



# THE NATURAL REMEDY FOR BIPOLAR DISORDER

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THE INTRODUCTORY EBOOK

**MICHAEL ROSE M.A.**

## **The Nutritional Remedy for Bipolar Disorder**

By *Michael Rose, M.A.*

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## **The Nutritional Remedy for Bipolar Disorder**

There has been a huge breakthrough in the treatment of bipolar illness. It can change the whole course of treatment. Until now, the only substances that could control manic energy were very powerful drugs with many side-effects—lithium, Thorazine, anticonvulsants, and atypical antipsychotics. But there is a nutrient, a polyunsaturated fatty acid, which when combined with psychiatric medicine can help less medicine do more work with fewer side-effects. It is, however, essential to do this under your doctor's supervision, as his eyes are trained to see your mood and behavior changes and to judge what is helping you and what is not. There is significant scientific research to back up these claims.

I started a specific polyunsaturated fatty acid supplement about ten years ago. As a licensed nutritionist and product developer in the health food industry, I read research on the latest nutritional trends. I noticed several articles about different oils being good for depression. Most nutritional supplements are inherently safe, and you can try a supplement to see how it makes you feel which you cannot do with medical drugs because they are not foods. They are restricted by law and are accompanied by side-effects, but nutritional supplements have a long safety record and have rarely caused serious side effects.

I decided I would try some of these oils to see how they make me feel. Maybe it would lift my mood when I felt down or calm me when I was up. Unfortunately, the result was, the opposite. I felt lousy after taking it.

Still, I was curious to find out why it didn't have a positive effect on my bipolar illness. In my research I noticed there were over 40 oils, all polyunsaturated fatty acids. I thought that since one of the 40 helped with depression, maybe there was another one

that would help with bipolar mania and mood swings, my main problem. I reasoned that if the combination was good for depression, perhaps one of the ingredients alone might be good for bipolar illness. Using my own research background, I read a lot of scientific abstracts, and came up with an idea about which of the 40 polyunsaturated fatty acids might help with my problem. My educated guess was right on target. Several years later I found that a few select scientists had come to the same conclusion.

The result was awesome—a great miracle for me! I felt a new sense of calm, rather than feeling my energy constricted by medicine. Having used lithium and anticonvulsants for years to control my bipolar illness, I could now use this specific polyunsaturated fatty acid and take much less medicine, therefore experiencing fewer side-effects. It has since been a real blessing in helping smooth out my mood swings. And yes, I did this under my doctor’s supervision. That is the only way it should be done!

Next, I began to do further research into why this polyunsaturated fatty acid was so helpful for my bipolar illness, yet the other was not.

The scientific studies demonstrating the different roles of these two very different but related polyunsaturated fatty acids in bipolar illness and major depression are presented in complete detail in my book, *BIPOLAR WELLNESS: How to Recover from Bipolar Illness*. You will receive a special offer at the end of this article.

### **THREE CLINICAL EXAMPLES**

#### **CASE 1**

*A 24-year-old man, “John,” was diagnosed with type 2 bipolar disorder as well as other related psychiatric diagnoses. He also had four prior psychiatric hospitalizations.*

*Based on refined blood tests (which are also described in the book BIPOLAR WELLNESS), he was prescribed this specific polyunsaturated fatty acid. His*

*anticonvulsant medication was continued, but the antidepressant was discontinued. Within three weeks the patient reported to his psychiatrist that his mental status, mood and mood stability, plus overall level of social and occupational functioning were the best he could ever recall.*

*At a six-month follow-up his blood tests showed vast improvement, and he reported that he was enjoying a continued stability previously unknown to him. He credited this success to the polyunsaturated fatty acid, stating that he had never had such benefit associated with the anticonvulsant he was taking. He also discounted the possibility that the discontinuation of the antidepressant was relevant since there had been many prior episodes of being off these medications with no equal benefit.*

## **CASE 2**

*A 27-year-old woman, "Kathy," was admitted with the chief complaint of emotional dysregulation. She had a family history of bipolar disorder and had engaged in frequent suicidal gestures and self-injurious behaviors. Upon testing blood levels, she was found to be in the lower third percentile of US population norms. Based on the family history of bipolar disorder, lithium was added to her existing anticonvulsant and atypical antipsychotic medications.*

*Based on her low blood levels, she was started on the specific polyunsaturated fatty acid. After a six-month follow-up, she was finally able to live independently and reported no self-injurious behavior.*

## **CASE 3**

*A 23-year-old man, "Paul," received a comprehensive diagnostic assessment suggesting "bipolar disorder not otherwise specified" as the most appropriate diagnosis,*

*along with generalized anxiety disorder. He was referred for treatment because he was contemplating suicide as he could no longer tolerate the-constant depression and anxiety, having suffered since age five. He had previously received various diagnoses, including bipolar disorder. He had been treated with a wide variety of antidepressant medications, mood stabilizers, and stimulants since his early teens. Medications had been either ineffective or poorly tolerated.*

*Upon testing his blood levels, he was found to be in the lower 11th percentile of US population norms. Because of this, the addition of polyunsaturated fatty acid to his medications was recommended.*

*Other treatment recommendations included discontinuation of SSRI antidepressants, the addition of lithium and a low-dose anticonvulsant. He continued his existing nightly dose of an atypical antipsychotic medicine.*

*At a nine-month follow-up, he reported markedly improved social and occupational functioning and normalization of his mood. The durability of these improvements allowed for the elimination of both lithium and the anticonvulsant medicine, plus cutting in half the nightly dose of the atypical antipsychotic medicine. He continued to take the polyunsaturated fatty acid supplement.*

The above clinical vignettes were taken from a peer reviewed scientific journal. The book *BIPOLAR WELLNESS* gives you the sources of over 20 scientific articles, which you can read yourself, or print out and give your doctor to read.

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***“Secrets of the Nutritional Remedy for Bipolar Disorder”***

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