YOUR BRAIN IS JUST HEALING!: Why Withdrawal Means You're Recovering! #psychiatry #podcast #alcohol Transcript

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Why Recovery Can Feel Worse Before Better

Have you ever tried getting sober, tapering off some sort of medication or beginning some recovery pathway and instead of feeling better, you suddenly feel worse?

You get anxiety, your sleep just falls apart, and your emotions feel raw. You feel exhausted, maybe numb even, panicked. disconnected, and then you have that terrible thought, was I actually healthier before I tried to make this change?

This is one of the most misunderstood parts of psychiatry of addiction medicine and nervous system healing, because sometimes feeling worse, it's not a failure.

It's a pathway. Sometimes it's the biology of neuroadaptation reversing itself. So I'm here today to talk about this. I want to explain why the brain reacts this way, why recovery might be nonlinear, what's actually happening neurologically.

And then let's get to some of the emerging and advancing recovery tools we're now exploring in modern psychiatry and addiction medicine. I'm Dr. Arwen Podesta.

I am a functional psychiatrist and addiction medicine specialist. Here we break down mental health, brain science, and integrative strategies in a way that's practical and grounded in evidence, whether you're a clinician working with patients or someone who's trying to better understand your own mental So, the brain adapts to survival.

How the Brain Adapts to Substances and Stress

The nervous system, our nervous systems, is built for neuro-adaptation, for adaptation. The brain doesn't really prioritize happiness, unfortunately. We wish it did, right?

But no, it prioritizes predictability, consistency. So when someone is taking a substance or a medication repeatedly and it's put into the system and affects the nervous system, the brain's going to compensate.

One substance that we think about is alcohol. So alcohol, what's it do? It suppresses excitatory signaling. And then in response, the brain increases excitator activity to compensate.

What about benzos, anxiety pills? They enhance calming neurotransmitters and then the brains reduces receptor sensitivity over time. What about opioid pain pills?

They alter, reward pain and stress systems, and the nervous system reorganizes around their presence. Psychiatric medicines, mainly SSRIs and SNRI's, they actually change the landscape of certain neurotransmitters, their usage and activity.

You know, even chronic stress and trauma can reshape the nerve system, creating a higher inflammatory system. And over time, the brain creates a new equilibrium around whatever environment it's repeatedly exposed to.

So when the substance or medication is then removed, The brain's out of sync, temporarily. That imbalance can create anxiety and insomnia, create emotional volatility and irritability, even sensory sensitivity.

brain fog, fatigue, depression and more.

Withdrawal vs. Healing in Recovery

And sometimes people interpret those symptoms as proof that they're permanently damaged. But often the nervous system is just trying to stabilize, to reorganize, re-calibrate.

This is also where I like to figure out the deficit, the cause and use appropriate tools in my toolbox. Medications for sure, but also integrative and functional approaches can be helpful.

Not everything for everybody. We definitely want to use medications around opioid alcohol and benzoid withdrawal. That's a no-brainer. And then some specialized things might be applicable in certain cases.

I think of amino acid restoration therapy, nutritional psychiatry, including micronutrient correction, inflammatory reduction, mitochondrial support, targeted nervous system regulation strategies.

Not everything's for everyone, but having tools that are appropriate to use in the individual to address their needs is important because brain recovery is also biological.

Now I think it's important to talk about the difference between withdrawal and healing. One of the most important parts of addiction treatment and recovery is that withdrawal symptoms are not always evidence of permanent change.

We need to treat the withdrawal. Some withdrawal states can absolutely be medically dangerous.

Dopamine Crash and Emotional Flatness

particularly alcohol withdrawal, benzodiazepine withdrawal severe polysubstance withdrawal that can be dangerous and this is why medical evaluation and medical stabilization is imperative but when someone's medically in the clear, is medically stable and still has things like insomnia like panic, brain fog, mood issues we need to be sure to understand this the nervous system is attempting to regain equilibrium But sometimes here, people might feel hopeless and think, if I feel this terrible without the substance, then maybe I do need it forever.

But the brain is adaptive. Have hope. Neuroplasticity is real. The same exact nervous system that adapted towards dependence can gradually adapt away from it.

And in psychiatry and addiction treatment, We use the evidence and successful tools that we have in our toolbox. I keep saying that to help stabilize and repair the system.

Here I'm going to talk about dopamine recovery and emotional flatness because one of the most emotionally painful parts of early recovery is the dopamine crash.

Many addictive substances artificially amplify dopamine signaling, giving a dopamine spike way higher than is normal, sometimes 10 or even 100 times higher.

And over time, the brain compensates by reducing natural dopamine responsiveness. So when the substance disappears, Motivation may feel like it's gone.

There may be a hard time finding joy. Life might feel emotionally flat and just nothing feels rewarding. And people might freak out during these stages.

I see it all the time. They think, oh my God, I have permanently lost my ability to feel happiness. But the brain is relearning how to generate reward naturally.

That process truly does take time And this is another area where medication and other tools, some more advanced recovery tools are increasingly being leaned on.

Supporting Brain Recovery With Treatment Tools

When I take people off of any substance, be it a psychiatric medication they may no longer feel they need, we want to give a trial of pausing, or an addictive substance like an opioid, alcohol, benzodiazepine, any other, I think about things that can support cell healing and brain healing, like amino acids that are the building blocks.

Things that can support methylation, which is a process that's responsible for the production of dopamine and other neurotransmitters. I think of things like exercise, anti-inflammatory interventions, gut brain restoration, mitochondrial support, IV therapies, especially NAD, and tons of other restorative approaches.

And using these to work with certain patients, not one size fits all, but finding the right tool for the patient and their needs. To dig in a little bit more about psychiatric medicine, discontinuation, and brain stabilization, well, it does get a bit complicated.

I've talked about discontinuations before, I want to be sure to loop it into this video because yes, In that instance, you may also feel worse before you feel better.

Because many people who try to taper antidepressants or other psychiatric medications experience real and sometimes profound discontinuation symptoms.

That can include brain zaps. Brain zapse is what people often describe it that are experiencing. It's like a nerve jolt inside the head or the brain. Certainly anxiety, insomnia, dizziness.

you know, agitation, flu-like symptoms, even sensory disturbances and depersonalization and brain fog. And in some patients, symptoms can be really severe.

Unfortunately, many people are told either it's all in your head or those symptoms are actually the original illness returning.

Antidepressant Discontinuation and Brain Stabilization

Sometimes, yes, the original symptoms do return, but not always. Sometimes this is just the nervous system struggling to re-stabilize after adaptation.

And that's the through line in this entire conversation. Whether we're talking about addiction, antidepressant discontinuation, benzodiazepine stopping, trauma and chronic stress, inflammation in the brain, dopamine dysfunction, or nervous system dysregulation in general.

The brain is constantly attempting to regain stability. And sometimes abrupt medication changes destabilize systems that adapted slowly over time. This is why carefully tapering and carefully individualizing approaches really, really matter.

Because stabilization, not force, is often what allows the brain to heal. I mentioned that recovery can be nonlinear. So what's this PAUSE, or P-A-W-S?

post-acute withdrawal syndrome. PAWS describes lingering nervous system symptoms that can continue after acute withdrawal ends. It might be 3, 6, 12 months after.

Maybe some anxiety and fatigue, continued or new sleep disruption, emotional sensitivity, poor concentration and brain fog, cravings, Stress and tolerance.

What makes PAWS so psychologically difficult is its unpredictability. Someone might feel dramatically better for several days, weeks, months, and then suddenly crash emotionally.

And that inconsistency makes people fear that they're regressing because recovery is really rarely linear.

Post-Acute Withdrawal Syndrome and Nonlinear Recovery

There are windows and waves, as we say, there are periods of healing and periods and destabilization, sometimes temporary setbacks, and then improvement again.

And during prolonged nervous system dysregulation, clinicians are here to use those tools I mentioned and more to figure out what's going on and how to stabilize and treat those very symptoms.

In addition to traditional medicine and nutrition, there are lots and lots of emerging and advanced interventions. You know, the field is evolving so rapidly, so many great studies.

Right now in psychiatry and addiction medicine, we are increasingly recognizing recovery as a whole brain and whole body process. not simply a willpower or character problem.

That means modern treatment discussions are expanded beyond symptom suppression alone. I'm going to list out a bunch of evidence-based advanced or adjunctive therapies that I lean on, but it's definitely not an exhaustive and total list.

IVNAD protocols, hyperbaric oxygen, amino acid restoration, nutrition nutrition, gut brain interventions, anti-inflammatory strategies, exercise, neuroplasticity, mitochondrial support, trauma-focused therapies, sleep stabilization, carefully structured micro-medication tapering approaches, so much more and more is emerging.

Advanced Recovery Therapies and Final Takeaway

You know, as a functional psychiatrist, I am thrilled where we are in medicine today because medicine is increasingly acknowledging that brain recovery and mental recovery involves inflammation, metabolism, neurotransmitters, trauma, gut-brain communication, nervous system regulation, sleep, nutrition, neuroplasticity, In future videos, I'm gonna break down many of these advanced recovery tools individually.

I'm excited for that, so stay tuned. If you're in recovery right now, or if you are supporting someone who is, if your a clinician who's helping support folks getting into recovery, please remember this.

Feeling worse temporarily does not always mean you failing. Sometimes it means you might need more medical attention, sometimes it mean that the nervous system is attempting to heal from adaptation.

and the brain can recover. There are tons of tools, tons resources, and most importantly, the nervous system can rebalance. And healing is often far more biologically possible than people realize.

But recovery usually takes longer than suffering wants it to. It's hard. Keep going. If this video has helped you better understand the neuroscience of recovery, please let me know in the comments.

You know, in the next video, I'm going to take a look at some cool things that are in pipeline that furthering addiction and psychiatric treatment and so much.

It's really a great time. If this was helpful, make sure to subscribe so you don't miss future videos where we break down mental health and treatment in a clear, practical way.

Follow along and join the conversation. I am Dr. Arun Podesta. Thank you for being here.