

What to do about depression

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There are several kinds of depression, and also anxiety and fear and apprehension which often come along with them.

The only one size fits all remedy is **omega 3 oils**. Good for all of it, takes several weeks to help.

1). Anxiety, fear, apprehension

- = **Low GABA** problems.

2). Obsessive, compulsive, thinking about bad things, can't let things go, dream of being run over on the freeway and things like that, think of hurting yourself, lots of psychic distress and suffering

- = **Low serotonin** problems.

3). Hopeless helpless crying depression

- = **Problems in the limbic system**.

4). No motivation, no energy, don't enjoy anything, sit around like a bump on a log, unaroused, unaware, but mood OK (you don't feel DEPRESSED, you just don't feel much at all)

- = **Low histamine** depression.

5). Poor mood, attention deficit, emotionally flat, not much drive or focus

- = **Catecholamine** depression.

1 & 2). If you have problems with both **GABA** and **serotonin** being too low, you most likely have **adrenal problems** causing this.

In this case you start with adrenal support, like **adrenal cortex** and **licorice**.

For adults, **DHEA**, **7 keto DHEA** and **pregnenolone** may help (though these should never be used in children, and only in adolescents if they have mainstream endocrinologist documented adrenal insufficiency, for which they are taking replacement doses of hydrocortisone). Also, hydrocortisone itself in less than replacement doses may sometimes be needed, but this is rarely appropriate in children or adolescents, and must be used sensibly and with care by anyone who needs it. Once you have some adrenal support regimen in place, then decide what residual depressive symptoms need to be addressed as discussed below.

Magnesium and **taurine** often help with spacey, almost disoriented anxiety and distress. These usually go along with a high heart rate and not sweating much. Take them several times a day for best effect, magnesium in forms OTHER than oxide or carbonate or hydroxide, if you use too much it is laxative. Most people tolerate somewhere between:

100-200 mg per serving of **magnesium**.

500-1000 mg of **taurine** at a time is about right.

1). For **GABA problems**, try **GABA**, (it doesn't work for everyone though and has to be taken several times a day), **theanine**, eating protein at every meal, adrenal support and if that isn't enough ask your doctor about **anxiolytics**. If the doc is reasonable they'll offer you **BuSpar** and a **valium** like drug (a **benzodiazepine**) for a month or two until the **BuSpar** starts working. **BuSpar** does not always work, you have to see if it is good for you or not. **Ativan** and **Xanax** seem to be fairly well tolerated. If you need round the clock coverage then **Klonopin** is a good choice - also this is good if you have MS or mood instability.

Some over the counter anxiolytics are **Kava Kava** and **chamomile**. Do note that all anxiolytics are also sedatives.

2). **Serotonergic depression**, use **Inositol**, 1-3 tsp a day as needed. If that isn't enough, add **tryptophan** or **5 HTP**. If that still doesn't do it, consider asking your doctor for an SSRI if you are not chemically sensitive. If you are chemically sensitive, or if you can't take codeine, you are very unlikely to be able to tolerate SSRI's. In this case add adrenal support whether or not you think you need it.

Chemically sensitive people who DO need an SSRI have more chance of tolerating Celexa or Lexapro than the others.

3). For limbic problems, make sure you have enough thyroid and sex hormones, try **B-12** and **folic acid** in large amounts ONLY if you are not prone to agitation, the nutritional supplement **forskolin** 10-30 mg 1-3 times a day, maybe try **dl-phenylalanine** 500 mg 3-4 times a day (if you have a lot of pain or malaise this is good), **L-tyrosine** 1-3 grams, or the prescription drug **selegiline** 5-10 mg a day. All the stimulant medications work excellently for this but mostly it is not lawful to prescribe them for this purpose.

4). If you have low histamine depression, IF YOU ARE NOT ALLERGIC AND HAVE NO INFLAMMATORY PROBLEM, try **L-histidine** 1-3 grams a day. If you are allergic this will make your allergies dramatically worse and you must NOT do it. In that case, take a lot of non-sedating **antihistamines** and other allergy medications, for example **Allegra (fexofenadine)** and **Singulair** or Accolate and Nasalchrom as this may let your body tolerate more **histamine**. AVOID all medications that have antihistaminic side effects and all antihistamines that get into the brain (which is all the over the counter ones).

5). For catecholamine depression try **L-tyrosine** 500-3000 mg a day, and **forskolin** 10-30 mg 1-3 times a day.

If you have a lot of fear or apprehension, sometimes beta blockers or the alpha agonists **clonidine** or **guanfacine** will relieve that. These also lower blood pressure. If your blood pressure is already low, you have adrenal problems and need to take more adrenal support before considering these.

If your mood is bouncing all over the place, you may have mood instability and need something for mood stabilization. Most doctors do not know that a lot of these medications work well at lower than normal doses but with much less side effects - the first thing to do if you may need them and aren't in such bad shape, you need a lot right away to keep yourself out of trouble, is to try 1/4 or 1/2 of the usual amount and see how you do. Most of the choices are Rx, **GABA** being the most notable OTC choice. GABA has to be taken several times a day. The Atkins diet also helps with this.

If your mood is bouncing and the period is days or longer, it can be you are reacting to dietary issues you haven't figured out yet, or you are chemically sensitive. In these cases all of the above won't help much until you avoid the offending foods or chemicals, then you may not need much help.

As a rule, if you really hate the mood stabilizers and don't want to take them because of how "flat" they make you feel, you truly do need them and it is crucial to take them.

If you find yourself changing your program around a lot because of what is happening to you and are never sure what is going on, try adrenal support, anxiolytics, identifying food and chemical sensitivities, and if those don't resolve it, then try mood stabilizers.

Most MD doctors just hand out SSRI's for everyone no matter what kind of depression they have. This is not useful. Find one who will at least try some different stuff. If one or two SSRI's didn't work, don't bother trying any more. Try different kinds of agents. If the doctor doesn't want to do that, go find a real doctor instead.