

Alt-Health: Antidepressants

The use of antidepressants (ADs) in this country rose more than 400% between 1990 and 2008, then increased by another 65% between 1999 and 2014. Why? Many argue that today's skyrocketing numbers are due to previous undertreatment of depression, while others blame profiteering by the pharmaceutical industry. Another camp sees it as a generalized symptom of dehumanization. I asked Dr. B, a clinical psychiatrist who works with adults and adolescents, for his take on antidepressants. As it turns out, this issue is much more complex than the TV ads would have us believe.

"There is a problem with the expectation patients have of a quick fix. Antidepressants can't actually cure depression," Dr. B told me. "Medications can't reformat your brain. When you stop them, your brain will go back to the way it was before you took meds. When people feel better and decide to go off, they expect the effects to continue. But most people relapse into symptoms again after a time, as they still are who they are." According to Dr. B, most people have no idea what antidepressants do or how they really work. He sees the advertising claims as marketing BS. "No legal medication can make you happy. Human emotional happiness is a transient, usually behavior-driven state." He believes that people need to learn skills through counseling, and that antidepressants alone are a very bad idea. "Studies show that patients who take meds alone without counseling are worse off in 10 years than when they started. Those new skills are important. Medications don't make good life decisions for you and feeling better is not related to actually being better." In other words, the idea is not to make the patient feel better about making lousy decisions.

Dr. B notes that antidepressants all work differently. "Selective serotonin reuptake inhibitors (SSRIs) like Prozac and Zoloft can best be described as turning the gain down on right brain activity, thus decreasing sensitivity and distortion. Norepinephrine-dopamine reuptake inhibitors (NDRIs) like Wellbutrin have the effect of turning up specificity or attention (left brain activity), which gives energy, alertness and more accuracy." He sees this as an important factor in properly prescribing medication; it also explains why ADs are often necessary for life for some people. "Feeling (right brain) operates 12 times faster than left brain. Some patients, even with 40 years of skill building, will be sabotaged by negative tendencies when they go off meds because the brain works so instantaneously that they have reacted before they have time to use their acquired skills. ADs can provide that 3 second pause that allows them time to choose. Humans are emotional critters, and that is for survival. Paranoia is a primitive survival mechanism - kill the danger before it kills you. But this instinct doesn't work as well in a crowded 9 to 5 culture. You can't just kill the person at the next desk, although these days that's getting way more popular."

I asked about people who drink while taking ADs. "Bad mix, alcohol and antidepressants. When people combine the two, they have more going on than depression alone. Clearly, there's a lot of issues they aren't dealing with and want to numb out with alcohol. Balancing brain activity is the key to successful treatment. Unfortunately, far too few doctors consider the treatment aspect of left to right brain balance, and our current diagnostic paradigm, the DSM5, doesn't address this at all. Newer information is out there, and a lot of doctors know this, but we are forced to practice in the old system due to insurance and politics."

What about long-term use? "One of my patients was on Zoloft for 20 years, but started having some side effects, muscle movements and such, so we have been trying a few different things to find the best

fit. On Wellbutrin, an NDRI, she felt more alert and had more energy and sex drive, but over time her obsessiveness returned. So we went to Cymbalta (SNRI-mix of norepinephrine and serotonin). Adding serotonin back diminished the obsessiveness, but then she found details cumbersome and boring. It's a balancing act. Who she is as a person can be changed. This, of course, is freaky, but off meds she gets bogged down with obsessive thinking and doesn't function as well. She's had many years of skill building, it just doesn't matter. Off meds, she can't use the skills."

I asked about other methods of beating depression, such as regular exercise, meditation and diet. Dr. B. believes these are positive steps, but that, for the average patient with a busy life, these may not be enough. "At the level of master yogi maybe, but not in the real world. I see medications, exercise, nutrition, healthy positive friends and books as valid methods, but taking medications regularly can be another form of self control."

So, ultimately, what's more important: self control, or medication? Dr. B considered for a moment. "Honestly, in our current society? One often needs the other in order to exist."

You can read Dr. B's blog at drbrilliantcliche.wordpress.com.