

Something To Consider: Improper Diagnosis, Although A Concern, Is Not The Only Issue

Irrespective of what a particular clinical diagnosis might possibly be, drugs are in my opinion, seldom (if ever) an appropriate solution for treating depression. I am convinced that, (in women especially), it is often a hormonal imbalance, which is quite easily resolved with proper treatment. Just supplying a few supplements to eliminate any nutritional deficiency is normally adequate to resolve depression. One contributor to depression that is seldom, if ever considered, is side effects associated with other medications that the majority of adults in the nation are often “needlessly taking.” I discovered that of the 200 most prescribed medications, “over half” list depression as one potential side effect! Most importantly, it’s normally surprisingly easy to eliminate the dependence on most (if not all) medications, “including antidepressants.”

The majority of antidepressants are actually prescribed by general practitioners who were not trained in mental disorders. They are often totally unaware of the many serious side effects associated with them as well. Most traditionally trained MDs, know very little about nutrition, or how to help their patients withdraw safely from antidepressants when necessary, (or if they so choose). Thus, many doctors not only unnecessarily place their patients on antidepressants that are totally inappropriate, but they also leave them on them for years as well. This practice basically increases the inherent risk these drugs are so well known for, (and there are many). They are also prescribed for many conditions they were not approved for by the FDA. It’s inexcusable, in my opinion, that doctors are allowed to arbitrarily prescribe potentially dangerous antidepressants, (for just about anything they might choose), and with absolutely no valid justification, or accountability.

Often, all it takes is either a comment by a patient to their doctor about being depressed, or in some cases just appearing depressed, that leads to a prescription for a potentially dangerous antidepressant. Maybe they were just having a bad day, something we all experience occasionally. The problem is – a thorough evaluation would definitely take considerably longer than the average 10 minutes normally allotted to each patient by most doctors. It only takes a couple minutes to write a prescription, which is nothing more than a quick fix that can, at times, have serious consequences, (especially long-term). Then, due to the many potential side effects associated with these medications, the typical domino effect of multiple medications prescribed for the side effects of each medication is established. An SSRI antidepressant such as Prozac™, with such an extensive list of side effects, could result in several more drugs in the future. As over half of the medications currently prescribed actually contribute to depression, if their depression might have possibly been only temporary, it might eventually become permanent. Even worse, their health will gradually decline due, to the typical nutrient depletion from the additional medications. As I noted, SSRI antidepressants such as Prozac™, Paxil™, and Zoloft™, are especially troubling in that regard.

I believe there is one potential solution to the problem that we might possibly consider. It would involve establishing a protocol that “all doctors,” including psychiatrists, would be required to follow before considering prescribing any psychiatric drug. Then, even if the diagnosis might have been inaccurate, we would just be taking hypocrites advise, and “first do no harm!” I’m convinced that I could establish a protocol that all doctors would be required to follow, prior to prescribing any mind-altering drug. The most popular, and by far most prescribed class of SSRI antidepressants on the market, such as Prozac™, Paxil™, Zoloft™, etc., usually take about 30 days to begin taking effect, yet some natural solutions, (at least in this case), are often even faster acting and more effective. Thus, urgency is not really a valid excuse.

Even if a doctor’s diagnosis were inaccurate, our approach would not only be perfectly safe, but should also normally improve the patient’s overall health, and often resolve other health issues as well. That is especially true regarding hormonal imbalances, which contribute to many other health issues. A typical example is an unresolved hypothyroid (low thyroid) condition, which many women are placed on antidepressants for. It is, in my opinion, the most overlooked, misdiagnosed, and improperly treated condition in the nation. Women are “ten times” as likely as men to experience the condition, the primary reason more women than men suffer with depression, and also have difficulty losing weight. One reason is that elevated estrogen is a thyroid suppressant. There are at least 47 potential conditions identified that are associated with this condition. The most common are “depression and mood swings,” which antidepressants and antipsychotics are all too often prescribed for. Then, the antidepressants actually worsen the condition, (in multiple ways). This would help explain why “depression,” is one potential side effect associated with these antidepressants.

I would be willing to help conduct a study to prove we can safely withdraw the participants from not only their antidepressants, but often most (if not all) of their other medications as well. As many different medications contribute to depression in multiple ways, that would likely be the most effective approach, and could also help resolve other health issues as well. Possibly we could request that our legislators draft, and submit, a bill to congress that would require all doctors to first apply the established procedures, (proven effective in our study), before considering prescribing any antidepressant to their patient. The proposal would also recommend preventing doctors from prescribing antidepressants for any condition other than depression. The patient would also be required to sign a statement, indicating that their doctor had tried the established procedures outlined in the form, prior to prescribing the antidepressant. The doctor would also be required to provide the patient with the potential side effects, contraindications, nutrients depleted, as well as the potential risk for reactions without proper withdrawal. This is something I might help provide, in order to assure both its accuracy, and that nothing important gets deliberately eliminated. It’s just a thought, and something we might consider in the future. We have to start somewhere. I believe we would all agree that, although the over prescribing of all medications is a serious issue, the greatest concern is regarding any medication with mind-altering potential.