



IT IS WRITTEN
INTERNATIONAL TELEVISION

Depression and Its Cure

Program No. 1217

SPEAKER: JOHN BRADSHAW

John Bradshaw (JB): What do Super Bowl winning quarterback Terry Bradshaw, television personality David Letterman and business tycoon T. Boone Pickens all have in common? Well, apart from being tremendously successful in their chosen careers, they've all had serious battles with depression.

Depression can be seriously debilitating, and people of faith are not immune to its effects. I've come to Weimar, California, to speak with Dr. Neil Nedley, the president of Nedley Health Solutions, and an expert in the area of depression.

Does God have a way out of depression? And what help does the Bible offer? Today we'll find out. Thank you for joining me on It Is Written.

JB: Dr. Nedley, thanks so much for joining me today. I appreciate it.

Neil Nedley (NN): It's great to be here.

JB: We're talking about a very, very serious subject today, that of depression. It affects people, and it's no respecter of persons.

NN: Correct.

JB: If you're wealthy, not so wealthy, bright, not so bright, male, female—doesn't matter your background. If you're a believer in God or not, you can still be depressed.

NN: Exactly.

JB: Which is interesting, isn't it? The Bible enjoins us to rejoice and be happy. In God's presence, there is joy, and yet there are many people in church who are clinically depressed.

NN: Yeah.

JB: Before we talk about the right way out, what—in your experience—are most people doing to treat their depression?

NN: Well, the most common treatment is medication. More than \$20 billion is spent in this country on medicines alone. And many of these medicines are expensive. There are all sorts of antidepressants out there, and they're flying off shelves. But they're not a cure-all. They're not the fix.

JB: Is it true that antidepressants are the largest selling classification of drugs?

NN: Correct.

JB: Is it helping?

NN: Well, it helps 20 percent of people to the point where they're no longer depressed.

JB: Two out of 10 depressed people take medication and essentially get over the depression.

NN: Correct.

JB: Two out of 10. But with eight out of 10, not so much.

NN: Eight out of 10, right. In fact, three out of 10 won't experience even a slight improvement with the drugs. Even with a combination—if you give them four antidepressants and raise the dose—they're still not going to respond. So three out of 10 will have zero response to medication. And then what's left in the middle are those who get a slight-to-moderate response, but are still clinically depressed and still suffering from it.

JB: Half of the people taking medication for depression are still depressed even though they're taking the medication.

NN: Exactly.

JB: Now I'm thinking of the cynic who says, "Oh, come on." But this is statistically true.

NN: Oh, absolutely. In fact, if anything, I'm stating things more in favor of the pharmaceuticals than the statistics are actually showing. So I'm quoting drug company data.

JB: You got this data from what the drug companies say.

NN: Yes. There are some studies out there that indicate antidepressants virtually help no one. Now, I don't believe that personally, because as a doctor I've prescribed antidepressants and I've seen their effect in some people in a positive way. But in reality, I've also realized that this is not the cure. This may help some people, but

there are far better approaches to treating depression, with fewer side effects, and they're far cheaper.

JB: What are some of the side effects people are getting from medication?

NN: Well, weight gain is one of the big ones. So it tends to cause weight gain, and it tends to cause them to have an "I don't care" attitude, so that when something happens in their life, like their spouse dies, they feel like they should cry at the funeral and care about it, but it's kind of like, "Eh, oh well."

And that's not a healthy thing. It also increases impulsiveness at first when you start taking it. That's why they have black box warnings on them that say if someone is suicidal, watch out, because this will increase their impulsiveness, and suicide is often an impulsive act.

So the suicidal person needs to get better, but the drug that they're utilizing might push them over the edge, and it's a very difficult situation for caregivers or physicians to know what to do with these individuals when they're at that point.

JB: But there is a safe way—there is a healthy way—to treat depression, even to help people get out of depression. We're going to talk about that in just a moment. What are some other things that people do in terms of self-medication?

NN: Chocolate is a big one. And soda. Carbohydrates not only taste good, but they also transiently increase serotonin levels. Unfortunately, there's a nadir, so they drop it below neutral afterward.

JB: Would you explain serotonin for me?

NN: Serotonin is a brain chemical that elevates mood, helps us concentrate better, and helps us sleep better as well.

JB: Which means that if I get a hit of something that increases my serotonin level, I just feel a whole lot better.

NN: You feel better, yeah. And so these people, by self-medicating, actually do feel a little better. They're altering some of their brain chemistry. But the self-medicated routes, be it alcohol or chocolate or cocaine or pornography—these self-medicated routes actually produce a greater nadir, in other words, a greater drop, the more often we utilize it.

So first, people do it to try to experience pleasure. But afterward, they're not doing it to experience pleasure; they're just trying to do it to get up to neutral. And in between that, even though there's nothing sad around them, they feel sad as a result of their self-medication.

JB: Depression's a massive issue. I know you've described it as an epidemic.

NN: Yeah.

JB: One in 10 Americans are currently depressed. Research suggests that one in two women may experience depression in their life.

NN: At some point in their life.

JB: That's just a dramatic figure. Now, God has a way out. And I'm going to be speaking with Dr. Nedley about that way out in just a moment.

JB: I'm with Dr. Neil Nedley today, president of Nedley Health Solutions and the founder of the Nedley Clinic, and the author of the book called *Depression: The Way Out*. We've been speaking about depression, its causes and its cures.

Dr. Nedley, what's the way out of depression? I don't think this is a simple, single, pithy answer. This might be a multifaceted answer. But walk us through the journey. Obviously, this is a very brief walk. With the way out of depression, where should a person be looking?

NN: Well, first of all, they need to try to find the underlying causes. So that's where we start, with the individual. We find out: Do they have frontal lobe causes? Do they have lifestyle causes? Nutritional causes? What's going on in their life in regard to their thought process? Are distorted thoughts there?

Of course, for the vast majority of people with depression, most of those are a major issue. We start them out on a pathway. The first thing we start them out on is a regular exercise program. We want them to exercise 60 minutes a day, ideally. It can be divided up into a couple of sessions, but regular aerobic exercise helps depression, and that's our first step with them.

We also, as part of that, try to get them out into light. Light therapy actually helps depression. If they can't get into life because of their job and it's wintertime, then they need to get a medical-grade light box and actually experience the simulated blue-sky light, which is the best type of wavelength light to help with depression.

JB: We're talking about a debilitating, disabling condition—depression. I've asked you the way out, and the first two things you tell me are exercise and sunlight. Now, that's pretty simple.

NN: It's pretty simple.

JB: I'm not exactly sure what you're going to say next, but I think we're seeing a pattern here. So what would be the next thing you'd recommend?

NN: Well, the next thing we would recommend is getting on a schedule with regular sleep/wake times. And ideally, early to bed, early to rise. Ideally, up at 6 a.m. or

maybe a little before, and getting that light therapy first thing in the morning. That's a crucial law. Then next, we're going to deal with the food you're eating. We're going to try to get you on a diet that's higher in tryptophan, higher in tyrosine.

JB: What's tryptophan?

NN: Tryptophan is an amino acid that is turned into serotonin in the brain.

JB: What's the other one?

NN: Tyrosine is another amino acid. It's turned into norepinephrine and dopamine in the brain.

JB: People talk about brain food. Do you believe in it?

NN: Absolutely.

JB: So the diet's going to look like...what?

NN: Well, the diet is going to be more plant-based. The plant-based foods tend to be higher in the natural carbohydrates that get the tryptophan and tyrosine into the brain. We're also going to be emphasizing foods higher in Omega-3, foods like spinach, walnuts, flax seeds, chia seeds and almonds. Green soybeans.

JB: I'm going to challenge you just a little bit here. To come back from depression, this doesn't sound like a terrible cross to have to carry, changing the diet and so forth.

NN: Right, and actually the food can be quite tasty.

JB: Sure, no question.

NN: In fact, in the book of mine you mentioned, we have recipes in there. And the people who come to our program, the first day, they like it. So tasty food can actually be healthy if we train the cook.

JB: Absolutely, although it's not the only factor. If we turn this principle around, are some people eating their way into depression?

NN: Oh, absolutely. The fast food industry, where it's high in fat, high in protein, and virtually no carbohydrates, that is going to lead to depression in many people. Again, nutrition is just one of 10 different "hit" categories.

JB: And how many of those categories do you have to hit to officially be diagnosed as depressed?

NN: Four. Four out of 10.

JB: Okay, then you're in danger of developing depression.

NN: Exactly.

JB: So eating well is a key to overcoming depression.

NN: Eating well, a major key.

JB: What else?

NN: Another key is adequate hydration. Just drinking enough water.

JB: Another very simple thing.

NN: Right. And it's pretty powerful in regard to what it does to brain chemistry.

JB: Why? Why is water so crucial?

NN: Well, water is crucial because our neurotransmitters actually communicate with the neurons through a fluid medium. And if there isn't enough hydration there, the communication system in the brain gets gummed up, essentially, that's kind of the...

JB: The layman's term.

NN: Basic way to describe it. So yeah, adequate hydration, 6 to 8 glasses of water a day, minimum.

JB: A lot of people aren't getting that, right?

NN: That's right.

JB: What if someone says, "I drink plenty of soda; isn't that good enough?" That doesn't qualify, right?

NN: No, actually, none of those qualify, as the studies show. All the rest are water substitutes and are not the same.

JB: So we're not going to be thinking that some sort of soda or caffeinated stuff is a water substitute.

NN: Or even dairy, yeah.

JB: Okay, not even there. So it's gotta be *water* water.

NN: It's gotta be water. And another important element is hydrotherapy. In other words, hot and cold treatments. We call that natural shockwave treatments for those who are severely depressed.

It actually, in our experience, works as good as the ECT, the shockwave treatments, without you having to get general anesthesia and seizures and lose your memory and things like that.

So we describe how to do that in our materials, and that can be a good starter. We put people on that part first, and then we lead them into analyzing their distorted thoughts. That's when we get to some of the crux of the matter, so to speak.

There are 10 Commandments in the Bible, and there are 10 different ways of distorted thinking. So we teach the individual, once they get the spa—we call the first part the spa experience. Once they get that spa experience, then the circulation in their brain is good enough where they can start analyzing their thoughts for distortion. Things like over-generalizing, like Elijah said, "I'm the only one who hasn't bowed the knee to Baal."

JB: So what you've got are people who are depressed, they're not thinking right. You create an environment where the thoughts are moving freer and more healthfully, and now they can do some healthy self-analysis and look at what the problems really are.

NN: Exactly. And that's crucial. That will enhance frontal lobe function. Just the analysis itself, of seeing if there is a distorted thought and then correcting that distorted thought, will actually enhance frontal lobe activity and will help the individual recover.

JB: Now, tell me again, what's so important about the frontal lobe?

NN: Well, the frontal lobe is the seat of spirituality, morality and the will. The will means it's our decision-maker. So it's actually the area where we make decisions and provide analysis. It really gives us the ability to accomplish advanced planning and thinking.

JB: If you have lifestyle practices in your life where you are messing with your frontal lobe capacity, you simply can't make decisions.

NN: Absolutely, yeah. It's why depressed people tend to get more depressed, because their decision-making ability is down. So they end up suffering from those complications.

JB: Okay, so we get to where people are analyzing thoughts and learning to make better decisions and so forth.

NN: Yes, a crucial element. And another crucial element that helps with that is the spiritual part. The reading of Proverbs, for instance, or the listening to music like King Saul was listening to—the soft harp music or soft classical music that can help to direct our thoughts—can be helpful and can enhance frontal lobe function. And so we utilize that.

We utilize what we call cognitive behavioral therapy, which is the analysis of the thoughts. We utilize the type of music that's been shown in controlled trials to help with depression recovery. Interestingly, it's the same type of music that a lot of hymns are composed from in the church. And then on top of that, we then provide the spiritual material that can also help enhance frontal lobe function.

JB: As a person goes through this process and implements these changes in their lives, I've seen people helped dramatically.

NN: We run 10-day programs for treatment-resistant depression. And when the relatives come 10 days later, they will often break out and cry and look at us and say, "What did you do?"

Just looking at the person, they can tell immediately that things are far better, and they can see life and energy return. One of the wonderful things that happens that we document in our program is that their emotional intelligence, in just 10 days, goes to the top 20 percentile in the nation.

So they actually have better emotional intelligence than people who've never been depressed. And emotional intelligence has more to do with their future success in life than any other factor. So the sky's the limit for these people.

JB: No drugs needed.

NN: No drugs needed.

JB: No messy side effects.

NN: That's right, exactly.

JB: God's way is always the right way, isn't it?

NN: Absolutely.

JB: God's way is the right way, and God does have a way out. What's so important about this is that depression is so debilitating that it complicates lives, and it has a seriously deleterious effect on a person's relationship with God. We don't want that, and God doesn't want that either.

JB: I'm talking about depression today with Dr. Neil Nedley of the Nedley Clinic, president of Nedley Health Solutions, a man who has been successfully treating people with depression for many years.

Dr. Nedley, Christians suffer depression, too?

NN: Yes, absolutely they can. People from all faiths can suffer from depression, as well as people of no faith.

JB: Well, why that's significant is because Christians are meant to be happy, and Christians are meant to be full of joy, and enjoy the Lord as their strength. Do you find that certain types of Christians suffer depression more or less than other types of Christians?

NN: Yeah, this has been well studied. Duke University found that the denominations that have the least rates of depression are the fundamentalist denominations, ones that believe in the Word of God, for instance, and believe that God has a plan for their lives and speaks to them through His Word.

JB: I've found that depression has a bit of a stigma attached to it. I don't know whether society has stigmatized it, or whether people just feel that way. Is that true?

NN: Well, there is a stigma. A lot of people with depression don't want anyone else to know about it. They're picking up their pharmaceuticals and making sure no one else knows about it.

It turns out people do know about it. They think they're hiding it, but in reality you can't hide always hide it from your co-workers and family members. The depression is going to manifest itself in multiple ways. But because of that stigma, they have a reservation to really go out and try to seek treatment, or come to a program like a depression recovery program in their community, for fear that they're going to be seen.

But what I've noticed is, when they recover from their depression completely, and that joy returns, then they have no problem telling people how depressed they actually were. Then the stigma is gone.

So if you have that stigma, the best way to take care of it is: get the treatment that's going to cure it, and then you don't have to worry about the stigma, and then you can own up to it.

JB: God has been curing depression for millennia, hasn't He?

NN: Yes.

JB: Give me an example from the Bible.

NN: Well, Elijah, when he was depressed, angels came and fed him food. I think there was some flax seed in that food. That was food to boost the tryptophan and the tyrosine.

Exercise was part of Elijah's program. And light therapy. Elijah, like a lot of depressed people, just wanted to be in the cave, in the dark. God had to produce earthquakes and fires and essentially say, "Get out of the cave, Elijah, you need to be in the light."

Then He came and dialogued with him, after He did all those things, then He gave him the cognitive behavioral therapy, and asked him, "What doest thou here?" And Elijah began to talk, and the Lord began to correct his distorted thought.

JB: Interesting.

NN: The same types of principles we utilize today.

JB: What other factors play into this many-headed monster called depression?

NN: You know, one of them that's very characteristic is pride. It's actually a magnification of self. When people experience the distorted thought of self-inflated pride, they are setting themselves up for wounded pride.

Then with that wounded pride, they've open to depression, anxiety and other symptoms. That's what led to Saul's issue. He had the pride, and when the women sang, "Saul has slain his thousands and David his tens of thousands," it was wounded pride, and it set him up for that whole process. And the Lord knows how to deal with that as well.

JB: That reminds me of another story in the Bible, the story of Nebuchadnezzar in the book of Daniel. You hear, "Is this not great Babylon that I have built?" Next thing you know he's out eating grass like an ox.

NN: Right. The interesting thing is, his pride was so severe that even though he had been impressed by what the Lord was doing, he had not changed. Impressed but not changed. So the Lord had to get to the root of his problem, which was his pride. But his pride was so severe that it took more than a 10-day program.

It was a multi-year program, but it was the same type of principles. It was a plant-based, vegetarian diet that Nebuchadnezzar was put on. Exercise was part of it. When you read Nebuchadnezzar's testimony, hydrotherapy was part of the program. The sleep/wake cycles were there, and then in the end, the cognitive behavioral therapy was there to get rid of the pride.

JB: So God knows the way out of depression.

NN: Absolutely.

JB: I don't want to give anybody false hope. I don't want to do that. Is there a danger that we could be telling someone, "There's a way out of depression for you," when really, there just isn't?

NN: No danger. Of course, we've dealt with thousands of patients, but in our treatment resistance program, the most common complaint we get from people is that they're thinking they're going to be the first one who does not respond to the treatments and the modalities that we utilize.

They think that nothing is going to help them. But at the end of the program, they find out that they respond as well. What I have to tell these people who think that there's no way out for them is, "Do you think the biggest expert in depression might not know something about it?"

And if the biggest expert in depression might not know something about it, perhaps that individual doesn't know something about it, and what they don't know might actually help them.

So there is a way out for everyone. And if they find the underlying cause, I have no doubt that there's a solution to bring them out of depression.

JB: Thank you for joining me today. This has been a blessing. I just believe that people are going to get their lives back again out of that vice-like grip of depression—liberated. We've seen it happen in so many lives—people liberated to lead full, productive, joy-filled, solid lives, rejoicing in the Lord.

NN: Amen.

JB: Friend, I want that person to be you. If you are suffering from depression, or if you know somebody who is, let them know. Go to DrNedley.com to get some good materials, and follow the plan that we've been talking about here, because there is a cure.

There is a way out of depression, and God wants you to experience what David wrote about when he said that in God's presence, there is fullness of joy. Dr. Nedley and I are going to pray for you now, and ask that God will bless you—and those you know and love—who are battling this difficult thing. Let us pray.

PRAYER:

Our Father in Heaven, we thank you today for Jesus—the Way, the Truth and the Life. And I am grateful that He said that He came to this world that we might have life more abundantly.

Lord, I pray that you'll help us all to think healthy thoughts, to have minds that are centered in your Word, and to be livers of lives that are grounded, founded, and rooted in the principles of Heaven that will bring us joy everlasting. Help us to be

glad and grateful today that there is a God who loves us, and a God who has the way out of difficulties, just waiting for us to find and follow. We thank you today and we pray in Jesus' name, Amen.



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