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St. John's Wort

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From Antidepressant Drugs to Antidepressant Health

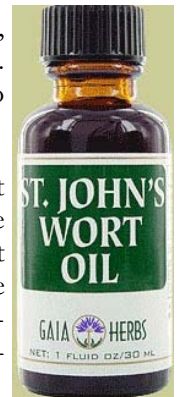
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Debbie was a 48 year-old business consultant for 6 major corporations. She was highly trained in successful use of personal power and communication in order to strengthen the sales force and cooperation between high-level executives. Every training session wasn't as easy as it looked; Debbie suffered from severe depression. Her best friend urged her to get onto a better diet by going vegetarian, adding vitamins, antioxidants, trace minerals and herbs. She stopped eating dairy products and sweets. After a year, her depression persisted and created exhaustion, possibly due to her inner frustration, and she was diagnosed as having an accompanying chronic fatigue syndrome by her local M.D. She was environmentally sensitive, becoming congested in her sinuses and chest from any odor or animal, and perhaps forty foods including dairy, corn, wheat, and nuts. Soon she couldn't ride in a car because of the tar, ozone or carbon monoxide levels which didn't seem to bother anyone else. Her doctor prescribed an antidepressant called Wellbutrin (Bupropion Hydrochloride). Although this drug's exact mechanism within the nervous system is not clearly understood, it is widely used. It is thought to have a slight impact on certain brain transmitters such as serotonin, norepinephrine and dopamine. Luckily, unlike Prozac, Zoloft, Paxil and several other drugs used to treat depression, Wellbutrin had almost no side effects. Her hypersensitivities to foods and the environment were cut by 75%. However, Debbie had some side effects; constipation, insomnia, and impaired libido. She still had the fatigue. She could live satisfactorily with these symptoms for six months, or maybe a year, but since she felt stable and her job performance had quadrupled from the self-confidence and strength she felt, she decided with her physician to try weaning herself from the drug.



Most antidepressants are broken down by the liver, and if there has ever been liver disease of dysfunction

in the past, the chemistry of the antidepressant frequently may become altered, possibly staying in the body longer and then generates greater side-effects. Much of the liver's metabolism is reflected in its breakdown of proteins and fatty acids, so in non-vegetarians the addition of an antidepressant may cause a low-level mal-metabolism of the drug which could lead to more side-effects. Debbie decided that she wanted a "clean" system, without even the slightest potential for toxic drug problems. According to her physician, she was stable and ready to go off the drug. At the same time she had arranged with her physician to decrease the Wellbutrin over a 2 month period, and she consulted me in my herbal practice as agreed upon by her doctor. I paid special attention to her constipation, since brain chemistry is often related to the brain-active chemicals stimulated and secreted by the smaller intestine. I recommended enzymes, acidophilus and a new herbal complex from a company I had the greatest respect for, "St. John's Wort" from Gaia Herb Company in Massachusetts. The quality of the extracts from Gaia are well-qualified as being equivalent to the best laboratory extracts in Europe. Within one month of Debbie self-administering one teaspoon twice a day, she remained not only stable from her previous problems, but her energy began to return, her digestive complaints vanished as well as her insomnia, and she was able to eat wheat and occasional foods that would have made her sick only months before. Now she is off Wellbutrin, it did its job, and she is sustaining excellent health on St. John's Wort Supreme with no side effects, no toxicity, and a balanced brain.



Anyone reading today's news knows that most antidepressants such as Prozac have potentially dangerous side-effects. One must weigh the side-effects with the benefits. Those who are on Prozac should speak to their doctors who can help them to make the final de-

cision; they should not do this on their own. In the conversations we have with our doctors, we frequently neglect to ask them about the middle ground between taking an actual chemical drug which has slight or moderate toxicity, or taking nothing, - there must be a middle ground, a non-toxic substance which gives a more mild benefit, perhaps. Medicine today has, though, no apparent middle ground. Medicine needs herbal solutions, just like the best surgeons who think twice about every surgery they perform, especially hysterectomies and caesarian sections. Today, surgeons are learning to perhaps NOT operate, but normal physicians are mostly not learning to try less toxic methods in less severe cases of illness. It is time.

Mental illness has risen astonishingly in the past several years, particularly serious depression. Dr. Gerald Klerman, a noted psychiatrist has termed the epidemic "Agent Blue." Do you suffer from anxiety or fear? Do you have an illness which is triggered by stress such as headaches, ulcers, spastic colon syndrome, hypertension? However, some of the greatest thinkers and leaders of our times suffered from depression. There is undoubtedly a wisdom which can result from an internal struggle. Should we then cover this up with a drug, or gently watch a mild calming accomplished with an herbal extract, thus possibly allow us to work on our problems with an able therapist? The answer should be answered by you and your doctor. Hopefully he will choose the appropriate path, which will enable you, empower you, and not wound you from your self-awareness possibilities. But physicians need to take herbal medicines seriously. Being from a direct plant source, unadulterated, the concentrations of accompanying alkaloids from a plant extract aid in the active ingredient's absorption and metabolism. Drugs are a single entity, a single ingredient, often with long-term consequences. You only hope your body can deal with them, most of the time it can. Sometimes it grows into creating a disturbance to optimum functionality of an individuals internal energetics.



New from Gaia Herbs is a combination of several herbal extracts which have similar properties to antidepressant drugs. St. John's Wort should not be a substitute for a necessary drug your doctor prescribes, but may be used in mild cases of depression for a 45-day trial period, or when weaning yourself from an antidepressant drug according to the doctor's recommendation. It can also be

used for symptoms related to chronic fatigue as well as those accompanying compromised immune systems,

such as recurrent viral infections (herpes, epstein-barr, cytomegalovirus, hepatitis C) and post-chemotherapeutically (in cancer patients) as a potential stratification method for lowered white blood cells (along with your ontological treatment). It does not

Substance	Mechanism	Possible Side Effects
Prozac (fluoxetine)	Inhibits Serotonin Reuptake, Lets more Serotonin remain	Common: nausea, insomnia, headache, agitation, reduced Appetite.
Other SSRIs Zoloft (sertraline) Paxil (paroxetine)	(SSRI)	Less Common: Lowered libido, sexual performance. Rare: Suicidal tendency, aggressive tendency.
Parnate (tranylcypromine)	Monoamine Oxidase (MAO) Inhibitor, increasing concentrations of epinephrine, norepinephrine, and serotonin as well as monoamines in the brain stem, which may have an integrative role in depression control.	Increased anxiety, decreased appetite, nausea, diarrhea, chills, impotence.
Other MAOIs: Isocarboxazid (Marplan) Phenelzine (Nardil)		
Imipramine (Sinequan)	Tricyclic. Inhibits Norepinephrine reuptake, therefore accumulates norepinephrine at the synaptic level.	Dry mouth, blurred vision, constipation, urinary retention, drowsiness.
Other Tricyclics: Amitriptyline (Elavil) Clomipramine (Anafranil) Doxepin (Adapin)		

have known reactions to pharmaceutical drugs prescribed by your physician. In order to understand how St. John's Wort works, it is important to examine its chemistry in relation to known antidepressant biochemistry. There are three major mechanisms utilized in the treatment of depression: One, the Selective Serotonin Reuptake Inhibitor (S SRI), two, the Monoamine Oxidase (MAO) Inhibitor, and Tricyclics.

St. John's Wort is not a substitute for a genuine drug of your doctor's (hopefully psychiatrist's) choice. St. John's Wort is not treating any medical condition or disease.

St. John's Wort consists of the following herbs:

Kava Kava Root (Piper methysticum); modifies neuron receptor spaces, acts in the "old brain" (limbic system - the seat of emotions), reduces pain by an unknown mechanism, does not develop tolerance, is not addictive, protects the brain against damage from stroke. It is working on the symptoms of anxiety. Principle molecule: Kavalactones. Possible side effects are rare and include only skin dryness/flakiness in high dosed individuals. May act like a tricyclic.



St. Johnswort Flower Buds (Hypericum perforatum) Hypericum is antidepressant, antiviral, and mildly antibiotic. The Hypericin molecule has shown to inhibit A and B monoamine oxidase (MAO), therefore



creating and increased level of dopamine, norepinephrine and epinephrine within the brain which contribute to emotional stability. The German literature indicates that Hypericin has a modulating effect on psycho vegetative disturbances, depressive states, fear, and nervous disturbances. It has been compared with tricyclic antidepressants in its mode of action is weaker than drug tricyclics and must not substitute for your physician's prescription. There is some evidence which suggests it to be an important adjunct to therapies for Herpes simplex, mononucleosis, and influenza, and with its antidepressant effect, is often used for chronic fatigue syndrome. Care must be used in sun exposures in that Hypericum can cause sun sensitivity. It is, therefore, often not prescribed in the hot summer months. Other foods to be stopped while taking this MAO inhibiting herb are cow products, beer, wine, pickled herring and yeast. Principle molecules: Hypericin and Pseudo-hypericin Secondary molecules:



Xanthenes, ferulic, gentisic and chlorogenic acids, carotenoids, alkanes phloroglucinol derivatives, phytosterols and medium chain fatty acid alcohols.

Passion Flower (Passiflora incarnata): a spasmolytic which has been known to be used in neurovegetative dystonia, insomnia and anxiety states, similar to Papaverine (Kava Kava) but more sedative. Principle molecule: glucosyl derivatives (saponarin, vitexin, orientin, vicianin).

Chinese Schizandra Berry (Schizandra chinensis); has been

shown to have a protective effect on liver cells, from exposure to toxic chemicals, and enhances the regenerative capabilities of liver cells, especially against free-radical induced tissue injury. Principle molecule: Gomisin A lignan (IIN-101)

Wild Oats (Avena sativa); for chronic and acute anxiety states, neurasthenic syndromes, weaknesses of connective tissue. Has shown in vitro anti-fungal activity. Principle molecules: saponins (avenacosides), flavones.

Calamus Root (Acorns calamus) Principal molecule: cis-isoasarone, a mild tranquilizer.

Other ingredients for energy and detoxification:

- ◆ **Siberian Ginseng (Eleutherococcus senticosus)**
- ◆ **Nettle Seed (Urtica dioica)**
- ◆ **Prickly Ash Bark (Xanthoxylum clava-herculis)**
- ◆ **Gotu Kola Leaf and Root (Centella asiatica)**

In my herbal/acupuncture practice, I have in any one week several patients who are taking antidepressant drugs. Although I do not interfere with that realm of therapy, I watch them for when they are taken off their medications eventually by their psychiatrists, and give them information about interim methods of herbal therapy, as I also communicate with their doctors to obtain a complementary relationship between the therapies. I am successful in establishing a good communication with nearly all physicians in this matter, and as long as these patients are monitored by their physicians, there is a success in slow weaning off the drug therapy. Phyto-Proz is the first product I have seen and utilized to aid the depressed patient out of the woods of drug therapy in a gentle manner. It may be-



hoove the alternative practitioner to get in contact with neighboring psychiatrists who do not prefer to start a drug therapy too soon, and may be open to herbal solutions. Sometimes a patient tries 3 or 4 drugs for depression and they prove to be too strong, the patient is chemically sensitive.