

A First Evaluation

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For the sake of clarity I feel it necessary to state that I am a practicing psychiatrist, not a research scientist. Interest and experience in the causes and cures of mental illness have kept me attune with the scientific community.

I was trained in orthodox analytical treatment methods and applied these in my practice for 15 years. However, I did not overlook chemotherapy, biological problems and physical conditions. Three years ago I received analytical results presenting a new world of information scientifically compiled by well known and experienced experts and consequently explored more fully the effects of other psychiatric approaches.

I discovered that results of strictly psychoanalytical therapy, with or without combined chemical (tranquilizer) treatment, produced poor recovery and remission percentages in schizophrenic patients. The costs in money, time and professional manpower were unreasonably high and I felt it was time to "get back to the drawing board."

I remembered my first encounter with the institutionalized and/or severely mentally ill person and recalled certain phenomena indicating a chemical or physiological difference. Finger nails were usually flat and pale; hair appeared coarse; fingers and clothing were often burned without

awareness or complaint of pain; and other less obvious physical changes were often present.

Logic indicated pursuit of a biological or biochemical cause, and in my efforts to remain abreast of recent improvements and discoveries, I read of the research and resultant theories of Drs. Hoffer, Osmond, Pauling and others. Their findings made sense! Having contacted and obtained information from these colleagues, the concept and treatment program of Orthomolecular psychiatry seemed clearly indicated.

After three years using these diagnostic and treatment procedures, I have compiled sufficient case histories upon which to base my own conclusions. My first impression was the number of unrecognized schizophrenics. It was apparent that physicians do not diagnose this perceptual illness until it is in the late stage, or phase III. Almost 50% of previously diagnosed neurotics were actually suffering from schizophrenia. History usually indicated life-long problems, and early recognition and Orthomolecular treatment, in some cases accompanied by supportive psychotherapy, brought about rapid response.

With Orthomolecular treatment, frequent office visits are seldom necessary. "Talk therapy" fails because the mental perception is distorted, and the patient is unable to comprehend the nature of the problem—

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much less, the pertinence of such things as bottle or breast feeding as an infant.

Chronic (long-standing) schizophrenic patients do not respond as quickly or as well as those diagnosed early in the course of the disease. This leads me to the conclusion that the condition may have existed long enough to cause resistant or permanent changes within the complex biochemical structure. However, I have noted marked improvement in even the most chronic cases.

Patients who had been treated by the usual psychotherapy, with no response, have recovered when changed to Orthomolecular treatment. But it is *essential* to improve the physician's ability to diagnose a perceptual disorder *early!* Consideration of diet, particularly carbohydrate metabolism, must also be made.

My personal conclusion, based upon experience both before and after inclusion of Orthomolecular treatment, indicates a definite biochemical factor in mental disease. Orthomolecular psychiatry is perhaps "relatively new" in its present stage, but it is not

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in its infancy as proclaimed by many who have closed their minds to the new horizons which it has already brought forth.

Research since 1952 demonstrates a realistic breakthrough to a better understanding of, and ability to treat successfully, mental conditions. I further believe strongly that future research will produce even greater discoveries.

We may have no "miracles" available, but we can now approach the patient with an offer of *real help!*