

High-Dose B6

High dose B6 (900-1200mg/day, also called pyridoxine) can relieve tremor and restlessness due to medications. The dose for restlessness is 600mg twice a day, for tremor it ranges from 900-1,200mg daily and can be taken at once or split in two doses. It may be difficult to find pills that have more than 100mg in them, though there are no known health risks to the higher dose. Examples of products which contain higher amounts include (from amazon.com):

- > Source Naturals Vitamin B-6 500mg Timed Release
- > Solgar Vitamin B6 250 mg Vegetable Capsules 250mg



A brand called "Neurobion Forte" has also been used to improve tremor (taken once/day; it contains B1, B6 and B12): <http://www.newhealthguide.org/Neurobion-Forte.html>

The dose can be divided twice daily (e.g. 600mg in morning, 600mg at night).

Other benefits: small studies show benefits for B6 (80-500mg/day) in premenstrual syndrome (PMS).

-Updated 6/4/2015 by Chris Aiken, MD

Risks:

Side effects are rare but can include nausea, headache and tiredness. Rarely, seizures and neuropathy (nerve-pain or difficulty walking) has been reported after high-dose vitamin B6 (these problems improve off the vitamin).

Research Studies:

Int J Psychiatry Med. 2002;32(1):103-8. Lithium-induced tremor treated with vitamin B6: a preliminary case series. Miodownik C1, Witztum E, Lerner V.

The occurrence of tremor in patients receiving lithium is well known, but the management of this side effect is a significant problem both for patients and physicians. Although some reports have suggested that beta-blockers may be useful in treating lithium-induced tremor (LT), these agents have different side effects which limit the possibility of their use. Vitamin B6 has been reported to be effective in treatment of patients suffering from different kinds of neuroleptic-induced movement disorders including parkinsonism and tardive dyskinesia.

METHODS: This report presents the results of a preliminary four-week open-label clinical trial of five patients who suffered from LT and who were treated with vitamin B6 (900-1200 mg/d). The severity of tremor was assessed using the tremor subscale from the Simpson-Angus Scale (SAS) and Subjective Clinical Improvement Impression scale (SCII).

RESULTS: After the addition of vitamin B6 to their treatment, according to the SAS scores four patients showed an impressive improvement until total disappearance of tremor. The subjective scale, on which the patients' scored their impression of clinical improvement, showed similar results. None of the patients suffered from any side effects attributable to vitamin B6.

CONCLUSIONS: The results suggest that vitamin B6 may alleviate LT, double-blind controlled trials are needed to establish this effect.

A second study on restlessness was published in the Journal of Clinical Psychiatry in 2004 (dose 600mg twice per day).