

The following was extracted from the 2007 book, by award winning author,
Dr. David W. Tanton, Ph.D.

“Antidepressants, Antipsychotics, and Stimulants – Dangerous Drugs on Trial”

**Mandatory Mental Screening For Postpartum Depression -
The Typical, Although Inappropriate Solution (Antidepressants)**

In 2006, the governor of New Jersey signed legislation, **requiring health care professionals who provide prenatal care, to educate women about postpartum depression (PPD), and see that new mothers receive treatment for the disorder.** Then in a press release, it was stated that **80% of women experience some degree of depression following childbirth.** And most recently, both Illinois and Pennsylvania are also attempting to get similar legislation passed as well. They are using the very same strategy as they did with TeenScreen, although the focus now is on expectant mothers. The obvious objective is to find a way to broaden their market every way possible. For years, it was adults (especially seniors). Once they had basically saturated that market, they began targeting our kids, (even very young preschoolers). Now, the only untapped market appears to be expectant mothers.

Worst of all is the deliberate attempt to get legislation passed, (state by state), to mandate mental health screening, first with children, and now their mothers. They would rather you had absolutely no choice in the matter, (an overt attempt to take away our freedom to make choices for ourselves and our children). They have already taken away our choice regarding healthcare, by assuring that natural therapies and supplements are not covered by insurance. Then if they have their way, all our health conditions (physical and mental) will be totally controlled by the pharmaceutical industry, and mandated by our government, both state and federal.

And of course, the “accepted” treatment for PPD just happens to be counseling and **drug therapy with antidepressants!** And they are deliberately very specific as to exactly how the program is to work, assuring that they take advantage of every opportunity to diagnose a mother with PPD, who would thus be **in need of the “appropriate medication”**. For example, **an excerpt from Senate Bill 15, in Illinois, reads:**

Physicians and other licensed health care workers providing prenatal and postnatal care to women shall assess new mothers for postpartum mood disorder symptoms at a prenatal check-up visit in the third trimester of pregnancy, prior to discharge from the hospital or other healthcare facility, and at the initial postnatal check-up visit and at each postnatal check-up visit thereafter until the infant’s first birthday.

Physicians and other licensed health care workers providing pediatric care to an infant shall assess the infant’s mother for postpartum mood disorder symptoms at any well-baby check-up at which the mother is present prior to the infant’s first birthday in order to ensure that the health and well-being of the infant are not compromised by an undiagnosed postpartum mood disorder in the mother (retrieved from <http://tinyurl.com/35zkec>).

And then we find that a hospital in Illinois is going overboard, when they make it appear that when a mother is even thinking about getting pregnant she should be tested for depression! The following was posted at

*The Advocate **Good Samaritan Hospital** in Downers Grove, Illinois continues to recommend that SSRIs be used to treat pregnant women even despite recent warnings concerning birth defects and other life-threatening disorders in children born to mothers who took antidepressants during pregnancy. **“Any woman,” the Hospital warns, “who is thinking about becoming pregnant, is pregnant, or had a baby within the past year can be affected by depression or other mood disorders”** (retrieved from http://www.sierratimes.com/07/04/04/75_8_37_98_67891.htm)*

Most doctors who come up with conclusions that ridiculous, are normally influenced financially by the industry producing and promoting antidepressants, (personally, I think they should consider re-naming the hospital!)

Although it appears as a concern, just like TeenScreen, it's just another marketing strategy by drug companies, (an obvious attempt to get everyone possible on their highly profitable medications). Unfortunately, far too many women have been placed on, (and often remain on), antidepressants throughout their pregnancy, which just increases the potential for experiencing PPD following delivery. As we discussed, the highly elevated stress hormone cortisol, stimulated by antidepressants such as Prozac™ on a daily basis, is the best way I know of to deplete the mother's adrenals, which are responsible for producing several critical hormones.

Most importantly, **mental evaluations never have been, and never will be, based on science.** Thus, the evaluation would be based on nothing but someone's personal opinion, as would be the solution. **And, as the promotion of the program is always funded, (either directly or indirectly), by the pharmaceutical industry, the “proper solution” would obviously be influenced as well.**

According to psychiatrist, Dr. Grace Jackson, author of *Rethinking Psychiatric Drugs: A Guide for Informed Consent*, **“Prescribing SSRIs as a preventative measure during pregnancy is a terrible idea”** (retrieved from http://www.sierratimes.com/07/04/04/75_8_37_98_67891.htm). In fact, regarding the overall scheme of screening all women before, during and after pregnancy and putting them on SSRIs, Dr. Jackson has stated **“In sum, there could not be a more foolhardy public health practice than this one.”**

As you will soon discover, **there is a very good explanation for PPD, (based on science – not conjecture).** Then as usual, there are effective drug-free solutions available.

Suddenly Going From An Unbelievable High, To An Unexplainable Low

In his March 2007 *Alternatives* newsletter, Dr. David G. Williams does an excellent job of explaining exactly how PPD develops, as follows (my emphasis added):

PPD is a very real problem, but it definitely doesn't stem from a drug deficiency. *The added nutritional and hormonal stress of pregnancy often leaves*

*the mother's body chemistry totally out of balance following childbirth. **One of the most common problems seems to stem from depletion of the adrenal (or stress) glands.***

Physical or mental stress, poor diet (excess sugar or carbohydrates), skipping meals, alcohol, and smoking are some of the primary causes of weakened adrenals. During and immediately before pregnancy a poor diet, particularly consuming too much sugar or high-carbohydrate meals, will quickly weaken the adrenals.

[MY NOTE: Coffee is also a stimulant known to deplete the adrenals, as is the NutraSweet™ found in diet beverages.]

*During the first three months of pregnancy many women experience a great deal of fatigue and a total lack of energy. **Beginning sometime during the second trimester they oftentimes get a huge burst of energy and heightened sense of well-being. These women will say things like, “This is the best I’ve ever felt in my life.” And this newfound energy remains with them until they give birth, when all of the sudden it feels like the whole world collapses around them (PPD).***

During the second trimester the child's adrenal glands begin to develop, along with the thyroid, pituitary, and other glands. And since the mother and child share a circulatory system she begins to benefit from the baby's hormones. In effect, she begins to “feed off” the baby. She begins to experience more energy and that overall sense of well-being. It couldn't get any better. Her body has discovered a fresh new source of everything she's been missing.

*But when the baby is born, the mother is abruptly cut off from her newfound lifeline. Within a day or two of giving birth, the mother can go from the highest high to the lowest low and never know what hit her. No one offers her an explanation. If anything, she might be told it's normal to experience the depression and fatigue and it's something she just needs to work through – and **maybe some antidepressants might help** (p. 167-168).*

Recommended Drug-Free Solution For Postpartum Depression

- ✓ Dr. Williams continues, (again with my emphasis added):

*The underlying problem, however, needs to be corrected. **The adrenal glands (and often the thyroid and pituitary glands) must be given nutritional support.** Sugar has to be eliminated. Additional minerals, B vitamins, and essential fatty acids (predominantly omega-3s) must be added to the diet. I've seen dramatic changes in just a matter of days through proper nutritional support, particularly using glandular supplements for the adrenal, thyroid,*

and pituitary glands. The problem isn't correctable with drugs (*Alternatives*, 2007 March, p. 168).

✓ **It just so happens that Standard Process™ is a company that has a dietary glandular formula for women called Symplex F**, which contains all three glandulars (adrenal, pituitary, and thyroid extracts), which Dr. Williams recommends, along with ovary extract. They also have another formula called Drenamin™, with several plant-based nutrients specifically formulated for helping rebuild weakened adrenals. Their products are only available through doctors (including chiropractors).

✓ **The adrenals (especially when depleted) need adequate salt.** The only salt I would recommend is Celtic sea salt, sold through the *Grain & Salt Society*. It comes in coarse crystals and fine ground. As the “coarse” is cheaper, I would recommend swallowing one teaspoon daily with water. Or you can use the “fine” for everyday seasoning. That’s the only salt I have used the past 18 years, and unlike the common table salt, it’s actually healthy, (as it contains over 80 trace minerals). Celtic sea salt is available at most health food stores, or directly through the *Grain & Salt Society* by calling (800) TOP-SALT, or by visiting <http://www.celtic-seasalt.com/>.

✓ **Avoid stimulants and stressors.** As Dr. Williams recommended, **avoid coffee, sugar, and NutraSweet™**, as they all stress the adrenals. And most importantly, **avoid physical or mental stress as much as possible. I would also recommend avoiding drugs such as Prozac™, which greatly increase the level of the stress hormone cortisol.** If you happen to experience unavoidable stress for some reason, just take a couple capsules of the very calming herb, valerian root. It will safely help you relax, and appears to do so without causing drowsiness.

✓ **Stay hydrated!** Don’t forget to **drink at least ten 8-ounce glasses of water daily**, which is especially important during pregnancy. The nausea many women experience during pregnancy is often the result of inadequate water intake.

✓ It’s also important to **take a potent vitamin B-complex such as B-100, as well as a good multi-mineral containing at least calcium, magnesium, and zinc.**

✓ **Essential fatty acids such as flax and fish oils also play an important part in our mental health.** I would recommend a minimum of two large soft gels of Flax seed oil, and two of fish oil, daily.

Applying all of the above recommendations throughout pregnancy, would greatly reduce the risk of experiencing PPD. Just remember that the typical approach of **“drugs for everything, and nothing but drugs for anything”** is a dangerous and self-destructive approach that never has, and never will, truly resolve any health issue, (physical or mental).