Safety and Effectiveness of Vitamins

"What use do you make of your physician?" said the king to Molière one day. "We chat together, sire; he gives me his prescriptions; I never follow them, and so I get well."

Adverse drug side effects are the proverbial elephant in the living room: everyone knows the problem is there, and hopelessly tries to work around it. Physicians attempting treatment through a haze of side effects still have an easier time than do patients actually living with side effects. The outlook is especially grim for psychotic patients who are treated with drugs only: they rarely improve, and all too frequently get worse.

There are two well proven-alternatives. The first is to do no harm by doing nothing. While such treatment rarely justifies a physician's fee or a pharmaceutical company's advertising budget, it frequently works. Indeed, long before Molière and in the centuries since, cultural records show that compassionate, common-sense care can and does allow people to heal. Patients treated without drugs are also patients without drug side effects. Often they are also quite well. It's an old psychiatrist's joke that just because you are paranoid doesn't mean they are not out to get you. Oddly enough, a current televised drug advertisement ominously proclaims that just because you are feeling better doesn't mean you don't need medication. That may be quite untrue. Recently, Harrow and Jobe "studied whether unmedicated patients with schizophrenia can function as well as schizophrenia patients on antipsychotic medications." The indications are that they surely can. In fact, "A larger percent of schizophrenia patients not on antipsychotics showed periods of recovery and better global functioning."2

A second, and better, alternative to drugs is to employ orthomolecular therapy. Psychotic patients treated with orthomolecular doses of nutrients are much more likely to recover than unmedicated patients. Even very high doses of supplemental nutrients are safe. It is those high doses that are also most effective. Furthermore, patients so treated characteristically experience side benefits rather than side effects. If medication is necessary as well, providing supplemental nutrients can improve outcome, often while reducing the drug requirement. Orthomolecular nutrition also reduces drug side effects.³

No one in their right mind, or wrong mind, wants harmful side effects. Adverse drug events are routinely accepted and heroically endured, even though, reports the Associated Press, "More than 1.5 million Americans are injured every year by drug errors in hospitals, nursing homes and doctor's offices, a count that doesn't even estimate patients' own medication mix-ups...(O)n average, a hospitalized patient is subject to at least one medication error per day." More than 100,000 patients annually die, just in the USA, from drugs properly prescribed and taken as directed.

On the other hand, a review of poison control center reports reveals that vitamins have been connected with the deaths of a total of ten people in the United States over the last 23 years.⁵ The American Association of Poison Control Centers (AAPCC), which maintains the USA's national database from 61 poison control centers, alleges the following number of deaths from vitamins in each given year:

2005: zero 2004: two

2003: two

2002: one 2001: zero

2000: zero 1999: zero

1998: zero

1997: zero

1996: zero
1995: zero
1994: zero
1993: one
1992: zero
1991: two
1990: one
1989: zero
1988: zero
1987: one
1986: zero
1985: zero
1984: zero
1983: zero
The zeros are not due to a lack of

The zeros are not due to a lack of reporting. AAPCC has noted that vitamins are among the 16 most reported substances. Even including intentional and accidental misuse, the number of vitamin fatalities is strikingly low, averaging less than one death per year for more than two decades. In 16 of those 23 years, AAPCC reports that there was not one single death due to vitamins.

Yet a harmless niacin flush is often seen as sufficient justification to discontinue B₃ therapy. Some physicians declare that they do not "believe" in treating with vitamins. What a curious endorsement of evidence-based medicine. Unless one chooses to consult a shaman, belief should have little to do with treatment.

Traditionally and to this day, much medical knowledge comes from physician reports. This journal publishes a lot of them. Physician reports are neither double-blind nor placebo controlled. They are the valuable experiences of qualified observers. They are valid. Just ask the patients that got better. Yet doctors' reports, as well as those of their patients, are typically marginalized as mere "anecdotes." "Where are the good old days," says Abram Hoffer, "when honest physicians honestly reported what they saw in language than any doctor could understand?"

New and more costly drugs have

come and gone, along with their new and more costly side effects that also come, and all too often stay. Oliver Wendell Holmes, M.D., famously wrote: "If we doctors threw all our medicines into the sea, it would be that much better for our patients and that much worse for the fishes." Indeed, side effects may make it impossible for patients to recover. We need to consider the full metabolic impact of decades of drug maintenance. Creating chronic patients with iatrogenic chronic diseases is no cure at all.

Pecuniary motivation aside, we might say that the pharmaceutical industry is at least in part made up of people who truly want to end suffering and disease. The same may be said of practicing health providers. It is certainly true of families of sick people, and of patients themselves. Good intent is not enough; Samuel Johnson commented that the road hell is paved with good intentions.

The search for truth has been likened to riding around on an ox in search of the ox. A healed patient is the best data. Always has been; always will be. Rather than reinvent the wheel, we need widespread use of what works. The psychiatric profession has right at hand a very safe and very effective nutritional treatment for psychosis. It is gram-sized doses of niacin. We do not need more research; we need to apply the research already done by Hoffer, Osmond, and others decades ago. The problem, Hoffer has observed, is that no amount of evidence can persuade someone who is not listening.

-Andrew W. Saul. Ph.D.

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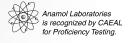
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