



**College of Intensive Care Medicine
of Australia and New Zealand**

MEDIA RELEASE

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High Dose Intravenous Vitamin C Treatment in Critically Ill Patients in New Zealand

There has recently been media and public interest in the use of high dose intravenous vitamin C treatment in critically ill patients in New Zealand Intensive Care Units.

The scientific evidence for this new treatment has recently been reviewed by the Clinical Practice Committee at the Auckland District Health Board.

This committee reviewed all of the published medical papers available and found that there had been no studies showing a benefit from high dose intravenous vitamin C treatment in critically ill patients with infections such as H1N1 influenza (or 'flu').

Evidence of safety for this treatment is available for healthy volunteers, and patients with cancer or burns, but not for patients who are critically ill with influenza or patients with impaired kidney function.

Evidence of harm from high dose intravenous vitamin C exists. It has caused kidney failure in patients with poor kidney function. This has been so well established in the medical literature that at least one medico-legal case has ensued when such evidence has been ignored.

The Medical Council of New Zealand provides guidance to registered medical practitioners on the subject of Complementary Medicines in its publication a *Statement on Complementary and Alternative Medicine (2005)*. It also provides general guidance in its publication *Good Medical Practice. A Guide to Doctors (2008)*, advice on prescribing in *Good Prescribing Practice (2010)* and advice on who can provide consent (and for what) on behalf of an unconscious patient in *Information and Consent (2002)*. These guidelines state that a registered medical practitioner should only prescribe a therapy if he/she is satisfied it is "in the patient's best interests", even in the face of a competent patient demanding the therapy.

Taking all of the information above into account, The College of Intensive Care Medicine and the Australian and New Zealand Intensive Care Society do not

currently support the use of high dose intravenous vitamin C treatment in any critically ill patient in New Zealand, except as part of a well conducted, ethics committee approved trial.

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