

Editorial

Orthomolecular Treatment of AIDS

Dr. Schackman, Professor of Public Health, Cornell University, et al, concluded that from the time of entering HIV care one's projected life expectancy is 24 years and the lifetime cost is \$618,900.¹ Seventy-three percent of that cost consists of anti-retroviral medication and laboratory expenses. HIV infection has been converted from a death sentence to a chronic disease. But what kind of chronic disease has replaced the killer AIDS? Dr. Schackman does not discuss the question in his paper. Considering the number of side effects of the anti-retroviral drugs, I wonder. I have not yet seen a detailed description of those patients after they have been on these drugs for, say, 20 years, and although it is great to extend life so markedly it is also important to make the extended life comfortable. Is it palliative care only?

Schackman's paper is great news for those who are ignorant of the important findings made by Harold Foster and summarized in his book *What Really Causes AIDS*, which has been reviewed in this journal. The four essential nutrients used in the African studies reported in this issue of *JOM* (p.193) are non-toxic: selenium and the three amino acids, glutathione, tryptophan and cysteine. They will do not harm. The drugs produce profound changes in lipid and lipoprotein metabolism and an increased risk of coronary artery disease. The HIV by itself impairs reverse cholesterol transport from macrophages. There is no evidence that these nutrients have any pathological impact on cholesterol metabolism. As a rule, xenobiotic (toximolecular) drugs are characterized by the large number of pages required to describe their side effects and toxic qualities. In sharp contrast orthomolecular nutrients are not toxic and any side effects are minor, rare and never life threatening.

The costs of treating HIV/AIDS will

be enormously reduced if these simple and effective nutrients are used. As was the case with the pandemic pellagra many years ago, which was eradicated by the addition of small amounts of niacinamide to flour, we can predict that HIV/AIDS will also be eradicated when public health policy mandates the addition of these nutrients to our daily food intake in the correct quantities.

—Abram Hoffer, M.D., Ph.D.

References

1. Schackman BR, Gebo KA, Walensky RP, et al: The Lifetime Cost of Current Human Immunodeficiency Virus Care in the United States. *Medical Care*, 2006; 44(11): 990-997.