# Correspondence

#### Editor's Note

Orthomolecular medicine is slowly penetrating into world medicine. This is not surprising as schizophrenia is a biological disease which knows no borders and which will respond to the best treatment no matter where it is given. For some time I have been corresponding with Dr. Munsterhjelm-Ahumada. When I heard about the results she was getting I asked her to send me a case history and this she agreed to do. I edited this somewhat but have left the flavour of the report intact.

Dr Munsterhjelm-Ahumada is a specialist in general medicine at Ekenas Health Center, Finland. She has been practising orthomolecular medicine since 1994.

-A. Hoffer, M.D., Ph.D.

## Case Report

A 59-year-old woman on medical leave since 1994 for depression complained that she had been depressed, more or less her whole life. It became more severe in the mid-1990s and she began to shows signs of paranoia. Over the next three years these symptoms became more intense and in the spring of 1999 she was gravely psychotic with severe paranoia and anxiety, insomnia, confusion and she heard voices and saw visions. She had been diagnosed clearly paranoid by several physicians. She was admitted to a psychiatric clinic for six week and then released into open care on medication including Risperdol 1 mg daily, Prozac 20 mg daily, Doxepin 100 mg daily and Imovane 11 mg before bed.

She came under my care in December, 2000, for possible estrogen therapy. She was no longer psychotic but she was aware of her deep depression and she suffered from the side effects of the medication. She was tense, stiff and so agitated she could not sit still. I started her on estradiol 2 mg and nortestosterone 1 mg and recommended vitamin therapy.

She started on the vitamins on her next visit. At the end of January, 2001, she began

to take selenomethione 50 mcg once daily, vitamin C, 1 gram twice daily, vitamin E 200 mg twice daily, a B complex preparation containing thiamine 250 mg, pyridoxine 250 mg, nicotinamide 50 mg and vitamin  $B_{12}$  300 mcg daily. She also took magnesium 500 mg twice daily, zinc 30 mg twice daily, B complex injections intramuscularly twice weekly and hydroxycobalamin 1 mg intramuscularly twice weekly.

In February, 2001, I added calcium 500 mg and nicotinamide 500 mg three times daily and gradually increased it to 1000 mg three times daily. During this period she improved steadily. The depression eased, she felt stronger and more cheerful. Because she still suffered involuntary movements I added manganese 10 mg daily. During February, 2002, she reported that she never had felt better in her entire life. The depression was gone, she was mentally strong and optimistic. She was free of her involuntary movements and was flexible and relaxed. She was off the Prozac and her risperdol was down to 0.5 mg daily.

She had total insight into her illness and clearly remembered her psychotic condition. She viewed her life history in a calm and objective way and she was optimistic about her future. Her relationship to her two grown children has always been good and her relationship to her mother was improving, as was her relationship to her ex-husband. She told both her psychiatrist and her psychotherapist that she knows and feels that it is the orthomolecular therapy that led to her present state of well being.

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### Fenfluramine and Vitamin C

Readers may be interested to learn why Fenfluramine predisposes to vegetations on the heart valves and other serious cardiac lesions. Wilson<sup>1</sup> in 1975 showed, both in guinea pigs and in man, that this drug does not cause weight loss unless and until it has caused vitamin C depletion. This is of pertinence because Rinehart and Mettier,<sup>2</sup> working at the University of California Medical Center in 1934, showed that they could produce degenerative and proliferative lesions of the heart valves, endocardium. and the myocardium of guinea pigs, resembling those of rheumatic carditis, by infecting vitamin C-deficient animals with beta-hemolytic Streptocci or B aertrycke but rarely by infection of animals on the same diet supplemented with orange juice.

These observations become very pertinent when drugs such as Wellbutrin and Ephedra are being suggested on television for weight control. All new drugs should be tested for their effect on vitamin C metabolism before approval; so should all other drugs in current use.

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## **References:**

- Wilson CWM. Clinical pharmacological aspects of ascorbic acid. Ann NY Acad Sci, 1975; 258: 355-376.
- Rinehart JF and Mettier SR. The heart valves and muscle in experimental scurvy with superimposed infection. Am J Pathol, 1934; 10: 61-79.