



Not All in Your Head

By Annette Poizner, Ed.D., RSW

I sat behind a one-way mirror with a team of health-care practitioners observing a medical resident's interview with a patient complaining of panic and anxiety. The patient reported a range of classic anxiety symptoms and mentioned a less common symptom: muscle spasms in his thumb. The resident asked, "What do you think that's about?" The man answered, "Stress." The resident agreed. My thoughts went immediately to the mineral magnesium. There is a range of symptoms associated with magnesium deficiency, including anxiety, panic attacks and spasms in the extremities. This patient was seeking anti-anxiety medication. Could it be that what he really needed was a change in his diet? As a visiting mental health consultant, I shared these thoughts with the team. We directed the resident to explore the patient's diet and, sure enough, he had an extremely limited intake of any foods that provided a good source of magnesium.

Medical programs do not provide physicians with comprehensive training in nutrition despite the fact that research has associated even mild deficiencies of certain nutrients with various psychological symptoms. Research has also established that the population, at large, is eating a diet deficient in many nutrients thus accounting for widespread obesity in children and adults. We all recall the dramatic story of Margot Kidder who has been successfully treating her manic depression with nutritional supplements and a carefully managed diet. I would argue, though, that many common maladies relate to nutritional imbalances and dietary sensitivities. Anyone experiencing bouts of depression, anxiety, panic, fatigue or other symptoms ought first to consider where there might be a nutritional component to the problem.

Psychologist Larry Christensen notes that there are some individuals whose depression is related to their excessive consumption of caffeine and sugar. Those who use these 'pick me ups' when they feel low, may, after the initial peak of energy, drop to an even lower low. In his research, he found that when some depressed patients maintained a sucrose-free, caffeine-free diet for a few weeks,

their depression improved dramatically. He called these individuals "dietary responders" and published a questionnaire to help identify individuals who can expect to be helped by this dietary intervention.

In other cases, nutritional supplementation will be the route to feeling better, but then again, diagnosis and effective treatment is essential. Sometimes people 'diagnose' themselves and take on a vitamin regime, at times to their own detriment. I remember the woman who came in for counselling after starting a high-stress job. She experienced a range of stress symptoms including sleeplessness, panic attacks, racing thoughts, difficulties concentrating and sore gums. Sore gums? Her dentist concluded that her gum pain was stress-related, since he could find no organic cause for it. I asked Rachel (not her real name) whether she had increased her dose of vitamin B, in anticipation of the stress of the new job. She said excitedly, "Oh yes. I doubled the dose!" I informed her of the stimulating properties of vitamin B. Until one acclimates to a new higher dose, symptoms can include interrupted sleep, agitation and sore gums. Rachel stopped taking vitamin B and within two days she was sleeping through the night, her gums now back to normal.

It is always important to be mindful when increasing the dose of vitamins, minerals and herbs. The body needs time and extra hydration to acclimate to higher doses, so it's best to build up slowly when adding supplements. Further, taking too many supplements creates dryness and what Chinese medical practitioners call a condition of "heat." Symptoms include agitation, dryness in the mouth, sore throat, anxiety and neck tension. Many people don't realize that taking supplements can backfire spurring a host of new complaints.

Not long ago I was consulted by a woman whose fatigue and depression was linked to an iron deficiency. Her doctor prescribed the mineral but was perplexed a few months later when her symptoms persisted and her blood levels had not changed. He had her continue taking the pills. I asked the woman whether she was taking calcium with the iron, and indeed,

she was. Calcium inhibits the absorption of iron. She began taking the two pills hours apart and within ten weeks her blood levels of iron were back to normal and she felt well. This story demonstrates the types of problems that can crop up when self-medicating with supplements and highlights the need to engage a naturopath to oversee your supplement program.

It remains most important, though, to realize that sometimes mental health symptoms are not all in your head. Psychiatrist Sidney Walker III wrote his book, "A Dose of Sanity: Mind, Medicine and Misdiagnosis" to point out the failings of a mental health system which tends to psychologize symptoms, while neglecting to diagnose the root cause for those symptoms. He recounts the story of a Holocaust survivor who lapsed into states of depression and severe paranoia for several weeks each year. Her health-care providers assumed the malady related to her past trauma. The woman had a successful professional and private life, but accepted prescriptions for drugs and ongoing psychotherapy, always hoping that these remedies would help avert the inevitable annual breakdowns which always occurred at the same time of year. After 25 years, she consulted Walker, well-known for his diagnostic acumen. He determined that this woman was suffering from a parasite which was common amongst prisoners in the concentration camps. Each year, it lived dormant until its active period when it reproduced and triggered the devastating symptoms. The cure: ten days of antibiotics. The moral of the story: sometimes it's not all in your head.

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