

POSTGRADUATE MEDICINE
4530 West 77th Street
Minneapolis, MN 55435

EDITOR'S MAIL

The Editor welcomes readers' comments, and selected letters are published each month. Letters must be signed and should be sent to Editor's Mail at the address shown. The journal reserves the right to condense letters if necessary for space.

The vitamin C controversy

To the Editor:

In his article in the September issue (page 153) on vitamin C and the common cold, John L. Coulehan, MD, states that Pauling's hypothesis has been tested by several investigators, including himself. I wish to differ with that statement.

Pauling's hypothesis was that very large doses of vitamin C would be effective in aborting colds. None of the studies that Dr Coulehan cites involved, at any point that I can see, doses greater than 4 gm/day. Little of the research on this subject published in US literature involved really large doses of vitamin C.

My own experience on myself and numerous patients is that doses of 3 to 4 gm up to six times a day, for a total daily dosage of 10 to 15 gm, are necessary to obtain relief of cold symptoms. It puzzles me that the studies done to test Pauling's hypothesis have not actually followed his recommendations.

My anecdotal experience suggests that 80% of the time the symptoms of the common cold can be markedly ameliorated by taking truly high doses of vitamin C. The duration of the illness is seldom shortened.

David M. Bee, MD
Glendale, California

To the Editor:

The article "Ascorbic acid and the common cold" by John L. Coulehan, MD (September, page 153), was an interesting survey on the pros and cons of use of vitamin C for the common cold.

After reviewing the article, I don't think it completely closes the door on a beneficial effect, and more work will probably be done. I can't help but comment on one thing mentioned. Dr Coulehan cites the study of Karlowski and co-workers in which most of the volunteers correctly guessed which of the products they were taking (the vitamin C had a tart taste and the placebo did not). Anyone involved with double-blind studies should be concerned as much with the active as with the placebo. They must match identically in appearance and in any other physical attribute, such as taste.

At Vitaminerals Inc, Glendale, California, we had to rerun the initial 25% of a double-blind test on a product some years ago. The active and the placebo used in this study were both in coated tablet form and were identical in appearance and flavor. However, partway through the study we discovered that the placebo inadvertently had been made with a core that, while it tasted the

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