Treatments to Make Those Antidepressants Actually Work and Reduce Side Effects

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the plan

I  - Overall Depression Approach
II – New Happenings in Depression: The DSM V
III - Supplements to Help Drugs Work Better
IV - Supplements to Help with Sexual Side Effects
V - How To Help the Weaning Process
I - Overall Depression Approach
overall approach

- Intake/PE/ros
- Labs
- Stress / HPA
- Spirit
- Digestive Imbalance
- Inflammation
- Diet and Exercise
- Sleep Problems
- Toxins
- Hydrotherapy
- Nutrient Repletion
- Supplements
II - New Happenings in Depression: The DSM V
Mental illness?

“Pathologizing one’s non-conformity.”

- gary greenberg in Manufacturing Depression
A Growing List Of Mental Ills

Work is progressing on a fifth edition of the Diagnostic and Statistical Manual of Mental Disorders. The current edition describes about three times the number of disorders as the first edition did in 1952.

Source: American Psychiatric Association
The **National Institute of Mental Health**, the world's largest funding agency for research into mental health, has indicated that it is withdrawing support for the manual

- no longer fund research projects that rely exclusively on *DSM* criteria
- “lack of validity”
- “based on a consensus about clusters of clinical symptoms, not any objective laboratory measure.”
- “symptoms alone rarely indicate the best choice of treatment.”

**British Psychological Society:**

“*the continued and continuous medicalisation of natural and normal responses to (pt) experiences... which demand helping responses, but which do not reflect illnesses so much as normal individual variation*.”
DSM-V and grief?

- May 2013

- While grief is only considered a sign of depression if two months have elapsed since the death of a loved one, the new version allows for diagnosis within the first few weeks.

- “Medicalizing normal grief stigmatizes and reduces the normalcy and dignity of the pain, short circuits the expected existential processing of the loss, reduces reliance on the many well established cultural rituals for consoling grief, and would subject many people to unnecessary and potentially harmful medication treatment.”

- Dunee. - Normal Grief vs Depression In DSM5 | Psychology Today
III – ‘Supplements’ to Help Drugs Work Better
"It's a new anti-depressant... instead of swallowing it, you throw it at anyone who appears to be having a good time."
- not all negative interactions
- Can actually **help medications** to reduce side effects and to become more effective in “treatment resistant” cases

Bright Light

- 14 Subjects were randomly assigned to receive either 10,000 lux bright white light for 30 min between 6 and 9 AM or dim red (placebo) light at a comparable time.

- On the Hamilton Depression Rating Scale (HDRS17, SIGH-SAD-SR version), the group receiving bright light improved 27% in 1 week (P=0.002). The group receiving placebo did not improve, except for one outlier.

Exercise

- Dallas TX: 126 pts with SSRI failure chose exercise instead of add-on med
- 30% of patients were able to feel better in four months (add on meds have 20 -30% success rate).
- more people stopped their exercise if they were in the more vigorous group, but more people were able to stick to the lighter exercising
Hormones

- **Hormones** are the active communication messengers between the neurologic and endocrine systems.
thyroid

- heavy metal pollution and radioactive bi-products from nuclear power plants

- symptoms include weight gain, slowed thinking and memory problems, feeling cold, and constipation

- low thyroid can be an early or even first symptom of oncoming depression.

Thyroid II


- about 55 to 60 percent of patients who previously failed to respond to tricyclic antidepressants can respond when there is enough thyroid hormone around. Barowsky J, Schwartz TL. An Evidence-Based Approach to Augmentation and Combination Strategies for: Treatment-Resistant Depression. Psychiatry (Edgmont). 2006 Jul;3(7):42-61.

- Study of 300 pts showed T3 or natural thyroid gave 2x to 2.8x better results than T4 Joffe RT, Singer W. A comparison of triiiodothyronine and thyroxine in the potentiation of tricyclic antidepressants. Psychiatry Res. 1990 Jun;32(3):241-51.
- 34 – 60 yr olds, 2004-2009, about 1300 sample size
- a higher total thyroxine (tT4) level was associated with better performance in the domain of psychomotor and a higher level of both fT4 and tT4 was linked to better language/verbal test performance among men
- fT4 was linked to better performance on visuo-spatial/visuo-construction ability and psychomotor speed among white people,
- below the normal range thyroid stimulating hormone (TSH) level (compared to the reference range) was linked to better performance in domains of psychomotor speed and attention.
Estrogen

- changing the ability of brain to recognize serotonin, as well as lowering levels of monoamine oxidase
- enhances serotonin and brain derived neurotropic factor (BDNF)
- Estrogen treatments for menopause reduce depression symptoms

Estrogen

- 127 women over 60 years old
- Sertraline (Zoloft)-treated women taking ERT (without progesterone) had significantly greater global improvement and quality of life than those not receiving ERT.
- Modest improvements were also observed in anxiety symptoms and cognitive functioning.
What about progesterone?

- Progesterone may block estrogen effects and support breakdown of serotonin in the brain.

- Progestogenrone treatment (DepoProvera) given without estrogen, is known to worsen depression in women who already have a tendency toward or clinical signs of depression. However, other research does not corroborate this.

- A study looking at levonorgestrel (Norplant), another BCP synthetic progesterone, showed the depression scores of the women most depressed actually improved during the study period.

References:


Testosterone

- Sxs: truncal fat, irritable, ‘curmudgeonly’
- trial of 19pt on antidepressants x 8 weeks, randomized, placebo-controlled
- Given 10g per day of transdermal T gel or placebo cream for tx resistant depression with low or nl T. antidepressant regimen.
- T-treated patients had a significantly greater rate of decrease in depression questionnaire scores than the placebo-treated patients.
- hhhh
Fish Oil

- 42 subjects x 9 weeks RCT
- Citalopram (celexa) plus fish oil or placebo (olive oil)
- Fish oil: BID of 900 mg of EPA, 200 mg of DHA, and 100 mg of other omega-3 fatty acids
- Combination therapy demonstrated significantly greater improvement in Hamilton Depression Rating scale scores over time ($F = 7.32; \text{df} = 1,177; P = 0.008$) beginning at week 4 ($t = -2.48; \text{df} = 177; P = 0.014$).
Folic acid (MTHF)

- 15mg given to 75 medicated treatment resistant pts
  - effects were as good or better than the added conventional medications studied
  - Fava et al. 49th annual meeting of the American College of Neuropsychopharmacology; December 5–9, 2010;
Zinc

- **Mice study**: zinc deficient diet or nl diet, then **forced swim test**. Animals who were zinc deprived had a minimal response to the antidepressant, whereas the animals with plenty of zinc in their body were much more able to respond positively when given medication. Mlyniec K, et al. *Zinc deficiency induces treatment-resistant depression* 11th World Congress of Biological Psychiatry, Kyoto, Japan. 2011

Vitamin B12

- Study of 115 people:
  - 40 Non-responders had avg B12 of 470pg/mL
  - 34 Partial responders: 536pg/mL
  - 41 full responders: 594pg/mL
creatine?

- women study: 5 grams creatine plus Escitalopram (lexapro) had positive results by week 2.

- Not known if benefit in men

- Caution: one 10 person study showed 2 men with bipolar taking medication actually got worse with creatine.

  - Bipolar Disord. 2007 Nov;9(7):754-8.
IV - Supplements to Help with Sexual Side Effects
sexual healing

**Yohimbe** - block receptors called presynaptic alpha-2 adrenergic receptors → adrenergic tone


- RCT 50 MDD patients: Prozac 20mg + yohimbine (titrated based on BP) of - ResponseNeuropsychopharmacology (2004) 29, 1166–1171,


- **Current:** NIH studying as IV during REM sleep for depression sxs - Rapid Antidepressant Effects of Yohimbine in Major Depression at [www.clinicaltrials.gov](http://www.clinicaltrials.gov) accessed 5-16-09
sexual healing

Ginkgo:
- open trial of 63 people: 84% effective rate.
- positive effect on all 4 phases of the sexual response cycle: desire, excitement (including erection and lubrication), orgasm, and resolution (the ‘afterglow’ or good feeling immediately following orgasm).
- 60 mg qd to 120 mg bid (average = 209mg/d).
- One other small study of 240mg qd with no benefit
V - How To Help the Weaning Process
weaning

- Super, super, super slow
- Naturopathic determinants of health - the best you can get them
weaning

- **SSRI’s:** 5htp/trp
- **SSRI/SNRI’s:** tyrosine / 5htp
- **TRICYCLICS:** gingko / tyrosine / 5htp
- **WELLBUTRIN:** Mucuna
- **ABILIFY:** Mucuna and 5htp
- **REMERON:** tyrosine and 5htp
summary

• I - Overall Depression Approach
• II – New Happenings in Depression: The DSM V
• III - Supplements to Help Drugs Work Better
• IV - Supplements to Help with Sexual Side Effects: bright light, exercise, hormones, B12, zinc, folic acid, fish oil, creatine
• V - Help for the Weaning Process
Thank you

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