Trigger Warning and Mental Health Support

The episode you're about to hear is an extreme case of medicine gone horribly wrong. But it's not the only case and it is nowhere near a rare case. This is something that happens far too consistently inside the system that we call medicine in this country and far beyond this county.

Most of the time, the cases are less extreme and the outcomes less severe, and they don't make headlines. But they are still tragic. And this one, as you'll hear, hits very close to home.

I'm not sharing this the way I share most of what we do on this show. This isn't about supplements or supplement strategy or general health and wellness.

I'm sharing it to make you as aware as I am, if you aren't already, that the system we've been handed is broken. In my opinion it's broken far beyond any reasonable repair.

It needs to be torn down and rebuilt into something that actually works. Something that stops chasing symptoms while ignoring the root cause. something to stop seeing people as the numbers on their insurance card or their credit card and start seeing them as human beings.

As the fellow man of the very practitioner who is supposed to serving them. And I won't pull punches on the practitioners involved in this story. What the record lays out appointment after appointment is, in my view, a horrifying disregard for human life and for mental health.

Now, if you are someone who struggles with your mental health, this next part is for you, and I mean it with everything that I've got. There is an answer, but that answer is not sitting in an orange bottle with a white cap on a pharmacy shelf.

It's found within you in a body and a mind that are crying out for help through the very symptoms that they are expressing. Your body is not broken. Your mind is NOT broken, your mental health can be restored, and there are people, good people who can and will help you find the path back.

Let me be clear about what this is Not. This is me not playing doctor or psychiatrist. That is the last thing that I want to do. This is me trying to spread awareness about the countless people who get chewed up and spit out by a system built for profit with humanity coming a far distant second.

So if you struggle in these areas, mental health, depression, anxiety, suicidal thoughts, any of it, know this. There is help and everything that you need is actually inside of you.

I know that sounds foreign and mystical, but it is true. But many of us, most of, us can use a hand. Someone who believes, someone who is willing to show the way.

That's all it took for my lovely wife, Jen. She just needed someone to believed and was willing, to showed away. And then she did it. She got herself out of the hole that she was in.

If the help you've reached out to has not been serving you, has taken you where you need it to be, if it's keeping you stuck, don't stop searching. if we can be of any service to you here at Vitality Nutrition, there's nothing that we'd love more.

We have a long series of episodes on this podcast called Emotional Vitality that are made exactly for this. These are episodes where we sell you nothing and simply teach you tools to help yourself.

And as you'll hear in Jen's story, if you listen to those episodes, which are linked in the show description, Jen being my beautiful wife, If you're new to the Show, there are things in natural health world that can meet many of the needs your body and your brain are asking for.

And hear this part plainly, at no point am I asking you to drop the prescriptions you may already be on and never, ever cold turkey. At no time am encouraging you do anything drastic.

What I'm doing is encouraging, you telling you that I believe in you.

The Tragedy and Prescription Timeline

even though I don't know you, because I do know the power of the human spirit that is placed within every one of us. I know this strength we all carry even when it is buried deep down the way it once was in my gin.

And if you are in an urgent place right now, if today feels heavier than you can carry, please reach for help this very minute. In the US, you can call or text 988, that's the crisis lifeline, anytime of the day or night.

And that is the floor. That's emergency backstop for you when there's no one else that you reach. But I anticipate that there are people closer to you who actually know you, who are willing to help, to listen.

Up to this point in my life, and I haven't known hundreds, but I've known many, people who have decided that they didn't want to be here anymore. I've never known one that didn' have someone, and in most cases, many someones, that would have helped had they known it was that dire.

But I do wanna be straight with you about this hotline thing. In the story that I'm about to tell you, the woman involved did ask for help. She did reach out and she was turned away.

So again, if some part of you is already thinking, why would I even bother when the system just fails people? Please hear me. Reaching out was never her mistake.

Letting one closed door be the final word. That is the trap. If you call and you get turned away, call again, find a different person, show up at a difference door, bring someone with you who refuses to take no for an answer, because it is a broken system, but there are people within it who still care and who want to help.

But again if you're in the traditional model, which odds are you are not so much if your listening to this show anyway, There is so much more help out there than what you found.

There's always hope. there is always more strength that can be mustered. I believe in you. i wanted to re-record that intro. My previous intro probably didn't prep for what this show is about.

This is a tough one, but I think it's valuable. It may not be the right time to listen if you're one of those people who is really struggling right now.

Maybe later, maybe just the preface that I just shared is good enough for now but know that I am recording this episode because I think the awareness of what happened here is critical for people to understand because, I hope, it creates a level of awareness in somebody listening, if not many of the people listening today, that we need to look a different way.

Welcome to Vitality Radio, the podcast that helps you make sense of natural supplements and thrive without pharma drugs. I'm Jared St. Clair. Two months before the worst day of her life, a young mother told the people prescribing her medication that she could no longer tell what was real.

She used these words, disoriented, forgetful, confused, disconnected. and they kept writing her prescriptions. By the time it was over, she'd been put on 13 different psychiatric drugs in about four months' time by a whole cast of different prescribers.

And she said, over and over at nearly every stop along the way, that she was getting worse. And nearly every single time, the answer was the same. Another drug, a higher dose, one more thing on the pile of things that weren't working.

And then it ended the way these stories are never supposed to. On a night in late January, 2023, this mother took the lives of her three children, five years old, three years, old eight months old.

She strangled them. Then she tried to end her own life. Two of the babies died that night. The youngest died a few days later. She survived. I'm not going to sensationalize that.

There is no excuse for what happened and three children are gone. And I have to assume the mother and father are absolutely tormented. But I am going ask the question that the whole system somehow skipped.

How does a devoted mother, a labor and delivery nurse by trade, end up there? And how much did four months of relentless, uncoordinated drugging have to do with it?

I want to walk you through how she got there because it's one of the clearest, most heartbreaking examples I have ever seen of a truth I've been shouting about for years.

Your doctor does not always know best. These drugs are not the harmless little helpers they're sold as. And nobody, nobody is going to verify your care for you.

You have to do it yourself. A few quick things before we dig in. One, this is a heavy episode. We're going to talk about a case involving postpartum mental illness, suicide, and the deaths of three children.

If you are in the thick of it right now, post partum struggles, dark thoughts, any of them, I want you to know that there are options, places that you can call.

Postpartumsupportinternational at postpardum.net. or call or text 800-944-4773. And if you're in crisis, 988 gets you the suicide and crisis hotline. any time, day or night.

Two, this is an active trial. It's in the news right now. And there are two sides arguing out in a courtroom. The prosecution says this was premeditated.

the defense says she was in grip of severe postpartum psychosis, made worse by a mountain of medication. A jury is going to sort out her legal responsibility, and that is their job, not mine.

So I'm not here to tell you a verdict. What I am going do is walk through the prescription timeline, which is documented. It's in the court record and in civil filings because that timeline tells a story every single one of us needs to hear and understand no matter how the case ends.

And three, I'm not going to name any names in this story. Not the mother, not her family, and not the individual providers who treated her. I am doing this for two reasons.

This is an active legal case. You've maybe even heard of it. If you have heard it, you know where to find all the information you want to. Find if you haven't heard, it you can punch in the details from this episode and you'll figure out what it is.

But those names belong in a courtroom, not on my show. And this family has been through something no family should ever have to endure, and I don't want to add anything to that.

Now, I'll be straight with you about where I stand because I do not want that to be hidden. I DO NOT consider the providers in this story the least bit innocent.

But it is not my job to convict them. That's for a judge and a jury, and I'll leave it in their hands. Because here's the

truth why I'm doing this episode.

To me, this was never really about a couple of individual clinicians. It's about the system that let this unfold, a system, that could produce this exact same tragedy tomorrow with a completely different set of names.

That's what we're after today. The pattern, not the people. So when I walk you through who did what, I'm going to call them by their role, the psychiatrist, nurse practitioner, so you can follow the story without me pointing a finger at any one specific human being.

Here's the sequence, and I'm pulling this straight from the civil lawsuits her family filed later and the evidence entered into court. So let me be clear up front.

What I am about to describe about these providers is what the complaints allege. Nobody's been found liable of anything, the providers have disputed the claims or declined to comment, but the prescriptions themselves, drugs, dates, those are documented in the court record.

So watch how fast this moves and watch often the same two people keep showing up in this story. It starts with a psychiatrist. According to the complaint, mid-October, 2022, she diagnoses this young mother with generalized anxiety and an adjustment disorder.

and starts her on the antidepressant Zoloft, 25 mg, quickly bumped to 50. And almost immediately, the suit says she reports feeling awful, can't sleep, no appetite, more anxious, and more depressed.

Her lawyer argues that reacting that badly to that low a dose was a red flag that should have stopped everything and prompted a much closer look. but it didn't.

October 20th, less than a week later, she reports heart palpitations, says she's deteriorating. So the first drug comes off and two more go on, a benzodiazepine and an antihistamine to knock her out.

November 16th about four weeks after that, She's in the emergency room, insomnia, anxiety, palpatations sent home with a sleep drug. November 21st, just five days later, she started on a second antidepressant.

November 25th, Just four days after that, She reports the new drug is making her insomnia worse. And the answer isn't to pause, it's to add a sleep drug, another antidepressant that doubles as a sedative, and a second benzodiazepine, three more stacked on in one single day.

The very next day, November 26th, she tells them she can't determine what's real, disoriented, forgetful, confused, disconnected, but nobody stops. November 29th three days later, According to the complaint, the nurse practitioner working through a perinatal behavioral health program now considers bipolar disorder, and her answer to that is to start an anti-psychotic Seroquel, pushing the dose up over the following weeks towards 400 milligrams a day.

The husband would later testify that the Seraquel is where her, quote, big spiral started. And this is the part that blows my mind. Between just these two, the psychiatrist and the nurse practitioner, The lawsuit says these 2 prescribers wrote her on top of the first drug, Zoloft, Trazidone, Prozac, Ambien, Rimiron, Clonopin, and Seroquel.

That's the cocktail. And court evidence showed one of them prescribed a full month's supply of an anti-anxiety drug Buspirone twice inside of two weeks.

prescribing the same drug twice a month supply inside of two weeks. How much care was actually being taken here? How careful were these prescribers, if careful at all?

December 2nd, three days after that anti-psychotic goes in, she reports she's suicidal and hearing things. Three days After that, She calls a crisis line herself asking to be admitted and she's told she doesn't meet the criteria.

And from there, it just keeps going. December 6th, the very next day, another benzodiazepine. Mid-December, a

mood stabilizer. Dec. 20th. Back to the ER.

Suicidal. New Year's. She checks herself into a psychiatric hospital and the suit says, isn't seen by a doctor for three days. A day program that found her over-medicated and misdiagnosed discharges her without help and then into January I tricyclic antidepressant, the dose climbing right up to the final days.

How Polypharmacy and Misdiagnosis Escalated

Add it all up, 13 psychiatric medications, more than 30 prescriptions from September to January. And beyond those two, the lawsuits name still more. Another nurse practitioner, a therapist, more psychiatrists, two hospitals, everyone who touched her as she bounced from one to the next.

At least five prescribers, not one of them, her lawyers say, considering the whole picture in front of him. I'll be fair about one thing because I don't want to sell you a story that isn't true.

It's genuinely unclear how many of these drugs she was actually taking at any one single moment. And doctors adjusting and swapping medications is not by itself unusual, but hold that fairness right next to this.

At nearly every step, she is telling them the same thing. I am not getting better. Now here's the thing that boggles my mind because this was never about one bad doctor.

Five plus prescribers by her own legal teams account, not one. had the full picture or at least considered it. One is adding a drug while another one doesn't know about it, the ER doesn' know what the psychiatrist did last week.

The nurse practitioner is stacking three medications on a person who the day before said she couldn't tell what was real because the information is scattered across the half a dozen charts that don't talk to each other.

There's a word for putting somebody on a pile of drugs at once. It's called polypharmacy. And when you've got that many powerful mind altering substances interacting in one body with nobody quarterbacking the whole list, you are not treating a person anymore.

You are running an uncontrolled experiment on them. Now I can't tell you what was written in every chart or exactly who knew what. That part's going to get fought over in court.

But let me tell what I don't buy for one second. The idea that these providers had no clue how much trouble this woman was in. Think about who she was and what we know she told them.

A labor and delivery nurse by trade, a medically literate woman, who knew the language, knew her body, know how to describe what was happening to her.

This is not somebody who sat there silent. My read on this. She was doing exactly what any of us would probably have done, telling them, I tried this, it's not working, It's getting worse.

What else can I do? That's the whole reason the drugs kept changing. Somebody was reporting back and the last one had failed. So here's my question. If she's articulate enough to walk you through her symptoms and she is telling you she can't sleep, her heart's racing, she cannot tell what's real, how do you not stop?

Whether or not every one of them had the complete list in front of him, each one had a patient in them, coming apart at the seams and saying so out loud.

And we don't have to guess about all of that because some of it's right there in the complaint. Her husband pointed it straight at the Seroquel. He tied her suicidal thoughts to that specific drug, told the nurse practitioner, in his words, 10,000 times worse since she's been taking this medication and asked if they could get her off everything, please, and just start from scratch.

According to the suit, the Seroquel was increased anyway. And when another hospital later determined she was over-medicated and reached out to that same nurse practitioner to coordinate with her about her care, The lawsuit says that nurse practitioners never even responded.

at the absolute minimum, the floor, The least you could possibly do when a mother this distraught is sitting in front of you. You ask, you pick up the phone, You find out everything she's been on before you hand her one more thing.

And I'm not willing to let it slide as well. They did their best. Asking a desperate woman what else she is taking is not heroic medicine. It's the bare minimum.

And here's a piece most people may never even know. When you give an SSRI, say Prozac or Zoloft, to someone who has an underlying bipolar tendency that hasn't been diagnosed yet, you can flip them into mania.

The head of Women's Mood Disorder Center at the University of North Carolina put it plainly, SSRIs can trigger mania in people predisposed to bipolar and they have to be watched very closely, not handed out by five different people who've never compared notes.

And this is happening to a brand new mom. There's a window after birth that some clinicians call the fourth trimester. Those first weeks and months when a mother's body and brain are the most vulnerable, that they will ever be.

It's when she needs the most careful, most coordinated care of her life. And too often, it's where she gets the least. What she got instead was a revolving door and a growing pile of prescription.

Nobody was driving the car and it went right off the cliff. So how does this even happen? How does here's a pill for your mood turn into more than 30 prescriptions, 13 different drugs in four short months, and a woman who can't tell what's real?

It starts with a story you've been told your entire life. That depression and anxiety are a chemical imbalance, that your serotonin is low, And that the pill tops it back up.

Clean, simple, scientific sounding. and it's not true. And I'm not giving you my opinion, I am giving the science. In 2022, researchers at University College London published a massive review, an overview of all the major research to date looking at whether depression is actually caused by low serotonin or not.

Their conclusion, there is no consistent evidence for it. No support for the idea that depression comes from low serotonin activity or concentration. The paper got downloaded more than a million times because it pulled the thread on a story the public has been sold for 30 plus years.

Now I want to be as fair as I possibly can be about this without pulling any punches. Plenty of researchers pushed back on that study saying that, hey, mainstream psychiatry has considered the simple one low chemical story outdated for a long time anyway.

Well, fine. But sit with this irony for minute. The field's own experts will tell you the chemical imbalance line was always a simplification that didn't hold up.

And yet that is still the story people hear when they walk out of an appointment with a prescription to raise that simple neurotransmitter. The serotonin deficiency idea was never the solid science that it was dressed up to be, ever.

So picture how this could have gone. Not one person stopping five prescriptions deep. I mean, right at the very beginning, what if before the first pill, before drug after drug drove her further down, somebody simply told her the truth?

You're not broken. You are not defective. And what if even later when her husband looked them in the eye and

asked, could we just take her off of everything and start over?

What if just one person in that room had answered, yes, and let me show you a different way. But nobody did because they weren't trained to, because that's not what they are taught in medical school.

They are thought that there is a pill for every ill. that comes from a pharmaceutical company. And if one doesn't work, we move on to the next or the, next, or try some kind of cocktail with two or three or four or five.

It sets up a trap and it happens more often than any of us realize. This woman was a nurse trained in medicine and I'll use a more difficult word, indoctrinated.

In a model that teaches you the answer to suffering comes in a bottle. So she almost certainly believed, what most people in her shoes do believe, that drugs were her only viable option.

That this was simply what you do. And so when one didn't work, she went to the next option within the same category of the options that had already failed her.

My wife believed this very same thing before I met her. Jen is the daughter of a nurse. And she carried the story, that same story her whole life. That she was defective, broken.

Something was wrong with her wiring that a prescription might quiet, but could never really fix. And that story is darker than it sounds because it nearly swallowed the most beautiful, powerful, brilliant woman in my life.

If you believe you're broken, a drug becomes the best you can ever hope for, away to make the defect a little less noticeable, while the effect itself supposedly stays there forever, standing between you and any shot at a whole, healthy, genuinely vibrant life, That's not healing, that's a life sentence dressed up as medical care.

It is a story that dictates to the main character that there is no possibility of a truly happy ending. And to paraphrase Dr. Roger MacFillin, it is lie that converts a creator being into a patient that convinces a divine spark that it's powerless.

Yes, it was a lie. Jen was never broken. She was depleted, she was overwhelmed, and her body was woefully unsupported. And once someone finally handed her a different story eight years ago and showed her another road, She took that road.

she did the work and she came back all the way back.

Serotonin, Gut Health, and the Broken Model

I'll tell you a little bit more about that later. Because her story is the whole reason I'm so passionate about this young mother's story. The odds are that this mother believes she was broken too.

Nobody ever told her the truth that she wasn't defective. She was a human being under crushing strain with a body begging for support. So let's give her the question nobody in that chain ever gave her.

If the problem was never simply low serotonin or some chemical imbalance that a drug could potentially fix, then what does a struggling mind actually need?

You've heard it, you've hear me say it. Roughly 90% of the serotonin is made in your gut, not your brain, your guts. But I wanna be clear, I do not believe low seratonin causes depression.

Anyway, we know it doesn't. We just talked about the science about that. I don't believe it's the villain at all. If anything, low Serotonins is a symptom of something deeper gone wrong.

never the cause of it. So that 90% number doesn't really matter because serotonin is the answer, it matters for one

reason and one very very important reason only.

It proves where this chemistry actually gets built. Your gut isn't just cranking out serotonin. It is a primary factory for the entire system. Your neurotransmitters, the building blocks of your hormones, The signaling that runs your mood and your mind.

That's the headline. Not seratonin, but the factory that makes all of that. And the real root cause of what people are suffering from is more complicated than any single chemical.

And at the very same time, it's far simpler than the pile of pills, the polypharmacy that these doctors often reach for. You fix the factory first. Now look at what mainstream medicine did instead.

They spent more than 30 years and untold billions of dollars insisting you're depressed because your brain is low on one chemical. A theory that we just covered has no consistent evidence behind it.

None. And their fix? Well, it's a drug that forces your brain to keep recycling the little bit of serotonin that's already up there. Chasing a number that was never the problem to begin with.

Meanwhile, the organ that actually builds the overwhelming majority of your neurochemistry, your gut, gets a shrug. Nobody looks there, nobody tests it, Nobody treats it.

Sit with how backwards that is because this right here is the tell. The whole story of how medicine gets practiced in this country. They double down on a disproven idea about the brain and flat out ignore a demonstrable fact about The Gut.

And I'll tell you exactly why this happens. You can patent an SSRI. You can patent a drug that you stack with an SSRI if the SSR isn't working well enough.

You could patent the mood-stabilizing drug. Patent an anti-anxiety drug, a benzodiazepine, an antipsychotic. Put a brand on it. You can bill it and you can sell it to millions for decades.

You cannot patent a healthy gut. There is no blockbuster drug in feed your body what it's missing and rebuild your microbiome. So the profitable theory that doesn't hold up gets 30 years and a spot on every prescription pad in this country.

And the true one that nobody can monetize gets buried, ignored, and most cases never discussed with the patient. That is not science-leading medicine, that is money- leading medicine and your mind is what's caught in the middle.

So no, 90% of your serotonin being built in your gut is NOT a reason to reach for a pill that just circulates it upstairs, it's a giant flashing sign pointing at the truth.

An enormous share of you brain chemistry, your neurotransmitters, YOUR hormones, Your mood gets built downstairs, not upstairs. The factory for a huge chunk of what runs your mind is your gut.

So follow that all the way down to where it leads. When the gut isn't firing right, the brain isn' firing, period. You cannot have an inflamed, dysbiotic, leaky, struggling gut and expect a calm, clear, resilient mind to just float above it, untouched.

That's not how the machine is wired. The gut, and the brains are on the same circuit. talking to each other with every single second of the day through the vagus nerve, through inflammation, to the compounds your gut bugs are producing around the clock.

This isn't theory, this is 30 plus years of me watching it play out in real people, including those who I love. Somebody comes to me wrestling with depression, anxiety, bipolar, ADHD, anything in the mental health world, and you know where I take them first?

Not to the Isle with our St. John's wort. Not the isle of Saffron. I take them to the gut health aisle every single time because in my experience, that's where the real story usually starts.

And the research backs this connection up so incredibly vividly. Look at IBS. One of the most common signs of gut distress is irritable bowel syndrome.

In 2019, an analysis pulling together 73 studies Roughly four in 10 IBS patients had anxiety and close to three in ten had depression. About three times the rate of people with healthy guts.

Three times! When the gut is a mess the mind pays for it and that is not a coincidence and it is NOT a side note. It is the main event and is exactly where we started with Jen when I met her.

And it's exactly were I would start with anyone listening to this show today. The first question I ask when anybody tells me that they're dealing with depression, that their dealing anxiety is, tell me how your digestion is.

What happens when you eat? How do you feel? Is there gas, is there bloating, Is their diarrhea, constipation, pain, cramping? is anything happening like that?

And I just keep dialing down to try and figure out what's actually happening, happening below the surface. Because if we don't look there, we're missing the point entirely.

Now there's a lot more to it than the gut, but the got is always where I start. But let's talk a little bit more about this problem with these drugs. There's something known as flattening or blunting.

The drugs don't just fail to fix the root. They can actively make it worse. And it's a lot more than boosting a chemical. Start with something in the research that is crystal clear.

Emotional blunting. Somewhere between 40 and 60% of people on SSRIs report it. 40 to 60%. That's flat, a numbed out feeling. Not sad, but not happy. The color drained out of things.

Researchers at Cambridge in 2023 actually worked out part of the mechanism. The drugs blunt the brain's ability to learn from rewards and pleasure. How does that make anything better?

The scientists themselves suggested that might be how the drugs work. It takes the edge off of pain, sure, but it takes joy out right along with it. Now imagine that flattening layered on top of powerful sedatives and an anti-psychotic and a person who's already told you that she can't tell what's real.

When you dull someone's emotional signal and slow their thinking and pile on drugs that alter perception, you are altering their judgment. That's not a fringe claim, that's basic pharmacology.

And there's a specific reaction here that almost nobody talks about and everybody should. It's called akathisia. it's the state of intense inner restlessness and agitation.

The drugs themselves can cause a feeling of crawling out of your own skin, of not being able to sit still or find any peace. that akathisia has been directly linked to the medical literature to aggression and to suicidality.

So the very drug given to calm somebody down can, in some people, wind them up into a state of agitation and torment. The benzodiazepines have their own version of this.

In some, people they don't sedate, they disinhibit. They take the breaks off. Every one of these reactions was on the table for a woman being handed drug after drug.

After drug, the side effect that they don't put on a commercial. There's good research about it. It actually shows that these drugs and violence towards others or towards yourself.

is a real thing. A large Swedish study in 2015 found that in young people ages roughly 15 to 24, this young mother was 32 by the way, the risk of violent behavior went up meaningfully during the periods that they were on SSRIs, comparing each person to themselves on the drug versus off of the drugs.

Probably the only way you can really do a study like that. 2016 review of controlled trials found the odds of aggression roughly tripled on these medications versus placebo.

And an analysis of the FDA's own adverse events reporting flagged the seratogenic antidepressants among the drugs most consistently tied to reports of violence.

Now I'm going to give you the caveat because Again, I want to be as measured as I can in this. You can tell that I'm myself very agitated about this, that it's very close to my heart, but I wanna be fair.

Most of this research is on the under 25 crowd. It's less certain in older adults. So I'm not going to stand here and tell you that these drugs turn everyone violent.

They obviously don't. What I am telling you though is that agitation, aggression, and self-harm are documented. Real reactions. Most dangerous when a drug is started.

Keep in mind the last change for this woman was just a few days prior. to what she did. When the drug is started, when the dose is changed, or when somebody comes off too fast, which is exactly the kind of turbulence you get when you run somebody through 13 medications in four months.

The danger isn't just the drugs, it's the constant chaotic changing of the Drugs with nobody watching for the reactions. And here's the part that should stop all of us cold.

Every one of those studies looked at a single drug, one medication, measured against none. That's it. Nobody was studied using a stack or a cocktail. There is no trial on an SSRI plus a second antidepressant plus two benzodiazepines.

What Actually Helped Jen Recover

even an SSRI and another SSR. There's certainly not one for people on an ssri plus a second SSI plus two benzos plus an anti-psychotic plus, a mood stabilizer all churning through the same brain at the.

Same time because you could never ethically run that experiment on a human being. So the cocktail this woman was on well, it's never been tested by anyone anywhere.

And when you're switching drugs and pushing the doses higher over and over, month after month, and the patient is screaming, this isn't working. then you're also running an ethical, an unethical experiment on one individual and her family right now.

That's all this was as an experiment. Let's see what happens when we change it to this drug. Lets see, what it happens, when, we add this one and this, one, and, this.

We'll just see. What happens? Come back and tell us, We will pay attention and we'll make adjustments. Or maybe we'll just give you more drugs. She was in completely uncharted territory.

So that's the damage side. Drugs that can flatten you, agitate you and stack the way they were on her do things nobody can predict. Now let's talk about what actually helps.

because there may be people, maybe you in this audience, that are struggling in these areas. One of the reasons I do this show is to try and help people with their mental health.

That's why we have so many episodes called Emotional Vitality. It's what we five episodes call Jen's Story. where

she tells her story, her private personal story out to the general public to try to help people not have to go through what she went through.

To try and help them not make the decisions she made that almost took her away from this earth. from me, from her family. There's a big reason I dedicate so much time on Vitality Radio to this topic.

Well, let's talk about how we approach this, not the way it's taught in medical school, Not the Way Your Psychiatrist Learned. Not The Way your Therapist Learn.

not The way your nurse practitioner learned or your MD learned. Let's talk about how we support the body so it can support. The mind we started in the gut.

Once that's headed in right direction, because that is exactly where I started with Jen. And it made a huge difference right away. The next question is, are the raw materials that the body requires even there?

Because your body can't build a stable mood out of nothing. It can make the neurotransmitters optimally, the hormones optimly without the nutrients that body require to make those things in the first place, without building blocks.

How depleted are you? When Jen looks back at her story, And how she ate and how was treated medically with antibiotic after antibiotic, after antibiotics and various other pharmaceutical interventions that she now does not believe ever helped her, but probably harmed her.

She is almost in shock that made it as far as she did. And oftentimes I am a little bit too. The body is an incredibly resilient machine. In most cases, it will take a tremendous amount of abuse before it finally gives in.

Thank God, my Jen was able to take that level of abuse for all of those years, starting on a pharmaceutical psychiatric drug called Prozac at the age of 13 and being on it until she was 45 years old.

What she knows now, and it's the one kind of funny part of this story, has changed the way she looks at everything because now she looked at every single morsel before she puts it in her mouth and says, is this serving me or harming me?

Most people in this country just put it in their mouth because they've never been taught better. And if they think it's harming them, they, think, it,'s superficial.

Oh, well, yeah. The Coke, It's got a lot of corn syrup in it. the diet Coke. It, s got aspartame in or it has got caffeine in, and it is bad, but it s not going to kill me.

How many people have said that? It s, not, going, to, kill, me donut s. Not, gonna, Kill, Me. Well, probably not, not one, but the addiction to those things long-term and the depletion that they create.

Yeah. But let's talk about a few things. This show is not about supplements. I know most of my shows are about supplement. But I want everything I ever do to be as actionable as possible.

And I highly encourage you to go back and listen to the Jen's stories if you've not listened. If you're a newer listener, if found me because of my recent appearance on the Just Ingredients podcast, you heard me talk about anxiety release.

You heard we talked about hormones and neurotransmitters and all that kind of stuff. if You haven't listened to Jen story episodes, there's five of them.

They are my favorite episodes that I've ever recorded. She is my favourite human being that known and loved. And her story has given more hope to more people than anything else that we've ever delivered on this podcast.

I'm so grateful for her level of transparency and willingness to share it to help her fellow man. But let me give you another one besides the gut. It's called methylation.

And it's a big word for a simple idea. A chemical handoff your body does billions of times a day and is central to how you make and regulate neurotransmitters.

it runs on B vitamins, specifically folate and B12. Here's the catch. About half of us are dealing with a gene problem with the MTHFR mutation that makes it very hard, if not impossible, to make the conversion from folic acid to methylfolate, or I should say to folate the foliate form that we need.

If you're not familiar with that, we have an episode on it. We'll link to it in the show description. But interestingly enough with Jen, when she finally got to the point, and I say finally, I mean, my gosh, she dealt with these drugs for decades.

She was about a year and a half after meeting me, nourishing her body before she got off of the drugs, weaned herself off successfully and safely. The only way that it should be done, do not ever cold turkey these things.

They can kill you. That's not an exaggeration. But if you want to get off of them, they can be removed from the body safely, slowly, under supervision.

When Jin got to the point where she no longer had the instability, where things were no long up and down, she just got more and more balanced and stable with the more nutrition that she did.

The less depleted her body became, the less overwhelmed she felt, even when things were overwhelming because her was resilient again. But what really changed things, was the final nail in the coffin of her anxiety, depression, bipolar disorder symptoms.

was a discovery that she dealt with this genetic mutation. And when she got rid of folic acid, foods fortified with folac acid just dumped those foods and added methylfolate and methyl B12, everything balanced out.

Does she still experience a little stress? Yeah, if we're having a family party, or the friends or neighbors are coming over and the house needs to be cleaned up and there's food to prepare.

Yeah, she feels stress, but it's not debilitating. It's nothing like it once was. She doesn't crash and burn like she once did because her body is capable now.

Her body was always capable. it was never broken. It was just incredibly depleted and toxic. And when we got rid of the stuff that needed to leave and we put back in the things that belonged, she became the truest version of herself.

The powerful, emotionally stable, balanced, loving, caring, beautiful woman that I fell in love with. So you can get genetic tests for MTHFR. In fact, very, very soon we will be offering those here at Vitality Nutrition will tell you exactly how to do it.

But you could also just get rid of folic acid and see how your body responds and put in just the basics. A little bit of B12 and a little of methylfolate, methylcobalamin or hydroxyclobalamin.

or adenosylcobalamin, you can experiment with the different ones and folate and see how your body responds. You'll see a difference if you need that change.

So let me get a little bit more into Jen's story and then I'm gonna wrap this up. I've mentioned before, Jen was on psychiatric medication from the time she was 13 until she is 45, 32 years.

And in all those years, she never got well. She got managed. Twice in that stretch, it got so dark that she tried to end her own life. That is what the Your Broken Story nearly cost.

everyone who loves her. Jen and I met eight years ago and from the very start, instead of asking which drug next, she started asking a different question.

What does my body actually need? She began nourishing herself. She started with her gut and then layered in the basics her body had been starving for.

Omega-3s, magnesium, a real foundational multivitamin, some genuine support for her central nervous system. I'm not going to read you a list of bottles and dosages because that's not what we're talking about today.

But if you do want to listen to that, please go check out the Gen Story episodes. They lay it all out. Here's the part that still gives me chills sometimes.

Within about a year and a half of us meeting slowly, carefully over months, she had weaned herself completely off both of her medications. And she told me that she felt better than she ever could remember feeling before in her life.

better than she'd felt since before she was a teenager, three decades of, I'm broken and can't be repaired, undone by finally supporting the body and the mind underneath it.

I mentioned a year and a half. She was off of her medications. she weaned herself off very, very carefully with supervision. Not overnight. It was slow.

But she did it. And when she started to enjoy life on a level that she didn't remember being able to before, the blunting went away. I want to be clear on this for a couple of reasons.

Now I've got in my mind that have been consulting with me that struggle with anxiety and depression. And they have heard Jen's story. They've been inspired by Jen story, but they don't necessarily believe that they can get there themselves.

So I say I want to be clear. I was the messenger. That's really my job here behind this microphone. I was the messenger for my Jen. It was a little bit different, a lot more personal, obviously, but I started helping her understand that there was different way delivering this different message before I fell in love with her.

But I love everybody that's listening to this show enough to spend time doing shows like this to try to help you find what she was able to find. And I promise you, you're not further gone than she was.

You're NOT. I was the messenger. And it was one step at a time. She did all the work. Some days were better than others.

Final Takeaways and Listener Guidance

Some days she felt like she was backsliding, but over time she got to a point where now she is so hyper resilient that even if there is a day that doesn't go the way that she wanted it to go, or there's a series of days that are challenging, overwhelming, stressful, all those things, she just bounces right back like a memory foam mattress.

I don't know a better way to describe it. to this, everything's fine. My life is good and I'm incredibly grateful for what I have. That's who she is now.

It's, who could have always been, but she was told that that was not true. But I am telling you right now that it was and we've proven it in her case.

And I believe that, it can be the case for you as well. So the last thing I want to leave you with is this. is this show is not about scaring you. It's not making you cry because of the loss of three innocent lives and the horror story that this poor woman and her husband have gone through.

And the story they're still going through with the court battle and I can't even fathom how she must feel about what's been done. I refuse to pass judgment on her because I truly don't believe she was in the right mind.

and do something like that, but it doesn't mean she didn't do it. It's an incredibly brutal thing to even consider. That's not what this show's about.

it's just a show about what I consider to be the absolute truth about mental health. It is not a drug deficiency, it is a body sending a signal saying, I need help, please help me.

And that help can come from a variety of different things, including mindset work, which we talk a lot about on the emotional vitality episodes. It can from nutrition, what you can get at your grocery store.

and especially what you can avoid at your grocery store and at you local fast food restaurant or soda shop if you live in Utah where soda shops are rampant.

There are things in pill bottles that we sell here at Vitality that can help you, but I promise you a drug won't fix that problem. and your doctor won't even tell you that it will.

It will just suppress it. And that's if it works as well as it's supposed to. But what matters here is that people don't get themselves into this same type of a position as this poor woman was in, or even the position that my wife was.

She didn't try to harm anybody else, but she did try and harm herself. You are the only person guaranteed to be in every single one of your appointments.

And if your prescriber refuses to answer those questions, you may want to consider a new prescribing for sure, but we live in the information age. You can find out for yourself.

Don't put that pill in your mouth until you feel good about it based on excellent. research to determine if it's what you need and if can help you. I am not your doctor, I do not want to be your Doctor, and I don't believe that drugs are always bad, but I DO believe in most cases psychiatric drugs create far more challenges for the body than they do benefit.

And I believe we have a ton of evidence about that. Always check the side effects, the real ones, always check how you re feeling, and always have somebody there by your side who is watching you when you change a dose, when what else you are using because some things simply aren't safe together.

These doctors in this court case blew it big time. They're trained, paid professionals, and they messed up hard, period. I don't care how the verdict comes out.

Nobody should be on 13 different drugs, 30 different prescriptions in four months for psychiatric care. That is an absolute travesty. but it is a perfect example of what's wrong with medicine in this country.

You are the only one that should ever be fully in charge of your health. If a drug is making you feel worse, that is information. It's a signal. That's not a reason for another drug.

Say it louder in the room. Write it down. Bring someone with you who can advocate for you if you're not capable of advocating for yourself. And remember, you are never broken.

Your body is sending signals to you saying, I need help. SOS, please help me. If we here at Vitality can be of service, that's what we wanna do. There's nothing that our team, That my sweet wife and I love doing more than helping somebody get out of the health hole that they're in.

Said health, we want to be a service. So if we can, Please let us. us a call. 801-292-6662. If you've got something significant going on, call that number or email jessica at VitalityNutrition.com and ask for an appointment.

Jen now does something called iMate. It's biofeedback testing. She can do it remotely and it's incredible on both the physical and the mental emotional side.

I do nutritional consultations. But again, none of this is about any of that. We just want to be resources if it makes sense for us to resources for you.

I've babbled enough. Thank you so much for listening to me. Call us if you have questions or jump on our website. There's a chat there for you as well.

You are not broken. Your friends, your family, whoever's struggling, they're not broke. They just need to hear a different story. And hopefully if YOU needed to here a story, you heard it today from me!

I'm Jared St. Clair and this has been Vitality Radio. Thanks for listening to the Vitaly Radio Podcast. If this episode helped you, follow the show, share it with someone and explore trusted education and resources at vitalitynutrition.com.

See you next time. Hello, everyone. I hope you enjoyed this week's episode of Vitality Radio. Just a reminder that this podcast is for educational purposes only.

This podcast has not been evaluated by the FDA. Thank you.