

# OPTIMAL HEALTH UNIVERSITY™

Presented by Dr. Peter Hobson

## Natural Solutions for Depression: Part II

*This week, Dr. Hobson is pleased to present patients with part two of our series on natural solutions for depression. Read on to learn what scientists are discovering about drug-free options for keeping the blues at bay.*

### Watch Your Diet

Nutrition is a key component of the chiropractic lifestyle. That's why Dr. Hobson encourages patients to consider how the foods they eat affect their body and well-being.

The documentary film *Supersize Me* demonstrated the physical and emotional effects of a high-calorie and high-fat diet. Not surprisingly, the filmmaker developed depression after eating only food from McDonald's® for 30 days.

High blood sugar or fluctuations in blood sugar may also trigger depression symptoms. So skip the simple carbohydrates. These "simpletons" are found in refined sugars, white flour, white rice, pasta and processed snacks. And here are two more reasons to hold back: Refined foods contain virtually no vitamins or minerals and are often high in fat.

On the other hand, research suggests that depressed people should opt for foods rich in complex carbohydrates, especially if their sorrow is triggered by stress (*Physiol Behav* 2000;70:333).

Complex carbohydrates, as opposed to their simpler siblings, are essential for healthy diets. Complex carbohydrates are found in a variety of foods, such as whole grains, potatoes, legumes (peas and beans) and other vegetables.

### Spice Things Up

Preliminary studies in mice show that curcumin, the nutrient in the curry spice turmeric responsible for its yellow hue, is a potent antidepressant.

According to researchers, curcumin produces chemical brain changes that mimic those of antidepressant medications called monoamine oxidase inhibitors — without the potential side effects associated with these drugs (*J Ethnopharmacol* 2002;83:161-5).

### Nurture Your Spiritual Side

Dr. Hobson and fellow doctors of chiropractic acknowledge the connection between mind, body and spirit.

Studies show that spirituality — including attending religious services, prayer, meditation and helping others — may slash an individual's risk of depression.

For instance, when researchers in Saskatchewan, Canada, surveyed approximately 37,000 individuals aged 15 years or older, they found a strong correlation between spirituality and freedom from depression.

"This study confirms an association between higher worship frequency and lower odds of depression and it expands that finding to other psychiatric disorders." (*Can J Psychiatry* 2006;51:654-61.)

Similarly, when researchers in Sao Paulo, Brazil, reviewed 850 studies on religion and mental health, they found that "higher levels of religious in-



volvement are positively associated with indicators of psychological well-being (life satisfaction, happiness, positive affect, and higher morale) and with less depression, suicidal thoughts and behavior, drug/alcohol use/abuse." Findings were especially true for individuals undergoing stressful circumstances, such as a disability (*Rev Bras Psiquiatr* 2006;28:242-50).

And, an inquiry of 99 college students revealed that students who reported that they were religious were 34 percent less likely to have mental health problems, compared with subjects who did not engage in spiritual pursuits (*Psychol Rep* 1999;85:1088).

### Dietary Supplements

Dietary supplements may alleviate depression in some individuals. For example, studies link vitamin B12 deficiencies with depression. A review of 700 women, 65 years of age and over, found that those with B12 deficiencies were more than twice as likely to be severely depressed compared with nondeficient subjects (*Am J Psychiatry* 2000;157:715-21).

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Studies also associate folate deficiencies with depression. Researchers from Tufts University in Boston, Mass., measured folate levels and depression symptoms in nearly 3,000 individuals between the ages of 15 and 39.

Subjects who met the criteria for a “lifetime diagnosis of major depression” had lower folate levels than their depression-free peers. The researchers concluded that “folate supplementation may be indicated during the year following a depressive episode.” (*Psychosom* 2003;72:80-7.)

The herb St. John’s Wort (*Hypericum perforatum*) may also be beneficial. However, new research identifies a variety of potential adverse reactions (*Complement Ther Med* 2006;14:268-81).

**Remember: Never initiate a dietary supplementation program without first checking with your doctor.**

### **Sleep Soundly**

When it comes to keeping depression at bay, seven to eight hours of sleep a night is optimal for most individuals.

Too few zzzz’s will bolster odds of developing the blues, according to an analysis of 130 people in Quebec, Canada (*J Gerontol Nurs* 2006;32:5-11).

On the other hand, excessive sleep — 10 or more hours every night — may leave you feeling sluggish and boost chances of depression, say scientists.

Sleep is especially important for children’s mental health. One study, which included 823 6-year-olds, documented that youngsters who had trouble sleeping during the previous six months had “significantly” higher chances of depression than any other emotional condition.

Five years later, at age 11, the same group of children again repeated the study. The association between sleep and depression was even stronger than it was at age 6. The authors conclude that there is “a stronger association of

trouble sleeping with anxiety/depression than other psychiatric problems.” (*Psychiatry Res* 2000;94:93-102.)

### **Light Up Your Life**

Light has immeasurable results on emotions. Days without seeing the sun dramatically increase chances of depression and anxiety. And for many people, driving to and from work in the dark is part of a daily ritual. One particular form of depression, known as seasonal affective disorder (SAD), develops primarily by lack of exposure to sunlight.

So, even if it’s merely for a few minutes a day, seek out sunshine. Of course, moderation is key — 10 to 15 minutes is enough — and always wear sunscreen.

Light therapy may be necessary in some situations. For instance, in a case study of a 46-year-old woman with diagnosed depression, light therapy significantly reduced symptoms. During the three-week study, daily bright light therapy slashed depression and anxiety by 74 percent to 80 percent (*Acta Psychiatr Scand* 2006;114:216-8).

### **Manage Anger and Frustration**

You can’t always avoid negative emotions, such as anger and frustration, but they’re strongly tied to depression. So finding a release, such as journaling or exercise, is essential. Also, identify which situations tend to provoke you to experience anger and frustration, and what specifically triggers the emotion. If possible, limit your exposure to these emotional triggers.

Listen to your inner dialogue and stamp out any self-defeating criticism. Replace it with positive messages and a plan for the future. For example, replace “I’m a real louse for forgetting his birthday” with “He’ll understand. I’ll do better next time. I’ll start a new system to remember birthdays today.”

### **Turn Off the Tube**

Too much TV, computer and video-game use may spur depression, especially among young people. Studies show that children who watch fewer hours of TV are less likely to suffer from depression, social isolation and obesity than youngsters who watch more TV. Spending hours on the computer, including the Internet, also increases depression and loneliness (*Future Child* 2000;10:123-44).

In addition, steer children away from violent television shows, movies and video games, which may increase depression and aggressiveness and desensitize a child to suffering.

Playing violent video games causes alterations in brain functioning, according to findings recently presented at the Radiological Society of North America’s annual meeting.

The study’s authors asked 44 youths, aged 13 to 17 years, to play either a violent or a nonviolent video game for 30 minutes, then complete a series of tasks.

During the experiment, investigators used functional magnetic resonance imaging to monitor metabolic alterations in the subjects’ brains.

The brains of those who played the violent game showed increased activity in the amygdala (the region of the brain involved with emotional arousal) — and decreased activity in the prefrontal lobes (the regions of the brain associated with concentration and focus).

**Remember: If you currently take an antidepressant, consult with the prescribing doctor before altering or discontinuing your medication.**

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