



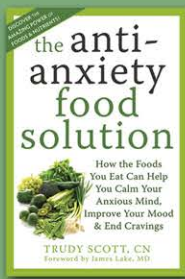
Case study: woman with panic attacks (using food and nutrients)

Trudy Scott, BS, CN (Certified Nutritionist), author *The Antianxiety Food Solution*

Special Advisor, National Association of Nutritional Professionals

“It is both compelling and daunting to consider that dietary intervention at an individual or population level could reduce rates of psychiatric disorders. There are exciting implications for clinical care, public health, and research”

Freeman, M. P. 2010. Nutrition and psychiatry. *American Journal of Psychiatry* 167(3):245.



The Case Study

Overview: Stay-at-home mom in her forties - anxious and experienced weekly panic attacks related to musical performances; tired; mildly depressed; severe PMS, including bloating and emotional symptoms (especially tearfulness). Ate fairly well i.e. a **real whole foods diet** (1), including grass-fed red meat, fish, whole grains, healthy fats and organic produce. But she had strong cravings for bread, pasta and unhealthy fats.

Week 1: Supplements recommended

- multivitamin and multimineral – for general nutritional support
- **B complex** – for anxiety and stress (2)
- **vitamin C** – for anxiety, stress and antioxidant support (3)
- **5-HTP** – for low serotonin: depression, winter blues and anxiety, afternoon and evening cravings, insomnia, PMS (4)
- **GABA** – for low GABA: anxiety, stress, overwhelm, panic attacks (5)
- **DPA** – for low endorphins: comfort eating and her love of bread and pasta
- **zinc** – for anxiety, depression, pyroluria and neurotransmitter synthesis (6)
- **vitamin B6** – for anxiety, pyroluria, PMS and neurotransmitter synthesis (7)

Testing: IgG food allergies (including gluten), adrenal dysfunction, pyroluria, fatty acid deficiencies, sex hormone imbalances, basic blood work (vitamin D, ferritin, cholesterol). Two-week gluten elimination-challenge trial was also recommended.

Week 2: No panic attacks in prior week. “For the first time in a long while, I have hope.” Less overwhelmed, more optimistic and sleeping well. Afternoon cravings less intense but still a problem so 5-HTP increased. **Vitamin D** (8) and iron supplements were added

Week 3: When she added gluten back: more tired, spacey, moody, and slightly more anxious. Labs confirmed sensitivity to **gluten** (9) and other foods – so they were excluded from her diet. Fatty acid testing indicated low levels - addition of omega-3s/**fish oil** (10) and omega-6s/evening primrose oil, plus more olive oil and coconut oil. Testing for **pyroluria** (11) was positive and zinc and vitamin B6 were increased.

Week 6: Improved energy, and she was more adventurous in the kitchen, such as using more fermented foods and making her own sprouts

Week 8: She was much more relaxed, less perfectionistic, mood great, cravings entirely gone, had lost fifteen pounds, sleeping well, no PMS and hadn't had a single panic attack since her first appointment.

Supporting Research

- 1) **Whole foods diet:** Jacka, F. N., J. A. Pasco, A. Mykletun, et al. 2010. Association of Western and traditional diets with depression and anxiety in women. *American Journal of Psychiatry* 167(3):305-311

Davison, K. M., Kaplan, B. J. 2012. Nutrient Intakes Are Correlated With Overall Psychiatric Functioning in Adults With Mood Disorders. *Canadian Journal of Psychiatry* 57:85-92
- 2) **B complex:** Hallert, C., M. Svensson, J. Tholstrup, and B. Hultberg. 2009. Clinical trial: B vitamins improve health in coeliac patients living on a gluten-free diet. *Alimentary Pharmacology and Therapeutics* 29(8):811-816.
- 3) **Vitamin C:** Brody, S., R. Preut, K. Schommer, et al. 2002. A randomized controlled trial of high dose ascorbic acid for reduction of blood pressure, cortisol, and subjective responses to psychological stress. *Psychopharmacology* 159(3):319-324.
- 4) **5-HTP:** Birdsall, T. C. 1998. 5-Hydroxytryptophan: A clinically-effective serotonin precursor. *Alternative Medicine Review* 3(4):271-280.
- 5) **GABA:** Lydiard, R. B. 2003. The role of GABA in anxiety disorders. *Journal of Clinical Psychiatry* 64(3):21-27.
- 6) **Zinc:** Lai J., Moxey A. et al 2012. The efficacy of zinc supplementation in depression: systematic review of randomised controlled trials. *Journal of Affective Disorders* 136(1-2):e31-39.
- 7) **Vitamin B6:** De Souza, M. C., A. F. Walker, et al. 2000. A synergistic effect of a daily supplement for 1 month of 200 mg magnesium plus 50 mg vitamin B6 for the relief of anxiety-related premenstrual symptoms: A randomized, double-blind, crossover study. *Journal of Women's Health & Gender-Based Medicine* 9(2):131-139.
- 8) **Vitamin D:** Lansdowne, A. T., and S. C. Provost. 1998. Vitamin D3 enhances mood in healthy subjects during winter. *Psychopharmacology* 135(4):319-323.
- 9) **Gluten:** Addolorato, G., A. Mirijello, C. D'Angelo, et al. 2008. Social phobia in coeliac disease. *Scandinavian Journal of Gastroenterology* 43(4):410-415
- 10) **Fish oil:** Haag, M. 2003. Essential fatty acids and the brain. *Canadian Journal of Psychiatry* 48(3):195-203.
- 11) **Pyroluria:** McGinnis, W. R., T. Audhya, W. J. Walsh, et al. 2008. Discerning the mauve factor, part 1. *Alternative Therapies in Health and Medicine* 14(2):40-50.



www.antianxietyfoodsolution.com

Questionnaires & poster download: www.antianxietyfoodsolution.com/apha2012

