

# A Legal Triumph for Orthomolecular Psychiatry

Dwight Kenton Kalita, Ph.D.<sup>1</sup>

In order to maintain the integrity of the position that treatment of mental disease is best accomplished by supplying an optimum, nutritional, molecular environment for the mind, and more specifically, by supporting the optimum concentration of substances normally present in human chemistry, some Orthomolecular psychiatrists have found it necessary to go to court. But, of course, the discovery of oneself in the battleground of the legal arena is nothing new for those who have vigorously challenged the status quo of the scientific community.

Such a legal challenge was recently made by Dr. John M. Baron, Cleveland, Ohio. He went to court in defense of Mr. Conley Dockery. The story began around January 18, 1972, when Mr. Dockery visited Harold Barker, M.D., who represented the Metropolitan Life Insurance Company. Mr. Dockery had recently lost his job; he complained of severe dizziness, headaches, insomnia, indigestion, and extreme weakness, all of which plagued his vocational effectiveness. And in order for Mr. Dockery to collect unemployment insurance, his symptoms

had to be proven as being organic in origin. Dr. Barker saw the patient five subsequent times after the initial meeting.

"I could not find anything organically wrong with this gentleman except his obesity of 215 pounds," testified Dr. Barker while appearing before the Honorable A. D. Arnson at Shaker Heights Municipal Court, Shaker Heights, Ohio (9:00 a.m., 9-5-74).

"There is no organic disease," he continued, "the patient is psychoneurotic. . . His symptoms are related to something referable to the nervous system."

Dr. Barker was then asked whether he had run a five-hour glucose-tolerance test.

He replied, "I did not feel that a five-hour glucose-tolerance test would help. . . Hypoglycemia clinical syndrome is not a serious syndrome. If the individual will eat more than three times a day or take any form of sugar, that will alleviate attacks."

The lawyer then continued his questioning: "What about a person doing something—like driving—and the attack comes on? Can he get to this candy, or whatever you want him to eat, fast enough to control the condition?"

<sup>1</sup> 312 Carpenter Road, Defiance, Ohio 43512

"Here," Dr. Barker replied, "you smoke a cigarette in traffic. . . Hypoglycemia is relatively mild all the time. It is never very serious unless it is associated with certain organic diseases. We do not feel that clinical hypoglycemia syndrome is sufficient to make anyone disabled for work. Its symptoms are usually weakness, thirst, and they may or may not have dizziness, and this is probably relieved by eating or taking sugar, like hard candy."

It so happened, and luckily so, that during the time of his troubles our "dizzy" patient stumbled one day directly into Dr. John Baron's office. Dr. Baron, who specializes in "nutrition, preventative medicine, and Orthomolecular psychiatry," has been practicing nutritionally oriented medicine since 1939. He is certified by the American College of Applied Nutrition and the American College of Bariatric Physicians, and is a member of the Cleveland Academy of Osteopathic Medicine and the American College of Neuropsychiatry. Upon seeing the patient for the first time, he immediately gave him a five-hour glucose-tolerance test.

"He complained," testified Dr. Baron, "of severe dizziness, headaches, insomnia, indigestion, and poor appetite; he also craved sweets."

Since Dr. Baron has tested and treated over 1,000 similar cases, he easily recognized Mr. Dockery's symptoms as being those of a clinical hypoglycemia syndrome. Hypoglycemia, according to Dr. Baron, is an abnormality of carbohydrate metabolism. As a result of a patient's inability to tolerate processed carbohydrates, sugar, white flour, etc., his blood sugar level drops below normal, and the commonly expressed symptoms of anxiety, weakness, depression, insomnia, irritability, dizziness therefore quickly ensue. A special diet of "high protein, low carbohydrates," along with "megavitamins, and injections of adrenal cortex extract, which relieves the adrenal glands from two to six hours so they can recuperate," was recommended by Dr. Baron to his patient.

In court, Dr. Baron was asked, "Based on your experience in dealing with hypoglycemia, can you

state whether or not many people who have hypoglycemia have been diagnosed as being psychoneurotic prior to having their hypoglycemia condition diagnosed?"

Dr. Baron's answer was an emphatic: "Definitely! But Orthomolecular psychiatry is a new field that has been developed to look at the view of psychiatric problems (i.e., psychoneurosis, psychosis, etc.) from a biochemical aspect."

The lawyer pursued his point: "Could Mr. Dockery have remained at work by carrying hard candy on him and eating it whenever he became weak and dizzy?"

"No," responded Dr. Baron, "because candy would develop just the adverse reaction we are seeking to eliminate. The pancreas, reacting to the processed carbohydrate, sugar, etc., would seek to enter the bloodstream; its insulin would continue to keep pouring because it had been reacted. The insulin increases and the sugar starts to drop. Therefore, candy is only a temporary measure as far as hypoglycemia is concerned. Two to three hours after this type of ingestion of food the hypoglycemia would become worse."

There is really nothing new with, or surprising about, a doctor like Dr. Barker failing to see hypoglycemia as a serious organic disease. Nor is there anything new—although it is startling—about a medical doctor prescribing candy for a hypoglycemia patient. But I begin to wonder about our supposedly learned scientific community when members therein actually suggest under oath smoking a cigarette to alleviate a drop in blood sugar. Suppose, for example, that a jet airplane pilot with a severe case of hypoglycemia was cruising at 40,000 feet, and 85 people were on board. The flight is between New York and California. Also imagine that Dr. Barker is one of those passengers, and he is summoned as an M.D., after takeoff, to the cockpit because the pilot is feeling dizzy and weak.

"Here," Dr. Barker would probably say, "smoke this cigarette and take this

sweet candy."

By the time the plane approached the Rocky Mountains, our poor pilot's blood sugar level would be dropping even more quickly, and for that matter, so might the plane. Ouch! that idea hurts. Failing to see that our hypoglycemic pilot might also be cerebrally allergic to tobacco, Dr. Barker would wonder why, after a short time, the plane was suddenly so unstable. Up go the allergic reactions; down goes the sugar level, and down goes the jet airplane!

But Mr. Dockery, and thousands of people just like him, are fortunate to have Orthomolecular physicians like Dr. Baron. It is men like him who have the integrity of their convictions and the internal fortitude to fight the general medical population's appalling ignorance of this now "epidemic-like" (Ross) organic disease.

By the way, Dr. Baron did come out the victor during his day in court. Mr. Dockery was awarded his unemployment insurance by the Metropolitan Life Insurance Company. Mr. Dockery was not psychoneurotic, and 100 hours on the couch of a psychoanalyst would not have alleviated his problem for it was strictly organic. Due to many factors—environmental, allergic, genetic, etc., — his ability to utilize processed carbohydrates was impaired during his lifetime.

If his treatment had been along the lines of symptomatic relief (i.e., shock, psychoanalysis, drug therapy), Mr. Dockery would have been doomed to a miserable life. But it was not. Root causes behind the manifested symptoms were discovered. As a result, treatment was etiological.

All good scientists are aware that for every effect there must be a cause. But too often, and tragically so for some people, some doctors center their attention only on the effect. They try to repress it, tranquilize it, ignore it, punish it, shock it, or just plain talk it down, and in this maddening process they create mental, emotional, and spiritual vegetables who are shunned by society and often locked up in the back wards of our now overcrowded mental institutions.

And what is far more serious, these institutions create a hostile environment for already overly sensitive, malfunctioning body chemistries. They feed schizophrenics high-carbohydrate dinners because it is "inexpensive." To compound the problem, they permit potential allergens such as tobacco, sugar, wheat, corn, etc., to literally abound for consumption. Cerebral allergies are not even tested. A glucose-tolerance test is rarely seen as diagnostically important. A hair analysis test is frowned upon. And the diet is enough to destroy any healthy biochemical mechanism given enough time. Amino acids, vitamins, and minerals, substances which are normally present at the cellular level are, of course, ignored. And on and on and on! I believe our problem all goes back to a basic philosophy of life. Do we seek to "have dominion over nature"? That is, do we seek to manipulate desired ends by synthetic intervention into the processes of nature, or do we seek to be harmonious with nature, discover her mysterious and majestic laws, and then live our lives, and this includes our medical lives, in tune with our discoveries? I think the latter is the correct path. Today, a few brave scientists are emerging who know that our human biochemical mechanism is an extremely complex, delicately balanced dynamism of millions upon millions of chemical reactions. They also know that man, via the stress of poor diet and a hostile chemical environment, can easily upset this delicate homeostasis of his inherited biochemical being. It is up to us, as Orthomolecular scientists, to continue to search out the etiological reasons for the breakdown of nature's homeostasis. For if we can, men like Mr. Dockery, instead of being incorrectly labeled and stigmatized as "psychoneurotic," will be properly diagnosed and treated, and thus will be given an opportunity to live a happy, healthy, and creative life.

Robert Frost once wrote, "Two roads diverged on a country road, and I took

the one less traveled by. And it has made all the difference." Orthomolecular scientists have taken the scientific road "less traveled by," but the empirical success they have seen in their own patients, I'm sure you will all agree, "has made all the difference."