



Doctors at Dorothea Dix Hospital in Raleigh have achieved a worldwide first in successfully treating severe mental depression with a thyrotropin releasing hormone (TRH), a drug used mostly heretofore in diagnosing pituitary-thyroid disease. Drs. Ian Wilson and Arthur Prange first administered the drug in 1970 and have used it periodically since in clinical tests on volunteer patients. Hesitant to label their findings a breakthrough in the treatment of severe mental depression, they do admit, however, that the drug's quick anti-depressant action warrants further investigation.

New Hope For Mentally Ill

by Clay Williams

Efforts on the part of two research scientists at Dorothea Dix Hospital in Raleigh have given hope to people suffering from the most common of all mental illnesses—schizophrenia.

Can schizophrenic patients be brought back from their psychotic dream world for a period sufficient to initiate rehabilitation procedures? The answer has eluded re-

searchers working with the mental disorder—until now.

Drs. Ian Wilson and Arthur J. Prange gained world-wide attention when they successfully treated patients suffering from severe anxiety and mental depression with Thyrotropin Releasing Hormone (TRH).

Favorable results caused the two scientists to direct their ef-

forts toward schizophrenia—a progressive mental disease that accounts for one-third of all admissions to mental hospitals and about half of the long-term patients, according to Dr. Wilson.

Drs. Wilson and Prange first administered TRH in the treatment of anxiety and depression in 1970 and have used it periodically since in clinical tests.

"Depression is characterized by

influence the secretion of hormones from the thyroid gland, Dr. Wilson explained.

"Previously we were interested in the function of thyroid hormones in the treatment of depression. We had known that the addition of small quantities of thyroid hormone to a standard antidepressant greatly accelerated its antidepressant effect. It was supposed that TRH would have a similar effect," Dr. Wilson said.

"However, on clinical trial at Dix, we discovered that TRH itself had remarkable antidepressant properties. Within an hour after administration of the hormone the patient appeared in a peaceful and tranquil state. Later in the day, there was a remarkable elevation in mood," he said. But, did the three scientists dare hope that TRH would release a person, if only temporarily, from the shadowy world of schizophrenia?

At the time of her admission to Dorothea Dix the confused teenager had grown into a young woman in her mid-twenties. Now, she was totally withdrawn from reality—constantly expressing delusions of persecution and experiencing auditory hallucinations (hearing voices). The voices were always threatening and menacing, according to Dr. Wilson.

Dr. Wilson said the decision to evaluate the effect of TRH in the treatment of schizophrenia was made because investigations showed that adult schizophrenia is often associated with impaired functioning of the thyroid gland in infancy; and many of the symptoms of depression which respond best to TRH are also found in schizophrenia.

After 10 days at Dorothea Dix the young woman was given an injection of TRH. Dr. Wilson said results were fantastic—more exceptional and dramatic in schizophrenia than in depression.

"Almost immediately a response was noted. Her frozen expression dissolved and she started to talk in a lucid and logical manner. Her conversation indicated she knew how abnormal her behavior had been, and was aware of hallucinations, but was no long-

er disturbed by the fact that she had experienced them.

"As the day wore on and the patient's mood rose to a normal level she gave her interpretation of the way her illness started. Whether or not it happened as she described it is questionable. But, it did show that she now had insight, where before she did not even know she was sick," Dr. Wilson said.

Dr. Wilson reported that the dramatic improvement lasted for a period of about five days, after which, she gradually slipped back into her previous state.

"It is difficult to describe the pronounced change in the schizophrenic personality upon administration of TRH. It eclipses anything I've seen in 20 years of practice. In order to appreciate the revelation it would be necessary to have a technical understanding of this insidious disease," Dr. Wilson said.

The researchers consider the breakthrough vital in the treatment of schizophrenia because tranquilizers, the basic treatment for the past 20 years, only modifies symptoms. TRH, on the other hand, brings about a fundamental normalizing change in personality. And, since TRH is a natural substance it is unlikely to cause toxicity to the body system over a period of time.

Although TRH at present gives only temporary relief from schizophrenia, Dr. Wilson said future studies probably will be directed toward giving a series of doses hopefully to alter the pathologic personality for a period of time to allow rehabilitative procedures to be started.

The researchers appear to be aiming ultimately for a way to give the schizophrenic personality a higher level of functioning.

"Without doubt," Dr. Wilson said, "schizophrenia is responsible for a major share of human misery and suffering both to the patients and their relatives. It is also of great socio-economic importance in the loss of productivity from individuals who require constant institutionalization once the illness progresses."