

RECLAIMING OUR TRADITIONAL MOODS

WISE TRADITIONS 2008

SATURDAY, NOVEMBER 8, 2008

PRESENTER: JULIA ROSS

READING, TESTING, OTHER RESOURCES

READING, WEB, CD'S/DVD'S

Mood and Nutrition

- *Ross, Julia, *The Diet Cure* (Penguin, 2000) www.dietcure.com
- *Ross, Julia, *The Mood Cure* (Penguin, 2004) www.moodcure.com
- *Ross, Julia, *The Mood Cure CD Set of a 3-day training in Amino Acid Therapy* (2004)
- Ross, Julia, *Urinary Neurotransmitter Testing - Problems And Alternatives* (see this article from the Townsend Letter at www.moodcure.com/relarts.html)
- Braverman, Eric R., M.D., Pfeiffer, Carl, M.D. et. al., *The Healing Nutrients Within* (Basic Health Publications; 3rd edition, 2003)
- Larson, Joan Mathews, *Depression-Free, Naturally* (Wellspring/Ballantine, 2001)
- Edelman, Eva, *Natural Healing for Schizophrenia*, (Borage Books; 3rd Rev&Up edition, 2001)
- Rapp, Doris J., M.D., *Is This Your Child?* (Harper Paperbacks; 1 edition (1992)
- www.feingold.org
- Karen Barth Menzies, Esq, Julia Ross, MA, Beth McDougall MD, Cary Murphy RN, *Public Forum on Antidepressant Drugs*— 90 minute
- **alternativementalhealth.com** The website of Safe Harbor, a nonprofit organization, provides books, tapes, information, resources, and training for treating mental and emotional problems naturally.
- DVD: Goldberg, Burton, *Curing Depression, Anxiety and Panic Disorder* (Do No Harm Productions, 2006)

The Antidepressant Controversy

- *Ross, Julia, *The Mood Cure*, Chapter 11 “Moods and Meds” (Penguin, 2004)
- *Ross, Julia, *Public Forum on Antidepressant Drugs: Established Risks, Proven Alternatives* (December, 2005)
- Glenmullen, Joseph, M.D. *Prozac Backlash: Overcoming the Dangers of Prozac, Zoloft, Paxil, and Other Antidepressants with Safe, Effective Alternatives* (Simon & Schuster 2000)
- Glenmullen, Joseph, M.D. *The Antidepressant Solution* (Free Press, 2005)

Thyroid and Adrenal Issues

- Arem, Ridha, M.D., *The Thyroid Solution* (Ballantine Books, August, 2000)
- Shames, Richard L. and Shames, Karilee H., Ph.D, *Thyroid Power* (HarperResource, June 1, 2002)
- Starr, Mark, M.D., *Hypothyroidism Type 2: The Epidemic* (New Voice Publication, 2005) www.type2htpothyroidism.com
- **brodabarnes.org** Broda O. Barnes, M.D., Research Foundation: Educational materials and conferences on holistic approaches to thyroid and other endocrine dysfunctions.
- Jefferies, William, M.D., *Safe Uses of Cortisol* (C.C. Thomas; 2nd edition, 1996)

Thyroid and Adrenal Issues (cont.)

- Wilson, James L., ND, DC, PhD, *Adrenal Fatigue: The 21st-Century Stress Syndrome* (Smart Publications, 2001)
- Shames, Richard L. and Shames, Karilee H., Ph.D, *Feeling Fat, Fuzzy or Frazzled?* (Hudson Street Press, July 7, 2005)

Mood and Brain function, S.P.E.C.T. studies etc.:

- Amen, Daniel G, M.D., *Change Your Brain, Change Your Life* (Three Rivers Press, 1st edition December 31, 1999) See his many subsequent books on the brain and ADD spirituality, etc.
- **brainplace.com**
- Perlmutter, David, M.D. *The Better Brain Book* (Riverhead Trade, 2004)

TESTING

- Vitamin Diagnostics: Testing for blood platelet serotonin, and catecholamine levels. Also pyroluria, red blood cell lining for EFAs, urinary thyroid, etc (800) 886-7773
- ZRT Lab for salivary or blood spot (home) testing for sex hormones, thyroid hormones and adrenal hormones. (503) 466-2445 or www.zrtlab.com
- Bio Health Diagnostics: Salivary Home Testing for Cortisol and DHEA, Sex Hormone cycle (16 samples) (800) 570-2000
- Diagnostechs for Salivary Cortisol and DHEA testing (includes anti-gliadin, etc.), salivary thyroid panel (800) 878-3787
- Immunolabs blood testing: Allergy foods, gliadin plus casein, whey, yeast, and candida complex blood. (800) 231-9197
- Enterolabs: Sensitive stool testing for gluten and dairy only. (972) 686-6869

ELECTRICAL AIDS

- S.A.D. Lamps, Full Spectrum Solutions (888) 574-7014 (FullSpectrumSolutions.com)
- Brain Stim Units for Pain, Mood, and Sleep <http://alpha-stim.com> or call 800-349-4991

NUTRIENT SUPPLEMENT SOURCES

For many of the supplements mentioned in the lecture, shop in health food stores pharmacies or online.

For all of the specific supplements mentioned in the lecture:

- MoodCure.com
- VitaminExpress.com

TRAININGS by Julia Ross

- **moodcure.com** See site's schedule of trainings or call 415 785 - 4411

AMINO ACID THERAPY AND ANTIDEPRESSANT DRUGS

If you would like to try an alternative to antidepressant medications, you will need to consult a prescribing physician before doing a two week trial of amino acids-along with your medication (plus other serotonin-enhancing nutrients, exercise, and light as described in Chapter 3 of *The Mood Cure*.) If the trial is successful, you'll need your physician to help you decide whether, when, and how to taper off of your medication. If you decide to stop using your medication, you'll need to be monitored for *withdrawal syndrome*. If you decide to continue using *both* the aminos and the medication, you and your physician will need to carefully monitor your progress to prevent *excess-serotonin problems* from developing. *We do not recommend the use of the amino acids 5HTP or L-tryptophan while you are taking two or more serotonin-stimulating medications (even if you are planning to stop or are in the process of tapering down on one of these anti-depressants).* The following lists will help you monitor your serotonin status. Read Chapter 11 in *The Mood Cure* for more information on this subject.

If you are taking more than one antidepressant (AD) that could, even partially, target serotonin, we recommend that you stop taking all but what you consider your single most helpful AD before you start your serotonin-targeted amino acids. Ask your MD or pharmacist for help. **Be sure to take aminos six or more hours away from SSRI's, SNRI's, or other drugs that target serotonin function.**

Monitoring for Withdrawal Symptoms: Increase aminos or meds, during your antidepressant taper if you experience:

- anxiety
- dizziness
- GI problems
- sleep problems
- fatigue
- disturbed sleep
- dizziness
- flu-like symptoms
- depression
- tingling or electric shock sensations

Monitoring for The Reverse Syndrome

5HTP or L-tryptophan, combined with drugs that stimulate serotonin activity, could potentially cause the reappearance or exacerbation of *symptoms identical to deficiency symptoms*. We have not seen this happen when only one SSRI or SNRI is being taken along with an amino for a few weeks. However, the excessive intake of any nutrient (or drug) can cause a "reverse effect" i.e. trigger symptoms similar to those of a deficiency of that same nutrient (or drug).

These could include any of the classic low-serotonin symptoms such as:

- negativity
- hyperactivity
- worry and anxiety
- low self-esteem

The Reverse Syndrome: Monitoring for Serotonin Deficiency Symptoms (cont.)

- obsessive thoughts or behaviors
- winter blues
- PMS
- irritability/rage
- dislike of hot weather
- panic attacks, phobias
- afternoon or evening cravings
- fibromyalgia and/or TMJ
- suicidal thoughts and feelings
- difficulty getting to sleep (night-owl)
- insomnia, disturbed sleep, bad dreams

Excess Serotonin: Monitoring for Serotonin Syndrome

A combination of more than one serotonin stimulating drug or, in rare cases, too much of even one drug, taken along with the aminos 5-HTP or L-tryptophan, could result in a different collection of adverse symptoms called *serotonin syndrome*. In a few cases we have seen some of the symptoms of this syndrome, particularly when someone has been taking more than one antidepressant at a time or taking the aminos too close to the time they've taken their medication:

- queasiness, nausea
- intense perspiration
- fever/high body temperature
- rapid heartbeat
- very low blood pressure
- extreme fatigue
- drowsiness
- sustained rapid eye movement
- over-reaction of the reflexes
- relaxation in ankle causing abnormal movements of the foot
- clumsiness
- euphoria
- restlessness
- feeling drunk and dizzy/intoxication
- rapid muscle contraction, twitching and relaxation in the jaw
- rigidity
- mental status changes (including confusion and hypomania)
- shivering
- diarrhea
- loss of consciousness, death

Review Chapter 11, in *The Mood Cure* (Penguin 2004).

WHICH FALSE MOOD TYPE ARE YOU?

IDENTIFY & ELIMINATE YOUR OWN NEGATIVE FALSE MOODS & APPETITES

TYPE 1 Low in SEROTONIN (our natural antidepressant)

- negativity, depression
- worry, anxiety
- low self-esteem
- repetitious, obsessive thoughts or behaviors
- hyperactivity
- irritability, rage
- night-owl, insomnia, disturbed sleep, hard to get to sleep
- benefits from antidepressant drugs
- panic attacks
- winter blues (SAD)
- suicidal thoughts
- fibromyalgia, TMJ, migraines
- fear of heights, water, snakes, performance, etc.
- dislike hot weather
- afternoon or evening cravings for sweets, starches, alcohol, or cannabis

Solution: 5-HTP 50 mg or L-tryptophan 500 mg (1-3) mid-afternoon & evening.

TYPE 2 Low in CATECHOLEMINE (our natural stimulant)

- cravings for sweets, chocolate, caffeine, or other stimulants for a lift
- depressed, bored, apathetic
- lack of energy, drive
- lack of focus, concentration, A.D.D.

Solution: L-Tyrosine 500 mg (1-3) on arising and mid-morning (and mid-afternoon if no insomnia)

TYPE 3 Low in GABA (our natural tranquilizer)

- cravings for sweets, starches, alcohol or tranquilizers when stressed
- over-stressed, burned out, overwhelmed
- unable to relax, loosen up, meditate, pray, slow down, sleep
- feel stiff and tense

Solution: GABA 100-500 mg as needed

TYPE 4 Low in ENDORPHIN (our natural pain killer)

- crave comforting or numbing "treats," i.e., sweets, starches, chocolate, bread, cheese
- sensitive to emotional pain or have had chronic physical pain
- cry or "tear up" easily, sad too often
- "Love" certain foods, drugs, or alcohol

Solution: DI-Phenylalanine (DLPA) 500 mg (2-4) on arising, mid-morning, and mid-afternoon (or d-phenylalanine if anxious (1-2) 500 mg, 2-3x/day). Free-form amino blend 700 mg before meals.

TYPE 5 Low in BLOOD SUGAR (adequate brain glucose stabilizes mood & appetite)

- cravings for sweets, starches, and/or alcohol (especially if a meal has been missed or delayed)
- irritable, shaky, stressed, headache, if it's been too long between meals

Solution: L-glutamine 500 mg (2-3) on arising, between meals and at bedtime, or open capsule in mouth for instant relief. Chromium 200 mcg (2) with each meal.

ESSENTIAL NUTRITIONAL SUPPORT FOR ALL TYPES

Multivitamin and Mineral (2-6/day); Vitamin C Ascorbate 2000 mg/day; Cod Liver Oil

Foods: a minimum of *3 meals/day, each containing 20-30 gm protein* (e.g., a chicken breast, 3 eggs, 1 cup cottage cheese). no less than *4 cups low-carb vegetables/day, plus only healthy fats* (butter, ghee, coconut or olive oil) and high-carb foods (fruit, beans, potatoes) as needed. Avoid sweetened and flour-based foods, allergy foods & caffeine.

For more information: dietcure.com, moodcure.com, Recovery Systems Clinic (415-383-3611)

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USING AMINO ACIDS: PRECAUTIONS

If you have: overactive thyroid (Grave's disease), PKU (phenylketonuria) or Melanoma;
Do NOT take: L-tyrosine, DL-phenylalanine, or L-phenylalanine ¹

Please consult a knowledgeable practitioner before taking *any* amino acids if any of the following statements apply to you:

- You react to supplements, foods or medications with unusual or uncomfortable symptoms
- You have serious physical illness, particularly cancer
- You have severe liver or kidney problems
- You have an ulcer (amino acids are slightly acidic)
- You are pregnant or nursing
- You have schizophrenia or other mental illness
- You are taking any medications for mood problems, particularly MAO inhibitors or more than one SSRI

Consult an expert before taking: If you have:	Melatonin	L-tyrosine or L-phenylalanine	GABA	5-HTP	DLPA	L-glutamine ¹
elevated cortisol (severe 2:-4:AM insomnia)				X		
asthma ²	X					
high blood pressure		X			X	
low blood pressure			X			
tendency to get migraine headaches		X			X	
manic-depressive (bipolar) tendencies ³		X			X	X

**Even if your doctor agrees that you can try amino acids (or any other nutrients),
if you experience discomfort of any kind after taking them, stop taking them immediately.**

Name _____ Date _____

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¹ In rare cases, glutamine might raise blood sugar in diabetics

² Nocturnal asthma seems to be the primary problem. 5HTP and tryptophan may also cause problems for asthmatics.

³ SAM-E, St. John's Wort, bright therapeutic lamps, chromium, and too much fish or flax oil may also trigger mania.

PYROLURIA: TESTING, TREATMENT AND RESOURCES

Pyroluria is a surprisingly common condition in the general population (11%) and even higher in some groups that tend to have quite stubborn mood problems, e.g., those with extreme stress reactions and social discomfort. For example, 30% of autistics and 44% of alcoholics have pyroluria. Excess pyrrolles deplete zinc, Vitamin B6, manganese, biotin and G.L.A., which can reduce responsiveness to amino acid therapy.

Below is a description of our clinic's approach to pyroluria.

TESTING

If you answer "yes" to 15 or more on the following questionnaire, test the level of pyrrolles in your urine with a kit ordered from Vitamin Diagnostics (732-583-7773). Also measure your zinc level, using Aqueous Zinc by Biotics, Zinc Tally by Metagenics, or Zinc Status by Ethical Nutrients. If the zinc-containing liquid is held in your mouth for 10 seconds and has no particular taste, your zinc levels are probably quite low.

TREATING

If the client's/patient's Questionnaire, zinc tally, and test results *and* a disappointing response to aminos indicate:

1. Try 100-200 mg zinc per day with meals, until the Zinc Tally response and subjective symptoms improve. We have not found any type of zinc to be superior.
2. Gradually raise vitamin B₆ from 100 to 500 mg per day (or up to 10 mg per kg of body weight.) Monitor dream recall. In severe cases, start with an injection of 200mg in 2 cc's, or use oral liquid B6 (e.g. Designs for Health). Follow with 100 mg B6 at meals as needed (or time-release B6 500 mg by Progena.) Use P5P the co-enzyme form of B₆, 50-100 mg/day, if B6 alone fails (or add it from the beginning).
3. Add Evening Primrose Oil 1300 mg/day twice a day to give 220 mg GLA.
4. IV's including minerals, inositol, manganese, extra zinc, B6, and B complex with biotin seem to give quick help.
5. Be sure HCL levels are strong. Do HCL challenge or at least use digestive enzymes with HCL
6. Take a strong (4-6 caps/day) Multivitamin that contains 1.5-2 mg of biotin, plus a multi mineral. Add a B complex or biotin on its own, if needed.
7. Dose Omega-3 per EFA test results or stop altogether until EFA test results come in.
8. Monitor symptoms, tally zinc response, and retest pyrrolles and EFAs.

RESOURCES—BOOKS, PRESENTATIONS, AND ARTICLES

See the information and the nutrient protocol designed by the clinician who alerted me to pyroluria, Joan Mathews-Larson, Ph.D. It is contained in Chapter Five of her excellent book *Depression Free Naturally* (New York: Ballantine, 2001). All of us are indebted to the brilliant pioneer, Carl Pfeiffer for identifying this syndrome.

1. <http://www.alternativementalhealth.com/articles/pyroluria.htm>
for: “Pyroluria: Hidden Cause of Schizophrenia, Bipolar, Depression, and Anxiety Symptoms” and other information. Woody R. McGinnis, M.D.
2. <http://www.alternativementalhealth.com/articles/walshMP.htm#Py>
for: “Commentary on Nutritional Treatment of Mental Disorders” from William Walsh, Ph.D., Senior Scientist, Pfeiffer Treatment Center
3. mindd.org/serendipity/uploads/pdf/McGinnesOnMauveFactorLondonOct2006.pdf for: “Discerning the Mauve factor.” Woody R McGinnis, Tapan Audhya, William J Walsh, James A Jackson, John McLaren-Howard, Allen Lewis, Peter H Lauda, Douglas M Bibus, Frances Jurnak, Roman Lietha, Abram Hoffer; *Altern Ther Health Med.* ;14(3):56-62
4. *KEAC (Center for Environmental Medicine)* Klinisch Ecologisch Allergie Centrum b.v. Centre for Environmental Medicine; Zoomweg 44, 6006 TW Weert (Altweeterheide); The Netherlands. Email: keac@tip.nl www.hputest.nl/english.htm (HPU=zinc & P5P deficiency).
5. *Naturopathyonline.com* specializes in mental health and pyroluria. Suzanne Lawton ND. (near Portland, OR) has developed some of the therapies reported on above.
6. Edelman, Eva. *Natural Healing for Schizophrenia, 2nd edition* (Borage Books, 3762 West 11th Avenue #188, Eugene, OR 97402.)
7. Holford, Patrick. *Optimum Nutrition for the Mind* (Basic Health Pub. 2004)

RESOURCES--URINE TEST FOR PYROLURIA (HAEMOPYRROL AND KRYPTOPYRROL): *Vitamin Diagnostics* (732-583-7773)

Name: _____

Date: _____ Zinc Tally Reaction _____ Score: _____

Date: _____ Zinc Tally Reaction: _____ Score: _____

Date: _____ Zinc Tally Reaction: _____ Score: _____

QUESTIONNAIRE: ARE YOU PYROLURIC?

The pyroluria screening test that follows is based on the pioneering work of Carl Pfeiffer, M.D., PhD. It will help you identify the physical and neurological symptoms that develop from losing large amounts of B6 and zinc. The circulating levels of pyrroles in your body may be slightly or profoundly abnormal, but in all cases, these levels rise even more when you are under stress. If you score 15 or more, it will be worth your while to be tested for pyroluria – and to get on with the needed bio-chemical repair. Compare your original scores with retest scores to monitor your progress.

- | Yes | No | |
|-----|-----|---|
| ___ | ___ | 1. Do you have poor dream recall or nightmares? |
| ___ | ___ | 2. Do you have a reduced amount of head hair, eye-brows, or eyelashes, or do you have prematurely gray hair? |
| ___ | ___ | 3. When you were young, did you sunburn easily? Do you have fair or pale skin? |
| ___ | ___ | 4. Are you becoming more of a loner as you age? Do you avoid outside stress because it upsets your emotional balance? |
| ___ | ___ | 5. Have you been anxious, fearful, or felt a lot of inner tension since childhood but mostly hide these inner feelings from others? |
| ___ | ___ | 6. Is it hard to clearly recall past events and people in your life? |
| ___ | ___ | 7. Do you have bouts of depression and/or nervous exhaustion? |
| ___ | ___ | 8. Do you have cluster headaches? |
| ___ | ___ | 9. Are your eyes sensitive to sunlight? |
| ___ | ___ | 10. Do you belong to an all-girl family, or have look-alike sisters? |
| ___ | ___ | 11. Do you get frequent colds or infections, or unexplained chills or fever? |
| ___ | ___ | 12. Do you dislike eating protein? Have you ever been a vegetarian? |
| ___ | ___ | 13. Did you reach puberty later than normal? |
| ___ | ___ | 14. Are there white spots/flecks on your fingernails, or do you have opaquely white or paper-thin nails? |
| ___ | ___ | 15. Are you prone to acne, eczema or psoriasis? |
| ___ | ___ | 16. Do you prefer the company of one or two close friends rather than a gathering of friends? |
| ___ | ___ | 17. Do you have stretch marks on your skin? |
| ___ | ___ | 18. Have you noticed a sweet smell (fruity odor) to your breath or sweat when ill or stressed? |

Yes	No	
___	___	19. Do you have – or did you have, before braces – crowded upper front teeth?
___	___	20. Do you prefer not to eat breakfast, or even experience light nausea in the morning?
___	___	21. Do you tend to become dependent on one person whom you build your life around?
___	___	22. Do you have a poor appetite, or a poor sense of smell or taste?
___	___	23. Do you have any upper abdominal, splenic pain? As a child, did you get a “stitch” in your side when you ran?
___	___	24. Do you tend to focus internally (on yourself) rather than on the external world?
___	___	25. Do you frequently experience fatigue?
___	___	26. Do you feel uncomfortable with strangers?
___	___	27. Do your knees crack or ache?
___	___	28. Do you overreact to tranquilizers, barbiturates, alcohol, or other drugs – that is, does a little produce a powerful response?
___	___	29. Does it bother you to be seated in a restaurant in the middle of the room?
___	___	30. Are you anemic?
___	___	31. Do you have cold hands and/or feet?
___	___	32. Are you easily upset (internally) by criticism?
___	___	33. Do you have a tendency toward morning constipation?
___	___	34. Do you have tingling sensations or muscle spasms in your legs or arms?
___	___	35. Do changes in your routine (traveling, new situations) provide stress?
___	___	36. Does your face sometimes look swollen while under a lot of stress?
___	___	Total