

MILD DEPRESSION

Depressive disorders can be the result of a wide variety of causes; some of them genetic, psycho-social, toxic, metabolic, infectious, hormonal, or allergic. Anyone having suicidal thoughts needs to be under the immediate care of a psychiatrist and consider anti-depressant medication. Persons having psychological, social, or behavioral issues need to be evaluated first by a psychologist or skilled counselor, before coming to this office for complementary therapies.

Our first approach with almost all conditions is to direct the patient to a diet which appears to be correct for the individual. No diet is correct for everyone; such as, strict vegan diets or vegetarianism isn't always appropriate. We like to perform intra-dermal allergy skin tests for foods to determine which consumed foods may not be appropriate; sometimes blood tests may be used to help in the assessment, but skin tests are almost always more sensitive in picking up the inappropriate foods. People with mild depression often improve simply by eliminating offending foods.

Nutritional supplements are usually recommended next where dietary restructuring does not produce the desired improvement. Often times, perhaps 60% of our patients experience significant improvement with these two therapies. When recovery is inadequate, we next move on to hormone evaluation. Low thyroid function or low adrenal function can contribute to depression (and fatigue). We will usually do blood, urine, and/or saliva tests to screen for these conditions. We do not always accept that normal results of blood tests for thyroid function are justification for excluding a low thyroid state. There are many forms of thyroid resistance syndromes in which the patient is functionally low in thyroid function but has normal blood levels of all

thyroid-related hormones. Therapeutic trials of low dose thyroid are often undertaken where there is suspicion of low thyroid function with normal tests. The patient is followed closely with office visits every two months until optimal improvement has occurred and may be monitored with various tests.

Low adrenal function may also be a contributor to low energy or fatigue (appearing as depression) and we generally depend upon blood, urine, and saliva tests to assess adrenal function. Referral to an endocrinologist for a Cortrosyn Stimulation Test will determine if the adrenals are weak or if the low adrenal output may be due to under-driving by the pituitary gland or the hypothalamus at the base of the brain. Further evaluations may be necessary. The patient may then start adrenal hormone supplementations and begin to feel somewhat better. Referral to a Neurofeedback Specialist for an electrical brain map may also be useful to determine if cortico-thalamic under-drive of the hypothalamus is a possibility.

Electrical neurofeedback (brain training) has been very successful in depressive states. Persons not responding to this approach may need to be evaluated for infections (e.g. Cerebral Lyme disease), toxins (from molds, heavy metals, or hydrocarbon xenobiotics), or metabolic (liver and kidney) causes.

Complex detoxification procedures may become necessary where the foregoing approach is unsuccessful. During a visit and follow-ups to this office, we work to guide you successfully.