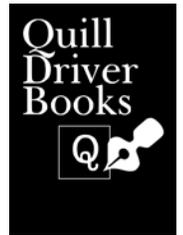


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The underground classic that sparked a patients' rebellion and saved lives, *Could It Be B12?*, is revised, updated and expanded in a second edition

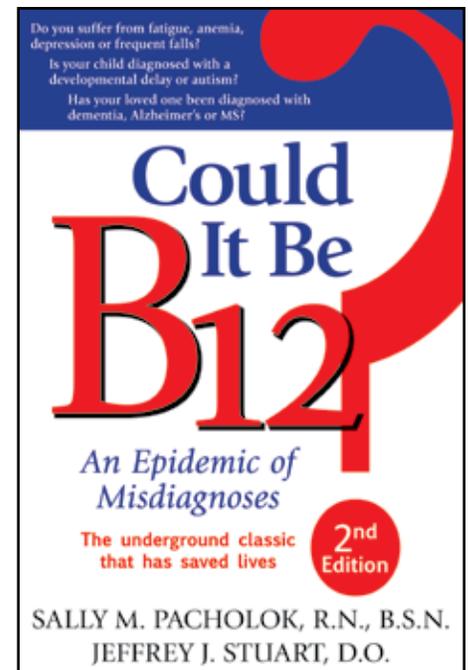
“The definitive book on B12 deficiency, diagnosis and treatment.” —Jeffrey Dach, M.D.

“I can honestly say this book saved my life.” —Reader Review, Amazon.com

Vitamin B12 deficiency is a public health crisis that even most doctors don't know exists. Millions suffer from it, but few are diagnosed. Left untreated, it causes permanent, crippling nerve damage—and too many patients don't get treatment until it's too late.

Only one book has ever revealed the full extent of this silent epidemic and taken a principled stand against the medical establishment's indifference. That book became an underground classic that ordinary patients passed to one another and discussed among themselves, and grew into a movement that every year draws more and more patients to take control of their own diagnoses and find the truth. And now, in a second edition that is revised, updated and expanded with the latest scientific findings, the National Indie Award-winning *Could It Be B12? An Epidemic of Misdiagnoses* (Quill Driver Books, March 2011) by Sally M. Pacholok, R.N., B.S.N., and Jeffrey J. Stuart, D.O., remains the most authoritative guide to vitamin B12 deficiency.

Six years after its original publication, *Could It Be B12?* continues to generate heated debate. Doctors are often uncomfortable about its claims—but no physician who has read the book can deny its evidence. And no book is more cited by ordinary people who have personally suffered from this disorder. On the Internet, in doctors' waiting rooms, in private conversation, wherever people talk about mysterious ailments their doctors can't seem to effectively treat—pain and tingling in the limbs, unexplained fatigue, dementia or mental illness—people ask, “Have you read *Could It Be B12?*”



HELPING PATIENTS TAKE CONTROL OF THEIR HEALTH

Could It Be B12? uncovers how standard medical practice has for decades misdiagnosed vitamin B12 deficiency, condemning countless patients to chronic poor health and life-altering permanent injury. Few patients are tested for B12 deficiency, even though it's a common disorder that can be easily detected with a simple (but rarely ordered) test and inexpensively treated. The manifold symptoms of B12 deficiency can look exactly like a myriad of different diseases, misleading doctors to misdiagnosis. B12 deficiency can mimic dementia, multiple sclerosis, early Parkinson's disease, diabetic neuropathy or chronic fatigue syndrome. It can cause depression and mental illness, infertility in men and women, or developmental disabilities in children.

Written in a highly accessible style that makes complex medical information clear and comprehensible to ordinary patients and their families, *Could It Be B12?* demonstrates how B12 deficiency is often the underlying cause of many seemingly hopeless problems. With extensive comparisons of treatment options, Pacholok and Stuart prove that early detection and treatment of B12 deficiency can save lives at a cost that's literally **10 cents a day**—and save billions of scarce health care dollars nationwide.

A CALL TO FIGHT THE MEDICAL ESTABLISHMENT AND TAKE ACTION

More than just a medical guide, *Could It Be B12?* is a call to action. Written by passionate advocates who believe firmly in patients' rights to needed treatment, *Could It Be B12?* gives ordinary patients the knowledge and confidence to fight the ignorance and rigidity of the medical establishment and take control of their own treatment. *Could It Be B12?* gives readers vital information and strategies to learn if they or their loved ones are suffering from B12 deficiency and how to work with health care professionals to get the treatment they need.

Could It Be B12? also presents a stirring message against the medical profession's indifference to the epidemic levels of crippling B12 deficiency and demands worldwide social action to raise awareness and win the fight against this easily prevented disorder that so needlessly ruins millions of lives.

Thoroughly researched, clearly written and filled with a generous anger against needless suffering, the second edition of *Could It Be B12?* is a book for the heart, head and pocketbook—a worthy update to a modern classic that will continue to serve as a wake-up call to the health care community and the public.

Book Details:

Title: *Could It Be B12? An Epidemic of Misdiagnoses*, Second Edition

Author: Sally M. Pacholok, R.N., B.S.N., and Jeffrey J. Stuart, D.O.

Publisher: Quill Driver Books, an imprint of Linden Publishing

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About Sally M. Pacholok

Co-Author of *Could It Be B12? An Epidemic of Misdiagnoses*



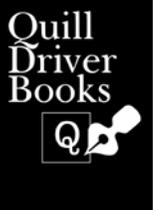
Sally Pacholok, R.N., B.S.N., an emergency room nurse with 24 years of experience, received her bachelor's degree in nursing from Wayne State University in Detroit, Mich. Prior to entering the field of nursing, she received an Associate's Degree of Applied Science with magna cum laude honors. She was also an Advanced Emergency Medical Technician (A-EMT), and worked as a paramedic prior to and during nursing school. She has worked in health care for a total of 32 years, and has cared for thousands of patients. In addition, she is an Advanced Cardiac Life Support (ACLS) Provider, and has assisted instructors at a local community college in training paramedics in ACLS. She is a Trauma Nursing Core Course (TNCC) Provider, an Emergency Nurse Pediatric Course (ENPC)

Provider and a member of the Emergency Nurses Association (ENA).

In 1985, Pacholok diagnosed herself with vitamin B12 deficiency, after her doctors had failed to identify her condition. As a result, she is passionate about the need to educate the public about the dangerous consequences of this hidden and all-too-common disease.

In 2009, Pacholok and her co-author, Jeffrey J. Stuart, started **B12 Awareness**, an organization to educate the health-care community and the public to the dangers of B12 deficiency. B12 Awareness has declared the last week in September to be **B12 Awareness Week** and are working to get legislation passed to officially recognize B12 Awareness Week annually. Visit B12 Awareness on the Web at **B12Awareness.org**.

Pacholok is a passionate crusader in the cause of educating the public, health-care professionals and health-care policy leaders about vitamin B12 deficiency and treatment. Says Pacholok, "We cannot rest until this disorder gets the attention it deserves and we stop needless injury, suffering and poor outcomes. The only way to solve this epidemic is to educate others to what is going on behind closed doors. There is a simple solution: Education, Awareness, Advocacy, Responsibility and Prevention."



For more information on *Could It Be B12? An Epidemic of Misdiagnoses* (Quill Driver Books, March 2011) or to arrange an interview with authors **Sally M. Pacholok** and **Jeffrey J. Stuart**, please contact Jaguar Bennett at Quill Driver Books, (800) 345-4447, Publicity@QuillDriverBooks.com

About Dr. Jeffrey J. Stuart

Co-Author of *Could It Be B12? An Epidemic of Misdiagnoses*



Jeffrey J. Stuart, D.O., is a board-certified emergency medicine physician who has practiced for 18 years. Stuart is also certified in Advanced Trauma Life Support, Advanced Cardiac Life Support (ACLS), Advanced Pediatric Life Support and Neonatal Resuscitation. Stuart received his Doctor of Osteopathy degree from the Chicago College of Osteopathic Medicine. His training includes field amputation and hazardous materials decontamination, and he has also participated in training sessions with the Detroit Metropolitan Airport SWAT team. Dr. Stuart participated in visual brain research at the National Institute of Mental Health in Bethesda, Maryland, in 1987, and was involved in cholesterol metabolism research at the Rockefeller University Hospital in New York City in 1985. He is a member of the American Osteopathic Association, the American College of Osteopathic Emergency Physicians, the Macomb County Osteopathic Medical Association and the Michigan Osteopathic Association.

Stuart joined Pacholok to promote public awareness of B12 deficiency after Pacholok correctly diagnosed his mother's B12 deficiency that had been misdiagnosed by two board-certified neurologists. For over 10 years, Stuart has tested all of his patients for B12 deficiency when they present with appropriate signs, symptoms or risk factors, and as a result has diagnosed hundreds of patients with B12 deficiency that would have otherwise be undetected. Stuart notes that such regular testing for B12 deficiency is not the current standard of care in the United States, and that potentially millions of cases of B12 deficiency are missed every year.

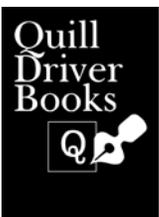
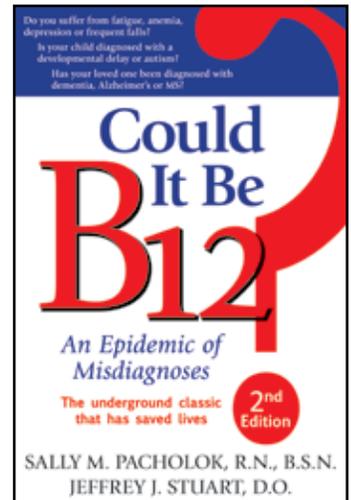


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What readers, patients and doctors say about *Could It Be B12? An Epidemic of Misdiagnoses*

Excerpted from the 67 FIVE-STAR reader reviews of *Could It Be B12?* on Amazon.com

- “I can say in all honesty that this book saved my life. No, really ... it really, really did. After four and a half years of expensive heart tests and taking doctor-prescribed cardio drugs, I was getting progressively weaker and weaker. My life had become unbearable ... until I came across this most excellent and wonderful book. Please read this book. It made all the difference in my life.”
- [When diagnosed with pernicious anemia], “the first thing I did was hit the Internet to learn more about this condition that was totally unknown to me. I found Sally Pacholok’s book. I cannot express the relief this book provided. It explained the gravity of the disease, described my classic symptoms, the possible causes, treatment and most importantly the hope for recovery. This is a must-read if you’re B12 deficient.”
- “You could save a life by reading this book. It’s too important not to read.”
- “This book saved my son. *Could It Be B12?* saved my son from a future of mental retardation and a sub-par life. We caught Jack’s B12 deficiency in its early stages, thanks to this book. Unfortunately, because many of the horrific side effects of a B12 deficiency hadn’t yet completely manifested, we got dismissed by many doctors.”
- “If you have been diagnosed with B12 deficiency, I am so glad that you found this book. It is a valuable source of information, perfectly written for the laymen. I have already given copies to my doctors ... it is a start.”
- “B12 was a MIRACLE CURE for my sister’s depression. The best thing you can do is to order an extra copy of this book and just give it to your doctor ... he will appreciate the information because there aren’t any other authoritative books on this subject.”
- “Many puzzling medical cases could have been solved with careful screening for B12 deficiency. As a physician, I am ashamed to admit that we’ve overlooked B12 problems or just dismissed the possibility that something so simple could have such devastating consequences. This book should be a staple on the shelves of all medical libraries and offices, as it reminds us to start simple when trying to make a diagnosis.”
- “A fantastic treatise on a much overlooked medical problem! As a third-year medical student, I was largely unaware of the prevalence of B12 deficiency and its devastating repercussions. This book, a combination of anecdotal evidence and solid research, provides a strong case for the importance of B12 testing and B12 treatment.”

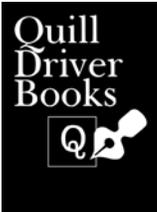
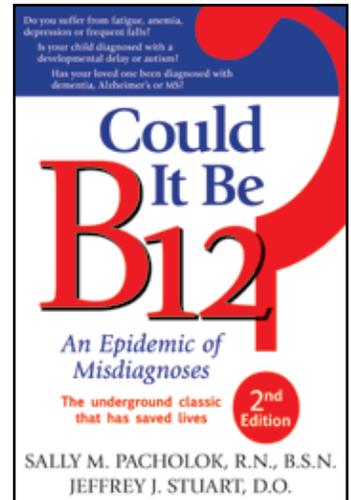


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More reader reactions to *Could It Be B12? An Epidemic of Misdiagnoses*

Excerpted from the 67 FIVE-STAR reader reviews of *Could It Be B12?* on Amazon.com

- “If you are looking for a book that you could bring into your doctor for their education (or for your own survival!), this is the one. It is an absolute horror that this illness goes undetected for so long in so many people. Protect yourself and your loved ones and have this book on hand always. This is the best gift you could give anyone. It saved me in ways I don’t even want to think about.”
- “I can’t express how grateful I am for this book! Saying thanks isn’t enough. I was suffering from debilitating fatigue and neurological symptoms for years and after seeing 20 doctors of all kinds, no one could find out WHY. Then I saw this book at the library and thought, could it be? That day changed my life.”
- “I have referred this book to a number of friends having the same symptoms and frustrations. I praise God for saving my life through the persistent labor of these two medically trained authors.”
- “The best book to read if you suspect that you have a B12 deficiency. I highly recommend it for everyone and it makes a great gift for grandparents.”
- “This book contains critical information that could change the lives of many people. Anyone with any sort of unexplained health problems, from Alzheimer’s to leg pain to autism, must read this. I also wish every doctor would read it and become more aware of the prevalence of B12 deficiency. After reading it at the library, I bought a copy for myself and one for my doctor.”
- “This is an excellent book—clear, easy to read, well documented, persuasive, and sensible. It is important that people take charge of their own health, and this book helps us laymen help ourselves.”
- “EVERY medical practitioner needs to read this book. I have recommended the book to more than thirty people thus far and will continue to do so to others. I am purchasing copies for each of my children as well as for the staff MD in this respiratory rehab unit.”
- “Not long ago I was suffering from occasional memory loss, tremors, and was having difficulty with thinking clearly. [After B12 treatment], I have recovered between 85 to 90 percent. I urge anyone who has these symptoms to read this book. It could change your life or someone you love.”
- “You’ll never know what it’s like to feel good until you make some changes in your life and read *Could It Be B12?* This book has changed my life.”



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Doctors and other medical professionals praise *Could It Be B12? An Epidemic of Misdiagnoses*

“This is the definitive book on B12 deficiency, diagnosis and treatment for the lay reader and for the interested physician. As a result of reading this book, I now routinely test serum B12 and Urinary MMA on ALL patients, and have been surprised to find many symptomatic B12 deficient patients completely missed by the medical system.”

—**Jeffrey Dach, M.D.**

“It’s been said that nothing is so blind as the eye that will not to see. As a practicing physician I can only hope that malpractice attorneys don’t read this book.”

—**Richard Nimbach, D.O.**

“Sally Pacholok and Jeffrey Stuart are to be congratulated for calling attention to this common disorder that affects a significant proportion of the population, particularly among the elderly. The number of conditions and illnesses that can be attributed to deficiency of vitamin B12 is impressive. It is often underdiagnosed and undertreated by the medical profession. I recommend this book to professionals and patients alike who are interested in finding the underlying cause and cure of many common diseases and conditions related to deficiency of vitamin B12.”

—**Kilmer McCully, M.D.**, author of *The Homocysteine Revolution* and *The Heart Revolution* and winner of the 1998 Linus Pauling Functional Medicine Award

“I defy you to read this book then not get yourself or a loved one tested for B12 deficiency.”

—**Eric Norman, Ph. D.**, developer of the UMMA test for B12 deficiency and founder of the first commercial laboratory to provide UMMA testing

“I have gained a distinct sense that we physicians, neurologists and psychiatrists have been miserly with our B12 diagnosis and treatments.”

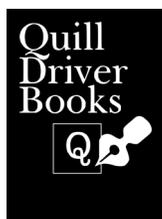
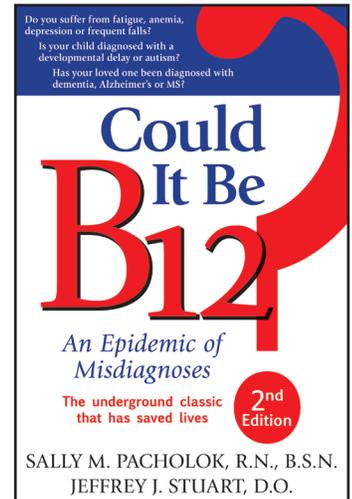
—**John Dommissie, M.D.**

“*Could It Be B12?* is both powerful and revealing. It serves as a reminder that often times a simple precaution and nutrition awareness will save lives and a ton of money. Nearly one of every five U.S. dollars spent, or about 19.6 percent of the gross domestic product, will go toward health care by 2020. This book will help to heighten the urgency to practice preventative care on a daily basis.”

— **Charles H. Liu R.Ph.**, clinical pharmacist, nutrition and preventive care specialist

“The authors have committed themselves to this noble cause. They have made this book an invaluable resource for medical students, practicing physicians and other health care professionals. *Could It Be B12?* speaks only the truth, and in doing so, it ‘gives life back’ to those with B12 deficiency who were well on their way to losing their lives altogether.”

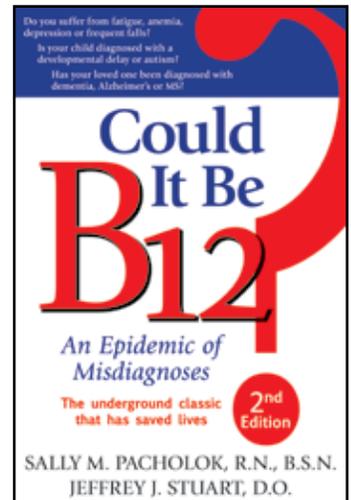
—**Joseph Chandy (Kayalackakom), M.D.**, recipient of the Glory of India Award



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What do these people have in common?

- A 40-year old reporter loses his ability to write, falls when he attempts to walk, and becomes so confused that his wife suspects early-onset Alzheimer's ...
- A beautiful, normal eight-month-old baby gradually loses her speech, stops responding to her parents and eventually can't even sit up by herself ...
- A 20-year-old woman becomes severely depressed and attempts to kill herself ...
- A ballet dancer undergoes cosmetic surgery and ends up nearly unable to walk ...
- A 69-year-old woman develops balance problems, falls and fractures her hip ...
- A 38-year-old woman condemned to life in a wheelchair after gastric bypass surgery ...
- An 86-year-old man becomes delusional and kills his wife ...
- A 54-year-old woman experiences paranoid delusions and violent outbursts, coupled with symptoms her doctor diagnoses as multiple sclerosis ...
- A 4-year-old boy is diagnosed with autism ...
- A 73-year-old whose doctors attribute his repeated falls to old age or possible "mini-strokes" ...
- A young woman unable to conceive ...
- A grandfather transforms, in less than a year, from a healthy jogger to a depressed, confused man diagnosed with senile dementia.



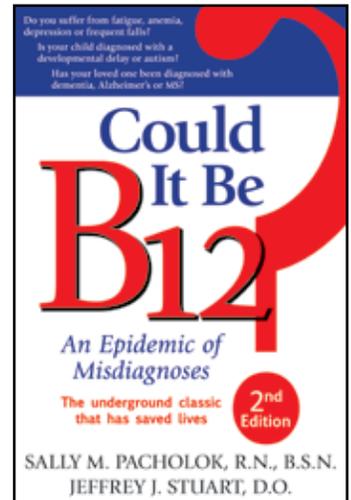
Here's what these patients don't have in common: a correct diagnosis. Instead they have a plethora of incorrect, often hopeless diagnoses: developmental disability, autism, multiple sclerosis, psychosis, senile dementia, transient ischemic attacks, depression or diabetic neuropathy. But, in reality, they all suffer from the same medical condition: vitamin B12 deficiency.



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Why Is B12 Deficiency So Frequently Misdiagnosed?

- Most doctors and health care providers don't know the facts about B12 deficiency.
- Most patients who have B12 deficiency symptoms or are at risk for B12 deficiency never get tested.
- The current standard for "normal" serum B12 levels is actually far too low.
- Doctors frequently don't diagnose B12 deficiency until the patient has enlarged red blood cells and/or macrocytic anemia—which are often late signs of advanced B12 deficiency.
- People over 65 are frequently misdiagnosed because doctors blame their B12 deficiency symptoms on preexisting diseases and comorbid conditions.
- B12 screening is not included for:
 - Older adults who fall or are at risk for falling.
 - Older adults who have cognitive changes or dementia.
 - Patients presenting depression or mental illness.
 - Patients who are pregnant or breastfeeding.



More on B12 Deficiency

B12 deficiency causes symptoms such as nerve pain or tingling, dementia, mental illness, tremor and difficulty walking. It is commonly misdiagnosed as Alzheimer's disease, depression, diabetic neuropathy, vertigo and mini-strokes. Major medical journals report that vitamin B12 deficiency occurs in up to 15 percent of the elderly—approximately 5.9 million seniors age 65 and older.. Other studies report the prevalence to be 15 percent to 25 percent.

What's more, these numbers only relate to persons 65 and older. They don't include the vast numbers of Americans under the age of 65—some of them infants and children, and millions of them young and middle-aged adults—who become B12 deficient for a variety of reasons. Treating B12 deficiency costs only a few dollars a month—**just 10 cents a day**—and symptoms are often completely reversible if people receive early treatment. If diagnosed late, symptoms such as dementia and nerve injury typically cannot be reversed.

B12 deficiency can mimic multiple sclerosis, chronic fatigue syndrome and postpartum depression/psychosis. It can make men or women infertile and cause developmental disabilities or autistic-like symptoms in children. Other groups of people at high risk for B12 deficiency include vegans, vegetarians, alcoholics and people with celiac disease, Crohn's disease, gastric bypass, anemia, autoimmune diseases and AIDS. The use of certain drugs such as proton pump inhibitors, metformin, H-2 blockers and nitrous oxide can also cause B12 deficiency.



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