

# Harmful Effects of Antidepressants and the Natural and Effective Alternatives



By Morning: Spirit: Wolf-D.R.M.

It's no wonder that antidepressants are the number one prescribed drug in America with all the daily stressors that make us feel hopeless, overwhelmed, and sleep deprived. It may seem the easiest thing to get a prescription to "make us feel better", but we know that all drugs have negative side effects. The harm from antidepressants, however, may be more than just on the physical body. In addition to liver toxicity, neurological disorders, osteoporosis, weight gain, and suicidal tendencies that are part of the natural, expected, and unavoidable side-effects of antidepressants, is it also possible that an antidepressant can cause a sane person to act like a cold-blooded criminal?

Kelly Brogan MD, a psychiatrist who regularly writes prescriptions for her patients got a disturbing letter from one of them, who wrote:

"I took the life of my 11-year-old son Ian on July 31, 2004 in a Paxil-induced state of psychosis and was charged with first degree murder. I was judged to be "not criminally responsible on account of a mental disorder" in September 2005 and received an absolute discharge from the forensic psychiatric system (in Ontario, Canada) in December 2009. I've been off all prescription drugs since September 2010. Prior to our family tragedy, I was a physically active sports consultant with no history of violence or mental illness."

He went on to tell how it is that a normal person, prescribed a seemingly safe medication for work-related stress, goes on to commit a heinous act of violence against his beloved child. We might think that this must be rare, right?

Wrong.

The Russian roulette that is played with each new prescription of psychotropic medication violates the physician's most primal tenet – first do no harm.

Dr. Brogan began investigating platforms like [www.madinamerica.com](http://www.madinamerica.com), and uncovered that beyond main stream media, there are grass roots movements of individuals trying to inform others of the extensive harm that is occurring with prescription drug use behind the veil of public news and information pertaining to what the real victims are experiencing.

The truth about antidepressants and violence is also in the most recently published medical literature, including a critical review, hot off the press, by Carvalho where the research on the supposed safety of SSRIs and SNRIs exposes a different story. In this document, they present an evidence-based horror menagerie of ways in which a simple antidepressant can derail your life, if it doesn't take it. Leaving patients with new medical diagnoses, antidepressants prescribed often for difficult transitions in life like divorces and deaths, carry documented risks that your doctor cannot possibly tell you about because if they knew of them, they would put down their prescription pad immediately.

Neatly summarized in the document are the adverse effects of antidepressants, which doctors are informed by the pharmaceutical companies prove sound because regardless of the harm the drug may produce, they are told these “side effects are rare, and outweighed by the benefits.”

What are those side effects...

**Table 1.** Main adverse events related to use of newer generation ADs

1.	Gastrointestinal (nausea, vomiting, GI bleeding)
2.	Hepatotoxicity and hypersensitivity reactions (dermatologic and vascular manifestations)
3.	Weight gain and metabolic disturbances
4.	Cardiovascular (QT interval prolongation, basal heart rate and HRV, hypertension, orthostatic hypotension)
5.	Genitourinary (urinary retention, incontinence)
6.	Sexual dysfunction
7.	Hyponatremia
8.	Osteoporosis and fractures
9.	Bleeding
10.	Central nervous system (seizure threshold, extrapyramidal side effects, serotonin syndrome, headache, stroke)
11.	Sweating
12.	Sleep disturbances
13.	Affective (apathy, switching into hypomania or mania, paradoxical effects)
14.	Suicidality
15.	Safety in overdose
16.	Discontinuation syndromes
17.	Ophthalmic (glaucoma, cataract)
18.	Hyperprolactinemia
19.	Risk during pregnancy and breast feeding
20.	Risk of malignancies

## ***The Risks That Made Dr. Brogan Quit Prescribing***

Having always represented antidepressants as safe and effective to her patients, Dr. Brogan put down her prescription pad after learning 3 facts about psychiatric medications:

- They result in worse long-term outcomes
- They are debilitatingly habit forming
- They cause unpredictable violence

These insights were apparently just the tip of the iceberg. Several years into the horror stories of patient experiences and new relationships with grassroots activists, Dr. Brogan was left wondering. What on earth *are* these meds? How could biochemistry have ever manifested molecules capable of derailing, distorting, and suppressing the human experience to this extent?

Some of the catch phrases from the document are below, and suffice it to say that many of these side effects are major problems if not life-ending tragedies that render the placebo-level performance of these medications totally unacceptable.

**Gut disturbance:** *“Some of the most frequently reported side effects associated with the use of SSRIs and serotonin noradrenaline reuptake inhibitors (SNRIs) include nausea, diarrhea, dyspepsia, GI bleeding and abdominal pain.”*

**Liver toxicity:** *“Two main mechanisms may be involved in antidepressant- induced liver toxicity, namely a metabolic component and/or an immuno-allergic pathway. A hypersensitivity syndrome with fever and rash as clinical manifestations, as well as with autoantibodies and eosinophilia, and a short latency period (1–6 weeks) point to a predominantly immunoallergic pathophysiological mechanism, whereas a lack of hypersensitivity syndrome and a longer latency period (i.e. 1 month to 1 year) points to an idiosyncratic metabolic mechanism.”*

**Weight gain:** *“Notwithstanding the complexity of the clinical scenario, compelling evidence indicates that the use of most antidepressants may increase weight in a significant proportion of patients.”*

**Heart problems:** *“SSRIs and SNRIs may promote a decrement in heart rate variability (HRV). Although the impact of the effects of antidepressants on HRV remains to be established, data indicate that a lower HRV is a significant predictor of incident cardiovascular events.”*

**Urinary problems:** *“SSRIs can cause urinary retention by acting on central micturition pathways. Serotonin may increase the central sympathetic outflow leading to urinary storage, and at the same time inhibits parasympathetic flow, which affects voiding.”*

**Sexual dysfunction:** *“...a significant body of data shows that antidepressants may differentially affect sexual function in multiple aspects, leading to reductions in libido, arousal dysfunction (erection in males and vaginal lubrication in females) and orgasmic dysfunctions.”*

**Salt imbalance:** *“The mechanisms of SSRI-induced hyponatremia remain incompletely elucidated, but these agents can act by either increasing the release of antidiuretic hormone (ADH) or increasing the sensitivity to ADH resulting in a clinical picture similar to the syndrome of inappropriate secretion of ADH.”*

**Osteoporosis/Bone weakening:** *“The use of SSRIs has been associated with a reduction in bone mineral density (BMD) and a consistent higher risk of fractures.”*

**Bleeding:** *“All serotonergic antidepressants have been associated with an increased risk of bleeding. The most likely mechanism responsible for these adverse reactions is a reduction of serotonin reuptake by platelets, although other mechanisms have also been implicated.”*

**Nervous system dysfunction:** *“All kinds of EPS [extrapyramidal symptoms] are seen in patients taking antidepressants, but akathisia appears to be the most common presentation followed by dystonic reactions, parkinsonian movements and tardive dyskinesia...Headache was one of the most common side effects associated with the use of antidepressants in a large retrospective cohort of adolescents and adults.”*

**Sweating:** *“Most studies indicate that approximately 10% of patients on SSRIs may develop excessive sweating, although the incidence may be higher for paroxetine.”*

**Sleep disturbances:** *“The SSRIs and venlafaxine are associated with increased REM sleep latency and a reduction in the overall time spent in the REM phase while sleeping.”*

**Mood changes:** *“Many patients taking SSRIs have reported experiencing emotional blunting. They often describe their emotions as being ‘damped down’ or ‘toned down’, while some patients refer to a feeling of being in ‘limbo’ and just ‘not caring’ about issues that were significant to them before...Furthermore, an activation syndrome in which patients taking antidepressants may experience anxiety, agitation, panic attacks, insomnia, irritability, hostility, aggressiveness and impulsivity in the first 3 months of treatment may ensue.”*

**Suicidality:** *“The incidence of suicide and attempted suicide has been a frequently underreported adverse outcome across antidepressant RCTs.”*

**Overdose toxicity:** *“Patients with MDD are at increased risk of suicide and overdosing of prescribed medications is a common method used to attempted suicide.”*

**Withdrawal Syndrome:** *“These symptoms include flu-like symptoms, tremors, tachycardia, shock-like sensations, paresthesia, myalgia, tinnitus, neuralgia, ataxia, vertigo, sexual dysfunction, sleep disturbances, vivid dreams, nausea vomiting, diarrhea, worsening anxiety and mood Instability.”*

**Eye disease:** *“A subset of patients taking SSRIs reports nonspecific visual disturbances...SSRIs may increase intraocular pressure and lead to the emergence of angle-closure glaucoma...A nested case-control study found a higher likelihood of cataracts after exposure to newer generation antidepressants.”*

**Hormonal imbalance:** *“Long-standing increases in peripheral prolactin levels are occasionally observed in patients using ADs, including SSRIs [208] ; hyperprolactinemia may have deleterious health consequences (e.g. a decrease in BMD [bone mineral density] and hypogonadism).”*

**Pregnancy/Breastfeeding risk:** *“Most of the data describing the presence of birth defects associated with SSRI use have been based on observational studies and drug registries. Therefore, the clinical significance of these data is questionable.”*

**Cancer risk:** *“Preclinical studies have found that antidepressants can increase the growth of fibrosarcomas and melanomas, and may also promote mammary carcinogenesis.”*

How is it possible that drugs, issued by medical doctors as health care professionals, which are purported to mitigate depression, anxiety and stress could possibly produce such harmful and life threatening side-effects? That's depressing.

And why don't you know about these? Because your doctor doesn't know. Many MD's prescribe an antidepressant simultaneous to an antibiotic "just in case the antibiotic caused depression or mood changes". Doctors are trained to treat these medications as a "why not" application of pharmacology, and the truth is that, as the authors state:

*...the history of toxicology reminds us vividly of the lag that often occurs between the first approval of a drug for use in humans and the recognition of certain adverse events from that drug."*

## Antidepressant Alternatives

Taking these risks are completely unnecessary when **natural, low cost, immediately available, and side effect free** vitamins, herbs, and other nutritional supplements are available. Alternatives to the risks presented by pharmacopeia and the lack of knowledge of medical doctors in prescribing the drugs are becoming more well-known, and ever more important for health.

Natural treatments offer not only resolution of symptoms and elimination/avoidance of meds, but an entirely new experience of self. This is not about getting "back to normal," it's about integration, evolution, and vitality. I've put together a self-healing toolkit for anyone considering an antidepressant or looking to come off of one for about the same price as a doctor visit.

See Home Remedy Section ([click here](#))