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Twenty-Nine Medical Causes of "Schizophrenia"

Excerpted from *Nutrition and Mental Illness*

by the late **Carl C. Pfeiffer, Ph.D., M.D.**

Internationally renowned pioneer in the treatment of mental disturbances through nutrition.

(Our grateful acknowledgement to the Princeton Bio Brain Center for permission to reprint. Following Dr. Pfeiffer's text are sections added by the editor to define and explain each disorder.)

The term "schizophrenia" is an inadequate and misleading diagnosis. "Disperceptions of unknown cause" is a better term.

If we include fevers, environmental pains, and drug reactions, there must be a hundred ways to go crazy and be diagnosed as schizophrenic.

A comprehensive list of possible causes for disperceptions that cause schizophrenia is shown in the table below.

Causes of Schizophrenia – well-known, less-known, and almost unknown

Well-known

1. [Dementia paralytica](#)
2. [Pellagra](#)
3. [Porphyria](#)
4. [Hypothyroidism](#)
5. [Drug intoxications](#)
6. [Homocysteinuria](#)
7. [Folic acid/B₁₂ deficiency](#)
8. [Sleep deprivation](#)
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Less Well-known

1. [Hypoglycemia](#)
2. [Psychomotor epilepsy](#)
3. [Cerebral allergy](#)
4. [Wheat-gluten sensitivity](#)
5. [Histapenia – copper excess](#)
6. [Histadelia](#)
7. [Pyroluria](#)
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9. [Chronic Candida infection](#)
10. [Huntington's chorea](#)

Almost Unknown

1. [Prostaglandins](#)
2. [Dopamine excess](#)
3. [Endorphins](#)
4. [Serine excess](#)

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5. [Prolactin excess](#)
6. [Dialysis therapy](#)
7. [Serotonin imbalance](#)
8. [Leucine, histidine imbalance](#)
9. [Interferon, amantadine, anti-viral drugs](#)
10. [Platelets deficient in MAO \(monoamine oxidase\)](#)

[Dementia paralytica](#)

This is a form of syphilis which generally affects patients in their 40s or 50s. Increased behavioral deterioration occurs and the person may be believed to have a "psychiatric illness" or Alzheimer's disease. Symptoms can include convulsions, irritability, difficulty in concentrating, deterioration of memory, defective judgment, headaches, insomnia, fatigue, lethargy, deteriorated hygiene emotional instability, depression, and delusions of grandeur with lack of insight. The patient gradually progresses toward dementia and paralysis.

[Pellagra](#)

A disease caused by a lack of Vitamin B₃ (niacin) in the diet or poor absorption of the vitamin. It is common throughout the world but infrequent in the U.S. It primarily strikes those lacking protein in their diets or who have a high corn diet or are unable to assimilate the vitamin. Symptoms often begin with weakness, listlessness, insomnia, and weight loss. Exposed skin becomes red and scaly. Loss of appetite, indigestion, and diarrhea occur. As the disease progresses the nervous system is impacted, manifesting symptoms such as headaches, dizziness, aches, muscle tremors and mental disturbances.

[Porphyria](#)

Porphyria is an inherited disease, usually first manifesting after puberty, that prevents the synthesis of heme, the part of blood that carries oxygen and makes blood red. There are a number of types of porphyria, some from bone marrow and others from the liver. Neurological symptoms frequently occur in those stemming from the liver. A review of 2500 psychiatric patients showed a 1.5% occurrence of porphyria.

Porphyria is identified by port-colored urine and feces which darken on exposure to light. Additional symptoms can be loss of vision, sensitivity to light, aches and pains, acne, vomiting, diarrhea, constipation, and abnormal fat metabolism.

Mental and neurological symptoms include irritability, confusion, delirium, psychosis, depression, hallucinations, seizures, altered consciousness, mood swings, and paralysis. Genetic carriers can experience mood swings and body pain while exhibiting no other signs of the illness.

[Hypothyroidism](#)

This is characterized by insufficient production of thyroid hormone. It can also be caused by poor metabolism of the thyroid hormone. The general net result is a slowing of the metabolism. This ailment is thoroughly covered in Dr. Broda Barnes' [Hypothyroidism: The Unsuspected Illness](#). Broda's book discusses the fact that hypothyroidism *may not show up on standard blood tests* and further testing may be required (covered in the book).

Physical symptoms can include weight increase, sensitivity to cold, coarsened features, thinning hair, dry puffy skin, pallor, hoarseness, slurred speech, night blindness, difficulty hearing, vision loss, migraines, constipation, edema, anemia, joint pain, slowed pulse, muscle aches, and weakness, and low libido.

Mental symptoms include terrifying dreams, obsessions, frightening hallucinations, paranoia, suicidal ruminations, psychosis, depression, emotional instability, delusions, fear, suspiciousness, resentment, auditory or visual hallucinations, paranoia and psychosis.

Hypothyroidism often first manifests as a result of severe stress.

The book [Natural Healing for Schizophrenia](#) reports that 10% of patients diagnosed with "schizophrenia" have been found to have thyroid imbalances. It has been estimated that up to 20% of women over 60 have evidence of hypothyroidism.

[Drug Intoxications](#)

This is self-evident.

Homocysteinuria

The compound homocysteine is normally not found in the blood or urine in noteworthy amounts. Homocysteinuria is a metabolic disorder resulting in an excessive accumulation of homocysteine in the blood and urine. Frequency of occurrence is 1 in 100,000 patients.

Elevated homocysteine levels are a risk factor for all kinds of vascular disease including strokes and heart ailments. Homocysteinuria can result in mental retardation and seizures.

Folic Acid/B₁₂ Deficiency

Folic acid (Vitamin B₉) is needed for forming body protein and hemoglobin. It is also needed to utilize B₁₂. Folic acid and B₁₂ work together to metabolize carbohydrates, fats, and proteins and to form red blood cells. Older people are most at risk for developing B₁₂ deficiencies. Also, surgical removal of part of the intestine can lead to B₁₂ deficiency.

B₁₂ deficiency is the cause of pernicious anemia, characterized by a gradual reduction in the number of red blood cells and by gastrointestinal and nervous disturbances. Eighty percent of pernicious anemia patients show neurological changes and 60% exhibit personality changes.

Physical symptoms of folic acid deficiency include fatigue and weakness, paleness, red, sore tongue, lesions in the corner of the mouth, burning feet, restless leg syndrome, shortness of breath, nausea, vomiting and, rarely, diarrhea.

Physical symptoms of B₁₂ deficiency include weakness in the arms and legs (sometimes being mistaken for multiple sclerosis) in addition to the signs of pernicious anemia.

Mental symptoms of B₁₂ or folic acid deficiency includes confusion, fatigue, poor memory, difficulty concentrating or learning, and mental lethargy. It can be mistaken for Alzheimer's in older patients. Additional mental disturbances include: loss of alertness, drive, self-confidence, and independence, social withdrawal, nervous irritability, headaches, insomnia, moodiness, severe agitation, lack of coordination, anxiety, delusions of persecution, and mania. Deficiency may also induce auditory hallucinations, psychosis, and paranoia.

Sleep Deprivation

Lack of sleep can occur a number of ways. Total sleep deprivation is complete absence of sleep. Partial is insufficient sleep night after night. Sleep can also appear to be sufficient in amount yet be poor in quality. This occurs with sleep apnea, marked by heavy snoring and occasional gasps for air – the person is awakened often hundreds of times a night without knowing it, gulping air due to a closed airway in the throat.

Sleep deprivation symptoms include irritability, fatigue, blurred vision, slurring of speech, memory lapses, and inability to concentrate. In extreme stages bizarre behavior and hallucinations can occur.

Heavy Metal Toxicity

Heavy metals is the term used for a group of elements that have particular weight characteristics. They are on the "heavier" end of the periodic table of elements. Some heavy metals – such as cobalt, copper, iron, manganese, molybdenum, vanadium, strontium, and zinc – are essential to health in trace amounts. Others are non-essential and can be harmful to health in excessive amounts. These include cadmium, antimony, chromium, mercury, lead, and arsenic – these last three being the most common in cases of heavy metal toxicity.

Sources of toxicity can include environmental, water supply, industrial, hobbies, and others, thus a full history of the person's work and living habits can help pinpoint potential heavy metal sources.

As an example of the scope of a heavy metal's toxicity, lead can affect the nervous system, gastrointestinal system, cardiovascular system, blood production, kidneys, and reproductive system.

Lead toxicity physical symptoms include a combinations of gastrointestinal complaints, anemia and neurological problems; also headaches and convulsions. Mental symptoms include restlessness, insomnia, irritability, confusion, excitement, anxiety, delusions, and disturbing dreams

Arsenic symptoms include stomach problems, neurological troubles, kidney failure, increased pigmentation of soles, palms, or other areas, garlic odor on breath, excessive salivation, progressive blindness, and others. Mental symptoms include apathy, dementia, and anorexia.

Mercury toxicity has been linked to, among other things, mercury dental fillings, particularly when people have a large number of them. Symptoms include a metallic taste in the mouth, excess salivation, gingivitis, tremors, stomach and kidney troubles. Mental symptoms include shyness, irritability, apathy and depression, psychosis, mental deterioration, and anorexia.

Hypoglycemia

This is a common condition of an abnormally low level of sugar in the blood. Sugar levels frequently change throughout the day and may be normal sometimes and abnormal at others. Symptoms include weakness, shakiness, excess hunger, anxiety, outbursts, faintness, headaches, passing out, delirium, coma, hallucinations, excess sweating, the appearance of intoxication, marked personality changes, irritability, negativism, mood swings, depression, crying spells, and a panorama of similar mental symptoms.

Numerous patients given psychiatric diagnoses have actually turned out to have hypoglycemia, including those classified with depression, manic-depressive disorder, and schizophrenia.

Psychomotor Epilepsy

Psychomotor epilepsy is also known as temporal lobe epilepsy or complex partial seizures. Epilepsy is a chronic brain disorder in which the electrical activity of the brain is periodically temporarily interrupted resulting in a seizure.

Not all seizures are jerking motions. In psychomotor (mind-motion) epilepsy the seizures are manifested in personality, emotional, thinking, and behavioral changes. *This condition is very likely to be misdiagnosed as a mental disorder. People with psychomotor epilepsy have been given schizophrenia, manic depressive, depression, attention-deficit disorder, and other diagnoses.*

The disorder has cyclical phases. The pre-seizure stage can last for hours or up to seven days with symptoms of moodiness, depression, anxiety or constant low-level anger, irritation, or annoyance, accompanied by general unhappiness and constant arguments.

The seizure stage of 60 to 90 seconds can include misperceptions of the environment, hallucinations, and bizarre sensations.

Between seizures, personality is affected by excessive, tangential speech, overly emotional feelings, and lack of sexual desire. Under physical or emotional stress, psychotic episodes can occur.

Cerebral Allergy

An allergy is a negative sensitivity, usually to a substance, which causes a physical reaction. Classical responses include creation of blood antibodies, histamine release, swelling, itching, runny nose, and others. However, substances can cause *many* negative reactions commonly not associated with allergies.

In the case of cerebral (brain) allergies – in which the allergies affect the nervous system – reactions include brain inflammation, irritability, fear, depression, aggression, extreme mood swings in a single day, hyperactivity, and psychosis.

A study of "schizophrenics" by Dr. William Philpott showed allergic responses as follows: Wheat (64%), Mature corn (51%), Pasteurized whole cow milk (50%), Tobacco (75% with 10% becoming grossly psychotic with delusions, hallucinations and particularly paranoia), and Hydrocarbons (30% with weakness being common and some participants reacting with delusions or suicidal inclinations). Ninety-two percent of the patients showed allergic responses with an average of ten items per person causing reactions.

Wheat-gluten sensitivity

Gluten is a protein found in wheat, rye, barley, and oats that gives dough it's sticky quality. An inability to digest these grains is called celiac disease. It's been estimated that up to 20% of Americans have the disease to some degree.

Studies have shown celiac disease to be inordinately high in "schizophrenic" populations. Research removing gluten and dairy products (which often seems to add to the problem) from the diet of a locked ward resulted in a significant improvement of patient behavior. See also the Philpott study mentioned above under "Cerebral Allergy."

Symptoms include mood swings (down after eating and up after avoidance), severe depression, anxiety, irritability, compulsive behavior, "schizophrenia" symptoms, and other mental disorders.

Histapenia – Copper Excess

Histapenia (hista-: histamine; -penia: deficiency of) is a shortage of histamine in the body. Histamine is an important brain chemical involved in many reactions. It has been found that 50% of patients classified as "schizophrenic" have low histamine levels in the blood and it rises to normal as they improve.

These same patients are found to have high copper levels. Elevated copper decreases blood histamine. Excess copper is linked with psychosis.

According to Pfeiffer, people with histapenia tend to have classic signs, including canker sores, difficult orgasm with sex, no headaches or allergies, heavy growth of body hair, ideas of grandeur, undue suspicion of people, racing thoughts, the feeling that someone controls one's mind, seeing or hearing things abnormally, ringing in the ears, and others.

Histadelia

This is a disorder, prominent in males, of too much histamine in the blood. (Compare to histapenia above). Estimated to affect 15-20% of patients classified as "schizophrenic."

Symptoms include hyperactivity, compulsions, obsessions, inner tensions, blank mind episodes, phobias, chronic depression, and strong suicidal tendencies.

Physical signs can include little tolerance for pain, rapid metabolism, lean build, profuse sweating, seasonal allergies, and frequent colds.

Pyroluria

A pyrrole is a chemical substance that is involved in the formation of heme, which makes blood red. Pyrroles bind with B₆ and then with zinc, thus depleting these nutrients. Abnormal production of pyrroles and their appearance in the urine of psychotics was first noticed in 1958 during LSD experimentation. Approximately 15-30% of "schizophrenics" have pyroluria. (At least 10% of these also have histamine problems.)

Symptoms include sweet, fruity breath and body odor, general loss of appetite, motion sickness, problems with sugar metabolism, allergies. Mental phenomena include delusions, hallucinations, paranoia, occasional loss of contact with reality, amnesia spells, and low stress tolerance. Person has a tendency to have insight (understand they have mental problems).

The ailment, which normally strikes females, generally responds well to B₆ and zinc treatment.

Wilson's Disease

This is an inherited liver disorder named after British neurologist Samuel Wilson. The small intestine absorbs too much copper and the liver excretes too little of it, resulting in a copper buildup in the liver and brain. Onset is slow and begins between 11 and 25 years of age.

A wide array of symptoms occur, fitting a number of psychiatric diagnoses, including "major depression," "schizophrenia," and "hysteria." Children with Wilson's disease can appear to be mentally retarded. Appetite loss and weight loss can appear along with hallucinations and delusions.

The physical manifestations of Wilson's disease do not appear until the late stages, thus it is easily misdiagnosed as "psychiatric illness."

Chronic Candida Infection

Refer to Dr. William Crook's article on "Candida and Mental Health" on this web site.

Candida is a yeast that lives in the body normally. However, broad-spectrum antibiotics tend to kill off Candida's enemies in the body and can result in Candida overgrowth. The yeasts put out toxins that can weaken the immune

system and cause a long list of symptoms.

Although psychosis is not a common manifestation of Candida, it has occurred. Mental symptoms have included fatigue, inability to concentrate, depression, mood swings, anxiety, hyperactivity, delusions, "manic depression," psychosis, and suicidal or violent tendencies.

Huntington's Chorea

A chorea is a nervous disorder marked by involuntary movements of the body and face and lack of coordination of the limbs. Huntington's chorea, a rare, inherited illness named after American neurologist George Huntington, is commonly labeled as "schizophrenia" because of its progression of mental decline. Even when involuntary movements appear, they may be mistaken for drug side effects.

Huntington's chorea usually appears in midlife. Beginning symptoms can include irritability, eccentricity and psychosis. Further signs include paranoia, obstinacy, indifference, euphoria, and violence. The disorder results in complete mental deterioration. Dr. Abram Hoffer reports successfully treating two cases with nutrition.

An important diagnostic tool in spotting Huntington's chorea is family history of the disease.

Prostaglandins

Prostaglandins ("prosta": standing before; "glandin": gland) are substances that act like hormones in the body. They effect blood pressure, metabolism, body temperature, and other important functions. Prostaglandin levels that are too high or too low can create symptoms. There are different kinds of prostaglandins with specific functions, thus different physical and mental reactions occur with imbalances in each one. Elevated prostaglandin levels have been observed in, for example, pre-menstrual syndrome (PMS). Research has shown that high levels of a prostaglandin called E2 coupled with low levels of one called E1 have been seen as a major cause of certain forms of depression. E2 is a central nervous system depressant.

It's been observed that geographical regions with low selenium levels in the soil and less sunshine have higher rates of "schizophrenia." Since some prostaglandins require selenium for their synthesis, it's believed prostaglandin deficiency may be a source of "schizophrenia."

Dopamine Excess

Dopamine is a substance involved with emotional and hormonal response and the integration of experience, emotion, and thought. Additionally, it stimulates the brain's pleasure center and is involved in sexual arousal. Dopamine appears to be a factor in producing hallucinations, voices and other symptoms associated with "schizophrenia." Those with histapenia (see above) often have elevated dopamine levels.

Endorphins

Endorphins, discovered in 1975, are substances secreted in the brain. They have a pain-relieving and stress-relieving effect similar to morphine. Endorphin molecules lock onto receptors in the brain to remove the perception of pain.

It has been shown that drugs which artificially stimulate and suppress the endorphin receptors can produce symptoms bordering on psychosis. Gluten molecules (see "Wheat-gluten Sensitivity" above) are molecularly similar in shape to endorphins and thus can create the same stimulatory/suppression activity. Certain dairy proteins have been shown to have similar qualities.

Serine Excess

Serine is an amino acid that is part of many proteins. It plays a critical role in maintaining blood sugar levels. It has a vital part in the production of the myelin sheath – the coating that protects certain nerve fibers.

In numerous studies the plasma levels of serine have been found to be significantly higher in "schizophrenics" than in control groups. There is also evidence that serine metabolism is abnormal in psychotics. In one study a limited sector of psychiatric patients who responded to a carbohydrate-rich, low-protein diet became psychotic again after oral intake of serine.

Prolactin Excess

Prolactin is a hormone also known as luteotropic hormone. It comes from the pituitary gland and induces lactation. Non-pregnant women have low levels of it and it increases about ten times in pregnant women. When prolactin levels are excessive in non-pregnant women, the condition is known as hyperprolactinemia.

This condition can produce a number of symptoms including lactation by a non-nursing woman and irregular or absent menstrual periods.

Excess prolactin has been connected with pre-menstrual syndrome and a host of extreme mental states that can occur with it. In some people tranquilizers can *increase* prolactin levels.

Dialysis Therapy

Patients who undergo dialysis regularly may be exposed to high levels of aluminum in dialysis fluids and medicines. A reaction called dialysis encephalopathy can occur. (Encephalopathy is a general term for "brain disease.") What follows is a progressive mental degeneration manifested by tremors, convulsions, psychosis and other changes in speech and behavior. Reduction of aluminum levels significantly reduces the incidence of this problem.

Serotonin Imbalance

Serotonin is a neurotransmitter, a chemical that transmits messages from one nerve to another. Too much or too little serotonin has been associated with depression, psychosis, and other problems. While drugs can be used to mask the symptoms of this problem, they do not solve the problem of the imbalance. Further medical inquiry is indicated in these situations to find the cause or to find nutritional supplementation that will permit the body to produce correct serotonin levels.

Leucine, Histidine Imbalance

Leucine and histidine are essential amino acids (the body doesn't make them). The leucine, histidine imbalance – high leucine and low histidine – was a condition Pfeiffer theorized as being a cause of "schizophrenia." Modern research has shown, however, that leucine-histidine imbalance does not play a significant role.

Interferon, Amantadine, Anti-Viral Drugs

A number of non-psychotropic drugs can create psychosis. It must be remembered that the nervous system is intimately connected with other bodily systems. Medical drugs can effect blood chemistry, hormonal balances, and a host of other areas that directly impact the brain and nervous system.

Interferon is a treatment for hepatitis. An estimated 1-2% of interferon users manifest psychosis or suicidal behavior.

Amantadine, a drug for Parkinson's Disease, can cause hallucinations, depression, jitteriness, and confusion. Caution is recommended in it's use in people with a history of psychosis.

In anyone experiencing a psychotic episode, recent drug ingestion must be considered as a cause.

Platelets Deficient in MAO (monoamine oxidase)

Monoamine oxidase is an enzyme that metabolizes (destroys) the neurotransmitter serotonin. Platelets are small blood cells involved in the formation of blood clots. If platelets have too little MAO, the serotonin levels increase. High serotonin is connected with a number of severe mental states such as the one classified as "paranoid schizophrenia."

In researching this particular malady of platelets low in MAO, we were told by Dr. William Walsh, who worked with Dr. Pfeiffer for 12 years, that he did not recall dealing with any cases of MAO deficiency so he was uncertain if MAO deficiency is a verified condition or a theoretical one.

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