


*Anxiety, Depression, & Emotional Trauma
Root Causes, Effects of Your Body &
Directions for Treatment*

Brought to you by:
Dr. Jess P. Armine
and
The Center For Bio-Individualized Medicine
www.drjessarmine.com



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BIO-INDIVIDUALIZED MEDICINE
FUNCTIONAL & INTEGRATIVE MEDICINE

What We Hope To Accomplish Tonight

- ✓ Define Anxiety
- ✓ Define Depression
- ✓ Define Emotional Trauma
- ✓ How Do the Above Effect Your Physiology
- ✓ How to Determine Root Causes
- ✓ What Are The Treatment Options

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Anxiety is an *Emotion* characterized by:

- An unpleasant state of inner turmoil
- accompanied by nervous behavior, such as pacing back and forth, somatic complaints and rumination.
- It is the subjectively unpleasant feelings of dread over anticipated events, such as the feeling of imminent death.

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Depression is an *Emotion*

- Depression is a state of low mood and aversion to activity that can affect a person's thoughts, behavior, feelings and sense of well-being.
- People with depressed mood can feel sad, anxious, empty, hopeless, helpless, worthless, guilty, irritable or restless.
- They may lose interest in activities that were once pleasurable

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Emotional Trauma

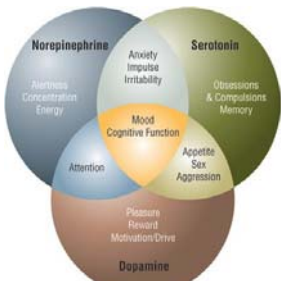
- **(Emotional)Trauma** is an emotional response to a terrible event like an accident, rape or natural disaster.
- Immediately after the event, shock and denial are typical. Longer term reactions include unpredictable emotions, flashbacks, strained relationships and even physical symptoms like headaches or nausea.
- While these feelings are normal, some people have difficulty moving on with their lives.

• American Psychological Association

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Emotions are the **EXPRESSION** of the
Neurotransmitters in your Brain

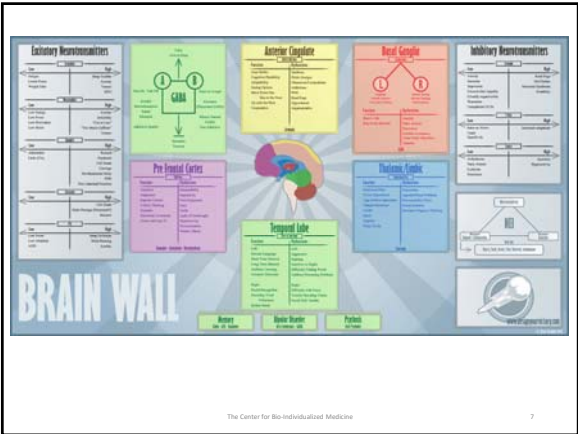



Reference: <http://dissolvinghallucinations.com/blog/does-the-neurotransmitter-make-my-brain-look-like/>

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ACR: Guest Faculty Resources -
Neurotransmitters: Treating Mood Disorders
Naturally with Dr. Jess Armine

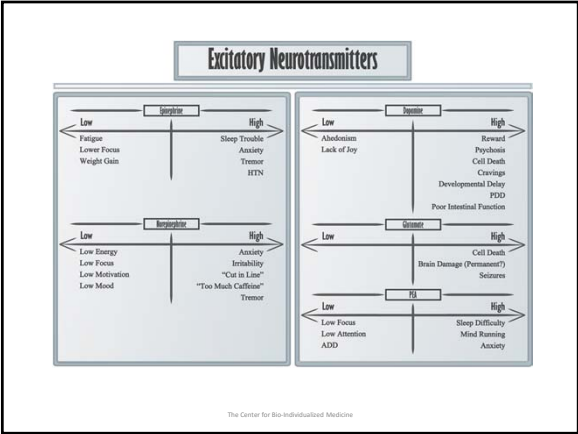




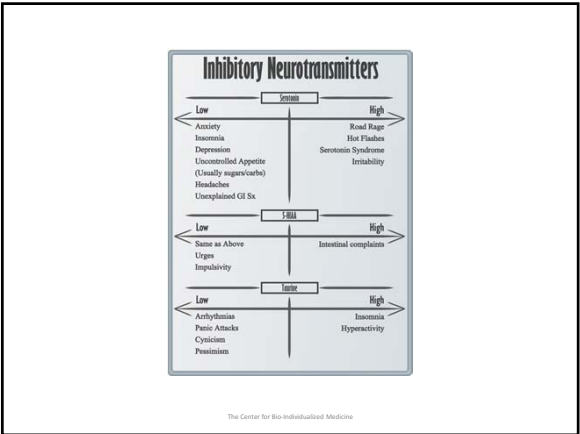
Neurotransmitters and their Functions

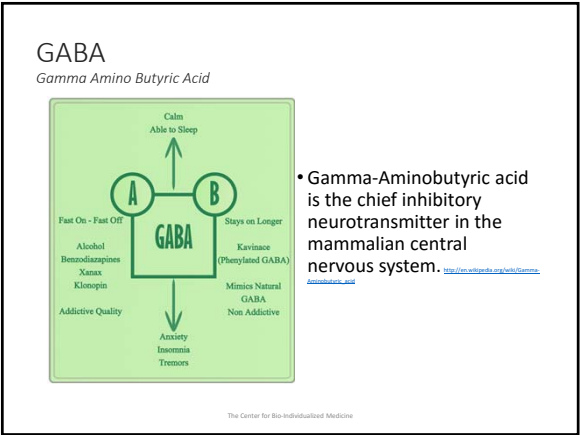
Neurotransmitters

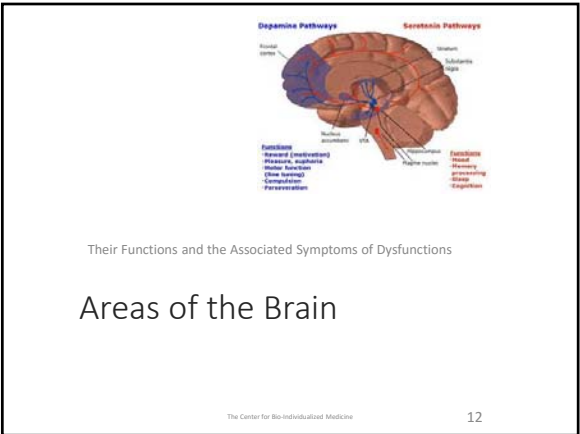
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Pre Frontal Cortex

ADD Here

Function	Dysfunction
Attention	Distractibility
Judgement	Impulsivity
Impulse Control	Poor Judgement
Critical Thinking	Lazy
Empathy	Tardy
Emotional Awareness	Lack of Forethought
Grows until age 25	Hyperactivity
	Procrastination
	Writer's Block

Dopamine - Epinephrine - Norepinephrine




Anterior Cingulate

OCD & ODD Here

Function	Dysfunction
Gear Shifter	Stubborn
Cognitive Flexibility	Holds Grudges
Adaptability	Obsessions/Compulsions
Seeing Options	Addictions
Move From One Idea to the Next	PMS
Go with the Flow	Road Rage
Cooperative	Oppositional
	Argumentative

Serotonin



Basal Ganglia

Anxiety Here

L


R

Language
Verbally Anxious
Homicidal Thinking

Internal Anxiety
Suicidal Thinking
Self Mutilation

Function	Dysfunction
Brain's Idle	Anxiety
Stay in the Moment	Panic Attacks
	Pessimism
	Conflict Avoidance
	Tense Neck/ Shoulders
	Tremors

GABA




Thalamic/Limbic


Depression Here

Function	Dysfunction
Emotional Filter	Depression
Colors Experiences	Appetite/Sleep Problems
Tags Interior Importance	Decreased Sex Drive
Charged Emotions	Social Isolation
Libido	Increased Negative Thinking
Smell	
Appetite	
Sleep Cycles	

Serotonin



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Temporal Lobe


Flow of the Brain

Function	Dysfunction
Left:	Left:
Process Language	Aggression
Short Term Memory	Fighting
Long Term Memory	Sensitive to Sights
Auditory Learning	Difficulty Finding Words
Complex Memories	Auditory Processing Problems
Right:	Right:
Facial Recognition	Difficulty with Faces
Decoding Vocal	Trouble Decoding Voices
Inflections	Social Skill Trouble
Rhythm-Music	

Memory
Gifts: 43% Increase

Bipolar Disorder
Gifts: 40% Increase

Psychosis
Gifts: 40% Increase



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Genetic snps

Are There Genetic Predispositions?

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Acknowledgement

I want to thank Dr. Ben Lynch for allowing me to use
many of his Pathway Planners in this lecture.



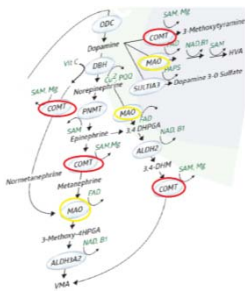
Benjamin Lynch, ND
Pioneer, Innovator, Researcher,
Clinician, Helluva Nice Guy!

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www.seekinghealth.com
World's Best Vitamins!!
www.seekinghealth.org
Join the discussion forums!!
Methylation videos!!

EXCITATION CAN CAUSE THESE SYMPTOMS,
WHICH SNPS ARE IMPORTANT TO CONSIDER?
COMT, MAO



COMT	MAO	G	A
COMT 4719G	MAO A	A	AA
COMT 4719G	MAO A	A	AA
COMT 162H	MAO A	T	TT
MAO A 829T	MAO A	T	TT

SNPs slow down the metabolism (drainage) of catecholamines
and eventually, they will "overflow"



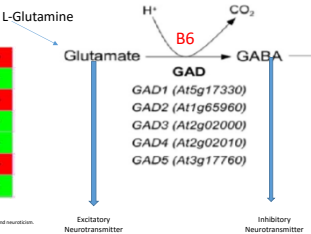
Popescu, Francisco et al. "Genetic Dissection of the Role of Catechol-O-Methyltransferase in
Depression and Stress Reactivity in Mice." *The Journal of Neuroscience*. The official journal of the
Society for Neuroscience 34.25 (2014): 8709-8713. PMC Web: 20 July 2015.
Casper, Daniel et al. "Genetic Variation in COMT Activity Impacts Learning and Dopamine Release
Capacity in the Striatum." *Learning & Memory* 24.4 (2016): 205-214. PMC Web: 20 July 2015.

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INCREASED GLUTAMATE CAN CAUSE EXCITATION
What SNPs can cause that?
GAD

				L-C
GAD1	rs2297225	C	CC	red
GAD1	rs2297225	C	TT	green
GAD1	rs2297225	A	AA	red
GAD1	rs2297225	A	CC	green
GAD1	rs2297225	T	GG	red
GAD1	rs2297225	A	AA	red
GAD1	rs2297225	T	CC	green



Association between glutamic acid decarboxylase genes and anxiety disorders, major depression, and neuroticism.
Nat Psychiatry. 2014 Aug;13(8):754-62. Epub 2014 May 23.

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ROS, Aldehydes (Yeast)

SOD2	A	AC	+
SOD2	AG	CT	+
SOD2 A191V	G	AG	+
PON1 Q128R	C	CT	+

SOD suspect mitochondrial involvement. Involved in MCS

PON1 Organophosphates (Patient lives in a farming community)

Suspect difficulty in metabolizing aldehydes. Also involved in MCS

NAT2 A80G (R258R)	G	AG	+
NAT2 C180T (R64R)	T	CC	+
NAT2 G108A (R197Q)	A	AG	+
NAT2 G87A (G296E)	A	GG	+
NAT2 T341C (R147)	C	CT	+

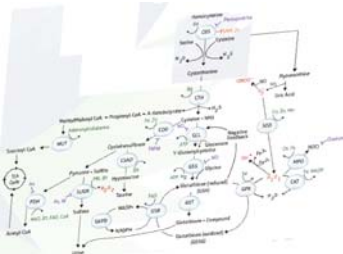
Gu, Xiang et al. "Evaluation of Genetic Polymorphisms in Patients with Multiple Chemical Sensitivity." *Sci. Adv. Environ. Sci. Res.* 10 (2015): 473786. Web. 20 July 2025.

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TransSulfuration

CBS A1307G	+
CBS A308A	+
CBS C19150T	+
CBS C699T	+
CBS K121N	+



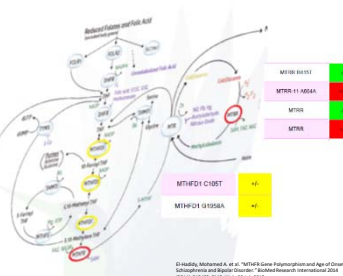
When it does express you may see brain fog, high ammonia on lab tests and/or high taurine on NT testing.

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METHYLATION

MTHFR C678P	+
MTHFR A1298C	+
MTHFR A1072G	+
MTHFR C677T	+
MTHFR G1793A (G2042C)	+
MTHFR	+
MTHFR	+
MTHFR	+
MTHFR	+
MTHFR	+
MTHFR	+
MTHFR	+
MTHFR	+
MTHFR	+

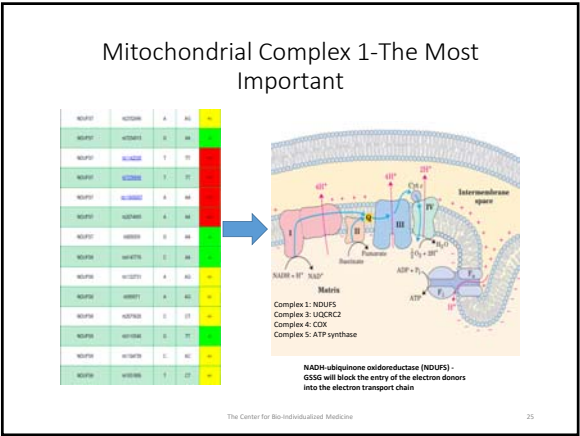


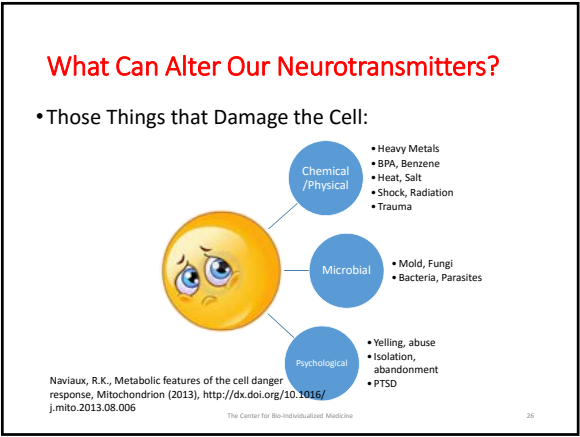
MTHFR gene information: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC304744/>

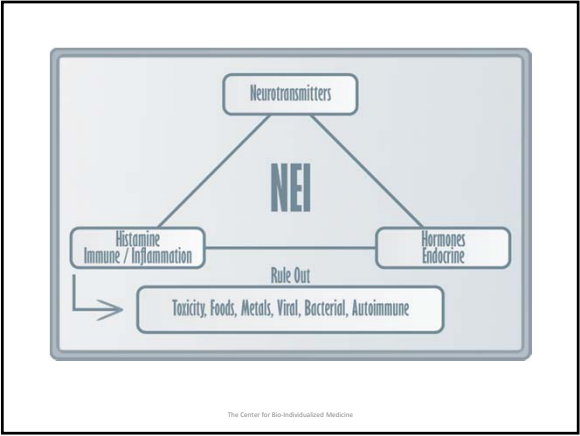
MTHFR database entry: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC171689/>

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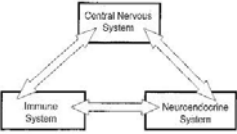


Causes of Distress and Imbalances

Central Nervous System

Immune System

Neuroendocrine System




Immune

- Toxins
- Xenobiotics
- Dietary peptides
- Dysbiosis
- Bacterial
- Viral
- Fungal
- Parasites

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Emotional Trauma



JUST as important as microbial and physical trauma.



An event will most likely lead to emotional or psychological trauma if:

- It happened unexpectedly.
- You were unprepared for it.
- You felt powerless to prevent it.

- It happened repeatedly.
- Someone was intentionally cruel.
- It happened in childhood.

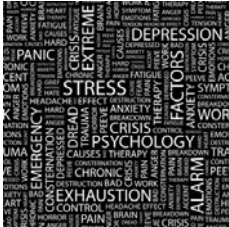
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Commonly Overlooked Causes of Emotional Trauma

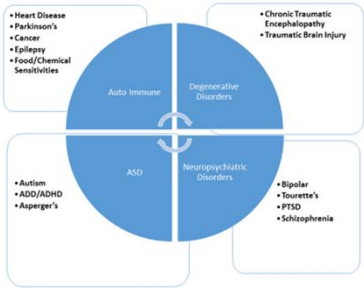
- Falls or sports injuries
 - Surgery (especially in the first 3 years of life)
 - The sudden death of someone close
 - A car accident
- The breakup of a significant relationship
 - A humiliating or deeply disappointing experience
 - The discovery of a life-threatening illness or disabling condition



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What will these cellular assaults cause?



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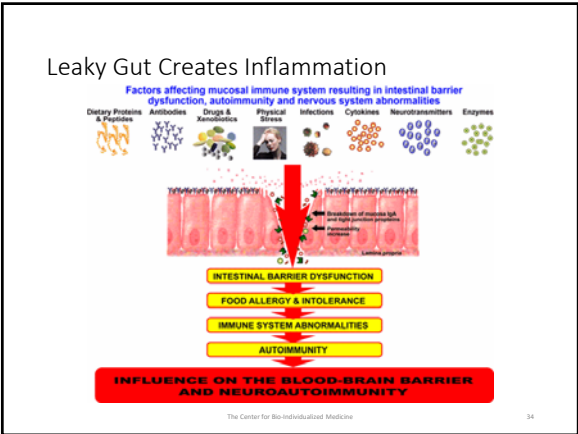
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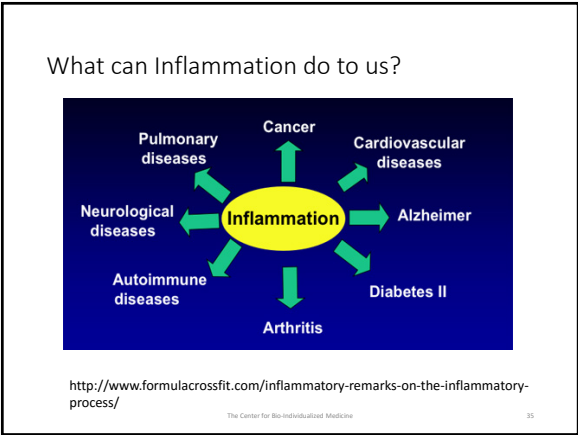
Of assault

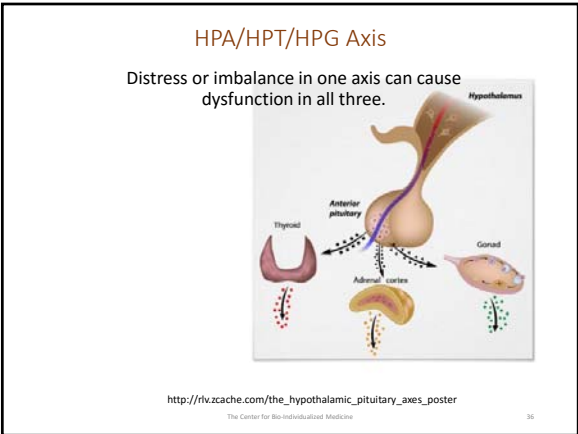
The Method

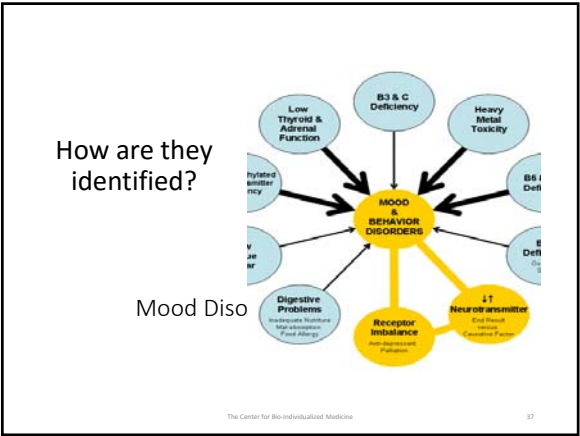
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“Listen to your patient, he is telling you the diagnosis”

Sir William Osler, Bt
Founder Father of Johns Hopkins Medical Center⁷

⁷Tutur, Amy (November 15, 2008). “[Listen to your patient](#),” The Listener (UK). Retrieved April 9, 2012.

REMEMBER, In Real Estate, It's “Location, Location, Location.”

In Health Care it's, “History, History, History!”

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The root causes

Look for

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- Neurotransmitter and stress hormone testing to identify the level of adrenal stress
- Looking at gut function for Leaky Gut Syndrome, food allergies, candida, dysbiosis, etc...
- Looking for immune dysfunction from possible metal allergies, chronic viral, bacterial, fungal or auto-immune disease.
- **Most of all, root cause analysis requires someone who can....**



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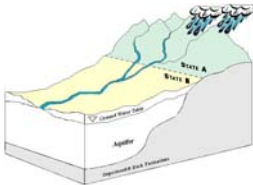
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Think Like a Detective



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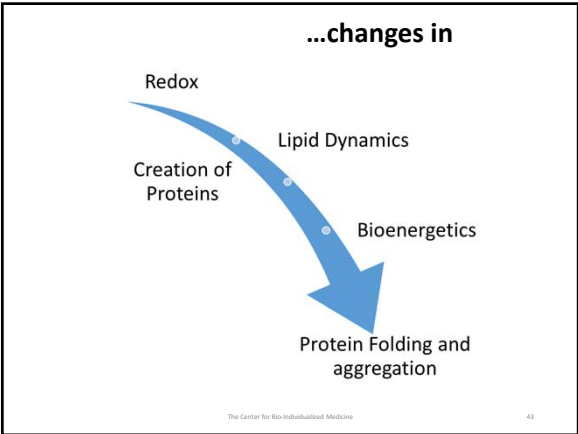


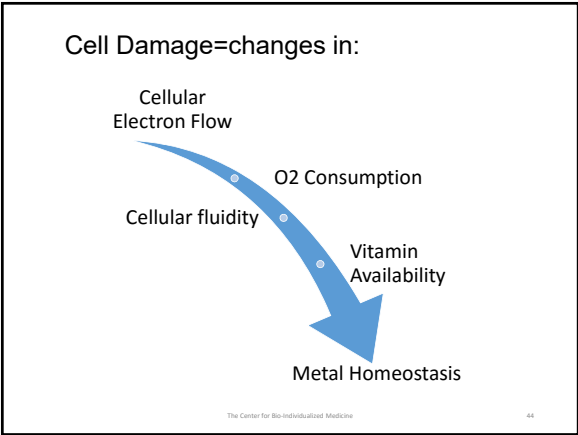
The downstream effects

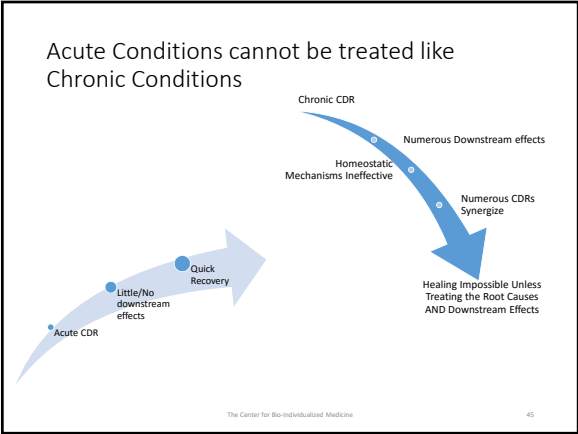
Look For

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If We Treat Symptoms:

Primary Complaints of Depression
& Anxiety



The Traditional Medical Route:

- Antidepressant Medications like Prozac, Zoloft, Lexapro (SSRI)
- If that doesn't work after 4-6 weeks. Then, maybe, Wellbutrin (SNRI, SDRI)
- If that doesn't work after several weeks, then maybe one of the newer meds like Pristiq or maybe referral to a psychiatrist for even stronger meds.
- Let's not forget the Ativan for the anxiety
- None of this gets at the CAUSE

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Neurotransmitters
Microbial Testing & More

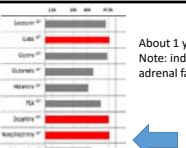
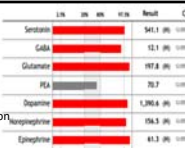
Testing Options

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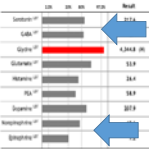
Initial Immune
Pattern.

Global Excitation

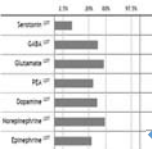


About 1 year later.
Note: indication of
adrenal fatigue

Let's look at the sequence of NT patterns as the neuro system's ability to compensate over time



About 3 years later.
Inhibitory NTs are lower &
more definite adrenal fatigue




10 years later, ALL NT's
are on their way down



15-20 Years.
Pretty Much
Exhausted

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ROUNDWORM
HOOKWORM
FLUKE
TAPEWORM
NEMATODE
PROTOZOA

Candida OverGrowth Symptoms

ANXIETY Headaches/Migraines VAGINITIS EXCESSIVE FATIGUE ACNE WEIGHT LOSS Kidney's Feet Low test drive	ALLERGIC REACTIONS Indigestion to Consumption Hyper Activity Stomach Issues Stomach Inflammation Poor Memory Cognitive Impairment Increasing Difficulties	ITCHING ECZEMA DEPRESSION PMS PERSISTENT COUGH Chronic Pain Irritability muscle weakness
---	---	--

Microbial Involvement



Lyme Disease: Adult Symptoms

Fast Facts

- Lyme is fastest growing vector-borne disease
- 80% do not recall tick bite
- Less than 70% of people develop a rash
- Treatment should begin without testing if rash is present
- Lab tests may be negative in the first 4-6 weeks

Early symptoms

- Flu-like illness (fever, chills, sweats, muscle aches, fatigue, nausea and joint pain)
- Rash (10% have EM rash)
- Bell's palsy

Later Symptoms

- Headache
- Stiff neck
- Light or sound sensitivity
- Cognitive impairment
- Sleep disturbance
- Depression, anxiety, or mood swings
- Arthritis
- Fatigue
- Abdominal pain, nausea, diarrhea
- Chest pain, palpitations
- Shortness of breath
- Tingling, burning or shooting pains



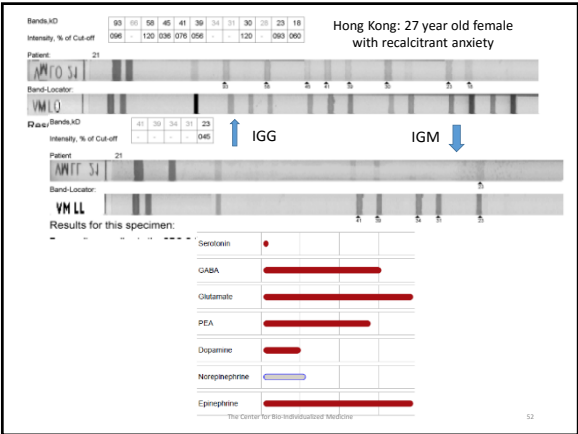
Children's Symptoms

Lyme pediatric specialist Charles Ray Jones, MD, compiled a list of common symptoms of infection in his young patients: severe fatigue unrelieved by rest
insomnia
headaches
nausea, abdominal pain
impaired concentration
poor short-term memory
inability to sustain attention
difficulty thinking and expressing thoughts
difficulty reading and writing
being overwhelmed by schoolwork
difficulty making decisions
confusion
uncharacteristic behavior
outbursts and mood swings
fevers/chills
joint pain
dizziness
noise and light sensitivity

Dr. Jones has also documented congenital, or gestational, Lyme disease in some children who were infected in utero or by breastfeeding. In these patients his suspicion is raised when the child has:
-frequent fevers
-increased incidence of ear and throat infections
-increased incidence of pneumonia
-irritability
-joint and body pain
-poor muscle tone
-gastroesophageal reflux
-small windpipe (tracheomalacia)
-cataracts and other eye problems
-developmental delay
-learning disabilities
-psychiatric problems

<http://www.lymedisease.org/resources/children.html>

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Of Interest

Table 1
Disorders corrected or improved by antiputnergic therapy.

Disease	Species	Antiputnergic drug	Reference
Autism	Mice	Suramin	Narvaez et al. (2013)
Spinal cord injury	Rats	Brilliant Blue G	Peng et al. (2009)
Traumatic brain injury	Rats and Mice	MRS2179	Chen et al. (2013)
Ischemic brain injury	Rats	Suramin	Kharlamov et al. (2002)
Glutamate excitotoxicity	Rats	Suramin	Bereznyuk et al. (2000)
Epilepsy	Mice	A43879	Engel et al. (2012)
Rheumatoid arthritis	Rats	Suramin	Sahu et al. (2012)
Chronic pain	Rats	P2X3-15h	Carrion et al. (2012)
Multiple sclerosis	Mice	Suramin	Novales-Li (1996)
Lupus erythematosus	Mice	Suramin	Balok and Salić (2008)
Restenosis after angioplasty	Rabbits	Suramin	Gray et al. (1999)
Duchenne cardiomyopathy	Mice	Suramin	de Oliveira Moreira et al. (2013)
Heart failure	Rats	Apayase	Matina et al. (2013)
Alcoholic liver disease/cirrhosis	Rats	Suramin	He et al. (2013)
Asthma	Guinea Pigs	Suramin	Opuma et al. (2007)
Emphysema	Mice	Suramin	Cakici et al. (2010)
Diabetic kidney disease	Rats	Suramin	Korrapati et al. (2012)

Suramin: Anti Parasitic Drug
Apayase: Used to treat Trichomonas

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The Order of Treatment


**“Reduce Stress,
Heal the Cells,
Heal the Gut,
Kill the Bugs!!”**

Foundational treatment

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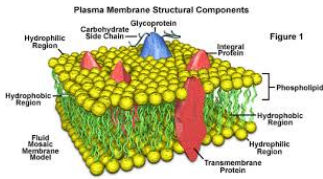

Reduce Stress



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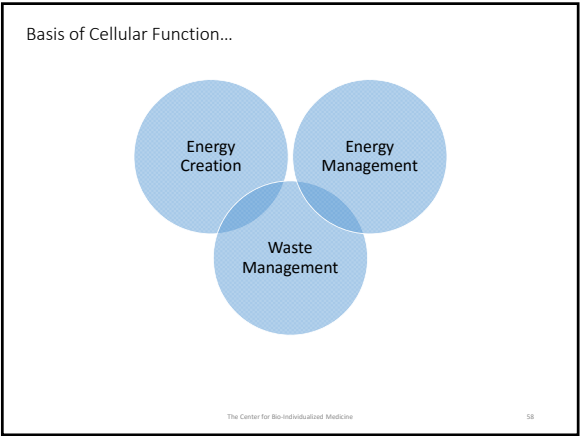
I Think We Sometimes Forget,
The Foundation of Life Happens in THE CELL!!



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TAAT


stands for

Targeted Amino Acid Therapy

Abbreviations.com

Dr. Kellerman

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Neurogenetics and Nutrigenomics of Neuro-Nutrient Therapy for Reward Deficiency Syndrome (RDS): Clinical Ramifications as a Function of Molecular Neurobiological Mechanisms

Kenneth Blum^{1,5,6,8,10,11,12,15}, Marlene Oscar-Berman², Elizabeth Stuller³, David Miller⁴, John Giordano⁶, Siobhan Morse⁶, Lee McCormick⁷, William B Downes⁸, Roger L Walter⁹, Debmalya Barhi⁹, Dennis Neal⁹, Eric R Braverman^{1,10}, Raquel Lehmman¹⁰, Joan Bonstein¹¹, Mary Hauser¹², David Han¹³, Yijun Liu¹, Many Helman¹⁴, and Thomas Simpatico¹⁵

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Treatment for Emotional Trauma

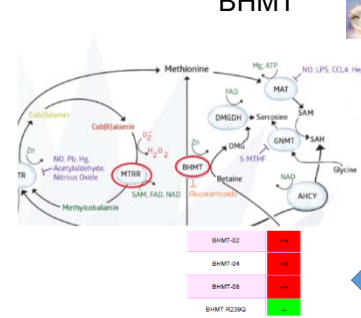
1. Emotional Release Technique
2. Cellular Emotional Release Technique
3. Emotional Release Technique Tapping
4. Emotional Trauma Therapy
5. Trauma Counseling Techniques
6. Emotional Healing Techniques
7. Trauma Group Therapy Techniques
8. Neuro Emotional Technique
9. EMDR (Eye Movement Desensitization and Reprocessing Therapy)



Medicines usually don't help get rid of the downstream effects of these root causes


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BHMT



BHMT Variant	Status
BHMT-G2	Red
BHMT-G4	Red
BHMT-G8	Red
BHMT-R239G	Green

Pearl: Patients like this will internalize stress and/or have chronic dysthymia. People with this pattern who have PTSD will respond better to EMDR than psychotherapy (talk therapy)



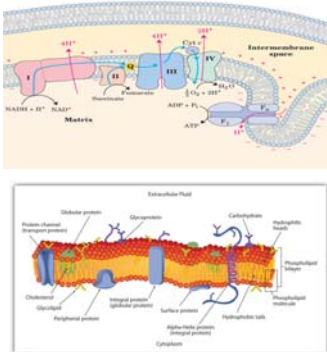
Obeid, Rima. "The Metabolic Burden of Methyl Donor Deficiency with Focus on the Betaine Homocysteine Methyltransferase Pathway." *Nutrients* 5:9 (2013): 3481-3495. PMC. Web. 30 July 2015.

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To Address Mood Disorders, you MUST consider
Not only Neurotransmitter imbalances but:

- Causes of inflammation
- The integrity of the cell wall
- Mitochondrial function
- Nutritional deficiencies
- Genetic polymorphisms
- Nutrigenomics
- And more...



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But if you want to get well...



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Working Together to Create a
Healthier World

Dr. Armine consults with patients and practitioners worldwide.

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ACR: Guest Faculty Resources -
Neurotransmitters: Treating Mood Disorders
Naturally with Dr. Jess Armine

Evidenced Based References

- NEI: <https://www.neurorelief.com/index.php?e=cms&cid=108&pid=85&type=1>
- Brain Basics: <http://www.nimh.nih.gov/health/educational-resources/brain-basics/brain-basics.shtml>
- The Brain from Top to Bottom: http://thebrain.mcgill.ca/flash/i/i_01/i_01_m/i_01_m_ana/i_01_m_ana.html
- Neurotransmitters, An Introduction: <http://mybrainnotes.com/serotonin-dopamine-epinephrine.html>
- *Epigenetics of depression*. Lolak S, Suwannarat P, Lipsky RH. Prog Mol Biol Transl Sci. 2014;128:103-37. doi: 10.1016/B978-0-12-800977-2.00005-X. PMID: 25410543

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