

**DR. KEESHA EWERS:** Welcome to the Women's Vitality Summit: Caring For Yourself Body and Soul. This is your host Dr. Keesha Ewers, and I'm very honored and excited to be interviewing my guest today. Dr. Hyla Cass, who is a nationally acclaimed innovator and expert in the fields of integrated medicine, psychiatry, and addiction recovery. Dr. Cass helps individuals to take charge of their health; one area is in withdrawing from both psychiatric medication and substances of abuse, with the aide of natural supplements. Dr. Cass appears often as a guest on national radio and television, including the Dr. Oz show, E! Entertainment, and The View, and in national print media. She's been quoted in many national magazines, blogs for the Huffington Post, and is the author of several best selling books including Natural Highs: 8 Weeks to Vibrant Health, Supplement Your Prescription: What Your Doctor Doesn't Know About Nutrition, and her eBook, The Addicted Brain and How to Break Free. She's created her own line of innovative nutritional supplements. Welcome to the Summit Dr. Cass.

**DR. HYL A CASS:** I'm so happy to be here.

**DR. KEESHA:** You know, this is a really important subject. I always start each interview off for the Summit, because we're talking about female vitality, and I always mention that vitality means your life force, your prana, your energy, your juice, your passion, your bounce. I often see in my practice, and this is why I'm doing this Summit, that a lot of women of our time are really kind of drained of vitality. One of the things that I see as a problem is addiction. That's a very big one for draining energy. I would love to ask what you see as the number one reason that women are low in vitality today. One of the biggest vitality drainers.

**DR. HYL A CASS:** Wow. Let me count the ways. I think it's our modern day. I think men are too, but women have the additional issue of even with all the evolution of equalizing roles and things, women are still the ones that are taking care of the home and the kids primarily. Homes where that's divided equally, bless those families. Even so, there's a lot to do. We're working, there's kids, there's family, there's paying the bills, there's administrating, and I just look at what I do. It's outrageous. So there are a lot of places where you can get drained and stressed, and you need to learn how to support your system so that you can handle all the things that come at you.

**DR. KEESHA:** Really, really important. I just gave a webinar called the Five Sneaky Health Secrets that a lot of medical practitioners don't cover, and one of them is boundary setting. I think that what you just mentioned is really important: these things that we do all day every day that can really drain your vitality. If we give a diagnosis of breast cancer to a woman, that task list, that daily grind, actually rearranges itself. We re-prioritize when we have something like that that we're confronted with. One of the reasons I'm doing the summit is so that women don't have to get to that point. Isn't it sad that we have to get these big wake up calls, and the body has to turn up the volume so loud?

**DR. HYL A CASS:** The point is, I was just talking to a patient the other day that was doing many things. Administering a large nonprofit, taking care of a disabled child, you can't imagine all the things she had to deal with. I said, how about your boundaries. She said, oh wow. You're right. She knew

about boundaries, she needed someone and here we are. We're the someone. Reminding women there are times when you say no. You don't have to say "No!" in a mean way or an angry way, because that's what happens. By the time you get to say no, you're so upset that it can't come out badly, it's more like, "No, that's not going to work for me right now." Or "Gee, I really can't, but maybe I can help you find somebody." Or "Let me help you find a solution." Not taking something on, don't take on every single thing. We're taught as little girls to be nice, to be sweet. It's kind of interesting, I see a lot of women kind of making like little white lie excuses about why they can't do things. Do you see that?

**DR. KEESHA:** Oh, of course.

**DR. HYL A CASS:** That's something that I don't do. I don't know if I was raised differently. It never dawned on me to say, "well I can't do that because..." I think I reached a point for me, because I went to medical school and had to deal with a lot of men, and sort of took on some of their aspects. You're absolutely entitled, what I'm saying is, don't stress yourself by making an excuse that's then kind of a little white lie. Then you have to remember what you said. Come from a place inside. This is what I'm saying. You deserve to have your space, your boundaries. Boundaries means: "I decide who comes into my energy shield and who doesn't." How much energy I'm going to give you. I'm entitled to say "no" in a nice way, and not to worry about if they won't like me.

**DR. KEESHA:** That's so important. In this webinar I have a whole slide, a list of ways that women can practice setting boundaries. There are statements, just like what you said: "That won't work for me, but I could..." and then you can negotiate. If you really do want to help this person, what you are good for? Whether you are capable, without having to extend beyond your energy level. I think this is where a lot of addictions come from. We extend ourselves so far that we feel like we have to numb out when we get too extended. I think it's a lack of boundary setting. It's why I wanted to start this conversation with the idea of boundaries, because I believe a lot of addiction comes from that space. Would you agree?

**DR. HYL A CASS:** Yeah, absolutely. Let's talk about addiction say, to sugar and carbs. When I wrote 8 Weeks to Vibrant Health, I had an example of a woman with a few kids who was working, and she'd come home at the end of the day really tired. Having to take care of the kids, do their homework, and finally collapse with a dish of ice cream and maybe some cookies. Her addiction was the sugar and fat in that ice cream and cookies. It wasn't simply sugar, it was also fat. It was an addiction, and she was using it to sure up her system because she was really drained. What happens when you eat carbs is it allows serotonin to be made because the tryptophan that you've eaten with other foods, there isn't actually tryptophan in most carbs. It's what makes serotonin; it's an amino acid. When you eat carbs, it helps the tryptophan to get into your brain, and make serotonin. Serotonin is our dope. It makes us feel calm, relaxed, and happy.

**DR. KEESHA:** Guess what else serotonin does?

**DR. HYL A CASS:** It causes your appetite.

**DR. KEESHA:** Serotonin is also the neurotransmitter that's released after you're done with sex. It's the

one that says, okay, now you can go to sleep and rest. It's an inhibitor of sexual desire, and so often I have women come in to me that are addicted to, I would add caffeine to that list, of sugar, carbs, and fat.

**DR. HYL A CASS:** That's in the morning. I was talking about at night. The nighttime one is the carbs, because that brings you down. This is so good, I'm glad you're bringing that up. Sorry I interrupted you. In the evening, you want to bring yourself down, so what do you do? You have sugar, or some sort of a carb that will put the serotonin into your brain, and in the morning you need to wake up, so you do something that puts dopamine into your brain, and that's caffeine. So you're absolutely right. I will call it an addiction, it's not, oh I just like my coffee, oh I just like my ice cream. It's not that. It's the compulsiveness of it. The need to use it in order to make yourself do what you need to do, which is get going in the morning, or in the evening to relax enough so that you can go to sleep.

**DR. KEESHA:** Which, in the way that I describe this, is the same as pushing on your gas pedal in your car even though your tank is empty and expecting your car to go further and faster. We all know that's impossible, any of us that drive. We know if it says 'E' on the gas tank, that the car will pull over on the side of the road, dead. We're going to have to give it fuel. What we do, is we grab a Red Bull or a Coffee in the morning when our tank is on 'E', and then follow it with sugar and carbs later. It's this roller coaster. Then people will use alcohol to go to sleep, which research shows does not work. It's a fascinating cycle that you can find yourself in if you're not doing this with intention, and really feeding yourself properly, the right fuel. Right?

**DR. HYL A CASS:** That's exactly right. I don't come on saying to someone, you have to give up x, y, and z. The woman I was talking about earlier came in and said, "You won't make me give up my wine, will you?" So, right away that was a clue for me, that this woman is low in probably serotonin. When somebody has a preference for a certain substance, and sugar is a substance, caffeine is a substance, alcohol is a substance. When you have a preference, it just tells me. It's information. I'm not sitting there judging you. I'm just saying, oh great, that gives me information. Let's say if you were in college and you were exposed to some kind of drugs, what did you use? Some will say, oh I liked cocaine, or I liked downers. That gives me a really good insight into what their biochemistry is really like. Then I can guide them to how to eat, and what supplements to take that will make their brain chemistry work for them. So that should they want to have a drink, should they want to have some coffee, should they want to have a carb, it's not a compulsion. It's not, I've got to have it or I'm going to die. It's more like a preference, take it or leave it. I'm not coming on like everything's bad and you have to be a Puritan, but what happens is that when your brain is balanced, you just don't crave those things. A real switch happens.

**DR. KEESHA:** That's really true. So, I would love for you to go through, I find it fascinating, I love working with the neurotransmitters. Talk about some of them. We've mentioned serotonin, dopamine, and GABA. Mention some of those, and what kinds of foods enhance them and what nutrients will enhance them to help them stay stable?

**DR. HYL A CASS:** The truth is that if you're eating a well balanced diet, and I'm not going to go into the whole nutrition arena here because that's the basis, you've probably covered that in some other of

your sessions.

**DR. KEESHA:** Not related to neurotransmitters directly.

**DR. HYL A CASS:** Okay. So when you're eating a good diet, you're going to be feeding all of your neurotransmitters. For example, carbs will be calming, they'll give you serotonin, but instead of simple carbs, make it complex carbs. Whole grains, quinoa. Things that will calm you down, but not cause you to be addicted. Sugar will get into your brain very quickly, and let you down very quickly. You have something sweet to eat, and an hour later, you want more. If not sooner. That's that. If you want to have your brain really cooking, when you get up in the morning, and you really need to do something, you need to think. You need to process. You eat foods that will supply amino acids, and what's that, that's protein. Protein is fish, chicken, meat, if you're vegetarian, some sort of soy product. Actually quinoa has some protein in it. That's a whole other story, is how to get enough protein when you're vegan. Basically, if you're eating protein, it's going to break down to the amino acids, and the amino acids are going to supply tyrosine to give you the right stimulation. To make dopamine. That will help.

**DR. KEESHA:** I think this is really important, because often American breakfasts look like, if someone's feeling that they're being healthy and they buy gluten-free waffles out of a box, that they've done something really healthy for themselves. Throw some maple syrup over the top of that, and you haven't provided your body with the ingredients to make the neurotransmitters that you need. This is not amino acid enhancing food. I love what you're saying, and I'm often known to say your breakfast can be dinner from the night before. The chicken that you had last night, you can have that for breakfast. It's actually really good to do. I love that you said make sure that you're eating enough protein. That's the way to set your day up so you can think properly.

**DR. HYL A CASS:** Another thing I do is if you really are unable to get a real breakfast, have a protein shake. Have a protein shake with at least 20 grams of protein in it. You mix that up with say, coconut milk or almond milk. I just had mine today, I had protein powder, 20 grams protein powder in almond milk with some greens, some super greens that also add different kinds of super food, that added nutrition. I also take a multivitamin, and it's really important also to be taking a multivitamin because it supplies the co-factors. The A, B, all the B's. You need to take extra vitamin-C even. Magnesium, calcium, all these things are co-factors in helping to make your neurotransmitters.

Maybe I need to back up and say what a neurotransmitter is. We're talking as if people know. I'm going to just explain a little bit. We have chemical messengers in our brain that transfer a message from one neuron to the next neuron. Those are nerve cells, neurons. That's how things happen in the brain. In order to get a happy message, we need enough serotonin. In order to get motivation and feeling up and good about ourselves, and able to focus and concentrate, we need dopamine. That's another neurotransmitter. So far we have serotonin and dopamine. Then there's GABA. GABA is the one that kind of controls everything, because for example if you had dopamine you'd just get focused and motivated, you'd get a little manic. You'd get a little bit too high. GABA comes along and kind of modulates it, brings it down a little. It's the one that calms you down. It's the one that people like from alcohol, that's the alcohol stimulation. It's usually GABA. Usually people who crave alcohol are low in

GABA: Gamma amino butyric acid. When you're feeling a lot of anxiety, and you just don't feel good, you feel stressed, burnt out. You can't relax. You may have muscle stiffness. You're basically low in GABA. You want to have enough of that to keep you balanced and calm, you want to use it for calm.

Then there are also the endorphins: endorphins keep us feeling good, feeling able to handle emotions. Able to handle when difficult things happen without just breaking down. People who tear up at every little thing, who cry easily. It's okay to be emotional, but when you're just crying, when you really don't want to be crying, it's just not appropriate, usually you're low on endorphins. That again is related to amino acids. That's another one. Then there's acetylcholine, which has to do with memory. If you notice that your memory isn't working too well, acetylcholine is probably low, and that gets lower with age. I'll just review quickly. Serotonin, you're feeling calm, good about yourself: happy and satisfied. You're not craving food all the time. Low serotonin, you're craving a lot of food. Particularly carbs. If you're low on dopamine, norepinephrine, I forgot to mention norepinephrine because it's on the same line as dopamine. You're going to be craving sweets, craving caffeine, you'll feel bored, depressed, unmotivated. When you have enough of the dopamine and norepinephrine, you're happy, you're motivated, you can focus and concentrate, and you can get things done. GABA is the one you need to calm, just chill. That's the alcohol one. For the people that turn to alcohol in order to get a GABA type fluid. The endorphins are when you tear up easily and you're sad, then you need protein to make that work. Then there's low blood sugar issue, when you have low blood sugar, everything goes south. You're craving sugar, and your brain just isn't working properly.

**DR. KEESHA:** So, that's a great review. I think it's so important because people read about an isolated neurotransmitter in a blog post somewhere and then go and look at their health food store for GABA if they're having anxiety. What's your advice to people?

**DR. HYL A CASS:** That's a good point. Yes. I have patients who come in like that. I ask everyone if they're taking a vitamin. Some of them say, it's a lot. I say that's why I want you in here. They bring them, and I look in them, sometimes it's crazy. They have a vitamin A, a vitamin C, a vitamin D, all these things, and they can really be taking a multi, although D has to be taken in higher quantity. So, how to handle the amino acids? What's interesting is, the free form amino acids will do a lot. Eating protein will do a lot. When you read about the individual ones, really educate yourself. Don't just read one thing and, okay, now I'm going to do that.

You know what I'd recommend, actually? I have a free eBook called Reclaim Your Brain. You can get Reclaim Your Brain for free from my website, you just go and sign up, put in your name and email, and you'll get it. That will explain, that will give all of these neurotransmitters, because I don't expect you to memorize this just from hearing it once. It tells you what the different neurotransmitters are, how to increase them with nutritional supplements, which ones to take. Very often, it's a good idea to take them in formulas. Remember I mentioned those co-factors. You need also some vitamins and minerals to go along with the amino acids to make these brain chemical neurotransmitters. You need a lot, you need a lot, you can't just say, okay I'll just take tryptophan; I'll just take 5htp. You really need to take it along with some B6 and some of the co-factors. Which is why I developed a product that does that. You need to educate yourself. You can, I'm not saying that everyone has to go see a nutritionist or a doctor like



me. Please know what you're doing.

**DR. KEESHA:** I think that sometimes, you know, when you take one of these isolated, let's say you read that dopamine's great for you so you start taking a lot of L-tyrosine. That competes with 5htp, on the same synapse. I look at it like the bell curve, you have that really peak potential where you're at, but you can slide over the other side of it too much and then you're affecting these other neurotransmitters in a bad way, and becoming imbalanced. It's really important that you listen to the feedback from your body, too. I always say start low and go slow.

**DR. HYL A CASS:** That's very good advice. Another analogy that I use is that the chemistry set in our brain is like an orchestra. It's a chemistry set, but it's also an orchestra because all of these neurotransmitters dance together, play together. They create harmony together. When you have one instrument of an orchestra that is out of tune, or excessive, making too much noise, maybe being in tune but being overly expressive and louder, it's not going to work. The whole orchestra has to work together. That's how we're built. Nature is miraculous.

**DR. KEESHA:** That's a very nice metaphor. You don't want the snare drums to be pounding away, or you're not going to enjoy the entire symphony. That's a really nice way of thinking about it. You do a lot with helping people who are trying to wean off their psychiatric medication do it successfully. I do this in my practice too; this is what your specialty is. I always tell my patients, please don't wean off something that you've been on like an antidepressant, maybe a serotonin re-uptake inhibitor on your own. You've got to replace it with something that your body can then use, or you're not going to be very successful. You've got to do something with either making sure you've got some strength going on with counseling, or your cognitive belief systems. You've just got to make sure that you're not just stopping the thing. Our bodies become very used to having that in there, if you just wake up one morning and say, I don't need this anymore, don't take it anymore, you're going to fail and feel miserable, and then think that you have to have it. You help provide guidance about how to do that. I'd love for you to talk to people about that process.

**DR. HYL A CASS:** Sure. You know, what happens is, psychiatrists, family doctors, whoever it is, puts people on these medications and don't tell them that they're highly addictive. When the person wants to get off of them, I've had many patients say to me: "the doctor said I know how to put you on them, I don't take people off drugs." They don't even know how. Basically, doctors figure you need to be on them for life, and that's horrifying. What happens when you're taking, for example an SSRI like Celexa, Lexapro or Cymbalta, which is also an ARI? You're affecting your serotonin system, your dopamine system, and eventually your brain gets used to it. Medication stops working.

Here you are, you're on medication, that's costing you money and it's giving you side effects of the SSRI's, the serotonin, the uptake inhibitors, or selective serotonin uptake inhibitors. I would try the antidepressants that I mentioned, Paxil, Zoloft, Prozac. What they do is actually shut down your own production. They shut down the receptor sites. Ultimately, you become depleted in serotonin, or the MARI's, serotonin and dopamine. You actually get depleted. You're not feeling very well because the darn drugs aren't working. You can't get off them, because when you get off them, a lot of the receptor

sites have been down regulated. Now, what am I talking about? What I'm saying is your brain got so used to not having it, it kind of shut down because, oh there's too much. We're getting serotonin, we're getting stimulation for serotonin, we're getting stimulation for dopamine, so we'll just shut down. So these receptor sites shut down and suddenly you stop the drug, and those shut down receptor sites aren't working, which means suddenly you don't even have normal serotonin available because your brain has stopped making it. So you've actually become depleted, and then you go through hell.

You go to the doctor and say I've got to be back on it, and then the doctor very kind of smugly, I've seen this over and over, I'm not just saying it, says "I told you you needed to be on it. You just listen to me. Listen to me, come every month, let me fill your prescription." I'm not saying everybody drop your drugs. If you're on a medication, and it's working for you, that's fine. I'm not going to get in the middle of that. I'm only saying that since so much of the time, they stop working, and they have these side effects of weight gain, sexual problems, wow, no orgasm, no sexual desire, or difficulty having orgasm. The weight gain, oh my god. Nausea, difficulty with digestion, problems with sleep. There's a very, very long list. So you take your medication, it's not really working, you can't get off it. What do you do? That's what you asked me. That was my preamble about what do I do. So, as you said, you need to support the brain in going through this. You need support; we can't just go off it. The receptor sites that receive the serotonin aren't there, and your serotonin production is turned down, it's dialed down. We have ways of helping people to successfully get off the medication. One is, you start to get off it very, very slowly. Sometimes, for some people, you can go do half-dose for a few weeks, then half of that for a few weeks, then half of that for a few weeks, and then they'll be done. I have other patients that I go as slowly as ten percent every two weeks.

**DR. KEESHA:** I've done that, too. I've even had them open the capsule and use a razor blade to take the grains because they're so depleted, it takes so long to get their brain to kick in for itself that they have to literally do it three grains at a time from inside the capsule.

**DR. HYL A CASS:** That's if they're depleted. That's if they are extended release, and they're kind of have to be. Otherwise the capsules are just power, and that's harder to do that with. I have a compounding pharmacist that I work with that actually puts them into pills, makes up little capsule doses. You don't have to pay for it, but what you get is, you'll start off on 10mg for two weeks, and then it drops down to 9mg, and then 10% of that is 8.9 mg, all the way down. They'll actually make up the capsules, or a liquid, compounding pharmacies can make up a liquid. Some of these drugs come in liquid, and then you order the liquid from the pharmacy, it's just regular, from a regular pharmacy. Not a compounding pharmacy. You work with that, and I explain to the patient how to work with it. You do it very, very gradually. At the same time, the same time as you're doing this very gradual withdrawal, you are supporting your neurotransmitter system. That's where you get success. I'm going to tell you now how you support your neurotransmitter system.

First of all, I think it's very important, before you even start going off drugs, to clean up your system. Start eating clean food, cut out the junk. Your poor liver has been so taxed with all the bad food you're eating. The chemicals, processed foods. Do a liver cleanse, do a detox, whatever you do, and eat fresh greens. Lots of protein. Drop the simple carbs, and so on. When you do that, the drug withdrawal will

be a lot easier. Then, when you're starting the drug withdrawal. Before that, I've already put people on a multi; they may be on some amino acids, specific to their particular issue. For example, if they're coming off of Zoloft, which is an SSRI, a serotonin re uptake inhibitor, I'll give them 5 hydroxytryptophan or tyrosine. Those are both in the same family. Some people do better on 5-HTP, some do better on tryptophan. You have to take that at least two hours away from the drug, because you don't want to cause serotonin syndrome. Although that's highly unlikely, we have to warn people.

So, I have them on supplements. If they're coming off something that also has a dopamine enhancer in it, like Cymbalta or Effexor, I'll also put them on something that enhances what I call the catecholamines, dopamine, and norepinephrine. Actually I developed a product called Focus, so they'll be on Focus, they'll be on 5-HTP or tryptophan, and we'll also be on a multivitamin. That really, really helps to mitigate the side effects, because you're beginning to feed the brain what it really needs. This goes back to what I was saying earlier, that rather than eating a bowl of ice cream, maybe take some 5 hydroxytryptophan, and 5-HTP, or tryptophan, and that'll raise your serotonin, and you don't have to eat ice cream and all that sugar, gain a bunch of weight, feel crappy, and all of that. That's the short form.

**DR. KEESHA:** This is so important because the way that I describe this to my patients is I'll say okay, your cells and your brain have been creating energy for you, and they're shoveling coal into the fire, and the new cells come along and they're trying to find out how to be a new brain cell, and the old guys are teaching them. We shovel this coal into the fire, and then you take away the coal, which is your antidepressant, and then they say, well, junior, I don't know what to tell you. We've got nothing. If you give them a supplement, you replace a similar thing and you put a woodpile there. Then they shrug, and they say, okay let's try this. Then they throw wood in the fire, and lo and behold, they have energy, and it works. You're successful that way and your energy doesn't plummet. The fire doesn't go out. What is going to be a little bit healthier than coal? It's a great way because we know that our cells are regenerating themselves, and we have to teach these new cells that are coming on board what to do and if there's, if you've just taken the antidepressant away then they don't have anything. There's nothing there. I love how you, this is exactly what I tell people. You've got to replace it. It's like, if you have a broken leg, and you're on crutches, and you don't go to physical therapy, and you just decide to throw away your crutch, you're not strong enough yet.

**DR. HYL A CASS:** Perfect analogy. That's exactly right. The crutch is the gradually decreasing or diminishing doses, and the food that you're giving, the amino acids, are rebuilding brain cells. I actually developed something called Brain Recovery, AM and PM, because I really found that when people are withdrawing from meds or withdrawing from an addictive substance, because I also see people who are getting off cocaine, meth, heroin, it's really the same thing. I hate to say it, but you know, drug effects on the brain and how to rebuild the brain. What I did was I created a product that gave you the multi, gave you the dopamine enhancer, which is tyrosine, and the 5-HTP in the evening, which is the calming serotonin enhancer. I also put in alpha lipoic acid and silymarin which support the liver, because I mentioned that you really need to support your liver here. It's been very taxed, in not only handling all the external toxins that come out of you, but the internal toxins, like detoxifying those drugs you've been taking. It also has things that balance your blood sugar, so you're much less likely to be craving a sugar fix. So what I did, being really creative, I kind of cooked this up. It's like a recipe.



So, your AM formula has a multivitamin and the things that help you feel more stimulated, and things that help you stop the sugar cravings. The evening one is more calming, it also has threonine in it, which is an amino acid that really chills you out. That's kind of my basic. That's what I really rely on. People who don't even know me say they've actually used it. You still have to go to your doctor, your doctor still has to help you with your program to get off the medication, but doctors usually don't know about vitamins and supplements, so you can't really let people do that. People tend to do that on their own, although I say check with your doctor, but I have people who I don't know who, who've ordered from my website and I get these wonderful emails saying you've just saved me, because I've tried so many times to get off these meds. I never could make it, and using the Brain Recovery AM and PM, I was able to do that. I also say throw in some essential fatty acids. Some EPA, for sure. That is so important in drug withdrawal.

One of the issues, and I'm sure you've seen this, are brain zaps. I don't know if you've heard people tell you that, it feels like an electric shock in their brain when they're coming off of the SSRI's, and it's so scary. I can't even imagine what it would feel like. I get told this over and over again, and they tell their doctor, and their doctor says to just power through it. Sure. Or, stay on the drug. Even better, stay on the drug. See, you shouldn't be getting off the drug. I'm telling you, I have super EPA that I actually have on my website, too. So you take the super EPA along with the Brain Recovery AM and PM, and you have something that actually gives your body what it really needs to restore your neurotransmitters. Then you get a much happier brain and a much happier withdrawal period.

**DR. KEESHA:** Beautiful. Now, Dr. Cass, I want to make sure that in the next four or five minutes here, as we wind down, I know this is not a four minute conversation but you alluded to the fact that coming off of these antidepressants is very similar to cocaine and meth. I wanted to address that really briefly because, an addicted brain is an addicted brain whether it's gambling and porn and shopping, or it's the things that we're talking about or cocaine or heroin. We need to really make sure that people understand that addiction is a neurotransmitter imbalance. Some cognitive belief is out of balance. Can you address that? I know one of the biggest vitality drainers is a mom with a child that's addicted to drugs, or any other person that you love that's addicted to drugs. This is a big deal.

**DR. HYL A CASS:** It's really serious. I really, really feel for these parents. Their kids somehow end up falling into some kind of an addiction. Nice families. It's what happens, it's the culture. Sometimes, it's sad, this happens with adults and young people. You're put on an opiate, you're put on a painkiller for an injury, and usually with young kids it's an injury. When I say young kids, I mean teenagers. You have a sports injury, you have surgery. You put on an opiate; you become addicted to the opiate. The doctor never tells you, just take it for a short time. They take it, and at some point the doctor cuts off the prescription, and they're left high and dry. What happens is, they are going to turn to the street to get the opiate because they're addicted, or they turn to heroin. I can't even tell you how many kids this has happened to. Young people. Age 18-25. They become heroin addicts.

The very sad thing about heroin addiction is if they get a bad one, like it's too strong, or if, and this has happened too, they get clean, and then they're going to take one last dose. They overdose, and they die.

Talk about heartbreak. It breaks my heart when I see it. I can't even imagine these parents. You can only do so much, and I recommend using addiction treatments that are more biologically based, like I'm talking about. There's the Alliance for Addiction Solutions that actually has a list of facilities that do a more holistic approach. A lot of addiction places call themselves holistic, it means they have yoga. Like, excuse me. I think yoga is great, but that's not what you and I are talking about. We're talking about real nutritional support. Micronutrient support. The right vitamins, the right minerals. The right amino acids.

**DR. KEESHA:** We are out of time. I so appreciate that you provided that resource, because I think this is such a big problem in our country right now, and I am very appreciative that you've given something for people to utilize. Thank you for sharing just a fraction of your wisdom in this short period of time, and on your speaker's page on the website of course, is your eBook that you talked about, and your contact information, so all of our listeners can access what you're up to and reach out to you. Thank you so much, Dr. Cass.

**DR. HYL A CASS:** You're welcome, and there are some other goodies, too. I think I gave you an addiction quiz.

**DR. KEESHA:** Great. Yes. On the website.

**DR. HYL A CASS:** You can test your own brain, my website is [cassmd.com](http://cassmd.com). You'll find it all there. This has been such a pleasure. I'm really, really glad to have the chance to talk about this very important information.

**DR. KEESHA:** Thank you so much for sharing. Remember everybody, to live, love, laugh. Keep learning, and be the most fabulous version of you. Until next time.