Submission to

Senate Select Committee on Mental Health

by

Bio-Balance Health Association Inc.

The following submission was prepared on behalf of Bio-Balance Health Association Inc. by John Skelton, inauguraal Vice-President of the Association and currently a member. It has been authorised, after review, by the Management Committee of the Association.

John Skelton is a retired clinical and occupational psychologist. He has been a carer of a family member with chronic mental illness for 25 years and has held the following positions in community organisations in the mental health field:

Senior Vice-President, Alliance for the Mentally III Australia Inc.; inaugural Chair, Queensland Consumer/Carer Advisory Group (advisory to Queensland Minister for Health); President, ARAFMI Queensland Inc.; inaugural President, ARAFMI National Council Inc.; Secretary, Queensland Alliance of Mental Illness and Psychiatric Disability Groups Inc.

There is no doubt that the system for the treatment and care of people with mental illness is in crisis. The focus on biological causes and pharmaceutical solutions that has developed over the last half-century and the process of deinstitutionalisation and treatment in the community that has accompanied it during that period have produced some significant advances in treatment and care. However, this approach has clearly reached the limits of its capacity to improve the lives of people with mental illness.

The perpetuation of this focus and the powerful vested interests that reinforce it have become a roadblock to the development of more refined approaches which make best use of the more recent advances in scientific insight into the biochemistry of brain functioning. By developing treatment methods based on this knowledge which have the potential to significantly improve the prospects for recovery for many people with mental illness, particularly those who are not being helped with present 'mainstream' psychiatric treatments, better outcomes are possible.

We wish to draw the Committee's attention to the demonstrated effectiveness of biochemical and complementary nutritional techniques in promoting recovery from mental disorders such as schizophrenia, bipolar disorder and depression in a large proportion of cases. These techniques involve the identification of biochemical imbalances affecting brain functioning and correction of such imbalances by complementary nutritional supplementation. This approach is compatible with current conventional psychiatric treatments: it does not seek to replace them but to support and complement them and reduce the required dosages and inherent side effects of the medications.

Limitations of medication therapy

The powerful antipsychotic, antidepressant and other psychoactive pharmaceutical medications currently used to treat mental illnesses produce some beneficial effects in most cases, but these benefits are usually partial in nature and the medications can often result in unwanted changes in behaviour and various other 'side-effects' which can be so intolerable as to undermine patient compliance with the prescribed medication.

The limited effectiveness of current 'mainstream' treatments for people with mental ilnesses in this era of deinstitutionalisation has had widespread and costly consequences:

- It has.placed huge strains on the limited hospital resources available for psychiatric patients, resulting in people often being discharged prematurely while still unwell, unstable and often non-compliant with prescribed treatment.
- It has resulted in immense amounts of public money being spent on employing workers to support mentally ill people in the community and on providing disability support pensions for the many chronically mentally ill people unable to work: people with psychiatric disabilities comprise some 25% of all people on Disability Support Pensions
- It has placed onerous burdens on the families of people with mental illness, often illequipped to cope with the stresses involved in caring for a mentally ill relative
- It has placed unacceptaable burdens on the community forced to deal with people when they are mentally unwell
- It has resulted in large numbers of mentally ill people getting into trouble with the police and ending up in prison, to the extent that our prisons have become de facto psychiatric institutions. A 2003 NSW Health Corrections report revealed that -

"the twelve-month prevalence of psychosis among prisoners was 30 - I repeat 30 - times higher than in the Australian community;

78% Of male and 90% of female reception prisoners were classified as having had a psychiatric disorder in the previous 12 months, while 1 in 20 had attempted suicide:

46% of reception and 38% of sentenced inmates had suffered a mental illness in the previous year; and

between 4% and 7% of reception inmates suffer a functional psychotic disorder." [Professor Chris Puplick, "Out of Sight - Out of Mind", Ockham's Razor, 20 March 2005, ABC Radio National]

Existing psychiatric medications are, in fact, relatively blunt instruments which take little or no account of individual differences in biochemical makeup.

Biochemical treatment

Virtually every individual has some biochemical imbalances, often genetic in origin, which may involve excesses as well as deficiencies. Some of these imbalances can adversely affect brain functioning. Where this occurs, mental disorders of various kinds, depending on the nature of the imbalances involved, can ensue.

It is now clearly understood that schizophrenia, bipolar disorder, depression and other mental disorders are primarily caused by imbalances in brain neurotransmitters, the raw materials of which are amino acids, vitamins, minerals and other nutrients. The step-by-step processes by which these neurotransmitters are produced in the brain and how neurotransmitters function are also well understood.

If the biochemical imbalances involved in each individual with a mental disorder are identified by appropriate biochemical assessment techniques, it becomes possible to take the necessary steps to correct the imbalances over a period of time by prescribing the appropriate nutrients in appropriate dosages, thus complementing the beneficial effects of the psychiatric medication therapy and making it possible in many cases to reduce the medication dosage to a level where side-effects are reduced or eliminated.

The complementary biochemical treatment techniques advocated by Bio-Balance Health Association were originally developed through clinical research over some 20 years by Dr Carl Pfeiffer at the Princeton Brain Bio Center in New Jersey, USA and, since Dr Pfeiffer's death in 1989, have been further developed through ongoing research by Dr William Walsh at the Health Research Institute and Pfeiffer Treatment Center (HRI - PTC), a research centre and non-profit outpatient treatment facility at Warrenville, Illinois, USA...

These techniques have recently become available in Australia through the efforts of the Bio-Balance Health Association and associated organisations and have the potential to make a significant contribution towards achieving improved effectiveness in the treatment of a wide range of mental, behavioural and learning disorders in combination with currently conventional pharmaceutical and other techniques.

Bio-Balance Health Association

Bio-Balance Association (BBHA) was set up in 1998 to promote, support and assist recovery from mental, behavioural and learning disorders through the identification of biochemical imbalances and treatment of such imbalances by complementary nutritional techniques and, more specifically

- (1) To promote, support and participate on a not for profit basis in the establishment and maintenance of facilities for comprehensive biochemical assessment and complementary nutritional treatment of mental, behavioural and learning disorders based on the model of the Health Research Institute/Pfeiffer Treatment Center (HRI PTC) of Warrenville, Illinois, USA and other such models and/or research as may be considered appropriate.
- (2) To promote, support and participate on a not for profit basis in the establishment and maintenance of facilities for the rehabilitation and reintegration into the community of people with severe mental illness with the assistance of the assessment and treatment techniques specified in (1) above and such other forms of assistance and support as may be deemed appropriate.
- (3) To support the training of medical practitioners and other professional and ancillary workers working with the Association, in the assessment and treatment techniques specified in (1) above.

Developments in Australia to date

In pursuit of these aims, BBHA was involved from 1998 onwards in negotiations with HRI - PTC and with interested Australian medical practitioners and pathology laboratories to

establish the conditions necessary for the practical implementation of these aims in Australia.

These negotiations finally resulted in BBHA sponsoring a visit to Australia in March 2004 by Dr William Walsh, founder and Scientific Director of HRI - PTC, to train a selected medical practitioner in South-East Queensland in PTC techniques; and in a further visit in April 2005, supported by BBHA, by Dr Walsh and Dr Allen Lewis (Medical Director of PTC) when several more Australian and New Zealand medical practitioners were trained in PTC techniques. A further outreach visit to Australia by Dr Walsh and PTC staff to train additional medical practitioners is planned for early 2006.

Although insufficient time has elapsed for formal follow-up studies to be carried out in Australia, the results achieved so far by the Australian medical practitioner trained in March 2004 have been extremely encouraging and appear in line with the outcomes experienced by Health Research Institute-Pfeiffer Treament Center.

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Health Research Institute - Pfeiffer Treatment Center

Attached for the information of the Committee is an article titled *Complementary Nutritional Treatment of Mental & Behavioural Disorders Comes to Australia* (Attachment A) which outlines the broad background and principles of PTC treatment techniques and results achieved to that time in follow-up studies of representative samples of people from USA and other countries treated by the Pfeiffer Treatment Center. The percentage of patients with major mental disorders who showed significant improvement in these follow-up studies by HRI - PTC are worth quoting again here:

Depression 80% Schizophrenia 75% Bipolar Disorder 65%

More detailed information about the research and treatment programs of Health Research Institute and Pfeiffer Treatment Center are available on the HRI-PTC website www.hriptc.org. Three articles from this website - Biochemical Treatment of Mental Illness and Behavior Disorders (Attachment B), Biochemical Individuality and Nutrition (Attachment C) and Nutrients and Depression (Attachment D) - are attached herewith for ready reference. Detailed commentary by Dr Walsh about various aspects of the treatment of mental illness, autism and behaviour disorders are available at www.alternativementalhealth.com/articles/walsh. This website also contains many articles by other authors about non-pharmaceutical treatment of mental illnesses.

Conclusion

Given the limited effectiveness of present 'mainstream' psychiatric medications and the serious and widespread implications of these limitations for patient, family and community outlined above, any treatment which offers the potential for improvement towards recovery for a significant proportion of people with mental illness warrants serious consideration.

Although the biochemical assessment and nutritional treatment techniques developed by HRI - PTC are not yet widely used for the treatment of mental illness, the results of follow-up studies carried out by HRI - PTC over a number of years indicate that they are potentially capable of making a highly significant contribution to relieving the burden of mental illness on the Australian community.