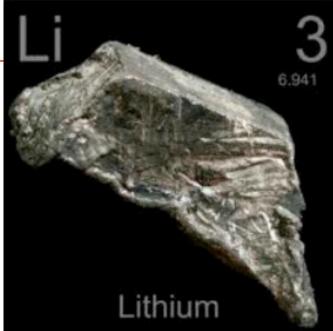
LITHIUM IN THE CENTRAL NERVOUS SYSTEM

Laurie K Mischley, ND, MPH, PhD(c)

Orthomolecular Medicine Today Conference

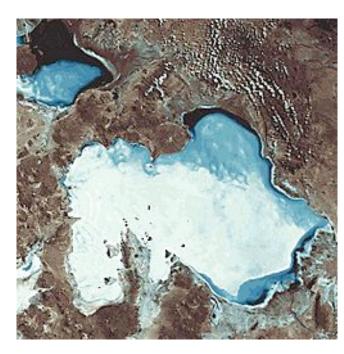
Vancouver, Canada April 2014



Geological perspective

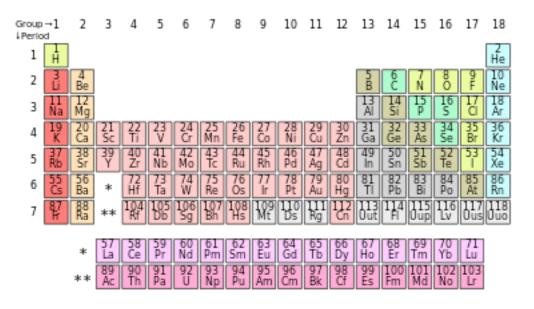
- Unevenly distributed throughout crust
 - Not unique: Iodine, Selenium
 - Medical geography- Harold Foster
- Largest known deposits are Bolivia & Chile
 - Salar- Spanish salt flats



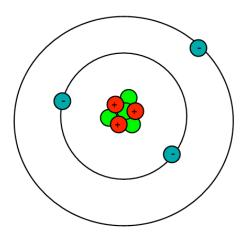


Chemical perspective

Alkali metal, lightest of all the metals Occurs as a salt



Swedish chemist Johan August Arfvedison isolated the salt in 1817.





Li Content of Earth's Crust

- Highest where salts have been concentrated by solar evaporation
- Desert, playa, salar





Lithium in Industry

- Lithium is highly anodic in the galvanic series
- Reacts with water something like sodium does
- Not very stable, but excellent energy density
 - Joules of energy per kilogram
 - Offers electronics that are smaller, lighter, thinner
- Widely used battery technology in small electronics







Human Use

Travel to mineral springs dates back ~ 2000 years

Gerhard Schrauzer

Born in Eastern Europe, grew up interested in the local mineral springs purported by locals to having moodenhancing properties.

German: 'Natalie Quelle'

1948- Dr. Schrauzer analyzed this water while employed as a laboratory chemist at a local research institute specializing in mineral waters.



Lithium in Biology and Medicine: New Applications and Developments

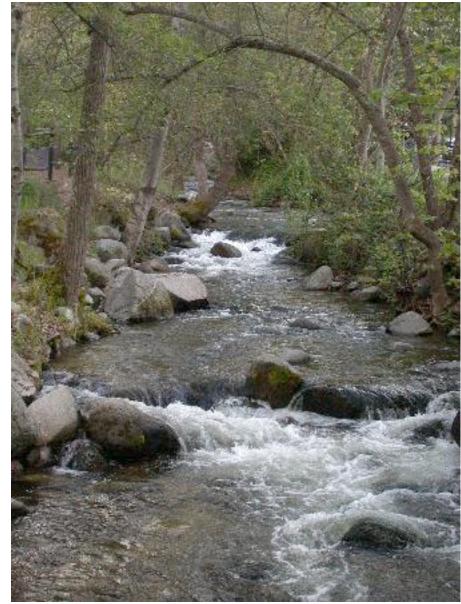
Schrauzer, G. N.

Downtown Fountain in Lithia Park, OR









LITHIUM SCIENCE

Is it essential? What are the symptoms of deficiency? How is adequacy assessed?

Li is an Essential Nutrient

- Every cell contains lithium.
- The body does not synthesize it's own lithium.
- Must be exogenously supplied: physiologically essential
- Required dose is estimated to be ~ 1 mg/ d.

Conditional essentiality has yet to be determined: Are there certain populations who may have unique requirements? Likely, given what we know about biochemical individuality, SNPs, epigenetics, etc.

Schrauzer GN. J Am Coll Nutr 2002;21(1):14-21.

Where does it come from ?

- WATER
 - A function of the natural variation in the Earth's crust
 - The higher the rainfall in any region, the lower the lithium level in the water supply.

• FOOD

- Likely a function of the soil the foods were grown in, and how well they are washed before consumed.
- Last analyzed 20+ years ago- farming practices have changed substantially.

Data in humans and rodents suggests the higher the Na content of the diet, the lower the Li.

Pickett EE. Biol Trace Elem Res 1992;34(3):299-319. Schopfer J, Biol Trace Elem Res 1994;40(1):89-101

Human Intake

Average US consumption: 650- 3100 µg/d. Determined by location/ source of water Soil/ mineral content of diet

Worldwide variation in intake:

Location	Lithium Intake
Tijuana, Mexico	1485 <u>+</u> 1009 µg/d
Glaveston, Texas	821 <u>+</u> 684 µg/d
Vienna, Austria	348 <u>+</u> 290 µg/d

Schrauzer GN. J Am Coll Nutr 2002

Metabolism

- Absorbed as a salt via Na+ channels in the small intestine
- Excreted through the kidneys
- Plasma concentration twice as high as RBC or CSF
- Ubiquitously distributed, highest concentrations in kidney, cerebrum, cerebellum (extra 10-20%)
- Deposited in bone and hair

Assessment

- Goats fed lithium-deficient or lithium-replete diets & then slaughtered
 - Blood serum: 19% reduction (P < 0.001)
 - Hair: 30% reduction (P < 0.001)
 - Milk concentrations: 31% reduction (P < 0.001)
- Supplemental lithium results in a direct dose-response relationship with hair lithium concentrations
 - Up to 2000 µg/g
- An ecological study in Texas correlated tap water lithium concentration with body status in urine.

Schrauzer GN et al. Bio Trace Elem Res 1994 Anke MAW, et al. Biological Importance of Lithium. 1991

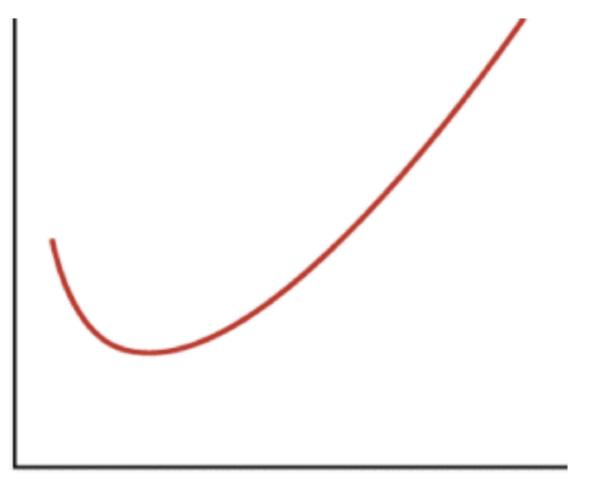
HAIR ELEMENTS



LAB#: H000000-0000-0 PATIENT: Sample Patient SEX: Male AGE: 10 CLIENT#: 12345 DOCTOR: Doctor's Data, Inc. 3755 Illinois Ave. St. Charles, IL 60174

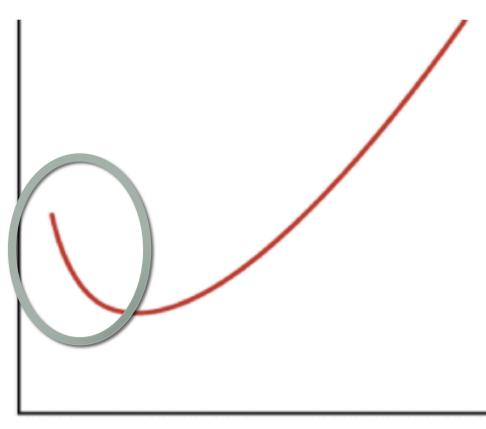
ESSENTIAL AND OTHER ELEMENTS				
ELEMENTS	RESULT	REFERENCE RANGE	PERCENTILE 2.5 th 16 th 97.5 th	
Calcium	981	160- 500		
Magnesium	68	12- 50		
Sodium	710	12- 90		
Potassium	96	10- 40		
Copper	600	9.0- 30		
Zinc	140	110- 190		
Manganese	0.34	0.18- 0.60		
Chromium	0.45	0.23- 0.50		
Vanadium	0.14	0.025- 0.10		
Molybdenum	0.060	0.040- 0.089		
Boron	2.0	0.50- 3.5		
Iodine	1.0	0.25- 1.3		
Lithium	0.014	0.007- 0.023		
Phosphorus	214	160- 250		
Selenium	0.65	0.95- 1.7		
Strontium	2.4	0.21- 2.1		
Sulfur	51500	45500- 53000		
Barium	0.93	0.19- 1.6		
Cobalt	0.022	0.013- 0.035		
Iron	21	6.0- 17		
Germanium	0.033	0.045- 0.065		
Rubidium	0.10	0.008- 0.080		
Zirconium	0.032	0.060- 0.70		

U-shaped curve: Deficiency & Toxicity





- Infertility
- Aggressive behavior
- Diminished impulse control
- Depression
- Increased suicide risk

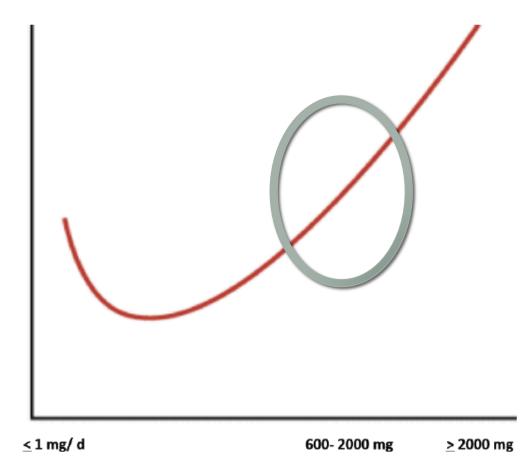




Pharmacological use

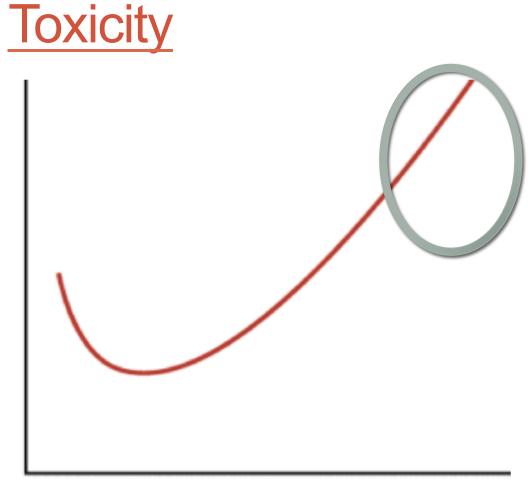
- Bipolar disorder
- Depression
- Seborrhea (topical)
- Dystonia?

<u>Side Effects</u> Weight gain Hypothyroidism Hyperparathyroidism





- Gastrointestinal complaints
- Tremor
- Confusion/
 somnolence
- Seizure
- Death



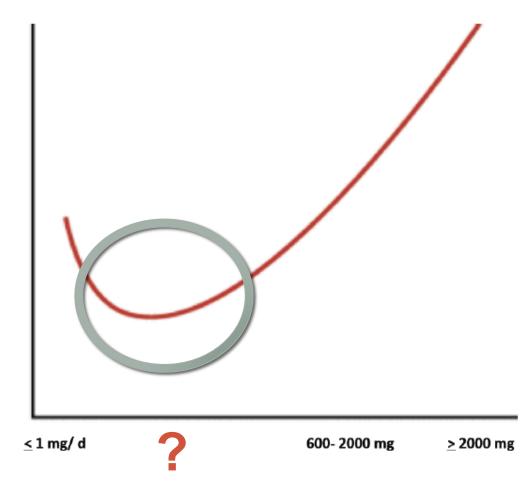


 600- 2000 mg
 ≥ 2000 mg

 Serum concentrations:
 1.5-3 mEq/L

Maintenance

- Cell growth
- Electrolyte regulation across neuron membranes
- Neurorepair
- Regulate autophagy



EPIDEMIOLOGY

Lithium status across populations

Ecological Studies of Deficiency

• Lithium mapped across Texas, concentrations of urine lithium were inversely proportional to regional rainfall.

Counties with the lowest vs. highest [Li_{urine}] had statistically significant increase in:

- All mental hospital admissions (P < 0.001)
- Psychosis (P < 0.01)
- Neurosis (P < 0.001)
- Personality disorders (P < 0.001)
- Schizophrenia (P<0.01)
- Homicide (P<0.01)

Dawson EB. Li in Biology & Medicine, 1991

	Year	Ν	Median	Mean (SD)	
				µg/g	ppm
New York, USA (68)	1975	206		0.009-0.228	
Montreal, Canada(6)		53			
Healthy control children	1977	22			.40 ppm
Children with learning disorder	1977	31			.22 ppm
Vienna, Austria	1992	20		0.030 (0.025)	
Munich, Germany	1992	18		0.035 (0.033)	
Tokyo, Japan	1992	20		0.070 (0.033)	
Galveston, Texas	1992	25		0.080 (0.059)	
Culiacan, Mexico	1992	21		0.081 (0.080)	
Kopenhagen, Denmark	1992	20		0.087 (0.021)	
Stockholm, Sweden	1992	10		0.094 (0.028)	
Tijuana, Mexico	1992	60		0.128 (0.087)	
California, USA, Healthy males		82		0.099 (0.126)	
California, USA, Violent offenders	1992	49		0.028 (0.029)	
Florida, USA, Prisoners	1992	48		0.032 (0.031)	
Oregon, USA, Prisoners	1992	31		0.051 (0.052)	
California, USA, Heart patients	1992	42		0.028 (0.025)	
National sample, USA,	1998	150		.015 (.008)	
Doctor's Data(69)					
Tokyo, Japan(5)		200			
Males	2011	n=100	0.011	0.019 (0.025)	
Females	2011	n=100	0.017	0.0275 (0.029)

Table 2: Population Reference Ranges of Hair Lithium. Diseased populations are in red.

Li Deficiency in Tokyo

Background: High rate of suicide in Japan **Hypothesis**: High frequency of deficiency

Aim: Li scalp hair in 100 male & 100 female residents of the Tokyo Prefecture.

Results: Below lower limit of detection in more than half of samples, in both genders.

Conclusion: Consider lithiation of the water supply.

<u>Schöpfer J</u>, <u>Schrauzer GN</u>. Biol Trace Elem Res. 2011 Dec; 144(1-3):418-25.

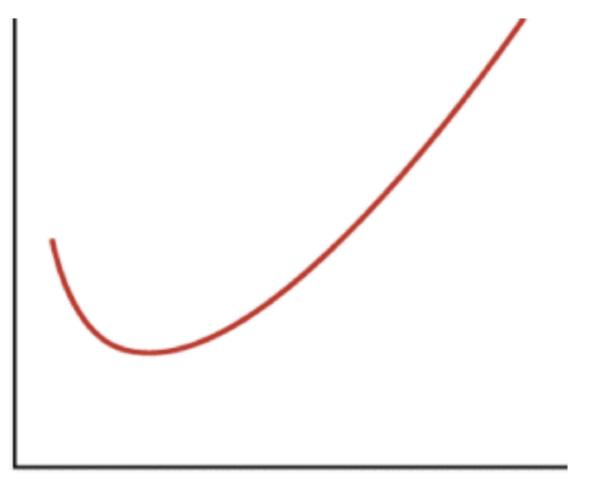
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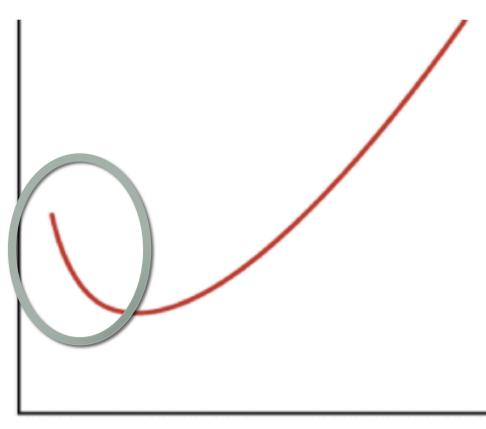
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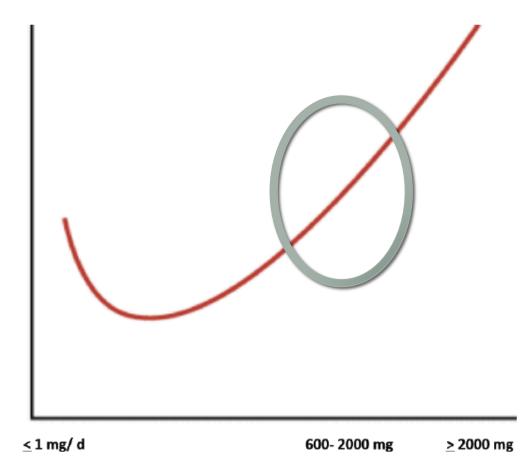




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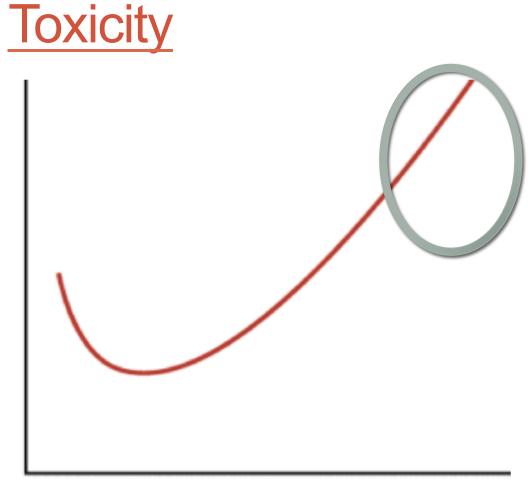
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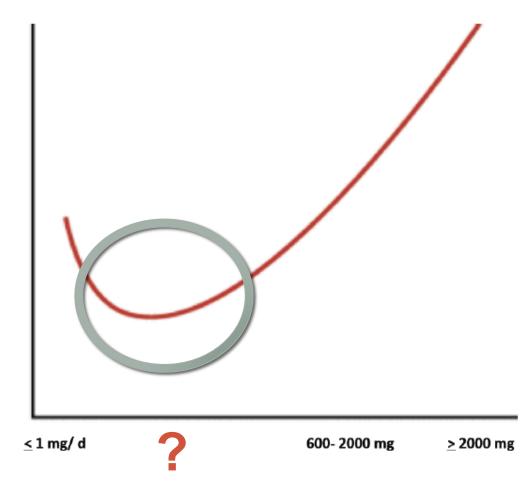


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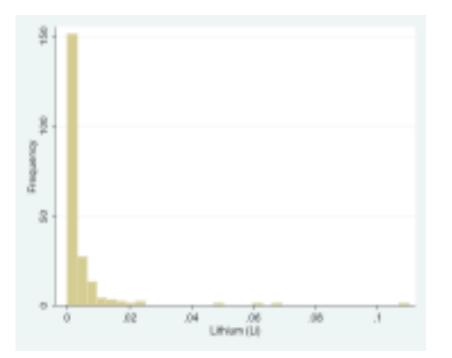
Clinical Case Series

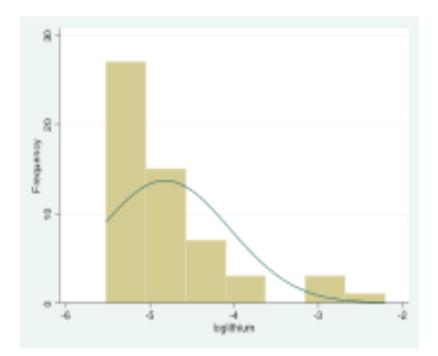
METHODS

- 711 clinical records identified by disease-
 - Chief complaint neuro disorder: PD, MS, ALS, HD, epilepsy, etc.
 - Secondary: fatigue, depression, myalgia, ... up to 10. (data avail)
- First test only
- Scalp hair only
- Untreated hair
- ICP-Mass spect

N= 419 (MS= 94, PD=80, Seizures=22, Autism=24)

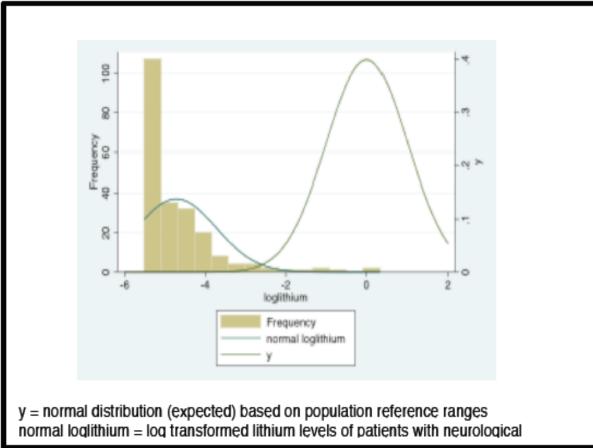
Lithium concentration distribution





Li Status of Neuro Patients in the Pacific NW

Figure 1: Log-transformed lithium levels of patients with neurological disorders compared to expected reference ranges from general population, as defined by laboratory reference ranges.



Frequency of Li Deficiency by Disease

Deficiency described as 2 or more standard deviations below the laboratory reference range (DDI).

Disease	Ν	Number Deficient (%)
Multiple Sclerosis	94	62 (66%)
Parkinson's Disease	80	51 (64%)
Autism	24	10 (42%)
Seizures	22	16 (73%)
A neurological patients	419	324 (77%)
Clinic-based controls	19	11 (58%)

Mischley LK 2013

LITHIUM REPLETION AS A THERAPEUTIC STRATEGY

Physiologic doses

Emerging Understanding

"It is likely that the ancestral role of this ion as a modulator of cell survival, cell growth, movement, and mood impact on a variety of behavioral issues, which are the expression of similar cell mechanisms operating in different neuronal networks."

Pasquali L, et al. Intracellular pathways underlying the effects of lithium. Behavioural Pharmacology 2010, 21

Drug Addicts: Rx Li for Foul Mood

24 former drug users Randomized to 400 µg/ d of Li or placebo x 4 weeks

Using the Naval Psychological Research Unit measure, there was a statistically significant improvement in mood scores from baseline, particularly in:

- Energy
- Happiness
- Friendliness

Schrauzer GN et al. Effects of nutritional lithium supplementation on mood. Biol Trace Elem Res 1992

Pharmacological Doses

- Method of Cooper, et al. uses doses of 600-1200 mg/ d, which targets a serum Li level between 0.65-0.85 mEq/L.
 Just below level of toxicity
- At pharmacological doses, 1-2 week latency for maximum effect
- Clinical efficacy retained for 1-2 weeks following discontinuation
- FDA Approval (used this way) for depression, bipolar disorder



LITHIUM OVERVIEW INFORMATION

Lithium is an element. It gets its name from "lithos," the Greek word for stone, because it is present in trace amounts in virtually all rocks. Lithium works with other elements, drugs, enzymes, hormones, vitamins, and growth factors in the body in many different ways. People use it for medicine.

Lithium is used for mental illnesses, including bipolar disorder, depression, and schizophrenia; for eating disorders, including anorexia and bulimia; and for blood disorders, including anemia and low white-cell count (neutropenia).

Lithium is also used for headache, alcoholism, epilepsy, diabetes, liver disease, kidney disorders, arthritis, a skin condition called seborrhea, and overactive thyroid. Other uses include treatment of asthma, Huntington's disease, Graves' disease, herpes simplex, a movement disorder called tardive dyskinesia, Tourette's syndrome, cyclical vomiting, Meniere's disease, a tingling or "crawling" sensation in the skin (paresthesias), and aggressive behavior in people with attention deficit-hyperactivity disorder (ADHD).

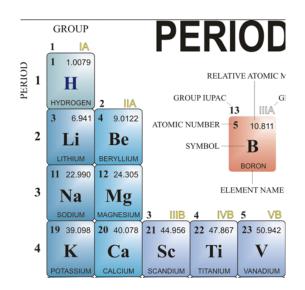
CNS: MECHANISM OF ACTION

Magnesium homeostasis

- Diagonal relationship
- Similar ionic radii and potential (0.60 A- Li, 0.65 A- Mg)
- Competition at binding sites
- Displacement of Mg by Li
 - 1.5 g Li/ kg body weight x 14 d
 - → Increase plasma Mg & Decrease RBC Mg

Haavaldsen et al. 1973

Li can inhibit Mg-dependent enzymes. Birch NJ, Lancet 1974; Amari L, Anal Biochem, 1999



Decreases neuronal hyperexcitability

Low RBC Mg and Li increase neuronal hyperexcitability.

Neuronal hyperexcitability involved in: Migraine Seizure Neurodegeneration Multiple Sclerosis

Protects cells against glutamate-induced excitotoxicity Bauer M, et al. Pharmacopsychiatry 2003; 36 Supp 3:S250-254.

Regulation of autophagy

Autophagy is the process by which cell lysosomes engulf and digest our used and dysfunctional waste, and recycle it into component parts, e.g. amino acids. (Greek, *auto* "self" and *phagein* "to eat")

Dysregulated autophagy is a major problem in all of the neurodegenerative diseases.

- In Caenorhabditis elegans, lithium supplementation resulted in increase in healthspan and mitochondrial energetic function.
 Tam ZY, et al. Effects of Li on Age-related Decline in Mitochondrial Turnover and Funciton. 2014 J Gerontol A Biol Sci Med Sci.
- Rodent model of Parkinson's disease, Li improved clearance of αsynuclein, ubiquitin, & superoxide dismutase 1.
 Fornai F, et al. Autophage 2008; Sarkar S, et al. J Cell Biol 2008

Glycogen synthase kinase-3 beta

GSK3b is involved in energy production & neurogenesis.

2 mechanisms by which Li inhibits GSK3b:

- Li dislocates Mg binding to the catalytic core of GSK3b
- Li induces conformational change via phophorylation of the serine-9 residue, rendering it inactive.

Li has been shown to reduce GSK3b at the gene level Mendes CT. Li reduces GSK3b mRNA levels: implications for Alzheimer's Disease. *Eur Arch Psych Clin Neurosci 2009*

Neuroprotection as a Downstream Effect

- Induces secretion of growth factors (e.g. BDNF) Su H, et al. 2009
- From adult stem cells, Li enhances the differentiation toward neuronal phenotypes, leading to neurogenesis.
 Kim et al., 2004; Fornai *et al.* 2008a)
- Increases neutropil formation, axonal elongation, and motor neuron axon collaterals.

Ferrucci et al, 2010, Gilad and Gilad 2007,

Pasquali L, et al. Intracellular pathways underlying the effects of lithium. Behavioural Pharmacology 2010, 21:473-492.

INDUSTRY PERSPECTIVE

5 mg 300 mg





Seven-Up Settles the Stomach

For Hospital or home use.

LITHIATED LEMON SODA

The added citrates neutralize free acid. The sugar is inverted... burns clean. 7-Up is more than a mixer ... It blends out the harsh features...Dispels hangovers...takes the "ouch" out of grouch.

Patents have been filed...

- Use patent, for an indication
 - Parkinson's Disease
 - Neurodegenerative Disease
- Should one be granted ownership for nutrient repletion?

PUBLIC HEALTH

Mental Health Neuroinflammation Neurodegeneration

PRAGMATIC QUESTIONS:

- Do our patients have lithium deficiency?
- If those who are lithium deficient were not, would the symptoms or course of their disease improve?
- Physiologic lithium treatment for:
 - Psychosis?
 - Depression? Anxiety?
 - Neuroprotection?
 - Levodopa-induced dyskinesia?
 - Dystonia?
 - Infertility?
 - Impulse-control disorders: Tics? Addiction? Seizures?
 - Unfriendliness?

Recommended Dietary Intake

- None exists
- Not added to multivitamins
- Not fortified in water, salt, bread, etc.

Future Research

- Distribution of lithium around the world.
 - Water samples to a central lab. Imagine the ROI...
- Analysis of foods for presence of lithium
 - As has been done for other required minerals. Thyme?
- Cross-sectional studies with disease incidence
- Intervention trials
 - Prevention
 - Lack of progression
 - Symptom Improvement



