

**Treating and Beating
Anxiety and Depression**

with
Orthomolecular Medicine

A Guide for Patients

Dr. Rodger H. Murphree II, DC, CNS

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Endnotes designated in the text of this book can be found at the end of each corresponding chapter. Starred footnotes can be found at the bottom of the corresponding page. Patient testimonials are based on actual experiences as observed by the author.

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Contact Dr. Murphree

Inquiries concerning content of this book should be addressed to the author at 3401 Independence Dr. Suite 121, Birmingham, AL, 35209.
Phone: (205) 879-2383 Fax: (205) 879-2381

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This book and the advice given are not intended to take the place of your physician. Please consult with your health care professional before discontinuing any medication.

*“I’d rather have a bottle in front of me
than a frontal lobotomy!”*

Have you ever, like Groucho Marx quipped in the golden age of comedy, found yourself having to choose the lesser between two evils? When you suffer from a mood disorder, your choices can seem bleak: numb the pain with alcohol, mask your symptoms with drugs...the choices get more destructive from there.

If you suffer from anxiety and/or depression, it likely affects every facet of your life. For many, the pain, disappointment, fatigue, and hopelessness slowly consumes every fiber of their being. They may lose their job, marriage, friends, and family relationships as they spiral into an ever deeper abyss. At its worst, the illness can cause such suffering that death is a welcomed option: over 30,000 Americans commit suicide each year.

Effectively treating anxiety and depression can be quite difficult. We’ve come a long way since the dark ages, when mood disorders were treated with barbaric therapies: brain surgery with no anesthesia, exorcisms, and shamanistic potions. In the late 18th century, however, Dr. Benjamin Rush, the father of American psychiatry, began to assert that mental illness is actually a “disease of the mind” that needed to be treated as such.

Dr. Rush theorized that “madness” was caused by "morbid" qualities in the blood, leading him to conclude that as much as "four-fifths of the blood in the body" should be drawn away. He bled one patient 47 times, removing four gallons of blood over time. He also strapped patients horizontally to a board and spun them around at great speeds. He confined others in his "tranquilizer chair"—which completely immobilized every part of their body for long periods and blocked their sight with a bizarre wooden shroud—while they were doused in ice-cold water.

8 *Introduction*

Insulin was isolated in 1922, and the idea of insulin coma therapy was introduced into psychiatry 11 years later by Austrian psychiatrist Manfred Sackell. The therapy involved depriving a person's brain of glucose (the form of sugar the brain uses to function) in order to elicit a comatose state. Patients were then dramatically reawakened by a sudden injection of glucose. Patients did seem to be calmer afterwards (brain damage can do that). Unfortunately, this new miracle therapy was also associated with a shockingly high mortality rate! Some physicians began to question its merits, and a randomized trial concluded that insulin coma therapy was not effective. It quickly fell out of favor. Whew!

In the early 1900s, frontal lobotomies and electric shock therapy were standard practice. Shock treatment became an overutilized and indeed cruel form of mass mind control for those housed in mental institutions.

Today, individuals who consult a family doctor for anxiety or depression usually receive a prescription antidepressant. This is most often an SSRI (selective serotonin re-uptake inhibitor) such as Prozac, Effexor, Cymbalta, Paxil, Zoloft, Celex, or Lexapro. Prescription antidepressants can provide excellent relief from the symptoms of anxiety and depression. Consequently, millions of Americans have tried them. In fact, prescription antidepressant sales reached a total of \$37 billion in 2003, which was \$9 million more than was spent that year on treatments for the heart, arteries, and blood pressure. Preschoolers, in fact, are the fastest-growing group of users.¹ In 2000, over one million American children were taking an antidepressant medication.²

However, antidepressant and antianxiety drugs are no panacea. Most individuals may initially benefit from taking an antidepressant drug only to find that the positive effects soon wear off. Several studies show that 19–70% of those taking the drugs would do just as well on a placebo!³ And while patients are attempting to correct their mood disorders with prescription drugs (which might or might not be working), they are facing some potential, sometimes serious, side effects. Prozac alone has been associated with over 1,734 suicide deaths and over 28,000 adverse reactions. Prescription antidepressants can cause depression, anxiety, addiction, suicidal tendencies, involuntary muscle spasms, and senility.⁴

Patients suffering from anxiety more than from depression are commonly prescribed one of the benzodiazepines such as Ativan, Xanax, or Klonopin. These medications are associated with numerous

unwanted side effects including poor sleep, seizures, mania, depression, suicide, ringing in the ears, amnesia, dizziness, anxiety, disorientation, low blood pressure, nausea, fluid retention, tremors, sexual dysfunction (decreased desire and performance), weakness, somnolence (prolonged drowsiness or a trance-like condition that may continue for days), and headaches. Over 73,000 older adults experience drug induced tardive dyskinesia (uncontrollable shakes). For many, these tremors are permanent.⁵

A BETTER WAY: ORTHOMOLECULAR

Fortunately for those seeking a safer, often more effective treatment for mood disorders, a group of progressive-minded physicians have pioneered orthomolecular medicine. Orthomolecular physicians recognize that in many cases of physiological and psychological disorders, health can be reestablished by properly correcting, or normalizing, the balance of vitamins, minerals, amino acids, and other similar substances within the body. And unlike drug therapy, which attempts to cover-up or at best temporarily relieve symptoms, orthomolecular medicine seeks to find and correct the causes of illness.

In this book, I'll show you how to discover and treat the physical illness causing your symptoms. I'll present scientific studies to demonstrate how mood disorders are aggravated or even caused by certain nutritional needs. I'll take you through a step-by-step program, based on orthomolecular medicine, to beat your anxiety and depression.

You are unique, and your results will vary from another individual's, but positive changes can be quick and often dramatic. Orthomolecular physicians have helped millions of patients around the world. Perhaps it's your turn to be another success story. Don't give up. You can feel better.

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4. Citizens Commission on Human Rights. See www.cchr.org.
5. Wolfe, Sidney, et al. *Worst Pills Best Pills*. Pocket; 1999. (A 2005 printing is now available.)

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