



Biochemical treatment of depression

24 October 2009



  Edmond V O'Flaherty,
GP
Gleneagle, Greygates, Mount Merrion, Co Dublin

Send response to journal:
[Re: Biochemical treatment of depression](#)

I am a GP with a big interest in nutrition in mental health. I see many patients who come to see if they can get off antidepressants and remain free of depression. To do that I order a whole range of biochemical tests, most of which I get done in my local hospital. I also use the services of Biolab, a specialist lab in London. The best result I get is coeliac disease which appears to be the cause of psychiatric illness in about 4% of patients. This can be diagnosed easily with a simple tTG blood test with confirmation by duodenal biopsy if positive. They can get off medication fairly easily if they go on a gluten-free diet. The others will require individual doses of amino acids, vitamins, minerals and essential fatty acids as a chemical imbalance seems to be the problem. This is not a panacea but many of my patients do really well and in fact this is the most satisfying of all the work I do as a GP. I had to go to Australia to learn about this at a course for doctors given by the Pfeiffer Center, Chicago (www.hriptc.org). Is not rocket science to learn it but nobody seems to want to know, while millions suffer.

Critical to get the biochemistry right

22 October 2009

  Edmond V O'Flaherty,
GP
Gleneagle, Greygates, Mount Merrion, Co Dublin



Send response to journal:
[Re: Critical to get the biochemistry right](#)

I am a GP with a big interest in getting the biochemistry right in addition to using the standard medication in patients with mental health problems. As little is known about this in Europe I went to Sydney for a course in 2006 and it has transformed the lives of hundreds of people since. I enjoy psychiatry a lot more now.

It appears that mental health problems are really physical health problems. The brain makes 300 neurotransmitters and the raw materials must be supplied daily- amino acids, vitamins, minerals and essential fatty acids. The raw material may not be supplied if the diet is not balanced properly. Next you need to get the proteins broken down to individual amino acids in the gut and then they go to the brain and hopefully provide a balance and normal mental health after conversion to neurotransmitters. Many tests can be done to find out what is wrong including plasma zinc, serum copper, ceruloplasmin, histamine, pyrroles, coeliac antibodies and various vitamin levels to name only a few. I look after two children who were doing really badly in school and when I did the tests and got the mothers to get the children the proper nutrients the results were most satisfactory. Having treated several hundred patients now I believe that getting the biochemistry right may well prevent many cases of depression and even cases of psychosis. Why let them suffer often for a lifetime if this simple work can be done. Here is one practical suggestion: Check every psychiatric patient for coeliac antibodies- a simple blood test (positive result to be proved later by duodenal biopsy). About 4% of them will be positive and you can change their life utterly by getting them on a gluten-free diet.

Antipsychotics are mostly antioxidants

17 June 2009

  Edmond V O'Flaherty,
GP
Gleneagle Clinic, Greygates, Mount Merrion, Co Dublin


Send response to journal:
[Re: Antipsychotics are mostly antioxidants](#)

Most antipsychotics are antioxidants, with the notable exception of Geodon (Ziprasidone). However many natural substances are antioxidants too and in my experience if they also are used patients need far less antipsychotics in the long term. This makes them much more alert and less prone to diabetes and the numerous other side effects of these drugs. If you were to analyse the biochemistry of a paranoid schizophrenic you would expect to find high serum copper and low plasma zinc for example. If you give zinc- typically about 50mg- lower intake of copper from the gut results. As copper is used in the body in the process of converting dopamine to noradrenaline this will reduce this production and in turn this will give the patient less adrenaline. Used in association with niacinamide or niacin at about 1.5g bd, B12, folic acid plus antioxidants such as vit C and E you can expect these patients to see a reduction in depression by months 3-6 and anxiety by months 7-8. By 12 months they are often quite well with the paranoia and voices gone. I enjoy psychiatry much more now that so many of my patients are getting better.

Two other points I would like to make. About 4% of those with a history of psychosis have coeliac disease and if treated by a gluten-free diet they get well. I noticed that the antipsychotic quetiapine (Seroquel) made many of my patients quite drowsy. I found out that that is because it has a strong affinity for the histamine receptors and if they take 120mg fexofenadine (Telfast) the drowsiness is much improved to the point of being able to work.

Biochemical treatment in Alzheimer's Disease

22 February 2009


 Edmond V O'Flaherty,
GP
Gleneagle Greygates Mount Merrion Co Dublin

Send response to journal:
[Re: Biochemical treatment in Alzheimers Disease](#)

I am a GP but one third of my work is psychiatric and in particular I am interested in getting the biochemistry working normally in addition to using the standard psychiatric treatment. The majority of psychiatric conditions improve with that combination, although OCD responds in only about 15% of cases. I looked at Alzheimer's Disease and in particular the biochemical treatment being tried by Pfeiffer Center in Chicago. They believe that the far from perfect performance of the gut at that age is one of the causes and suggest metallothionein promotion to improve the transmission of proteins in the form of amino acids through the gut wall might help. I myself have tried it in only one case -it costs about 50p per day but others thought this was too expensive and would not try it. Happily two years on my patient is doing well and her husband is very happy with the result. I have given details of this and other aspects of nutrition in mental health at www.omega3.20megsfree.com. The first page will get you on to the Pfeiffer data.

Start with getting the biochemistry right

10 September 2008


 Edmond V O'Flaherty,
GP
Gleneagle, Greygates, Mount Merrion, Co. Dublin

Send response to journal:
[Re: Start with getting the biochemistry right](#)

I am a GP but about one third of my work is concerned with biochemical psychiatry. While patients continue on their antipsychotics or antidepressants I try to improve the situation by working on the biochemistry. This has given me enormous satisfaction and it is by far the most useful work that I do. I do not know if early intervention with antipsychotics would help a person who appears to be heading for a first psychotic episode but I am sceptical. However because psychiatric conditions are largely genetic it appears that the breakdown occurs when antioxidant protection has become inadequate because of the build-up over many years of oxidative stress. Before they reach that state there are many things that could be done. Paranoid schizophrenics for example have high copper and low histamine-they are overmethylated. Copper is involved in the conversion of dopamine to noradrenaline and in turn much of this finishes up as adrenaline. It is no wonder that they are so anxious and can hardly sit still. Niacinamide, zinc, B12 and folic acid together with other nutrients, especially antioxidants, will help a lot. Incidentally antipsychotics themselves are almost all powerful antioxidants.

Copper in post-natal depression

29 August 2008

 Edmond V O'Flaherty,
GP
*Gleneagle, Greygates, Mount Merrion,,
Co Dublin*

Send response to journal:
[Re: Copper in post-natal depression](#)


I would be supportive of Dr Ellen Grant's contribution to these rapid replies. Most doctors have little or no interest in nutritional psychiatry so a whole range of psychiatric problems are being treated inadequately using medication only where the biochemistry should be sorted out too. Copper levels double during pregnancy, probably because it appears to be required for the formation of blood vessels in the foetus. If the copper level does not drop quickly after delivery depression

appears to be likely. It seems then that giving zinc after delivery should protect against post-natal depression. Further research is needed to prove that definitively but as zinc competes with copper in passing through the gut wall it seems entirely logical.

There is a whole world of biochemical treatments available for such varied conditions as autism and Alzheimer's too but nobody seems to care as no drug company can make money out of natural nutrients-amino acids, vitamins, minerals and essential fatty acids.

The most important work I do.

6 October 2007


 Dr Edmond V O'Flaherty,
GP
Gleneagle, Greygates, Mount Merrion, Co. Dublin

Send response to journal:
[Re: The most important work I do.](#)

When I became a GP I had no knowledge of any therapy other than what we were taught in hospital. We kept patients in bed for quite a while after an infarct as we did with patients who had severe back pain. We used drugs which later proved to be highly dangerous. Many years later I developed an interest in nutrition in mental health, using vitamins, minerals, amino acids and essential fatty acids as complementary treatment and now I use these nutrients for many patients with much satisfaction. If a patient who has seen a cardiologist comes to me and says he heard I could improve his disease I would laugh at the idea. However if a patient who had seen a psychiatrist comes there is a better than 50:50 chance that I can significantly improve his condition. Much work has been done in this field by the late Dr David Horrobin, Professor Malcolm Peet of Sheffield University and Professor Andrew Stoll of Harvard but much more needs to be done, especially in publishing results. Drug companies will not pay anything to advance this type of treatment. Doctors generally have no knowledge and no interest in the subject. I think that is outrageous. This month for example I have 2 patients who have been diagnosed with schizophrenia starting at university and all I have done is to try to normalise their biochemistry while leaving their medication to the psychiatrist. This is the most important work I do and the most satisfying. For those interested I have a website at www.omega3.20megsfree.com

Coeliac disease may manifest itself as psychosis.

6 April 2007

 Edmond V O'Flaherty,
G.P.
Dublin, Ireland

Send response to journal:
[Re: Coeliac disease may manifest itself as psychosis.](#)

At a course for doctors in nutritional treatment in psychiatry that I attended a year ago in Sydney one point made by the staff of Pfeiffer Center of Chicago (www.hripte.org) was that 4% of psychotic cases are due to coeliac disease. Immediately I started doing coeliac screening of all my patients with a history of psychosis. The very first positive one, who had relatively minor bowel discomfort, was a 38 year old lady with a 20 year history of bipolar disorder and numerous admissions for chronic severe depression. A few weeks after starting a gluten-free diet her depression lifted and she has remained well since. I believe that all patients with psychotic illness should be screened. The thought that thousands of people are suffering mental torture when a simple blood test could lead the way to dramatically improving their mental health sounds almost too good to be true but true it is.