

# Editorial

In the last issue we featured a report by Dr. C. Tkacz and Dr. David Hawkins dealing with tardive dyskinesia, that is with its absence in a very large series of schizophrenics treated over the past fifteen years. Dr. David Hawkins is one of the early pioneers in the use of orthomolecular psychiatry, and in his hospital and at his clinic in New York, has received a large number of seriously ill, chronic schizophrenic patients from New York and the rest of the United States and Canada. Dr. Tkacz and Dr. Hawkins report they have seen no cases of tardive dyskinesia develop in their practice. This is an astonishing statement. When we became aware of this finding it immediately struck us that in our practices, using vitamins and tranquilizers for at least fifteen years, we also had not seen any cases out of a practice of several thousand patients.

We therefore had never been personally seriously concerned and have been puzzled at the great concern expressed by many other psychiatrists. A large number of papers appear in the current psychiatric literature dealing with this terrible affliction, and many papers are read at scientific meetings. The best estimates today suggest that about one-third to one-half of patients will develop minor or major symptoms. But recent, more thorough studies show the rate has gone up. If this conclusion that tardive dyskinesia can be prevented holds for other series of cases, as we expect it will, it follows that physicians who allow tardive dyskinesia to develop in their patients are no longer following the famous medical dictum "Do your patients no harm."

**A. Hotter and H. Osmond**