatment. This has been reinforced not only by my clinical feeling and intuition, but by the patient's

⁵ Tien, H., *Archives of General Psychiatry*, Vol. 3

responses to drugs, especially the phenothiazines. For instance, I have one patient I have seen for 12 or 14 years now, who on 20 mg a day of Stelazine cannot be distinguished from a normal person, whereas when she drops the dosage to 10 mg immediately begins to hallucinate. It's possible to turn her illness on and off and her hallucinations on and off by merely varying the dosage of her Stelazine.

"This, plus innumerable other experiences of a similar nature led me to believe, in agreement with Freud by the way, that the illness is primarily biochemical. The fact that there is a high concordance in families also indicated to me that there is a genetic coding and genetic codes expressing themselves in a biochemical manner. In addition there are the innumerable physical characteristics of schizophrenics which all experienced clinicians recognize, so that it is possible to tell that a patient has schizophrenia—for instance, a patient you've never met, maybe a complete stranger—you can pick him out of a crowd as having schizophrenia.

"Previously I had used psychoanalytic psychotherapy when, with schizophrenics, I used supportive therapy, in which of course I used psychoanalytic principles. Many, patients I saw three times a week, and I always felt that understanding the patient's psycho-dynamics explained the content of the symptoms, or might explain why they were having certain symptoms at that time, but the psychoanalytic understanding of the patient never explained why, for instance, he hallucinated in the first place.

"Freudian theory brings an understanding of ..meaningful connections, but insufficient causality. The results that we are obtaining now seeing a patient for half an hour once a month are extraordinarily better than we used to get seeing a patient for 50 minutes three times a week. This of course enables me to carry a great number of patients whereas before carrying 10 schizophrenics at one time in therapy was about all I could manage. I now carry easily 70 or 80, whom I am personally treating. Another thing that impressed me was that patients improved on a strictly biochemical treatment even when they did not know it was being administered.

"I have one interesting case of a woman whose family was told she had dementia praecox in 1934. And they were told the condition was hopeless. She has no children and has a very devoted husband. He decided that he would take her home rather than leave her in a state hospital

with this hopeless disease.

"Since 1934 she remained in bed and he had been taking care of the house and preparing all meals. She has been mute as well as incontinent. He has more or less devoted his entire life to caring for this invalid at home. Well, he heard about this treatment and came to see me. Then he made up a cocktail which included nicotinamide powder which he got from a drug company, ascorbic acid crystals, and 50 mg of pyridoxine ground up. He shook this up and made a concoction which she couldn't identify, because throughout all these years she has adamantly refused to see a doctor or take any kind of medication or pills. Well, she got out of bed, she is now fixing the meals, is talking, but still not aware that she is receiving any kind of medication which she gets twice a day, once in the morning in her orange juice and at night in her milk, which is her habit.

"The husband comes in to see me about every six to eight weeks or he calls me and we change the dosage of the medication, depending on how she's doing. I expect within maybe six months or so to be seeing her in the office."

Dr. Hawkins has sent many of his patients to SA. At that time there were three groups operating, two at Fordham University and one at Trinity Church, and he was looking forward to a new group starting in Long Island. Recently the Long Island Schizophrenia Association was organized and has become active.

"The SA program," he said, "has been

of enormous help to all the patients, and has been a benefit to the doctor because the patients help each other and keep each other on the treatment regime. At one time we had great difficulty keeping patients on medication. Now that they go to SA they all appreciate its value and encourage each other to stick with the prescribed treatment."

Also at the meeting was the late Dr. Robert L. Meiers, psychiatrist, Twin Pines, Belmont, California.

It was from Dr. Meiers that Dr. Hoffer learned about relative hypoglycemia, a low blood sugar condition, in schizophrenics and alcoholics. After running tests on all kinds of patients, Dr. Meiers discovered that over 70 percent of the schizophrenics had relative hypoglycemia.

Also there was Sister Patricia, a nun from Ontario who was administrator of a 28-bed hospital. She had persuaded a young psychiatrist to accompany her to the conference hoping that what he heard and saw would convince him that schizophrenics can get well on proper treatment. She felt she had indisputable proof and she had the proof with her— Eddie S. and Gerry S. who also spoke at the conference.

The parents and a sister of a schizophrenic man, a talented artist, sat quietly through the proceedings. The sister wept as she told me their story.

"We are here," she said, "because we saw the notice of this meeting in the paper and we thought that maybe here we will get the help we are looking for. My parents are living on social security. Once they had money. They spent it all on treatment for my brother."

Her brother was once a very good student who had completed his B.A., but was unable to

return for his M.A. degree because of his illness. He had been sick nine years and had had shock, insulin, and three admissions to hospital. He had hallucinations and was suspicious of the family whom he no longer trusted after they put him in hospital. He got worse on treatment.

He then had therapy for two years, without medication. "After two years his psychiatrist told my parents, 'Your son is just plain crazy.' After they spent thousands of dollars he said that. Father said, 'Why didn't you tell us before? If you say he's plain crazy, what have you done for him?'"

"My parents are sitting here, afraid to go home, afraid of what they'll find. Will my brother have broken all the furniture again? Or thrown it out? Will he have thrown the clothes and dishes in the garbage, as he has many times before? My mother won't even put up drapes. My father says 'If I could just eat a piece of bread a day, with a cup of coffee, if this would help my son get better.'"

Had her parents found the help they were looking for at the conference? Yes, she thought they had.

"Many doctors and psychiatrists just don't understand how destructive schizophrenia is," Dr. Hawkins had said. "It destroys financially and socially. It destroys the entire human being. It destroys the family."

"I will not be content until we can recover every schizophrenic within weeks or months of therapy," Dr. Hoffer told the conference. "This is why we have the Schizophrenia Foundations and SA. We cannot relax on the basis of what we have done as long as we have places like the Manhattan State Hospital in New York City where people are locked up for 20 or 30 years."