We all know that human beings are creatures of habit. If we get sick, we see a doctor. We expect quality care based on modern science and good medicine. We trust physicians, especially those who studied, trained and qualified as specialists. Every year, millions of patients overflow the offices of psychiatrists looking for help with depression, bipolar disorder, anxiety, schizophrenia, attention deficit disorder, anorexia, autism, stroke, epilepsy, dementia and other brain conditions. Many doctors choose to manage mental patients efficiently by assigning diagnostic labels (D.S.M.) and prescribing meds. If we visit their efficiency clinics, our symptoms will get managed, but will that heal our sick brains? What can go wrong? At age 91, Abram Hoffer, PhD, MD knows a great deal about medicine and psychiatry. After six decades of experience in research and clinical practice, Dr. Hoffer can guide us through the mental healthcare maze and teach us how to find safe and effective care, consistent with the practice guidelines of psychiatry. Readers of this book will learn that Dr. Hoffer discovered restorative treatments and healed many patients.

As you read Hoffer’s book, you will realize that he is a rare psychiatrist, one in a thousand. Abram Hoffer became a physician in 1949, after graduating from the old school which taught medical students to take proper care of patients and above all, do no harm. With a PhD in biochemistry, Hoffer’s education, laboratory experience and observation skills proved useful during his medical studies. He learned to assess each patient carefully, check for infections (such as syphilis) and test for medical problems (such as thyroid, adrenal, blood sugar and hormone disorders) before diagnosing the cause of each patient’s symptoms. Hoffer learned that episodes of psychosis can have a number of possible causes. A competent doctor considers the underlying cause(s) of each patient’s symptoms before recommending treatment(s). If patients go psychotic after years of untreated syphilis, can antipsychotic meds, electric shocks or talk therapies heal them? Not likely. Those patients need antibiotics. If patients starve or ingest food artifacts, can meds, shocks or talks heal them? No. Those patients need nutritious diets. If patients become psychotic after hormone problems or thyroid, adrenal or blood sugar disorders, will meds, shocks, or talks heal them? Not likely. Those patients need medical care. If psychotic patients get accurate diagnoses, many respond to appropriate treatments. Dr. Hoffer treated psychotic patients with respect by giving mental status exams, taking histories, doing medical tests and making differential diagnoses before recommending safe and effective treatments. Over his long and distinguished career, Abram Hoffer researched biochemical factors which can cause or contribute to psychosis. Then he developed restorative treatments.

With his medical school training and his PhD in biochemistry Dr. Hoffer researched the causes of psychosis and developed restorative regimens for patients with schizophrenia, psychosis, anxiety and depression. If patients had disorders of neurotransmitter metabolism, food sensitivities, cerebral allergies or overloads of toxins, Hoffer learned how to help them. One evening while sitting at his kitchen table, Hoffer studied the chemical formulas of mescaline and other hallucinogenic compounds. Eureka - he spotted an indole structure! He wondered if the human brain could produce indoles. If so, might those i-metabolites cause hallucinations or perceptual distortions? Dr. Hoffer found indoles by tracing the metabolic pathways of tyrosine, adrenalin, noradrenalin and dopamine. Hoffer observed that irreversible oxidation can produce aminochromes (indole compounds such as adrenochrome and dopachrome). 1 or 2% of people overproduce indoles until they hallucinate during episodes of schizophrenia. Believing that internal indole production could be controlled, Hoffer tested medicinal doses of niacin and ascorbic acid (vitamins B-3 and C). His experiments showed that megavitamin therapeutics could restore normal brain function.

Somehow Dr. Hoffer found the time to write books and medical journal articles and establish orthomolecular medicine as a complementary dimension of care. An appendix to Adventures in Psychiatry: the Scientific Memoirs of Dr. Abram Hoffer lists his publications: 30 books and hundreds of journal articles. Even before Dr. Hoffer’s time, there were precedents for restorative care. Malnourished pellagra patients recovered from episodes of psychosis by taking niacin and tryptophan and improving their diets. (Ref. Dr. J. Goldberger.) Other patients, who went psychotic after infections of syphilis, recovered by
taking penicillin. With pellagra patients cured and syphilis patients getting penicillin, Dr. Hoffer applied his PhD in biochemistry to research schizophrenia, neurotransmitters and metabolic pathways. After he learned to differentiate patients whose psychoses were triggered by infections (such as syphilis or rabies) or medical problems (such as thyroid disorders or pellagra), Hoffer identified a group of patients whose hallucinations and perceptual distortions had biochemical causes. In the 1950s, while researching schizophrenia in the province of Saskatchewan, Canada, Dr. Hoffer cooperated with colleagues to diagnose underlying causes of psychosis and treat patients safely and effectively. Dr. Hoffer published his research, progress and clinical success stories in 600 medical journal articles spanning 50 years. Years of Hoffer’s editorials in the *Jnl. of Orthomolecular Medicine* explain many interesting developments.

Without studying Hoffer’s double-blind placebo-controlled gold-standard research, experiments, data or findings or reading Hoffer’s books, articles or editorials, conventional psychiatrists disputed, discounted and denied Hoffer’s progress reports. After all, how could mere vitamins possibly heal psychotic patients? Busy managing their sick, suffering and deteriorating patients, ‘modern’ psychiatrists dissed Hoffer’s biochemical hypotheses and his reports of a 75% recovery rate for acute schizophrenia. They did not interview recovered patients. Instead of studying Hoffer’s reports, reading his books and complementing their usual treatments with restorative regimens, many psychiatrists assumed that Hoffer’s experiments were flawed and his discoveries were wrong. Closed-minded psychiatrists ignored orthomolecular research and withheld regimens of vitamins from hundreds of thousands of trusting patients.

While Dr. Hoffer was using his old-school training to heal patients, then sharing his findings by writing books and articles and networking with colleagues, most other psychiatrists had no success with psychosis. After World War II, chemical companies manufactured pharmaceuticals from left-over rocket fuels. Talk therapies and managed care changed the practice of psychiatry, but not for the better. Consider palliative care for cancer patients – terminal patients do not get well so doctors manage their last hours with sedatives and pain pills. Pills and the palliative care model took modern psychiatry backward. Here’s the logic - psychotic patients are not likely to recover, so manage them with anti-symptom medications: antidepressants, anxiolytics, antipsychotics and anticonvulsants. Why mention side attacks, toxic effects and drug-induced neurological disorders? In the rush to squelch angst, numb pains, numb brains and stimulate energy, why bother with mental status exams, patient histories, medical tests or differential diagnoses? Quick and easy to ignore practice guidelines and rely on shortcuts. As long as doctors manage mentals efficiently, who will notice? Just keep them calm and quiet, safely distanced from normal people. Abram Hoffer noticed. His patients, their families and caregivers saw how carefully Hoffer treated his patients, researched neurotransmitter disorders and developed restorative treatments, consistent with the practice guidelines of psychiatry. Many of Hoffer’s patients lived well, worked and paid taxes.

Herds of patients consult psychiatrists and visit mental hospitals every day. The practice guidelines of psychiatry recommend: 1. mental status exams, 2. patient and family histories, 3. testing for medical problems, 4. differential diagnoses, 5. safe and effective treatments. Many patients get efficient shortcuts and substandard care: words but no respect, shelter but no privacy, food but poor nutrition, and mind-numbing treatments with anti-symptom meds or electric shocks. Years ago when psychotic patients only got meds, talks or shocks, Dr. Hoffer saw few recoveries. For decades, Abram Hoffer researched neurotransmitter disorders, identified metabolic causes of psychosis and prescribed health-restoring doses of vital amines and other nutritional supplements. Many of his patients restored their health. A good many physicians, worldwide, learned about guideline-quality restorative care from Abram Hoffer. Thousands of psychotic patients have recovered this way but even after decades of research, progress and success, orthomolecular medicine remains little-known.

In this book, Dr. Abram Hoffer (biochemist, physician and psychiatrist-retired) compares psychiatry yesterday (1950) and today (2007). Today most patients get managed care, labels and pills, talks and shocks. However, recovery rates remain low, little better than yesterday. Abram Hoffer outlines yesterday’s problems with psychiatry, warns us about the dark side of psychiatry today and nourishes our hope for recovering and living well with restorative orthomolecular psychiatry.

Review by Robert Sealey, BSc, CA author of *90-Day Plan for Finding Quality Care* www.searpubl.ca
Most doctors don’t pay any attention if patients over-eat junk food or self-medicate with alcohol, oblivious to the reality that brain cells need proper ‘fuels’. Certain nutrients are essential. Psychiatrists don’t usually bother with nutrition but Abram Hoffer went to the old school which taught doctors to assess root causes and contributing factors before making a differential diagnosis. As Hoffer evaluated biochemical and nutritional factors underlying psychosis, he discovered that foods and nutrients can affect mental health. Over his long and distinguished career, Dr. Hoffer fine-tuned patients’ diets and prescribed regimens of vitamins, trace minerals, amino acids, antioxidants, energy and enzyme cofactors. These treatments healed many patients until they stopped hallucinating, rejoined their families and lived well.

Hoffer remained true to the principles of good science and the practices of good medicine. If only his colleagues in psychiatry had retained their care and concern for healing patients by consistently using the practice guidelines of their profession. But, modern psychiatry shifted darkly toward managing mental illness by giving sick people quick labels and offering palliative care-by-pills. Would a daily overload of patients sick with depression, bipolar disorder, schizophrenia, psychosis, attention deficit hyperactivity disorder, autism and anxiety mean that psychiatrists would have no choice but to shortcut their professional practice guidelines? The practice guidelines of psychiatry recommend a series of careful steps before psychiatrists make accurate diagnose which, of many possible causes or contributing factors, lies at the root of our brain sickness. Professionals who follow their guidelines know that they are encouraged to assign a differential diagnosis before they recommend relevant treatments which have been researched, tested and proven safe, effective and restorative for our particular problem. What if overloaded specialists have too many sick patients and not enough time to follow their guidelines? How could they manage by only using quick labels and easy prescriptions? Wouldn’t the quality of care suffer? Of course, but after all, everybody knows that mental patients never get well anyway, so best to keep them quiet, keep them calm and keep them safely out of our minds. Who would notice if modern psychiatrists shortcut their practice guidelines?

What if our experts give us labels and assign us numbers from the hundreds of mental conditions which are categorized in their Diagnostic and Statistical Manual (D.S.M.)? Giving quick labels will be way faster than doing mental status exams, way faster than taking medical and mental patient and family histories, and way faster than doing medical and neurological tests (as recommended by the practice guidelines of psychiatry in order to discover the root cause(s) and contributing factor(s) and make a differential diagnosis). With a D.S.M. label, a psychiatrist need only prescribe one or more pills from their handy lists of antidepressants, antianxiety meds, antipsychotics, and anticonvulsants? How many patients recover and resume normal life after experts give quick labels and anti-symptom prescriptions? It turns out that less than 10% of schizophrenics recover that way.

According to Dr. Hoffer, in 1850, the Quakers, a religious group, developed what they called Moral Treatment for the Insane. They provided kindness, shelter, food and respect until 50% of their patients recovered and returned to their communities where they could work and live well. What went wrong since 1850? The herd of mental patients who trusted our lives to modern psychiatrists have learned a series of painful lessons. Not only do D.S.M. labels bear no relation to treatments, but the treatments with pills and more pills don’t necessarily help us recover or resume normal life. Modern managed care has none of the success that the Quakers provided in the 1950s; modern psychiatry is about managing patients, sacrificing the quality of care in favor of efficiency. Isn’t efficiency more important than healing mental defectives?

Students of the history of pharmacology can easily learn that chemical company manufacturers developed brain pills from left-over rocket fuels after World War II and have grown rich by modifying and marketing these powerful pills. Why not give rocket fuel-based chemicals to re-energize sick mental patients? Why not? Because prescribing rocket-fuel-based chemicals will cause many sick patients to suffer from adverse effects, toxic effects and drug-induced neurological disorders. Will anyone notice; will anyone care?
When Dr. Abram Hoffer started working as a young psychiatrist at mental hospitals in Saskatchewan, Canada, he was horrified by the sorry state of affairs; the warehousing of hundreds of sick, suffering and deteriorating patients. Nobody told Dr. Hoffer that there was no cure for psychosis, so he applied his PhD in biochemistry to research schizophrenia. Fortunately for his patients, Dr. Hoffer did not follow his herd of colleagues into the dark age of ‘managed’ psychiatry; Hoffer refused to label and drug sick patients into silence; he preferred to take the road less travelled and heal his patients so they could live well. Many of Hoffer’s acute schizophrenia patients recovered by taking optimum doses of a methyl acceptor (B-3, niacin or niacinamide) with an antioxidant (C, ascorbic acid). For more than 50 years, while researching and developing regimens of nutrients to heal psychosis and other mental disorders, Hoffer reported clinical progress and success by improving diets and giving medicinal doses of vitamins B-3, B-6, C, zinc and manganese. Thousands of patients recovered. Megavitamin therapeutics proved safe and effective.

Believing that thousands of patients and their trusting families could benefit from complementary vitamins and minerals, Abram Hoffer made the time to write more than 30 books and 600 medical journal articles and editorials. Hoffer’s books include *The Chemical Basis of Clinical Psychiatry (1960), Niacin Therapy in Psychiatry (1962), How to Live with Schizophrenia (1966), The Hallucinogens (1967), Smart Nutrients (1980) Orthomolecular Medicine for Physicians (1989), and Adventures in Psychiatry (2005) and Orthomolecular Medicine for Everyone (2008). For decades, he wrote about the biochemistry of schizophrenia, described the healing capabilities of vitamins and other nutrients, recommended healthy diets and introduced orthomolecular medicine to patients, families, caregivers and health professionals. Thanks to Abram Hoffer’s prolific part-time authorship, anyone can read about his research, check his references, consider his careful observations and learn Hoffer’s restorative treatment regimens.

As Hoffer studied his herd of mental patients, he discovered which ones had nutritional deficiencies and dependencies and which ones had disorders connected to their biochemical individuality. As appropriate to each individual’s diagnosis and biochemical individuality, Hoffer healed with essential nutrients, starting with vitamin B-3, using either niacin and niacinamide. Hoffer researched, discovered, developed and taught orthomolecular principles. Decade after decade, Hoffer wrote so many detailed books, articles and editorials that any open-minded health professional can pierce the veil of darkness that shrouds modern psychiatry and learn how to heal chronic mental illnesses and maintain health by prescribing complementary regimens of vitamins A, B, C, D and E with trace minerals and other nutrients. As Dr. Hoffer explains the restorative dimension of care: “The practice of orthomolecular medicine recognizes that diseases are due to a metabolic fault that is correctable in most patients by good nutrition, including the use of vitamins and mineral supplements.”

As you read this fascinating book, you will learn how to restore health and live well by eating nutritious foods and asking health professionals to recommend nutritional supplements. Ortho-molecular medicine has helped thousands of patients, for decades. Optimum doses of essential nutrients tested safe and effective. You can help yourself recover, feel better and live longer; then tell your friends and families!

review by Robert Sealey, BSc
author of *Finding Care for Depression, Mental Episodes & Brain Disorders*  
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