

Getting Off Tranquilizers and Antidepressants

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Excerpted from **The Addicted Brain and How to Break Free**

<http://cassmd.com/books/the-addicted-brain/>

Tranquilizers

If you take anti-anxiety drugs, you have lots of company. More than 4 million Americans take prescription benzodiazepines such as Valium or Xanax every day, often for years. Two-thirds of all prescriptions for benzodiazepine are written by family practitioners, and the remainder by psychiatrists. Highly addictive, they are also responsible for a major portion of accidents, many serious and even fatal. Benzos happen to be one of the largest classes of abused drugs, as well.

Though less generally recognized, there are also withdrawal effects from the antidepressants especially the SSRIs – *Prozac, Zoloft, Paxil, and Celexa*. We will deal with the benzos first.

Minimizing Withdrawal Symptoms with Natural Remedies

Coming off benzodiazepines has its own hazards, and must be done under medical supervision. Abruptly withdrawing from high doses can lead to seizures or even death.

My patient Marcy had been hooked on Valium, and finally took herself off it, cold turkey. Not a good idea. She had a many of the usual withdrawal symptoms: insomnia, anxiety, irritability, sweating, blurred vision, diarrhea, tremors, mental impairment and headaches.

Had she known better, she would have gone on a gradual program of withdrawal coupled with natural remedies such as theanine, GABA, and valerian, as found in CALM Natural Mind, and Nightly CALM, both of which can ease and shorten the transition phase.

The ideal withdrawal program has to be tailored to the unique circumstances – the amount of the drug taken, length of use, and your unique physiology. It takes months to get off these drugs completely, and professional support and guidance are essential.

As mentioned, the herb, valerian, is also a great help in the process of withdrawal. A GABA enhancer, it will have similar actions to the drug, but is much gentler and doesn't have the same addictive potential. The same is true for GABA and theanine. You gradually reduce the tranquilizer dose while increasing that of the supplements. Experiment with each, and see which one works best for you. They each have their own actions and "feel," so the choice depends on how well they're doing the job.

A word of caution – since benzodiazepines, GABA, theanine, and valerian all enhance GABA, the combination of the herbs with tranquilizer drugs can make the drugs' effects more potent.

For this reason, valerian, as well as the amino acids theanine and GABA, should be viewed in the same way as any medicine, and taken in carefully scheduled doses as part of the medically supervised withdrawal program.

To sum up, here are some practical steps you can take to break addiction to tranquilizers, and minimize symptoms of withdrawal:

- Do this only under the guidance of a physician.
- Deal with psychological issues with the guidance of a psychotherapist.
- Start with milk thistle (*Silymarin silibum*), a supportive herb for the liver, your detox factory, to speed up the break-down of these drugs in your body. Alpha lipoic acid is also an excellent liver support, even used intravenously for acute liver toxicity as occurs in acute mushroom poisoning. Both nutrients are found in my Brain Recovery AM&PM Formula.
- Gradually reduce the tranquilizer dose, under professional guidance, and replace it with valerian, theanine, glycine and/or taurine. Or take my CALM Natural Mind which contains all of these: 2 capsules as needed throughout the day, for maximum of 8 capsules per day. Space them at least 2 hours away from the medication, to avoid interaction since they have similar effects.
- When withdrawal symptoms are gone, along with the meds, reduce the supplement doses. Since they are not addictive and do not build tolerance, you don't have to be weaned off them later.
- Follow the Healthy Brain Diet guidelines.

Antidepressants

More and more information is coming to light about withdrawal problems from the Selective Serotonin Reuptake Inhibitors or SSRI antidepressants, such as fluoxetine (Prozac), Sertraline (Zoloft, Lustral), Paroxetine (Paxil), Citalopram (Celexa), and Escitalopram (Lexapro), to name the most popular. Even more difficult are the SNRI or serotonin-norepinephrine reuptake inhibitors, such as Venlafaxine (brand names: Effexor, Effexor XR). Experts assert that technically, none of these are addictive. However, there are definite issues of tolerance and withdrawal that must be addressed.

In his books, *Prozac Backlash*, and *The Antidepressant Solution*, Harvard psychiatrist Joseph Glenmullen begins by describing the serious long-term side effects associated with these serotonin-boosting medications. I have found the same in my own practice, where individuals consult me to help them wean off the meds.

They include neurological disorders, such as facial and whole-body tics ('tardive dyskinesia') that can indicate brain damage; sexual dysfunction in at least 60 percent of users; debilitating withdrawal symptoms, including visual hallucinations, electric shock-like sensations in the brain (brain zaps), dizziness, nausea, and anxiety; and a decrease of antidepressant effectiveness in about 35 percent of long-term users.

In addition, his research points to the direct link between these drugs, and suicide and violence. See also my [Huffington Post blog](http://www.huffingtonpost.com/hyla-cass-md/is-it-drugs-not-guns-that-b-2393385.html) on the subject (<http://www.huffingtonpost.com/hyla-cass-md/is-it-drugs-not-guns-that-b-2393385.html>)

There is research showing that the SSRIs also make you prone to weight gain, and, when taken by pregnant women, to birth defects in the fetus.

Unless you wean off any psychotropic (mind-altering) medication very slowly, you can go into withdrawal, euphemistically called "discontinuation syndrome" by the medical profession. Symptoms include bouts of overwhelming depression, 'brain zaps' (fortunately, often relieved by fish oil), insomnia, and fatigue.

It can even include life-threatening physical effects, psychosis, or violent outbursts. Sadly, many psychiatrists cavalierly minimize these problems.

The irony here is that research shows that for most users, the effects are largely placebo, but one with potentially serious side effects. (Fournier JC, DeRubeis RJ, et al. "Antidepressant drug effects and depression severity," *JAMA* 2010; 303(1):47-53.

Another problem is that they stop working after a while and either the dose needs to be increased, the product changed to a different one, or another one added. Why? The receptor sites downregulate or close down, and more serotonin is needed to have the same effect. But in fact, the drugs actually deplete serotonin. So you are chasing the elusive goal of keeping a healthy serotonin level unless you help Mother Nature by giving the brain the material it needs. (see p. 25)

Basic Weaning Protocol:

A good solution here is to add serotonin precursors, i.e. the amino acid 5-Hydroxytryptophan (5-HTP) along with B vitamins especially B6, B12 and folate- or take a potent multivitamin that contains a good dose of them, such as my Two-a-Day Better Balance Multi, or Brain Recovery AM&PM. They both also contain methylfolate, a healthier form of folic acid that can actually enter the cell more readily. This is especially useful for a significant per cent of the population, especially the depressed sector, that have a defect in this area.

Then reduce the medication by 10% every 7-14 days, unless or until there are symptoms of withdrawal, then return to the last comfortable dose and wait a longer interval. Toward the end, you may have to make the reductions even smaller, often requiring a specially compounded liquid form of the drug to be measured in small, precise quantities.

Some other nutrients to use here are omega-3 fatty acids that help prevent brain zaps; magnesium 300-600 mg daily that has a calming effect; inositol 500 mg 2-3 times daily (in capsules or powder), and 2 hrs away from the medication.

The rest is a similar program to the tranquilizer withdrawal covered in the previous chapter.

I will soon have a new Medical Food formula that helps with withdrawal symptoms as well, and shortens the weaning period.

**For more information, see my book,
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<http://cassmd.com/books/the-addicted-brain>**

All the supplements are available on my website:

<http://cassmd.com>