

Depression

When depression is externally caused, any type of extremely distressing situation may trigger it. Simply being exposed to depressed people can even be an influence, since children learn by imitation. While these are normal reactions, the condition can perpetuate itself when it affects the internal workings of the body, preventing the person from overcoming his or her pain. When it persists, the condition becomes clinical depression.

There are a number of nutritional factors that can affect a person's mood, contributing to depression. Vitamin deficiencies can play a part. The B vitamins are clearly related to the healthy maintenance of the brain. The level of folic acid, in particular, bears an inverse correlation to the severity of depression. The mineral magnesium is also a substance found to be deficient in depressed people. Large amounts of fluoride, on the other hand, may lead to the onset of depression. Once depressed, the person might lose interest in exercising and eating healthy- or eating at all.

Further, the person may be under a great deal of stress, which not only perpetuates poor eating habits but causes the more rapid loss of important nutrients. Chemical imbalances in the brain can also be either the cause or effect of depression. Dopamine is the chemical that produces anxiety, stress, nervousness, and aggression. When the level of dopamine is elevated, a person may develop feelings of insecurity, paranoia and fear. Serotonin is another important chemical in the brain that can affect a person's mental well being. Individuals with low serotonin levels are usually controlled personalities who display mood swings and some sort of compulsion, such as alcoholism, overeating, or being a workaholic, perfectionist, or procrastinator. A serotonin imbalance can produce not only depression but internal anger.

Depression can also be linked to other physical factors, such as hypothyroidism and food or environmental allergies.

Depression is manifested both physically and emotionally. The classic physical signs of depression are headaches, fatigue, digestive problems, hyperactivity, sleeping disorders, loss of concentration, and distorted eating patterns-either the urge to consistently overeat or loss of appetite. A significant change in weight is often evident.

The emotional side of depression can include excessive crying, pessimism, a sense of worthlessness, guilt, or self-pity, loss of self-esteem, loss of enjoyment from normally pleasurable activities, decrease in sex drive, and suicidal tendencies. It is important to note that anyone who talks of suicide should be taken seriously, and professional help should be provided.

While many of the physical and emotional symptoms of depression are things that can be a normal part of everyday life, when several of these symptoms are experienced for any prolonged length of time, they may be an indication of depression, and again, professional help should be sought.

Major depression is characterized by:

- 1) one or more major depressive episodes, depending on whether the depression is a single episode or recurrent
- 2) no evidence of manic episode or an unequivocal hypomanic episode

The diagnostic criteria for a major depressive episode are as follows:

1. At least five of the following symptoms have been present during the same 2 weeks, representing a change from previous functioning. At least one of these must be depressed mood or loss of interest in pleasure:
 - Depressed mood most of the day or nearly every day, either reported by the patient or observed by others.
 - Loss of interest or pleasure in almost all activities.
 - Significant weight loss without dieting, or decreased appetite nearly every day.
 - Insomnia or hypersomnia.
 - Psychomotor agitation or retardation.
 - Loss of energy or fatigue.
 - Feelings of worthlessness, self-reproach, or guilt.
 - Impaired ability to think clearly, concentrate, or make decisions.
 - Suicidal ideation or recurrent thoughts of death.
2. Depression is not due to another condition, such as bereavement, an organic factor, or an underlying schizophrenic disorder.
3. No psychotic symptoms during periods of normal mood.

Personality and Psychodynamic Factors

The literature on the psychodynamics of depression is vast. No single personality trait or groups of traits that predisposes one to depression has been identified, nor has a single psychological mechanism by which depression comes about been elucidated.

Many psychodynamic theorists note that those prone to depression are characterized by low self-esteem and a high degree of self-criticism. Some conceptualize depression as anger turned inward. Others write about instability and insecurity in early mother-child interactions laying the groundwork for later sensitivity to separations from loved ones and a resulting vulnerability to depression when faced with separation or loss.

Pharmaceutical Medications

Tricyclic antidepressants (TCAs). These antidepressants are the most widely used medication for unipolar depression. Their actions seem to be related to their capacity to potentiate the CNS actions of norepinephrine and serotonin. TCAs are used in the treatment of acute depressive episodes, in the alleviation of more chronic depressive syndromes, and maintenance therapy to prevent the reoccurrence of depressive

episodes. Between 50% and 85% of patients with unipolar depression improve when treated with TCAs.

Monoamine oxidase inhibitors prevent the formation of monoamine oxidase, an enzyme that breaks down amines in the brain and intestinal tract, thereby blocking the metabolism of norepinephrine and serotonin in the CNS. Their effectiveness is attributed to normalizing the amount of amines in the brain.

There are now other related drugs called selective serotonin re-uptake inhibitors (SSRIs),

That has a wide variety of side-effects (nausea, nervousness, fatigue, insomnia, dizziness, panic attacks, aggressive behavior and suicidal tendencies).

The SSRIs are better tolerated and it is much harder to overdose on them than the older drugs. Keep in mind that it takes three weeks for effectiveness to take place.

Treatment

A. Dietary Recommendations

Food and environmental allergens may cause or trigger depressive states.

- Eat a diet that includes plenty of raw fruits and vegetables, with soybeans and soy products, brown rice, millet and legumes.
- If you are nervous and wish to become more relaxed, consume more complex carbohydrates. For increased alertness, eat protein meats containing essential fatty acids. Salmon and white fish are good choices. If you need your spirits lifted, you will benefit from eating foods like turkey and salmon, which are high in tryptophan and protein. Deficiencies in tryptophan can cause serotonin deficiencies as well as melatonin deficiencies.
- Omit wheat from the diet as gluten has been linked to depressive disorders.
- Avoid diet sodas and other products that contain the artificial sweetener Aspartame. These contain phenylalanine which converts into phenol and therefore causes headaches, insomnia and depression.
- Avoid food high in saturated fats; the consumption of meat or fried food, such as hamburgers and French fries leads to sluggishness, slow thinking and fatigue.
- Avoid all forms of sugar as the body reacts quickly to simple carbohydrates and causes an energy peak followed by a severe crash, fatigue and depression.
- Avoid alcohol, caffeine and processed foods.
- Keep your mind active and get plenty of rest and regular exercise. Exercising releases endorphins and enkephalin which cause an increase in mood.

- Avoid stressful situations.
- Learn to recognize and then to reroute negative thinking patterns. Working with a qualified professional to change ingrained habits can be rewarding. Keeping a daily log can help you to recognize distracted thought and develop a more positive way of thinking.
- Check for hypothyroidism which may be a factor in some aspects of the depressive state, leading to general sluggishness, increase in neuronal transport time and depression.
- Try using color to alleviate depression: blue has a relaxing, calming effect, lowers high blood pressure, lowers heart rate and pulse rate, and lowers respiration. People who are depressed or anxious can benefit from green surroundings which are calming to the mind. When you feel depressed try sitting on a hillside or by a green pasture and focus on the body part you want to heal.
- Music can have a powerful effect on mood and may be useful in alleviating depression. Music reduces anxiety and lessens irritability. Environmental sounds such as a running stream, a waterfall, or bird songs have been used by therapist and psychologists as a means of treatment. These sounds, it appears, can do much to relieve stress and lift depression. Soft music and soothing sounds used alone or with relaxation techniques can effectively alleviate stress, relax muscles and evoke a positive mood. Researchers suggest that these sounds promote the production of endorphins; the body's own painkillers and can thereby also keep in the control of pain.

B. Supplements

L-tyrosine-250-500mg per day on an empty stomach

- Alleviates stress by increasing the levels of adrenalin and dopamine

Zinc- 50mg per day

- Zinc is found to be deficient in depressed people

Selenium-250mcg per day

- Has been shown to elevate mood and also to decrease anxiety.

B-complex-50-100mg three times per day

- Essential for the maintenance of nerve cells.

Calcium/Magnesium-1500-2000mg per day

- These are essential minerals for the nervous system which have a calming effect on anxiety.

5-HTP-100-300mg per day

- Increases the levels of serotonin in the body and alleviates depression and insomnia.

Vitamin C- to bowel tolerance

- Aids to prevent depression and is a co-factor for neurotransmitter synthesis.

C. Other Factors to Consider

- Smoking impairs blood flow to the head via its vasoconstrictive action and displaces CO₂ in the erythrocytes. It also uses up vitamin C and B6.
- Pharmacological causes of depression may include steroid, contraceptive, reserpine, amphetamine withdrawal, cimetidine, indomethacine, phenothiazine, thallium, mercury, cycloserine, vincristine, and vinblastine.
- Infectious causes of depression may include hypothyroidism, hyperparathyroidism, Cushing's syndrome and Addison's disease.
- Collagen disease causes depression and may include fibromyalgia, SLE, and RA.
- Neurological causes of depression may include MS, Parkinson's disease, head trauma, seizures, cerebral tumors, stroke and early dementia.
- Chronic fatigue syndrome may also be a cause of depression.

D. Essential Oils for Depression

Rose	Tangerine	Geranium	Vitiver
Ylang Ylang	Bergamot	Jasmine	Lavender
Orange	Clary Sage	Sandlewood	Melissa
Verbena			

E. Herbal Approach

***Hypericum perforatum*-St. John's wort**

St. John's wort acts pharmacologically to alter brain chemistry in ways similar to anti-depressant drugs.

"Hypericin, hyperforin, and other components (flavonoids) of the plant have been shown to inhibit the breakdown of several neurotransmitters within the brain that maintain normal mood and emotional stability.

It appears to improve the signal produced by serotonin after it binds to its receptor sites on the brain cell.

***Piper methysticum*- Kava kava**

Kava kava helps in the treatment of anxiety and depression. Kavalactones are the primary active components.

They exhibit sedative, analgesic, anticonvulsant and muscle relaxant effects. Most sedative drugs work by binding to receptor sites (GABA-the brain's natural calming agent) in the brain to promote sedation. Kava lactones do not appear to bind to these receptors but somehow magnify the area near the receptor site in a way that enhances GABA binding and is therefore not addictive.

***Ginkgo biloba*-Maidenhair tree**

Ginkgo increases the blood flow and oxygen supply to the brain. Ginkgo is therefore useful in the prevention and treatment of strokes. It can be used with standard anti-depressants and it may enhance their effectiveness.

Essential Health Natural Wellness Clinic Information Series
By Cobi Slater, DNM, CHT

Ginkgo biloba standardized extract contains 24% Ginkgo flavone glycoside at a dose of 40mg three times per day.

It should be taken consistently for at least 12 weeks in order to determine the effectiveness. Most people benefit within 2-3 weeks.

E. Homeopathic Remedies

The following are the most common homeopathic treatments for acute, more temporary causes of depression. In cases of chronic depression, homeopathic remedies, while still beneficial, will need to be utilized in conjunction with other therapies.

Aurum Metallicum- This remedy is prescribed by homeopaths to alleviate feelings of worthlessness, low self-esteem, and despair. It can help provide hope for a person with reactive depression, and is said to be particularly beneficial to those generally hard-working individuals who have had life-altering events that they feel suggests failure on their part. This type of person is usually idealistic and goal-orientated.

Ignatia- In instances of depression caused by an event that produces profound sadness or grief, such as the loss of a loved one, and in which those feelings of deep sorrow or obvious, *ignatia* is prescribed.

Natrum Muriaticum- This treatment, like *ignatia*, is also used when depression is caused by an event that generates profound bereavement and distress. However, the difference is that this one is used for those individuals who cannot show their feelings. This is for people who appear strong and controlled and suffer in silence.

Sepia- This remedy is used mainly for women going through menopause. While depression associated with menopause often appears and disappears at random, or for no apparent reason, the depression the woman feels is quite real and intense. She may feel disconnected from everything that once gave her pleasure, including family and friends. This type of depression can be characterized by irritability and indifference to others.