

**Hospitals and Health:
Your Orthomolecular Guide to a
Shorter, Safer Hospital Stay**

Abram Hoffer, Andrew Saul
and Steven Hickey

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Laguna Beach, CA.

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It feels awful to do other than praise unstintingly the last-published book by the great man himself, Abram Hoffer, even if he is only one of three authors on the cover. It's also embarrassing that the other two are people I admire and regard as friends. I do have problems with this book, though, mostly because it seems unclear exactly what kind of beast it is. It doesn't do what it says on the cover - or only in what looks like a hastily bolted-on addition. Subtitled *Your Orthomolecular Guide to a Shorter, Safer Hospital Stay*, this looks like something it would be a good idea to buy for a relative or friend facing elective surgery (clearly nobody has time for it before emergency surgery). But the "guide" and "tips" bits appear in the 12-page appendix and dispersed through 200 pages of discussion. Did the publishers say "If you add this bit in we can market it as a self-help guide"? If so, they mis-targeted the audience, I fear. Who is this book really for?

Of course it's the discussion that is the really interesting part anyway; mostly this is a very good and entertaining exposition of what is wrong with health care, and why, particularly (but not uniquely) in hospitals in the developed west. As such I enjoyed it, although not as much as other books and articles by the same authors. It begins with a brief history of medicine, and of some of the mistakes, the fraud, incompetence and callousness, but most of all the profit motive, that have prevented medicine from fully delivering on its promises. Then a focus first on hospital-acquired infections, with mentions of two notable women, Florence Nightingale and Mother Seacole, and of course a focus on MRSA and its friends, which can make hospitals such dangerous places. The first section

ends with a chapter on the limits of modern psychiatry and pharmaceutical medicine, and the simple message from Abram Hoffer's work, that nutrition, particularly niacin, can help many sufferers—because it's almost always a biochemical/nutritional illness. There are some great medical anecdotes here, which are a good way to transmit a message; we find it natural to think in stories.

So the first part of the book is a useful resource of facts and figures, and some new ideas or ways of thinking about health care. But who's it for? If the aim were to preach to the converted, like me, it should be more fact-crammed, but if it were to help prospective patients to reframe their approach to doctors and hospitals, as the cover indicates, I think it should be much shorter and punchier, and perhaps even more anecdotal.

The second part, entitled "Antidote—Patient Power" starts with probably my favourite quotation, particularly given the origins of the surgical profession; attributed to Warren Buffet, it goes; "Never ask a barber if you need a haircut." Then we are straight into game theory, with some simple but powerful proposals such as refusing permission for hospital staff to use your first name—insist on some respect! These days that goes just as much for the call centres and help lines that we all have to deal with. This whole strand is very good and very useful; the only problem is that one has to read the whole book to access it.

There is a good discussion on when treatment, say for cancer, might be imposed against your will. Three scenarios: you have learning difficulties; you have a phobia of hospitals (which might be based on past experiences); you wish to receive vitamin C instead. Is forcible treatment justified in any of these? The authors could equally well have used the example of childhood vaccinations, at a time when children may be excluded from school if they do not receive them.

Quite rightly, the final chapter is "The Power of Nutrition," with sections on which supplements to take before, during and after hospitalization, on safety and on misinformation, from the media and from hospital staff. Need I say more? The appendix has a

number of checklists on the safety and standards of hospitals, which will amount to quite a paradigm shift for patients, and that's no bad thing, because the hospital system ain't going to do that for you. But even using the internet considerable time and effort will be needed to complete these, indeed it may not be possible before you are actually in the hospital, with the drip in your arm. So unless we start using this book as part of teaching citizenship in schools, it's going to be a problem applying it in real life. Maybe they are planning the sequel already—The Little Book of Patient Power?

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No More Fatigue: Why You're So Tired and What You Can Do About It

By Jack Challem, BA, ASN
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Hoboken, NJ.
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When I first entered the relatively new field of orthomolecular health education some 35 years ago, I naïvely predicted that the self-evident benefits of nutritional therapy would catch on in about 20 years, and then I would be out of a job.

Not a chance. Abram Hoffer frequently said that it would more likely take 40 years. Looking back on the 1930s and mindful of the early work of William Kaufman with niacinamide and Claus Jungeblut with ascorbate, perhaps it is going to be 80 years. However long it may take for orthomolecular medicine to be universally accepted, it will be that much sooner because of Jack Challem and books such as his latest one, *No More Fatigue*.

Jack Challem is well known and well

regarded both as an orthomolecular medical writer and speaker. His numerous books are consistently informative, interesting and easy to understand. Such attributes are not universal. Certainly making health care understandable is a goal that many a government remains miles away from.

No More Fatigue opens with a topic overview, and three brief case histories. These may well indicate that Challem listened to Dr. Hoffer's time-honoured presentation advice: always lead with some case histories. Then, sequential chapters in Part 1 get right to what the author feels are the five causes of fatigue: stress, poor eating habits, hormone issues, illness, and aging. Part 2 tells the reader just what to do, beginning straightaway with nutritional supplements. The author recommends supplemental vitamins C, D, and B-complex; CoQ10; L-Carnitine; alpha lipoic acid; quercetin; and a number of other nutrients as well. Right there you have this book's orthomolecular difference. While some critics' hearts might fairly flutter at the thought of "all those supplements," Challem is ready for them. First of all, his recommended dosages are not astronomically high. Second, he states that, based on United States Department of Agriculture data (www.ars.usda.gov/Services/docs.htm?docid=10709), nearly half of Americans do not get even the US recommended dietary allowance (RDA) of vitamin C, which is a mere 90 mg. More than half do not consume the RDA of vitamin A. Over two-thirds of us do not get the RDA of magnesium, calcium, or vitamin D. An astonishing 86% do not get the RDA of vitamin E, less than 23 IU. Overall, he makes a solid argument to take supplements.

But, the author states, supplements are not enough. Eating right is fully and fairly highlighted. Fresh, unprocessed food is best, of course, and junk food and caffeine are to be avoided. Challem also recommends not only a low sugar diet but also a low starch diet... and no potatoes. Protein is emphasized, and some readers may feel is over-emphasized. Pork is not on the menu, beef is minimally recommended, but seafood, lamb, turkey, and chicken dominate. I am biased, for I am

one of these who advocate a primarily (but not by any means entirely) plant-based diet. In the three pages of meal plans (a good idea), the author has animal flesh food listed as an entrée for two out of three meals a day, and that often in addition to eggs for breakfast. I'd cut that meat recommendation by half, substituting other protein foods such as seeds, cultured dairy products, nuts and nut butters for meat entrées. Again, as I am a long way from vegetarian, I offer no argument against seafood or eggs, both excellent protein sources. But animal muscle once a day is plenty.

No More Fatigue offers many practical, helpful suggestions on exercise, increasing sleep, and reducing stress. There are also many illustrative case stories. A handy self-questionnaire is included, along with spot-on discussions of adrenal exhaustion and thyroid issues. Future editions of the book might benefit by expanding the index and reference sections, and possibly a judicious trimming of some of the more commercial resource recommendations.

The book is serious about diet revision,

and contains 30 pages of recipes. This is probably best for the general reader unfamiliar with a basic unprocessed food, no junk, low sugar orthomolecular diet. Although I'd personally prefer a substitution of 30 more pages of additional research studies along with Challem's always-competent analysis, I concede to the author the game point for providing what any quick look around the mall instantly confirms: people need those recipes pretty badly. Indeed, if more people followed the recipes in the book, they would not need the book.

But the public does need this book, and badly. Yes, there are a numerous other works on fatigue. Most do not contain recommendations for higher, orthomolecular nutrient doses. That alone makes this a go-to book. The author's positive voice, clarity and organized presentation clinch the deal.

—Andrew W. Saul, PhD

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Andrew Saul is, with Abram Hoffer and Steve Hickey, coauthor of Hospitals and Health: Your Orthomolecular Guide to a Shorter, Safer Hospital Stay. As Dr. Cathcart has been deleted from Wikipedia since 2007, Saul was honored to have participated in inducting Dr. Cathcart into the Orthomolecular Medicine Hall of Fame in 2008. <http://orthomolecular.org/hof/2008/cathcart.html>. The peer-reviewed Orthomolecular Medicine News Service is a non-profit and non-commercial informational resource. Editorial Review Board