

# Earth House: An Alternative for Persons Suffering from the Schizophrenias

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## Introduction

In 1976, the Journal of Orthomolecular Psychiatry featured an editorial written by Abram Hoffer and Carl Pfeiffer on Earth House.

Earth House was described as *"the prototype of a biochemically oriented treatment center founded by Ms. Rosalind LaRoche in 1970 to provide a structured home for schizophrenics in the process of recovery."*

Pfeiffer wrote, *"Earth House is a revolutionary approach to better mental health care. Humphry Osmond observes that Earth House demonstrates the compatibility of the biochemical approach with a humane and humanistic understanding of this great family of illnesses ... Combining biochemistry, nutrition, psychotherapy, and compassion, the Earth House program has taught many schizophrenics to help themselves to full recovery."*

*In the McGovern Hearings of the Select Committee on Nutrition and Human Needs of the U.S. Senate June 22, 1977, Earth House was cited as a unique alternative.*

*This article is intended to provide a look at Earth House eight years later, the way in*

*which it has developed and where it is going.*

## An Overview

Earth House has been designated by the State of New Jersey as a residential treatment center for young adults diagnosed as schizophrenic. Located just outside of Princeton, New Jersey, Earth House accommodates a maximum of twelve patients ranging in age from 18 to 40. The minimum stay is three months; the average length of stay is six months. Most patients have been previously hospitalized, many with a history of suicide attempts, and a history of previous substance abuse.

Earth House is based both upon a medical and an educational model. Patients are under the care of Orthomolecular physicians with training and expertise in the schizophrenias. They prescribe both medication and nutrients for Earth House patients.

In addition to this close medical supervision, patients are required to learn about the nature of their illness, the nutrients, medications, diet, exercise and life habits which will

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assist their recovery. It is because of this strong 'learning orientation' that they are called 'students' and will be termed as such for the duration of this article.

### **The Earth House Program**

The Earth House staff includes social workers, psychologists, and teachers of nutrition, exercise, arts, crafts, dance, drama, yoga, and academic subjects. These staff members provide a regimen of classes and exercise designed to promote an optimal physical and psycho-social environment for recovery.

The exercise program is a rigorous one. Required activities in this program include classes in aerobics, hatha yoga, psychocalisthenics, psychophysical integration, swimming (10 laps minimum) and sports games. In addition, students are obliged to jog not less than one mile twice a week and long walks are encouraged.

As mentioned above, each student's medical progress is carefully supervised by an Orthomolecular physician. In addition, students are offered the opportunity to work with a behavioral optometrist and an acupuncturist.

Earth House students are constantly encouraged to learn strategies for managing both illness and wellness. Accordingly, students have weekly classes in 'Wellness Management' and 'Responsible Patient-hood'.

Academic and arts classes include literature and composition, creative art, current events, and a weekly library visit.

Students are also required to undertake household chores, volunteer jobs, and part time jobs as they are capable. They also have the opportunity to attend classes in area schools, colleges and universities, community programs, and lectures in the community on nutrition. It is required that students attend monthly meetings of the Schizophrenia Foundation of New Jersey.

### **Families**

Families are included in the educational process. Family workshops are offered three times a year on subjects such as communication, coping with the holidays, and limit setting. Reprints are sent to families several times a month on a wide range of subjects from new research in the field to helpful hints in the

kitchen. A library of videotapes is open to families at all times. A team headed by the Director and Director of Family Services works with families to assist them in developing basic management strategies for their child when he/she is at home or when he/she is graduated from the Earth House program.

### **Nutrition**

A key staff person is the nutritionist/cook who provides healthful gourmet meals. Refined flours, white sugar, caffeine, processed foods, dairy products and as much as possible, chemical additives, are banned from the Earth House kitchen. Fresh vegetables, fruits, fish, fowl, and whole grains are emphasized. A rotation diet ensures that students who are being treated for cerebral allergies can avoid hyperallergenic foods such as wheat, soy and eggs.

When they first arrive, Earth House students are frequently puffy and bloated, often overweight, showing signs of edema from inadequate diets, heavy medication and a lack of exercise. After a month or two at Earth House there is a characteristic weight loss and a marked overall physical improvement. Students who arrive underweight and malnourished soon develop good muscle tone and appropriate weight gain.

### **Illness Management**

An important key to the Earth House program is the goal of dealing with "Illness Management" as a whole. Consequently, treatment programs have been devised to meet the different stages of the progressing Earth House student.

In order to describe these stages, this article will use as a case example, a young woman sent to Earth House in January of 1984 by the State of Rhode Island.

### **Case Example**

Judy had been hospitalized ten times at the State of Rhode Island Institute of Mental Health. Her first admission was in January, 1973, and the last one was in December, 1983. She had a history of suicide attempts.

Staff members at the Rhode Island Institute had heard of Earth House, and as a last resort, decided to send her to Earth House

with the agreement that the State of Rhode Island would pay her tuition for a year.

**FIRST STAGE: ARRIVAL**

When they first arrive, Earth House students require orientation and close supervision. They are introduced to the routine of chores, classes and meals. Because there are no locked doors and no seclusion rooms, in special cases such as Judy's, an 'operative' provides round the clock supervision. Operatives are trained by Earth House professionals specifically to work with schizophrenic patients. Upon completion of their training, the operative may work with a patient at Earth House or in his/her home. Judy required the care of an operative during her first three weeks at Earth House.

**January: Staff Observations**

Upon arrival Judy was hysterical, banging her head against the wall and crying loudly. According to Earth House staff members, she evidenced some of the most violent and inappropriate behavior ever seen in an Earth House student.

Presenting problems cited in Judy's chart included constant hunger attacks, trouble with concentration, sensitivity to noise and sleep disorders. She denied having any delusions or thought disturbances, but early in her stay it became evident that she was suffering from visual and tactile hallucinations. She insisted that her only problem was constant attacks of hunger.

**Vitamins**

Super Quintal (B complex)		1 tab	A.M.
Vitamin C	1,000 mg.	2 caps	A.M. & P.M.
Vitamin B6	500 mg.	2 tabs	A.M.
Vitamin E	200 IU	1 cap	A.M.
Vitamin A	25,000 IU	1 cap	A.M.
Deaner	100 mg.	1/2 tabs	A.M.
Calcium Gluconate	1500 mg.	1 tab	Bedtime
B12 injection	1 mg.	By Injection	Weekly
Chelated Chromium	200 mg.	1 tab	Bedtime
Ziman Fortified		1 cap	A.M.

**Medicines:**

Xanax	1 mg.		Bedtime
			& PRN up to three a day.
Trilafon	8 mg.	2 tabs	A.M. & P.M.
Cogentin	2 mg.	1 tab	A.M. & P.M.
if needed.			
Dilantin	100 mg.		A.M. & P.M.
Lithium	300 mg.	1 tab	P.M.

After 4 days 2 in the P.M.

Staff reported yelling, violent behavior, tirades, outbursts of hysterical crying and destructive behavior. At one point in a physician's office, she picked up a metal scale and threw it across the room, then ran out into the street in front of a car. One staff member wrote of this period: "I became acquainted with Judy when she first arrived at Earth House. She was hallucinating and complained that there were crabs in her throat. She was subject to outbursts, complained constantly, would not acknowledge others, and displayed frequent suicidal gestures. She was unmanageable as a patient."

**January: Medical Program**

When Judy arrived at Earth House her prescribed medications were 1 mg of Ativan three times daily and 50 mgs of Thorazine by injection with additional Thorazine by mouth as needed. For the first few months Judy frequently needed 200 mgs Thorazine daily.

She was tested for biochemical imbalances by Philip L. Bonnet, M.D., Orthomolecular psychiatrist and by Carl Pfeiffer, Ph.D. M.D., Director of the Princeton Brain Bio Center. She was also tested for cerebral allergies to over 50 food and inhalant substances. (The intradermal method of testing was used.)

At her initial appointment the following nutrients and medications were prescribed as a general treatment program:

When her test results were completed Judy's chart indicated: Histamine Blood Level 12.6, (Normal 40/70 ng/mi)  
Spermidine 26.0, (Normal .90 mcg/mi)  
Spermine 1.66, (Normal .30 mcg/ml) Copper 170, (Normal 110/mcg) Zinc 89.0, (Normal 100 mcg) Urine KP 23, (Normal 10 mcg)

It was explained to Judy and her family that test results showed that she was suffering from a low blood histamine level, subclinical copper poisoning, zinc deficiency and pyroluria. Tests also showed that she was suffering from moderate allergies with particular sensitivity to millet and penicillin.

To treat the low histamine, niacin and folic acid were added to Judy's treatment program. The level of B6 was increased to induce dream recall. Neutralizing injections were started to treat the allergies.

## **SECOND STAGE: ADAPTATION**

The second stage of progress for Earth House students includes, very broadly, a general adaptation to the basic routines of the House. There is no longer the need for the Operative supervision. Students are expected to get up in the morning on their own initiative and get to classes on time. At this point more emphasis is placed on social awareness and orientation.

### **March: Staff Observations**

In March of 1984, various staff members made the following progress notes for Judy.

"I began to work privately with Judy about six weeks after she had arrived at Earth House. She was unable to keep several successive phone appointments as we were beginning therapy. She was still uncooperative and very negative. But the fact that she could even carry on a conversation was a marked improvement."

"Judy has become a good contributor to the group. She has a tendency to talk excessively about herself. But she also makes a continuing effort to play a helpful role and reaches out to other members. Much delusional material seems evident just below the surface, but she functions quite well compared to her initial adjustment difficulties."

"In movement class Judy has shown some improvement. She attempts to participate but

requires assistance.

"Judy has shown enormous improvement in art class since her arrival. She seems more open and relaxed in the group. Consequently, her artwork is also reflecting these changes."

"Over the last several weeks Judy begins her day by throwing tantrums regularly, expressing self destructive thoughts, and is critical of everyone involved in her care. By late afternoon and evening, she seems more manageable."

### **March: Medical Notes**

Judy's chart during the month of March showed the following: Histamine 32.6 Copper 152.0  
Zinc 105.0 Urine KP 14.0

### **April: Staff Observations**

By April, staff notes included comments such as:

"Judy still seems to be in a lot of pain from depression and hunger pangs. She believes that all of her problems are due to food allergies and that this is not being addressed at Earth House though she is receiving the neutralizing injections. She is also improving steadily. Outbursts are much less frequent. Suicidal talk and gestures have subsided. Complaints of crabs in the throat' are gone. Judy is beginning to acknowledge that things are a little better. Staff members perceive her behavior as being a lot better."

"Judy has shown much improvement in class, both socially and physically." "Judy is making progress. She is participating more and making good observations in discussions. She gives evidence of having the ability to write well." "Some of her disperceptions have disappeared and her somatic attacks are somewhat lessened. She continues to be obsessed with hunger attacks."

### **April: Medical Notes**

In April Judy was tested again for trace elements. At this time she was also tested for aluminum. Her chart for April showed the following:

Histamine 45.0  
Spermidine 0.83

Spermine 1.01  
Lit+Therapeutic 0.80  
Copper 1.36  
Zinc 73.0  
Urine KP 14.0  
Lead 4  
Manganese 10  
Aluminum 61. (Normal 30)

It was now explained to Judy's family that her histamine was rising into normal range, that copper was decreasing, and the urine kp was coming down. It had now been ascertained that her aluminum level was high (close to double the acceptable norm). Further questioning revealed that Judy had lived in an industrial area.

Magnesium was added to her nutrient program for treatment of aluminum toxicity. Epsom salt baths were encouraged.

### **THIRD STAGE: ADVANCED**

A third stage of progress is indicated by the students' increased ability to take on responsibility. They may be able to hold volunteer or paid positions. They evidence some concern for other patients. They may develop a sense of humor.

#### **July: Staff Observations**

In July staff notes included the following: "Judy has tried very hard to learn in art class. Her improvement is very apparent. Recently, a watercolor landscape she did reflected a good deal of careful observation and attention to detail." "Judy is participating well in the group." "Judy tends to think she can't do an assignment — then she does it well. Her written work sometimes shows her engaging sense of humor. She has been more alert lately." "Judy seems comfortable with the decision to remain at Earth House rather than leaving prematurely. Judy is very helpful and protective toward new students."

#### **July: Medical Notes**

Her medical chart showed the following:

Copper 96  
Zinc 93  
Manganese 9.5  
Urine KP 14  
Aluminum 19

It was pointed out to Judy and her family that both the copper and the aluminum disorders were now under control.

### **FOURTH STAGE: GRADUATE PROGRAM**

The student is well enough to leave Earth House but is not quite ready to live alone. The graduate program of Earth House offers living in supervised housing in the general vicinity of Earth House, where medications, nutrients, diet and exercise can be supervised, and assistance offered with problems that may occur. The student in this program is obliged to serve at least twenty structured hours a week in some 'outside' system such as a job, school or vocational training. This person has reached a stage of wellness, insight and knowledge which equips him to manage with guidance and a strong community and medical network.

As of this writing (October, 1984) Judy has not yet reached this stage. She still denies her illness and is not convinced that she has been greatly helped. On the other hand, the people around her have noted a great difference in her behavior.

#### **Staff Observations: October**

Staff progress notes now included the following remarks:

"Judy had a calm month. She continues to be a good contributor to the group and exhibits sincere interest in the well being of others. She still has not come to terms with the nature of the illness."

"Judy continues to be cooperative."

"Judy has produced lovely work this month, both in art and poetry. Her Haiku poems revealed some personal feelings and her limericks were cleverly humorous."

"Judy continues to write easily and recently was willing to spend extra time revising a particularly good composition. Questions that call for logical thinking are hard for her, but in general her work is creditable."

"Judy has been in good spirits this month. She is jovial with staff and gets along well with her peers."

#### **Medical Notes: October**

Judy's test results indicated that her blood histamine level was 34.4. Tests for Candida Albicans had been found to be negative. Her nutrient and medication treatment program now consisted of:

**Vitamins**

Super Quintal (B complex)		1 tab	A.M.
Vitamin C	1,000 mg.	2 caps	A.M. & P.M.
Vitamin B6	500 mg.	2 tabs	A.M. & P.M.
Vitamin E	200 IU	1 cap	A.M.
Vitamin A			
as Beta Carotene	25,000 IU	1 cap	A.M.
Deaner	100 mg.	1/2 tab	A.M.
Calcium Gluconate	1500 mg.	1 tab	Bedtime
B12 injection	1 mg.	By Injection Weekly	
Chelated Chromium	200 mg.	1 tab	Bedtime
Ziman Fortified		1 cap	A.M.

**New Vitamins**

Octocosinol		1 tab	A.M. & P.M.
Niacin	100 mg.	1 tab	A.M. & P.M.
Folic Acid	1 mg.	1 tab	A.M.
Niacinamide	500 mg.	2 tabs	A.M.
Molybdenum		1 drop	
Manganese	50 mg.	1 tab	A.M. & P.M.
Zinc Oratate	50 mg.		
L-Glutamine	1 mg.		

**Medicines:**

Thorazine	50 mg.		As Needed
Trilafon	8 mg.		A.M. & P.M.
			Increase to two in the P.M. if needed.
Lithium		1 tab	A.M. & P.M.

At the time of writing, Thorazine has been rarely needed. Judy is taking one Trilafon in the P.M. No Cogentin has been needed. We attribute Judy's decreased need for medication to her improved physical health and the fact that various imbalances have been normalized by the prescribed nutrient program.

Staff at the Rhode Island Institute of Mental Health have also noted the changes and have expressed satisfaction with the effectiveness of the Earth House treatment program for Judy. Plans are being made to send another student to Earth House from the Rhode Island state hospital system.

Since its founding in 1970, Earth House has served approximately 400 students. Many of these have come to Earth House in varying stages of chronicity, having been to hospitals and clinics all over the country for years at a time. They carry varying diagnoses including paranoia, manic depression and depression. A statistical study over a 36 month period showed that 82 students had been served, of

which 70% were male and 30% were female. The average age was 25. Of these, 14% had been referred by M.D.'s, 68% had been referred by hospitals and 18% by the families. The mean length of previous hospitalization was six years with a low of four months and a high of twenty one years.

At the end of the study, 45% of the students had "graduated" from Earth House, which means that they were able to hold jobs (part time, full time or volunteer) and move into sheltered group living situations or to independent living. Of the remaining, 16% had voluntarily withdrawn, 21% were asked to leave, and 18% were still in residence.

"Graduation" from Earth House may not mean complete recovery. However it does indicate that a student has reached a level of functioning which includes having friends, a growing sense of humor, and is either in a paying or volunteer job. The Earth House graduate also has an understanding of certain

principles of "wellness management" (including nutrition and exercise) which will assist him or her in avoiding further hospitalization.

### **Conclusion**

Earth House is not for every person who has been diagnosed as schizophrenic. Recovery depends on length of illness, the degree of biochemical imbalances, the willingness of family to cooperate with the program and, perhaps most important, the patient's desire for recovery. Earth House teaches that recovery is an active process requiring the dedication of an athlete in training, not something the staff does to the patient. Earth House teaches that recovery is work.

What Earth House hopes to demonstrate to psychiatric physicians and institutions all over the country is a model which combines a strict Orthomolecular medical basis with an educational and management approach. It is a model which offers hope and may well offer the optimal environment for recovery.

*Our thanks to Drs. Carl Pfeiffer and Philip Bonnet for assistance with this article.*