

EDITORIAL

Editorial: The Exceptional Cascading Effects of the One Seminal Case Report

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"As in clinical work, it is the single case which is the stimulus for further enquiry" (Osmond, 1962, xii). This prophetic excerpt from *Niacin Therapy In Psychiatry* was made by the long-time collaborator of Dr. Abram Hoffer, Dr. Humphry Osmond, in reference to an astounding reversal of a schizophrenic teenager in 1952. Here is a brief description of this case:

Towards the end of May, another opportunity arose to try niacin. A seventeen-year-old boy, C. C., was admitted with an acute schizophrenic illness in February. This had started only a few days before admission. He was excited, overactive, silly and at times deluded. He responded transiently to ECT and was put on deep insulin but this had to be stopped after less than ten comas because he developed rightsided facial palsy. During the next three weeks his mental condition worsened steadily until he was lying in his bed, naked, hallucinated, lalling in an incomprehensible way, urinating and defecating where he lay. His family, who were much attached to him, were distressed about this obvious deterioration since ECT and insulin could not be given. On May 28th he was started on 5 grams of niacin and 5 grams of ascorbic acid divided into five doses daily. A chance for the better was noticed within twenty four hours and ten days later he was described as "almost normal." A Rorschach test done within three weeks of the new treatment being given showed "some anxiety" still remaining which was hardly

surprising but no perceptual anomalies. Vitamins were stopped on the 27th of June and he was watched for three weeks before leaving hospital for his home on July 21st. A follow up three years later showed that he was in good health and had finished Grade XII. He has not been in hospital since (Osmond, 1962, xi-xii).

Shortly after this clinical reversal, Dr. Hoffer and his team conducted further studies (e.g., Hoffer et al., 1957) to determine the clinical efficacy of therapeutic doses of niacin and niacinamide. These astounding results confirmed what was observed in this noted case, and have been documented meticulously by Hoffer in this journal and others for decades until his death in 2009. Imagine what life would have been like for the thousands of schizophrenic patients had Hoffer ignored the result of that single case?

On a related note, the treatment of schizophrenia was fundamentally transformed by neuroleptics – originally called major tranquilizers and now known as typical and atypical antipsychotics. While preliminary psychiatric testing of chlorpromazine (CPZ) took place at the Villejuif psychiatric hospital in Paris (Chertok, 1982, as cited in Stip, 2002), it was Drs. Delay, Deniker, and Harl who first published comprehensive reports on its use. They demonstrated that CPZ did not simply sedate agitated patients, but actively targeted psychotic symptoms

like hallucinations and delusions (Delay, Deniker, & Harl, 1952, as cited in Stip, 2015), effectively launching the era of modern psychopharmacology. The rest, as they say, is history.

My late father had Parkinson's disease (PD) and died at the age of seventy-six in 2010. For years prior to his death, the most important treatment providing quality of life benefits was Sinemet, a combination of levodopa (L-3,4-dihydroxyphenylalanine; L-DOPA) and carbidopa. By allowing more L-DOPA to enter his brain and boost dopamine production, the medication significantly lessened his tremors, stiffness, and slow movement. One can only imagine the delayed suffering that would have unfolded to the countless millions of patients globally if Dr. Walter Birkmayer had not given 50 mg of L-DOPA intravenously to patient L.S. in July 1961 (Foley, 2003). Here is an excerpt (as documented by Foley, 2003, p. 469) from the seminal paper originally written in German by Birkmayer and Hornykiewicz (1961).

The effect of a single intravenous injection of L-DOPA in Parkinson's disease was, in short, the total abolition or the substantial reduction of akinesia. Patients who, when lying in their beds, could not sit themselves up, who could, when sitting, could not stand, or who, when standing, could not start walking, were able to accomplish these tasks with ease after L-DOPA. They walked with the normal associated swinging movements, they could even run and spring. The voiceless, aphonic speech, with its unclear, palillalic articulation, became as strong and clear as that of normal persons. The patients could, for a short period, carry out motor activities to a degree which had been thus far achieved by no other medicament. This DOPA effect reached its peak within 2-3 hours and lasted (to a lesser degree) for 24 hours.

At present, L-DOPA treatment remains the international gold standard and the most effective symptomatic treatment for PD. On a related note, there was an epidemic of encephalitis lethargica (EL), sometimes referred to as "sleeping sickness," that spanned across the globe beginning in the winter of 1916-17, and continued into the 1930s (Hoffman & Vilensky, 2017). EL is a neurological disorder that has acute and chronic phases, though both phases tend to be mixed, and is initially characterized by "excessive sleepiness, disorders of ocular motility, fever, and movement disorders, although virtually any neurological sign or symptom could be exhibited, with day-today, and even hour-by-hour shifts in symptomatology" (p.2247). The chronic phase, on the other hand, can last months to years, and is marked clinically by severe "parkinsonian-like signs" (p. 2247). The film

Awakenings, directed by Penny Marshall, portrays the story of a neurologist, Dr. Malcolm Sayer, who brought patients with EL back to life by administering L-DOPA – albeit, for a temporary period of time – because he noted advanced Parkinsonian symptoms among his patients with EL ("Awakenings," n.d.). This movie was based on the remarkable book with the same title by neurologist Dr. Oliver Sacks (1999), documenting his work with EL patients from around 1966 to 1969. Here is a passage from Dr. Sacks about his most famous patient from that period, Leonard, whom he had first seen in the spring of 1966 and who later exhibited a remarkable response to L-DOPA treatment:

L-DOPA was started in early March 1969 and raised by degrees to 5.0 gm. a day. Little effect was seen for two weeks, and then a sudden 'conversion' took place. The rigidity vanished from all his limbs, and he felt filled with an access of energy and power; he became able to write and type once again, to rise from his chair, to walk with some assistance, and to speak in a loud and clear voice – none of which had been possible since his twenty-fifth year. In the latter part of March, Mr L. enjoyed a mobility, a health, and a happiness which he had not known in thirty years. Everything about him filled him with delight: he was like a man who had awoken from a nightmare or a serious illness, or a man released from entombment or prison, who is suddenly intoxicated with the sense and beauty of everything around him (pp. 184-185).

As these historical milestones demonstrate, individual case reports remain the foundation of discovery, and form the basis of how early clinical observations on treatment can uniquely transform the routine care of patients. All medical students become acculturated into their future clinician roles because of the case report. During clerkships, internships, and residencies, medical students report on their cases and determine individualized care based on how their patients respond to treatment while under their care. It is the hope of this editor and the journal that our case reports will not only inspire work in orthomolecular medicine, but perhaps transform the routine care of patients in a manner similar to the pioneering work of these notable and brilliant clinicians.



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