

Book Reviews

What Really Causes Schizophrenia
by H.D. Foster
Trafford Publishing, Victoria, BC
2003, Paperback, 257 pages
(free at www.hdfoster.com)

Harold Foster, Ph.D., is Professor of Geography, University of Victoria. Why would a geographer undertake to describe schizophrenia? He does not merely describe this complicated scourge of modern mankind; his analysis is a superb construction of this mysterious disease from its genetic roots, through its complicated biochemistry to orthomolecular treatment, which he endorses. Foster is an unusual geographer. He studied and reported widely on his investigations into the connection between disease and the chemical composition of soils. He is also an expert on crisis management. He has read widely, has published numerous books and reports including many in this Journal. He and I have co-authored papers. Above all, he is not involved in the forty-year old controversy about the treatment of schizophrenia and brings to his analysis the open mindedness of the real scientist who is willing to examine all the evidence and not to look selectively at what is fashionable. This is why Foster has been able to write this excellent book. I wish every medical student was required to read this book before passing the final examination in psychiatry. With the current state of interest in the real biochemistry of schizophrenia I doubt that any medical student could pass the final exam if his professor knew that he had read it.

The roots are genetic. The molecular structure must be present in the genes in order for this disease to be awakened. The recent genetic work is described. But the process must also be activated or triggered. Genes do not live in a vacuum; they are surrounded by an enormously complex

mixture of molecules. If the molecules for which the genes are programmed are available, the genes will operate normally. If there is a major change in the biochemical environment of the genes, the disease will appear. The biochemical abnormalities are described, including the conversion of adrenaline to adrenochrome. It is also clear that schizophrenic genes provide a major survival advantage in the Darwinian sense, if only they are allowed to operate the way nature meant them to. Because this has not been happening for the past 150 years there has been a major increase in the incidence of schizophrenia. It is a pandemic. The genes provide a major advantage to their possessor in terms of physical health and in creative talent, although being sick does not provide any advantages. I tell my schizophrenic patients if you feed your genes properly you will be well and have all the advantages they can confer upon you. Foster provides these steps in his second last chapter

Step one: Proper shelter or treatment facilities. Living on the streets does not provide proper shelter.

Step two: Genetic screening

Step three: Allergy testing. The term cerebral allergies has been used for patients psychotic because of their allergies.

Step four: Low sugar diet. Get rid of the junk.

Step 5: Adrenochrome reduction

Step 6: Deal with other biochemical abnormalities.

Step 7: Repair the damage from the disease and the way it has been treated.

Step 8: Repair the soul. Unfortunately this is too often neglected.

My summary of the ideal treatment consists of four elements: shelter; food; decency and respect; and orthomolecular therapy. I urge you to read this book and pass it on, even though you will probably not get it back.

—Abram Hoffer, M.D., Ph.D.

**Cholesterol Control Without Diet:
The Niacin Solution, 2nd Edition**

by W.B. Parsons, Jr
Lilac Press, Scottsdale AZ
2003, Paperback, 278 pages

I reviewed Bill Parsons' first edition of this very important book in this Journal, (Vol 14, 1999, 3rd quarter).

The second edition is revised, enlarged and expanded and is even more valuable than the first. Dr. Parsons is the most knowledgeable physician alive when it comes to treating patients with lipid problems using drugs and niacin; it is clear that he favours the use of niacin, rather than the drugs. He was the first physician outside of Saskatchewan to use niacin. He instigated the first niacin-cholesterol studies and with his associates corroborated the claim that Dr. Alshul, Dr. Stephen and I had made in 1955 that niacin lowered cholesterol. Had we not had this corroboration from the prestigious Mayo Clinic, where Parsons was chief resident, this discovery might have languished and never been corroborated.

Dr. Parsons provides the evidence, based upon his own studies and the vast literature, that using niacin to lower elevated cholesterol levels is the only practical, effective, safe and cost-effective method for restoring lipid levels to normal. Niacin does more than decrease levels of low-density cholesterol; it elevates HDL, decreases LpA and lowers triglycerides. In comparison with the statins it is the clear winner, and is decreases mortality and extends life even after patients have already suffered their first coronary. I would love to see a double blind controlled study comparing niacin against any one of the modern statins to be run at least ten years. It would win the battle hands down. Niacin can be combined with the statins if this is necessary. Diet by itself is relatively inef-

fective, difficult to follow and, according to Parsons, not very practical as it is so difficult to alter people ways of eating. I agree. I have been taking niacin since 1954, not for cholesterol, which is very low, but for other reasons. Niacin is a vitamin, not a drug and in addition to its effect on the blood lipid profile it has the usual positive vitamin properties.

Most physicians do not know niacin since it is not patented, has no solicitous "parent" to promote it and is not advertised. It is difficult to pick up a medical journal with out seeing some statin ads; I have yet to see one ad extolling the virtues of niacin. Perhaps with the new non-flush niacin forms now available in the United States and Canada these ads may appear. Since physicians do not know niacin, they are negative about it. I find exasperating the total ignorance of niacin and the fear it generates. There is a fear of hepatotoxicity, but Dr. Parsons points out that increase in the liver function tests, unless they are very substantial, i.e. over three fold, usually do not indicate liver pathology. There are many compounds that elevate liver enzymes including all the statins. A second problem is the flush that accompanies niacin when one first starts to use it. Physicians who understand this and know how to work with it seldom had a problem and their patients get along well with it. However physicians who do not know anything about it also impart their lack of skill to their patients and they too soon stop using it. As Parsons puts it, you have to know how to use niacin before you prescribe it for your patients. With the new no-flush forms (not inositol niacinate) there is no longer a problem. According to Parsons, inositol niacinate, the usual no-flush niacin in health food stores, it is not nearly as good for lowering cholesterol although it is as good for other conditions in which niacin is helpful.

Dr. Parsons reviews the role of the statins and the drug companies that got

them approved and placed upon the market. I think this is an important section and it is not a pretty picture.

If your doctor tells you have a cholesterol problem, or if you suspect that you might have one, be sure and talk to your doctor about niacin rather than take the statins and refer to this excellent book. It will answer all questions and give reassurance that niacin is the right treatment. You will be better for having done so.

For more information about this book visit www.cholesterolnodiet.com

–A. Hoffer, M.D., Ph.D.

Synthesis in Healing

by J. Jacka, N.D.

Hampton Roads Publ., Charlottesville, VA
2003, Paperback, 320 pages

Growth and healing are remarkable, almost totally incomprehensible, operating without our conscious control and work remarkably well when we observe the rules of nature we have been adapted to over eons of time. When I cut my finger I watch in amazement as it heals, more quickly on vitamins, until there is no scar and I ask myself how does my body know when to start and to stop the healing process? Sometimes it fails and grows too much tissue in some people but this is very rare. Is there some inner healing force, some type of energy, some type of inner three dimensional pattern which when warped or distorted or injured instructs the healing process until it is restored? Is this why we have phantom pain when limbs are gone? The body refuses to accept that the pattern can no longer be repaired. Can we hasten and improve the healing process, the restoration of this inner pattern by manipulating the flow of energies around the body?

This is what this interesting book, *Synthesis in Healing*, is about. Judy Jacka

describes the inner and outer cause of disease and bases her therapeutic methods on her long experience as a naturopath healing thousands of patients in Australia. She describes how this type of healing can be so helpful to many difficult conditions.

She is holistic in her approach. In contrast to so many therapeutic books which tackle only one aspect of disease, she works with many factors. The outer causes are malnutrition, pollution from chemicals in air, soil and water and thus in food, radiation, and toximolecular drugs. The inner causes deal with all the inner facets of energy. She considers proper nutrition, the correct use of vitamins, minerals, and other factors include herbs.

Jacka found that before she became involved with energy healing she was able to help more than half her patients but when she added these other factors, this increased substantially. Many cases are described to illustrate the results she has been getting.

Jacka describes seven energy centres or chakras in the body. The four above the diaphragm relate to one's relationship to the external world and the three below the diaphragm deal with personal body comfort and survival matters. Each energy centre controls different bodily activities and functions. For example, the heart chakra or energy centre deals with blood pressure, the immune system, chronic fatigue syndrome. Those of us trained in western medicine find it very difficult to accept that these relationships actually exist but doctors trained in Chinese or oriental medicine, or in energy medicine have a much better understanding. Many physicians are becoming much more skillful in using these energy therapies and nurses by the thousands are using therapeutic touch therapy. Whether or not we agree with the theories presented, there is no question that they do help many people. This is not a criticism since in reality we

do not know how drugs that are therapeutic and toxic work and we do not know enough about how nutrition and natural substances work. In medicine the most important fact is whether or not a therapeutic method does help patients get a well. It is pleasing to know why but its only real value is in helping to discover better treatment. Thus the description of epileptic convulsions made 2000 years ago is still accurate today. The explanations for these diseases made 2000 year ago are laughable. Will our present explanations be equally comical 2000 years from now?

This book has made me think more seriously about all the different healing modalities which work as if one has only to stimulate one part of the total healing essence of energy in order to turn on the whole system more efficiently. Once it is turned on it works equally well when the body is provided with the natural nutrients, and freedom from toxins, which will allow its healing process to function.

I think physicians and other healers should be aware of this growing interest in energy healing so that they can understand their patients better who have had or will have it and so that they might themselves undertake to learn something about it. It will make them much more sensitive to the many factors which they have to deal with including nutrition, pollution, drugs, massage, homeopathy and more. This is a good book with which to start.

I ran across one error about vitamin D, which is understandable since the newer information has only become available over the past few years. The toxicity of vitamin D has been grossly exaggerated. Recent very comprehensive reviews all show that we need much more than the very low doses recommended to prevent rickets in children and that the optimum dose is somewhere between 4000 IU and 10,000 IU daily.

—Abram Hoffer, M.D., Ph.D

Thyroid Power

by Richard L. Shames and

Karilee H. Shames

Harper Collins, NY

2001, Paperback, 226 pages

If you are one of the millions who struggle with subtle low-thyroid conditions, *Thyroid Power* may be right up your street. Richard Shames, M.D., is a general practitioner with special interest and experience in treating thyroid problems. Compared to so many physicians who literally laugh patients out of the office when they ask about thyroid supplementation, Dr. Shames and his co-author (who is a registered nurse and Ph.D.) offer a reasoned, compassionate alternative to just “learning to live with it.”

Thyroid Power clearly explains the important difference between T-3 and T-4 thyroid hormone. T-3 (triiodothyronine) seems to be the one to watch. Doctors characteristically overemphasize your T-4 (l-thyroxine, or “storage” thyroxine) level and effectively ignore T-3 (fast-acting or “active” thyroxine) levels. The authors’ central point is that physician fixation on test numbers, which are inadequate to detect borderline conditions, results in masses of people suffering the symptoms of low thyroid. These all too common symptoms include fatigue, depression, weight gain, insomnia, difficult menopause, endometriosis. A variety of further symptoms include arthritis and rheumatic complaints, low sex drive, infertility, and skin problems. Many persons are therefore “uncomfortable but still normal.”

What to do? First of all, say the authors, if you feel poorly, insist on thyroid testing, and be sure to obtain a copy of your test results. Doctors must provide them to you if you ask. So ask! Interpretation of the tests is likely to be better if you are informed and easier if you have a copy of *Thyroid Power* in your hands. The book provides case his-

tories and the numbers to look for. Since a “normal” or even somewhat high T-4 can coexist with the symptoms of low thyroid function, do not accept a test for T-4 alone. Insist on T-3 testing as well, and pay special attention to it. TSH (thyroid stimulating hormone) testing will almost always be done. High TSH levels “means that the brain and pituitary (gland) are asking for more thyroid hormone.” (By the way, “pituitary” was left out of the index, and should be added.) The authors consider any TSH number over 3.0 to be “suspicious, and anything over 4.0 merits treatment” if symptoms are present.

Second, using the self-assessments provided in the book will walk you through, and assist you and your physician in making a proper diagnosis. For example, one thing patients can do is take their basal body temperature using a sensitive ovulation thermometer, or basal thermometer. This is easy and can be done before getting out of bed in the morning.

Third, with tests in, be prepared to require physician action. The authors say you should “obtain a trial of thyroid medicine, regardless of blood test results.” This statement will not endear them to the entire medical community, but who cares about that any more? Personal health is not a popularity contest. Still, the authors wisely provide what amounts to a letter of introduction for you to show to your doctor. It is tucked away at the back of the book, but don’t leave home without it. It is very to the point and complete with many recent references from scientific journals. Patients also learn what to say to a doctor who wishes to deny thyroid supplementation because the T-4 level is high. These were brilliant, and essential, inclusions. Patients will need them.

Fourth, learn the side effects of too much thyroid. These include: rapid heartbeat, unusual difficulty sleeping, sweating and otherwise feeling hot, hyperactivity, a

racing mind, and twitching. Contrary to popular medical myth, thyroid medication does not cause osteoporosis; it helps prevent it.

The attitude of *Thyroid Power* essentially is this: If you have symptoms, here’s something you can do about it. “Each person is his or her own best physician,” the authors say. I like that. I also like their many natural healing recommendations, including stress reduction, avoiding chemicals in both food and environment, choosing organic foods, and taking vitamin supplements. I was disappointed that the text recommends only 1,000 mg of vitamin C a day, which is wholly inadequate to supply the adrenal support the authors call for in Chapter 7. In the back of the book, the suggested supplement list calls for as much as 2,500 mg of vitamin C, but this is slightly contradictory and in any event, still too low to do the job. The B-complex recommendation is likewise overly conservative. The balance of the supplemental recommendations are generally quite good, notably the one calling for at least 400 IU of vitamin E daily, plus calcium, magnesium, zinc and chromium.

Many practical hints are provided. Stop caffeine, tobacco, alcohol, and aspartame (“Nutrasweet”) use. Excess iodine supplementation will not help low thyroid sufferers. Take thyroid medication on an empty stomach. If you still have low thyroid symptoms with a TSH of 2 or lower, order a TRH (Thyrotropin Releasing Hormone) test. All the different brands of thyroid medication are discussed. Information is also given regarding tailoring dosages and weight gain resulting from insufficient T-3.

The sections on herbal remedies are entirely too brief. Readers are interested in herbs, their specific dosage, preparation and side effects. A two-page presentation and scattered mentions here and there is just not what we expect from a work authored by a holistic physician. Home-

opathy is similarly praised, but sketchily treated. Regrettably, no specific, low-dose homeopathic remedies are recommended for thyroid conditions. At the very least, much more complete homeopathic and herbal bibliographies are needed in *Thyroid Power*.

An unexpected surprise was book's uncompromising criticism of water fluoridation. It takes a bold medical author (and publisher, for that matter), so solidly to condemn fluoride which, though "currently touted as harmless enough to be put into the water supply, has been used in the past as a powerful medication to slow down overactive thyroid activity." A citation to the *Journal of Clinical Endocrinology* backs up this most interesting statement. The authors state that water fluoridation is a significant cause of low thyroid illness in millions of people. They also mention the curious origins of water fluoridation, first employed in Nazi concentration camps to allegedly "force inmates into submission." The authors' unequivocal conclusion: "Do not allow your children to be treated with fluoride."

Thyroid Power is a very good work. I rarely say this about a book whose primary focus is medication, but then I have personally seen what thyroid can do. In her early fifties, my mother suffered from arthritis, depression, skin problems, fatigue, unexplained weight gain and assorted other miserable symptoms. Nothing seemed to help, until her doctor retired and she got a new, younger family physician. He promptly put her on thyroid medication, and she was a new woman. Her singing voice came back, along with her get-up-and-go. Her weight came down, her joy of living came up, and her skin looked great. No more bags under the eyes; no more three-hour daily naps. If this is you, then *Thyroid Power* is your book.

—Andrew W. Saul, Ph.D.

Health Food Junkies: Overcoming the Obsession with Healthful Eating

by Steven Bratman, MD
and David Knight

Broadway Books, NY
2001, Hardcover, 242 pages

Would you end a friendship because a friend likes pizza and you've achieved a "higher" state of nutrition consciousness? I have seen both vegetarians and high-protein advocates do this, if they have a religious-like zeal related to the foods they eat. Indeed, a girlfriend once screamed at me because I happen to enjoy two cups of weak coffee in the morning.

This issue—which I call food fascism—is one of many raised by Steven Bratman, a nutritionally oriented physician, and his coauthor David Knight in an original but little-noticed book. Bratman's book tackles the rare theme of well-meaning nutritional excesses that become a pathology he calls "orthorexia nervosa."

How do you know if you have the affliction? Bratman writes, "If you simply eat healthy food but don't give it more of a place in your life than it's really due, you have a good diet—a laudable goal. But when you use food to drain away the energy from other parts of your life, you are impoverishing your soul. Instead of dealing with your real feelings—your real challenges, interests, desires and needs—you pretend to find them in food. You transfer anxiety over how your life is going to anxiety over what you are going to eat."

In the book, which is written in a fast-reading conversational style, Bratman relates his personal experiences with orthorexia nervosa and other forms of nutrition extremism, including the time when he was in a vegetarian commune and everyone was fretting about what to feed a visiting spiritual leader. When the spiritual leader finally arrived from overseas, he wanted to know how to get to the nearest

fast-food restaurant -- much to the dismay of his followers.

Bratman points out that controlling food sometimes becomes a substitute for unsuccessfully controlling the unpredictability of life. He describes a few patients who literally got carried away with trying to improve their diet and health. For example, Bratman tells of a person who ended a romantic relationship because she couldn't change her partner's eating habits. In another case, he diagnosed a patient with several food allergies. Over the coming months, the patient identified more and more food allergies on her own, or thought she did, until she was essentially a pan-reactor. By that time, she had essentially painted herself into a nutritional corner and was eating a very narrow range of foods.

Similarly, many of us have encountered people (or patients) who dutifully take dozens of supplements, often for reasons they could not remember. I once received a laundry list of supplements from an 85-year-old reader asking me what he should change. I wrote him that, if he was 85 and in good overall health, he probably shouldn't change a thing.

In describing some of his case histories, Bratman occasionally reveals some of his own weaknesses as a physician. In the case of the self-diagnosed pan-reactor, he probably should have intervened more aggressively than he did.

Nonetheless, Bratman has written a powerful, insightful, and original book. It warns all of us that a healthy interest in food and health can sometimes become obsessive and self-destructive. Between the lines, there is a message that patients should be followed up to reduce the risk of such problems.

There is no way to tell how many people suffer from orthorexia nervosa. My guess is that it is a very small number compared with all the millions that inflict damage on themselves by eating irresponsibly. That said, it is important to remember that

a sound diet and taking vitamin supplements -- and I take my share of them -- should not become an end unto itself. "There is more to life than reducing cancer risk," Bratman points out. Regaining and maintaining health should enable us to achieve another end, such as exploring our human potential, being creative, helping other people, or making this world a better and more peaceful place.

— Jack Chellem
The Nutrition Reporter
jack@thenutritionreporter.com

The Best of Health:
The 100 Best Health Books
by S. Zerden
Warren H.Green, Inc. St. Louis, MO
2004, Paperback. 533 pages

What a delight! Reading *The Best of Health* I am taken back over the years to revisit my former and present colleagues and to recall the many times we met and talked about the connection between nutrition and health, down a very fine memory lane. Captain Cleave's fine book which in one night awakened me to the vast importance of nutrition in general and not just to a few of the nutrients from which it is made; Carlton Fredericks, whose studio I often visited in New York and on whose program I appeared. Ross Hume Hall, a recent loss to our world; Gary Null who continues to keep great articles coming at a tremendous pace and all such useful material. Richard Passwater who frequently attended the meetings of the Canadian Schizophrenia Foundation and presented his prescient information about the antioxidant vitamins. Jeffrey Bland, major educator to the North American medical profession. Roger Williams who, even when almost blind and deaf, still attended our meetings and contributed. Linus Pauling of course, most brilliant Nobelist ever who should have been awarded his third for his work in or-

thomolecular medicine. Irwin Stone who ate steak liberally covered with copious quantities of vitamin C. Wilfrid Shute who bravely soldiered on trying to persuade a skeptical medical profession of the value of vitamin E. Ruth Adams and Frank Murray whose book cured a young woman in the Midwest. She had been told that her mother had made her psychotic. She fled from home and joined a hippy group. After reading *Megavitamin Therapy* she began to take niacin, increasing it to 60 grams daily. Her voices ceased. Two years later she was still well on 3 grams daily. Emanuel Cheraskin, brilliant writer and orator, a major draw at our meetings. Allan Cott... I wish I had known all my colleagues not listed here.

The books discussed here will be the basis for a book to be written one day about the new paradigm in medicine called Orthomolecular Medicine and Psychiatry.

Part 1 provides an analysis of what is

wrong with health in America. Very simply we do not have enough of it and these books tell us why. I wish that the powers that be would read these books. Part 2 lists a few books dealing with nutrients, especially vitamin C and vitamin E. Missing from this section is the work of William Kaufman and niacinamide as a treatment for arthritis and diseases of ageing. Part 3 lists books dealing with fighting diseases from arthritis to vascular diseases, to the immune system and cancer, diabetes, thyroid, the connection to mental health, weight control and exercise. The part on extending life I especially appreciated since I discovered that the patient whom I started on niacin 40 years ago is 110 years old, the oldest resident in Saskatchewan and still does cross-county skiing.

This book is great fun, like looking through one's favourite picture album of friends and relatives.

–Abram Hoffer, M.D., Ph.D.