



Figure 14. Pathway Diagram: A simplified overview of mitochondrial NAD⁺: NADH deficiency.
ME/CFS: Correcting Chronic Mitochondrial Dysfunction

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Description

Acetaldehyde, glycolysis, TCA cycle flux and other mitochondrial matrix NADH generators (not shown - see Figure 17) decrease the mitochondrial NAD⁺ pool and increase the NADH pool.

Complex I (NADH Dehydrogenase) normally balances NAD⁺:NADH redox, however is inhibited by reactive oxygen and nitrogen species, generated by mitochondrial activity and additionally by uncoupled NOS and NOX activity - promoted by interferon signalling cascades and acetaldehyde directly.

As Mitochondrial Complex I is progressively inhibited, proportional NADH pool elevation inhibits TCA cycle substrate pathways, whilst GDH + NADPT activity is increased, increasing glutamate and NADPH, thereby promoting regulatory glutathione synthesis and peroxidase, reductase activity - *unless* inhibited by low glycine and/or cysteine. Also from low Mg-ATP, Se, FAD, total NADP:NADPH pool size and/or excess heavy metals, where elevated pyroglutamate (pGlu) may also be observed.

Methylene blue concentrates in the mitochondrial matrix, providing a narrow therapeutic window for creating a parallel electron pathway to Cytochrome c and NAD⁺ redox support.