

Editorial

Money Well Spent?

Recently Senator Michael Kirby called for a major increase in funding of psychiatric research in Canada. There have been no objections so far, especially from the psychiatrists who have always been very happy with new funds. I first noted this in the 1950s when the public began to demand that mental hospital superintendents do a much better job in treating the mentally ill in their charge. The standard reply was "Give us the money and we will do it." More money was poured into this herculean task of cleaning the stables that had been fouling for so many years. But it was very strange that even as the amount of money increased dramatically the percentage of patients who recovered did not get any better. The main effect of deinstitutionalization was the dumping of these patients from prison-like hospitals to the prisons and the streets where they still wander about today.

I conducted a comparison of over 100 schizophrenic patients I treated in a nursing home in Saskatoon, which cost 25 dollars per day, with treatment outcomes of similar patients treated in the University Hospital in Saskatoon. The cost at the University Hospital, the best in the province, a teaching hospital, was 80 dollars. The outcome was the same. I concluded that of the four important aspects of good treatment—shelter, food, kindness and medical care—that the medical care was the most important even though the other three factors had to be above what had been provided. Increasing the number of caring staff, which was the main difference, did not improve to the recovery rate. More money was not the answer. Better treatment was.

In my book *Schizophrenia, Yesterday (1950) and Today (2007), From Despair to Hope: With Orthomolecular Psychiatry* (In Press, Trafford, Victoria) I concluded that the results of treatment which depends on the use of toxic, prohibitively expensive, anti psychotics are no better than the results we saw in 1950 when the treatment

was incarceration. The evidence for this conclusion is given in the book and is based on the published conclusions of almost every paper which described outcomes. Fewer than ten percent of modern schizophrenic patients recover to the level at which they can work and pay income tax and psychiatrists do not expect them to. Here is what insider Gwen Olsen wrote in her book, *Confessions of an Rx Drug Pusher*:

"For fifteen years I served the interests of the pharmaceutical industry with dedication, loyalty and fierce competitiveness. However, a series of events over the years awakened an awareness in me that something was very wrong, indeed, very dangerous about the industry and their practices.

In particular, my experience selling psychiatric drugs as a hospital rep in which I was the caterer of the foods being consumed at hospital Grand Rounds and Mortality and Morbidity Conferences taught me that full disclosure was not being practiced with psychiatric drugs and doctors were fully aware that the therapeutics often used for mental illness could control patients but not heal them. I was trained by the industry that this phenomenon is known as the "revolving door syndrome"...There was no such thing as recovery with biochemical psychiatry, Pure and simple. These patients were customers for life and most, if not all, would suffer permanent and progressive brain damage from their treatments and medications. The drugs were also known to be highly addicting and difficult for patients to withdraw from yet patients were never informed of that fact".

Ford Motor Car company recently reported it lost billions of dollars over the past few years. Would throwing more billions into their coffers make things any better if they continued to build cars that are no longer wanted? They announced the only move able to allow them to survive. The bottom line drives industry. But it has no effect in medicine, especially in psychia-

try. Should we throw more money into psychiatry while it continues to follow the same old methods it has been following for decades, depending more and more on drugs which become more and more toxic and expensive, and which have led to the present dismal treatment results of the seriously mentally ill?

We do need much more money for research but only if that money is efficiently used to study alternative methods of treatment such as orthomolecular psychiatry. I think we should not provide more money until that new research is directed rationally and is not used to do more research for Big Pharma. Linus Pauling, in his definition of orthomolecular psychiatry, clearly showed that no xenobiotic (foreign) molecule will ever replace an orthomolecular substance that is normally found in and needed by the body. The chemical reactions in the cells are enormously complex and depend on the availability of these normal constituents such as vitamins, minerals, amino acids and essential fatty acids, in the correct concentration.

To visualize the complexity of these reactions, Roger Williams likened the cell to an orchestra. Each essential nutrient is like one member of the orchestra. A superb symphonic performance is a function of the quality of the musicians, a good conductor and all reading the same music. These are what the public demands. However, suppose during the performance the solo

violinist faints. The conductor believes the show must go on, so calls upon the lead drummer to replace the violinist. We will no longer hear a symphony; it will be a cacophony. Recently, young Julian Kuerti, assistant conductor of the Boston Symphony, learned that the scheduled pianist for the evening's performance was not able to appear. He called upon his father, renowned pianist Anton Kuerti, who was in town for the concert. The performance was superb. But there is only one Anton Kuerti. In the cells of the body each nutrient has been selected by evolution to be like an Anton Kuerti. If thiamin is removed from the cell only another thiamin can replace it, and until this is done the cell will not perform. Giving a patient a xenobiotic to replace what is missing is like replacing the violinist or pianist with the drummer. It would be like replacing Anton Kuerti with me—I would have to run for my life! The orthomolecular law is that xenobiotics cannot replace missing orthomolecular substances. The drug companies are wasting our money looking for something they will never find.

Until the profession makes a firm decision to examine very seriously alternative treatment methods I would not give them a penny. This poem, with its Part II added by Herbert Nehrlich, so well describes modern psychiatry.

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The Ambulance Down In The Valley

by Joseph Malins (1895) – A poem about prevention

'Twas a dangerous cliff, as they freely confessed,
though to walk near its crest was so pleasant;
but over its terrible edge there had slipped
a duke and full many a peasant.
So the people said something would have to be done,
but their projects did not at all tally;
some said, "Put a fence 'round the edge of the cliff",
some, "An ambulance down in the valley."

But the cry for the ambulance carried the day,
for it spread through the neighboring city;
a fence may be useful or not, it is true,
but each heart became full of pity
for those who slipped over the dangerous cliff;
And the dwellers in highway and alley
gave pounds and gave pence, not to put up a fence,
but an ambulance down in the valley.

"For the cliff is all right, if you're careful," they said,
 "and if folks even slip and are dropping,
 it isn't the slipping that hurts them so much
 as the shock down below when they're stopping."

So day after day, as these mishaps occurred,
 quick forth would those rescuers sally
 to pick up the victims who fell off the cliff,
 with their ambulance down in the valley.

Then an old sage remarked: "It's a marvel to me
 that people give far more attention
 to repairing results than to stopping the cause,
 when they'd much better aim at prevention.

"Let us stop at its source all this mischief." cried he,
 "come, neighbors and friends, let us rally;
 if the cliff we will fence, we might almost dispense
 with the ambulance down in the valley."

Part II by Herbert Nehrlich

So the townspeople met at the top of the cliff
 where the workmen put up a strong fence,
 woven wire and posts that were hardy and stiff
 and they lauded each other's good sense.

For a week the fence stood and no ambulance came
 then one morning they woke up to see
 that the fence had been cut from the cliff to the tree
 in the valley they stood with their shame.

Said a voice from the sky, and they knew it was God,
 "If you keep people healthy at all,
 there are forces objecting as they find it quite odd
 when no earls and no peasants do fall."

And instead of a fence on the edge of the cliff
 they had placed at the bottom a pool,
 where they'd land in the water, not ending up stiff
 but each victim was seen as a fool.

And to face their disease that had caused the neglect
 they would get a big bucket of pills,
 though the cost of it all would not nearly reflect
 that they'd taken the fence from the hills.

But the pharmacist said "It's the minds of all men,
 they are missing the atoms of dope,"
 and that medicine taken again and again
 was the modern way's spirit of hope.

The sage who had said that the fence should be built
 then spoke up, from the cliff near the edge
 but the white coated doc said it must be the guilt
 and he gave to the people this pledge:

"You will no longer be in the danger to fall
 from the cliff, neither earl nor a peasant,
 as the ordinance says that the citizens, all,
 won't be wandering near any crescent."

And the sage on the edge while addressing the town
 said "They're neither your neighbour nor friend."
 Both the doc and his buddy then pushed the sage down
 off the cliff. Thus the story does end.

American Medical Revolutions

About 170 years ago our ancestors forced the repeal of licensing laws which had created a monopoly over the practice of medicine for orthodox physicians. Ordinary people, farmers, artisans, tradesmen and others got together and forced politicians to act on their behalf. They were tired of bloodletting, and harsh medications like mercury compounds that ruined their teeth and weakened their bodies. They opted for kinder and gentler alternatives with lower casualty rates, particularly the newly introduced homeopathy. They were impressed that tiny doses of medicine were able to cure cholera much better than the massive doses used by orthodox physicians.

Homeopathy, introduced in America in 1825, was a brand new medical discipline developed by a German physician named Samuel Hahnemann (1744-1843). He was disillusioned with the results of medical practices of his day. He stopped practicing and began to study the effects