Depressed

Depression is a symptom of something smoldering much deeper with two interdependent and reciprocal forces conspiring, physical and psychological, each affecting the other. Optimum balance, not being depressed, demands a strategy and care for each.

"Don't ask why the addiction (or depression), ask why the pain."
Gabor Maté - addiction specialists, and renowned expert on trauma, stress and childhood development.

First, children, and therefore society and culture, are under siege, physically, emotionally, and psychologically, with conflicting and confused values or models regarding identity, purpose, and meaning. Fast-pace change. Everything is flexible, including identity, place and purpose. My father had one career, thirty-years at the same post. That stability—one path, one company, one identity—was the gold standard. Today it's an artifact. Today, people change industries 3–7 times. Many juggle freelance gigs, consulting, and part-time roles simultaneously. Automation will displace 92 million jobs but create a net gain of 78 million. How does a young person fit in — into what? A moving puzzle? It takes a strong, well-grounded person with a great foundation to meet these opportunities with clarity. Many are not that agile, clear, or strong. Roles and expectations between males and females are wobbling. Hormone emulating chemicals add to the confusion.

Don't forget, we have been starved and poisoned for a long time. Multiple studies cited in 'The Brussels Times' and echoed in *Still No Free Lunch*: we need to eat 100 apples today to benefit from the same nutrition one apple provided in 1950. https://www.brusselstimes.com/31282/fruit-and-veg-less-nutritious-since-1950. Over 1 billion pounds of pesticides are applied annually in the United States. Adding insult to injury, we consume an estimated 8 to 12 billion, 28-gram servings (roughly 21 pieces each) of Cheetos each year.

Chemicals in the food and drinks that young people consume daily are likely fueling the global decline in mental health. Neurotoxins in pesticides, ultraprocessed foods, heavy metals and microplastics can destabilize the nervous system and "lead to a greater experience of stress and impact on social behavior." This "could explain why younger generations are doing progressively worse mentally as exposure grows across the planet." Exposure to these toxins "poses an immediate and pervasive public health issue that is an existential threat to the very fabric of human society." https://www.sciencedirect.com/science/article/pii/S014976342500291X

Psychologically, we are estranged from nature's living resonance. Our human body is 40% to 80% water, depending on age. Water, and our body, are energized by the chemical and frequency signatures of its environment. City water, which most consume, is treated with chlorine, chloramines, and sometimes fluoride. It passes through pressurized pipes, often made of metal or PVC and in the process loses its natural flow dynamics, becoming energetically "flat." City water may carry the residue of industrial environments, EMFs, and chemical treatments. Structuring is disrupted, reducing vitality.

The air we breathe is not much better. Chemtrails, sprayed all over the world, can contain aluminum, barium, strontium, titanium, lithium, ethylene dibromide, radioactive elements like thorium and cesium, heavy metals such as lead and cobalt and pathogenic agents.

Hundreds—if not thousands of scientific papers explore the harmful biological effects of electromagnetic fields (EMF).

Over 20,985 objects have been launched into orbit. 25,000 new satellites have been approved. Over 5 million macro cell towers are active, with 5G cells, far more harmful, representing exponential growth in urban zones, next to where most people live.

A poisoned and starving body is fertile ground for a poisoned and starving mind. We are profoundly social creatures. Screens, artificial environments, and technology have replaced immersion in nature.

Original play has been stolen, transformed into adult-organized cultural-competitive games. Behaviorism's Skinner Box, rebranded as compulsory schooling, dominates most of childhood, gobbling up nearly all of adolescent and young adults' attention. The extended family is a faint memory.

Grannie's presumed wisdom is on a cruise ship, or more likely, she sits alone watching CNN. Isolation and loneness are ubiquitous Unaffordable housing. $200+ per bag of processed stuff at the grocery, and inflation, a hidden tax, leaves precious little resources for flourishing. Is it a miracle that we aren't all depressed?

40%–60% of the U.S. population live with at least one chronic illness. That is about 129 to 150 million people. We can assume that many of these are depressed. Add that to the estimated 280 million people worldwide live with depression, around 3.8%, though some suggest it may be closer to 5% due to underdiagnosis. That is 410 million depressed people.

Depression is now the second-leading cause of disability globally. The respond to the COVID-19 pandemic, not the alleged bug, triggered a dramatic spike in depression, adding 76.2 million new cases of major depressive disorders globally in 2020 alone. Isolation, grief, economic instability, and disrupted routines had a devastating impact on personal mental health worldwide.

Contrary to the classic feeling of hidden greatness, young people today top the charts in depression. This in stark contrast to the rebellious youthful passion and energy that helped shape history:

> Alexander the Great became king at age twenty, and built one of the largest empires in history in less than a decade.
>
> Joan of Arc's leadership began at seventeen. By eighteen, she helped secure the coronation of Charles VII.
>
> Germany – *Hitler Youth* (1926–1945) Leveraged the passions of youth into Nazi ideology, militarizing a generation, leaving a deep psychological imprint.
>
> United States – *Civil Rights & Black Power Movements* (1950s–1970s) Student Nonviolent Coordinating Committee, Black Panthers, sit-ins, protests, community organizing, armed self-defense.
>
> China – *Cultural Revolution* (1966–1976) Young Red Guards—students were tasked with purging "bourgeois" elements.
>
> United States – *Counterculture & Anti-Vietnam Movement* (1960s–1970s) College students, hippies, draft resisters mobilizing through music, protest marches, alternative lifestyles.
>
> Iran – *1979 Islamic Revolution* – Students and young clerics opposed the Shah.

You don't exhibit that kind of energy, passion and commitment if you are depressed. Today:

- Young adults (18–25) show the highest rates of depression, with 18.6% in the U.S. reporting major depressive episodes.
- Adolescents (12–17) are also heavily affected, with 20.1% experiencing major depressive episodes.
- 29.2% of adolescent females in the U.S., report depression versus 11.5% of males.
- Nearly 1 in 3 high school girls in the U.S. (about 30%) have seriously considered attempting suicide, a sharp rise from less than 20% in 2011.

Why? Joseph Chilton Pearce:

True to nature's design adolescents and young adults are looking for models that match their idealism, and they find us falling short. Examine the models we give our young people. Pop stars, rock stars, movie stars, sport stars, social media images, at best maybe political stars, Donald Trump? (Note: Joe made these observations twenty years ago.) These are their models.

On every hand what we offer doesn't fit the need. We betray what the young person is looking for. At a certain point, in place of idealism, comes despair, a loss of hope. And with that, cynicism, anger, frustration and the adoption of models who represent the exact opposite of what they really need.

Driven by feelings of futility and helplessness they chose antiheroes instead of models that represent real virtue, uprightness, true character, justice, honesty, fairness, and so on. They pick the punk star who shouts, "don't kill me I'm already dead."

It's too painful. They must deny their idealism to survive in our corrupt society. And of course, society is ever-anxious to provide those anti-heroes because you can make billions feeding the frustration and rage our young people feel.

These feelings of hidden greatness and idealism begin to emerge around fourteen or fifteen. By sixteen the pain is heavy. Instant by instant they wait for something tremendous that is supposed to happen, and it doesn't. I was talking about this with a radio announcer, one of these tough guys who battens around his guests and plays the tough role, and I asked; "can you remember this feeling that something tremendous was supposed to happen in your life? "What do you mean, remember," he said. "I've waiting for it all my life and it hasn't happened yet."

Nature, meaning our body, knows only two states, growth and protection. Chronic protection means stagnate growth, atrophy, and finally, death. We call this feeling of shutting down 'depression.' Author, Howard Bloom, calls it the 'Lucifer Principle,' life's self-destruct switch moving us out of the way when we trade growth and connection for isolation and protection.

Growth and wellbeing are maintained through connecting, exploring and creating. Fully engaged, we feel energized moving up in the pecking-order of our social nest, passionate, even joyous. Winners keep winning and reproducing. Losers fade out of the way. Perceiving that we are not connected, focusing inward, protecting rather than engaging and exploring, energy diminishes, passion dissipates, there is no joy, we withdraw, the body is experienced as painful, not pleasure. To feel 'normal' we compulsively turn to substance or, they are over-prescribed for profit. A great business model. No longer aligned with nature's creative force, the body initiates a self-destruct program and slowly shuts down, getting us out of the way of evolution's driving focus.

Depression isn't just sadness—it's a quality of emotional gravity that pulls everything down. A heavy fog or numbness, emotional flatness, disconnection from others, from our self, and from the things that used to matter. Mental fatigue: thoughts feel slow, repetitive, or stuck in loops of self-criticism. Sleep disruption: either too much or too little, with no real rest. Food becomes either irrelevant or a temporary escape. Negative self-talk; "I'm not good enough," "What's the point," "I'm a burden." Hopelessness: the future feels blank or threatening, not something to look forward to. Isolation, even when surrounded by people, there's a sense of being alone or unseen. Hobbies, passions, even relationships may feel distant or meaningless. "I don't recognize myself anymore."

Depression is a complex and multifaceted condition—less a single cause, more a convergence of forces.

Biological & Genetic Factors

- **Genetic predisposition**: A family history of depression increases risk, though no single gene causes it. (The family environment being transgenerational.)
- **Brain chemistry**: Imbalances in neurotransmitters like serotonin, dopamine, and norepinephrine can affect mood regulation. (sensory deprivation of pleasure predisposes this imbalance. See https://ttfuture.org/sensory-deprivation-and-the-developing-brain

- **Hormonal shifts**: Changes due to pregnancy, menopause, thyroid issues, or chronic illness can trigger depressive episodes.

Environmental & Life Stressors

- **Loss and grief**: Death, divorce, or separation from loved ones are major triggers.
- **Job loss or financial instability**: These can erode a sense of control and self-worth.
- **Abuse or trauma**: Physical, emotional, or sexual abuse—especially in childhood—can leave lasting psychological scars.
- **Loneliness and isolation**: A rising factor, especially among both the elderly and younger generations.

Psychological & Cognitive Patterns

- **Negative thinking styles**: Rumination, perfectionism, and catastrophizing can deepen depressive states.
- **Learned helplessness**: Repeated failures or uncontrollable events lead to a belief that one's actions are futile.
- **Unmet expectations**: Achieving goals that don't deliver the emotional payoff hoped for can lead to existential disappointment.

Perceptual & Existential Triggers

- **Identity crises**: Feeling disconnected from one's purpose, values, or community.
- **Symbolic defeat**: Even when life appears successful externally, internal narratives of failure or inadequacy can dominate.
- **Cultural and societal pressures**: Unrealistic standards of success, beauty, or achievement can distort self-perception.

Medical & Substance-Related Influences

- **Chronic illness**: Conditions like cancer, diabetes, or neurological disorders often co-occur with depression.
- **Medication side effects**: Certain drugs (e.g., corticosteroids, interferon-alpha) can induce depressive symptoms.
- **Substance misuse**: Alcohol and drug abuse are tightly linked to depression, both as cause and consequence.

The Body Knows and Expects

James W. Prescott, PhD, on Sensory Deprivation

James W. Prescott's pioneering work in the 1960s and '70s laid the neuropsychological foundation for understanding how affectional bonding through touch and movement is essential for healthy brain development—and how its absence can lead to lifelong emotional and behavioral dysfunction, i.e., depression and violence.

> If you live in a culture where the cultural norm is you don't get touched very much, people don't perceive that as deprivation. But, if you look at how other primates mother their infants, what do we see? An enormous amount of physical body contact. There's no mammal that separates the newborn from its mother at birth, except the human mammal. Yet, we do that routinely. That's sensory deprivation.

Antidepressant (SSRIs) Mimic Sensory Deprivation

About 34.2 million adults plus **3.2 million children and adolescents** in the U.S. are currently prescribed antidepressants, SSRIs. Antidepressants can be viewed as chemical sensory deprivation and Prescott's rare research established long ago strong correlations between sensory deprivation and violence.

Use of SSRIs, Selective Serotonin Reuptake Inhibitors—often lead to emotional blunting or affective flattening, a dampening of emotional sensitivity—both positive and negative, similar to sensory deprived primates and humans. SSRIs reshape how the brain processes emotional and physical signals. They don't "lift mood"—they modulate how stimuli are processed and interpreted, blunting or numbing reactivity.

Chemical antidepressants often create feelings of emotional "numbness" or detachment, reduced sensitivity to physical pain. A common side effect is diminished capacity to experience pleasure, reduced sexual desire along with diminished emotions like sadness, empathy, and even physical sensation. Life and its relationships become flat.

Sensory deprivation of pleasure and affectionate touch—doesn't just numb the system, it primes it for violence.

One of Prescott's most striking and unsettling insights: **When the developing brain is denied pleasurable input, especially during critical periods of infancy and childhood, that sensory system becomes hyper-reactive to stimulation.** This hypersensitivity doesn't lead to pleasure—it often triggers defensive, aggressive, or violent responses. The brain, starved of nurturing input, misinterprets stimulation as threat, not connection.

The absence of pleasure is more damaging than the presence of pain.

> "But there is something else that evokes **violent responses and that's the absence of pleasure**. That is very different from the sensory experience of pain, and most people don't yet appreciate that distinction. In fact, more damage occurs with the sensory deprivation of pleasure than the actual experiencing of physical painful trauma." jwp

Cultures with low levels of affectionate touch had significantly higher rates of violence, addiction, and social dysfunction. When pleasure is absent, the brain's reward system atrophies. The 'threat-detection' system dominants. This leads to a reactive, survival-based orientation—where stimulation is met with fight-or-flight, not curiosity or trust. The denied stimulation becomes a 'phantom limb,' aching for contact but lashing out when it arrives.

Note: top full appreciate the sensory deprivation connection the 1987 Time Life documentary "Rock A Bye Baby" describes how the sensory deprivation of normal mothering, touch and movement, causes permanent brain abnormalities and pathological violence.

View it here: https://ttfuture.org/sensory-deprivation-and-the-developing-brain

The single greatest contribution to understanding the mother-infant separation syndrome was provided by Drs. William Mason and Gershon Berkson in their swinging mother surrogate experiments. Infant monkeys reared on the stationary mother surrogate developed all of the abnormalities which isolation-reared monkeys develop – depression, social withdrawal, aversion to touch, stereotypical rocking and chronic toe and penis sucking, self-mutilation and pathological violence as juveniles and adults. The infant monkeys reared on the swinging surrogate mother developed normally with only minor stimulus-seeking behaviors, e.g. thumb-sucking. Depression, social withdrawal and avoidance of touch were absent in the swinging mother surrogate reared infant monkeys.

SSRIs don't block sensation outright, they filter and flatten emotional resonance. Life and images of self lose dimensionality. A reduction in emotional or sensory richness. A sense that life has lost its depth, color, or symbolic resonance.

Experiences feel muted, as if viewed through frosted glass or heard through static, a loss of internal contrast—where joy, grief, awe, and even discomfort no longer register with full intensity. It's not only

about feeling alone; it's about feeling less alive. Loss of dimensionality is the physical experience. Isolation, loneliness and depression are the mental or emotional interpretation of that experience.

How Antidepressants Alter Experience

Core experience: Blunting physical-sensory experience.
Affect: loneliness or feeling disassociated.

Felt as: Muted sensations, flattened affect, reduced contras.
Affect: ache of disconnection, yearning for resonance.

Root Cause: Neurochemical blunting, trauma, sensory deprivation.
Affect: Relational absence, emotional isolation.

Symbolic Texture: Living in grayscale or in low resolution.
Affect: Calling out into silence.

Feedback: Internal: the body doesn't register full emotional signal.
External: others don't reflect or respond.

Potential Outcome: Disengagement, depersonalization and violence to self and others.
Affect: Sadness, longing, existential questioning, addictive seeking the denied sensory and emotional experience.

Loss of dimensionality is often misinterpreted as depression, when it may actually be a sensory collapse—a body no longer receiving or interpreting emotional data with clarity. Loneliness, by contrast, is a cognitive-emotional narrative: "I am separate," "I am unseen," "I am unshared." Loss of dimensionality and feeling isolated and lonely can co-occur together, but they don't originate from the same place. One is felt in the body, the other is interpreted by the mind.

Prescott's Key Findings

- **Sensory deprivation**, especially of touch and vestibular stimulation (movement) in early life, disrupts normal brain development.
- **Deprivation leads to affectional disorders**, including depression, aggression, and impaired bonding.
- **High touch nurturing cultures** with rich tactile and movement environments (e.g., through infant carrying, breastfeeding, dance) show lower rates of violence and mental illness, including depression.
- **Lack of touch** leads to emotional dysregulation. Natural anecdote: affectionate touch and movement, massage therapy, oxytocin release through intimacy.
- **Movement** is essential for brain integration. Exercise boosts BDNF (Brain-Derived Neurotrophic Factor—a protein that plays a crucial role in the health and adaptability of your brain and nervous system) regulating mood and stress.
- **Early bonding** shapes lifelong emotional health. As adults, positive shared sexual pleasure and affectionate contact restore emotional vitality.
- **Sensory-rich environments** nourish development. Exposure in nature, dance, and embodied play as healing modalities.
- **Societies with high tactile nurturing** and movement rituals (e.g., Polynesian cultures) have dramatically lower rates of violence and mental illness.
- **Cultures that honor embodied connection** tend to preserve emotional resilience across generations.

Prescott's emphasis on multi-sensory nourishment suggests that depression is not merely a chemical imbalance, but often a sensory and relational deficiency—a mismatch between what the body–brain system evolved to expect and what modern environments provide. 37.4 million adults and children chemically numb, sad, lonely, depressed and potentially violent, is a lot.

From the Physical to the Mental: Ego or Social-Image and Identity

This complex and multifaceted condition, depression, affects both the physical body and the mind. Detoxing and feeding our starving body is obvious. Far more elusive and abstract is our psychological challenge. To address the elephant in our depressed room, we need to tackle the ego. I'm using the term ego to represent our social image of self, the character we play on culture's stage, both being mental images produced by the neocortex, the theater of the mind. Ego is the mental images and feelings we create in response to punishment, embarrassment, shame and praise. Our 'character armor,' described below.

From nature's view the ego, as a social image, has no place in evolution's passion for optimum growth, learning, connecting, exploring and creating. In the Zone or the optimum state called Flow the ego is absent. When active, this self-centered protective reflex is a distraction, a hindrance. This becomes clear when we discover that our identity, ego, or 'character armor,' reflects, and then defines how we interpret every experience, pleasurable or painful.

> The term "character armor" was originated by Wilhelm Reich**,** an Austrian psychoanalyst and former student of Freud. Reich coined the phrase "character armor" to describe the habitual psychological defenses and coping styles that individuals develop—often unconsciously—as a way to protect themselves from emotional pain, trauma, and societal pressures. Ego is a coping style. The bigger the ego, the greater the coping. Social success in this regard is a coping pattern. Success equals pleasure. Lack of success equals pain.

From this embodied view we discover that the ego is a filter that defines our 'subjective reality.' It *is* done unto us as we believe and this filter defines what we believe. The deep intent or goal of most 'therapies' is 'limbic reimprinting' of this filter.

The limbic region, or mammalian brain, defines our relationships. The basic question, 'how are you?' points to this system. What we think, our mental abstractions, are drawn from the 'reality shaping' nature of this midbrain center. The term 'born again,' describes how reimprinting or 'insight' creates a new reality within this deeper, non-cognitive layer.

To be born again, which implies turning off nature's self-destruct switch, demands that we penetrate this 'reality defining' filter and discover a new reality, a new identity. There is an implicit 'Catch 22' however. Questioning or attacking this filter, strengthens the filter. Yes, it's complicated.

Life and its relationships are perceived as either threatening, painful, or pleasurable, with affectionate touch, movement and actual, not virtual, engagement being the primary sources of flourishing, along with feeling safe and nourished. Compared to our millions of years of species typical evolution, the image below hits the bull's eye. Sensory deprivation is the new normal.

Focusing on the social-image, feeling safe, and therefore accepted unconditionally, loved or loving, is the only force powerful enough to negate our 'ego-as-reflex' defense filter. The intellect can't do this. Our ego is a house of abstract mirrors. When our ego-filter imprints and defaults pain, we can't use the source of our pain to negate our pain. Don't forget, our ego, or self-world-view, evolved to protect us. When this defense system defaults to negative or painful images, despair soon follows. That is a very powerful drive to overcome. David Bohm, Einstein's protégé:

> We are faced with a breakdown of general social order and human values that threatens stability throughout the world. Existing knowledge cannot meet this challenge. *Something much deeper is needed, a completely new approach*. I am suggesting that the very means by which we try to solve our problems is the problem. *The source of our problems is within the structure of thought itself.*

While David is describing a universal phenomenon, his core insight, that 'something much deeper is needed, a completely new approach', applies to us as individuals, to our personal egos, our imagined social image.

Limbic reimprinting, or being born again, begins with basic trust. Feeling 'safe enough to play,' with life and all its relationships being the playground. This was the basic bond we expected and experienced in utero. That is, until transgenerational and cultural pain and trauma betrayed that expectation, filling the womb with anxiety and stress hormones, toxic smog. Feeling safe and connected was replaced by threat and a chronic search for protection. Growth slows or stops, and we call this shutting down depression. Each of us, in our own way, must reach back into our authentic nature, before this toxic cocktail pushed us in the corner, and rediscover what being 'safe enough to play' feels like. Not as a concept. In the body. That is the ground floor. The phoenix rising.

As David observed, '*something much deeper is needed, a completely new approach*. *The source of our problems is within the structure of thought itself."*

Hint, the antidote to depression is not found in the intellect or its ego. Using the drug culture term, depression is a 'bad trip.' Depression is the 'dark night of the soul' phase of the Hero's Journey.

Shedding our disastrous addiction to culture and its images, *is* that the something deeper, a completely new approach.' Only then can we rediscover who or what we really are, and always have been.

Our true nature and its identity, along with spiritual sovereignty isn't granted by external institutions—it's cultivated through reimprinting our identity, not mirroring concepts, rather our biology and infinitely creative mind. Model and mirror *that* and watch depression evaporate. As Joe described, it is all about modeling.

We can kick the 'Lucifer Principle' and its depression with affectionate touch, movement, feeling safe enough to play, engaging nature and its endless miracles, by considering the intellect as theater, not taking our role in culture's play personally (negating reification of our social image or identity), a diet free of processed poisons, rediscovering the genius of childhood, our natural wonder and playfulness, by dancing, connecting and creating together.

It's very simple. Basic trust, not believing in a self-image that needs to be justified and protected, an imagination free from comparison and induced self-doubts, connection, and the joy of simply being alive casts a bright light under the bed. Now, when we look there is no scary monster lurking. This new state, free from chronic protection, evolves a new filter, a new subjective reality.

Every moment and everywhere we look is overflowing with infinite potential. Our hidden greatness is there, just around the corner, and we can't wait to see what is coming next. But, as we all know, all this is easier said than done.

Michael Mendizza

Epilog

The Failure and Over Diagnosis of Antidepressants

A deeply contested and consequential topic—one that sits at the intersection of neuroscience, public health, and pharmaceutical ethics.

The Failure Narrative: What's Being Challenged

- **Questionable Efficacy**: Recent reviews cast doubt on the serotonin hypothesis—the idea that depression stems from low serotonin levels. Since SSRIs work by increasing serotonin, this undermines their theoretical foundation.
- **Placebo Effect**: Meta-analyses suggest that for many patients, antidepressants perform only marginally better than placebos, especially in cases of mild to moderate depression.
- **Pharma Influence**: Critics argue that pharmaceutical companies have shaped trial outcomes and public perception through selective data reporting and aggressive marketing.

Over Prescription:

- **Cultural Medicalization**: Depression and anxiety have become broadly defined, leading to more diagnoses and prescriptions—even for subclinical symptoms.
- **Long-Term Use Without Reevaluation**: Many patients remain on SSRIs for years, often without clear clinical justification. Studies estimate that 30–50% of long-term users may not need continued medication.
- **Expanded Indications**: SSRIs are now prescribed for a wide range of conditions beyond depression—PTSD, OCD, panic disorder, even personality disorders—further inflating usage.

Side Effects & Withdrawal Challenges

- SSRIs (Selective Serotonin Reuptake Inhibitors)—carry an FDA "black box warning," which is the agency's strongest alert for serious or life-threatening risks. The warning focuses on *increased risk of suicidal thoughts and behaviors* in children, adolescents, and young adults (up to age 24) during the early stages of treatment for major depressive disorder and other psychiatric conditions.
- 2020 Swedish register-based study published in *European Neuropsychopharmacology*, which examined over **785,000 individuals** aged 15–60 who had been prescribed SSRIs between 2006 and 2013. The study found **a statistically significant increase in the risk of violent crime** convictions during periods when individuals were on SSRI medication compared to when they were not.
- Using antidepressants to address depression during pregnancy is linked to congenital heart defects in babies, also linked to brain-related issues such as autism-like behaviors, preterm birth, neonatal seizures, and postpartum hemorrhage.
- **SSRIs also elevate cardiovascular risks in older adults**, disrupting blood vessel function, increasing plaque buildup, and interfering with calcium channels
- **Physical Side Effect:** Nausea, weight gain, sexual dysfunction, insomnia, fatigue
- **Emotional Blunting:** educed emotional range, apathy, detachment
- **Dependency & Withdrawal:** Discontinuation syndrome: dizziness, brain zaps, irritability, flu-like symptoms
- Fetal exposure to SSRIs lead to altered brain development, numerous risks to fetal health, and deficits in behavior after birth. In animal studies at birth fetal SSRI exposure is associated with low birth weight, persistent pulmonary hypertension, increased risk of cardiomyopathy, and

increased postnatal mortality. After birth, such exposure is associated with delayed motor development, reduced pain sensitivity, disrupted juvenile play, fear of new things, and a higher vulnerability of affective disorders (such as anhedonia-like behavior). These behaviors are regarded as signs of anxiety and depression in animals.

- A number of studies tell of how in utero exposure to SSRIs alters brain development in humans and lead to other harms. A study by Kaiser Permanente of Northern California of 82,170 pregnant women showed that if the depression was treated with counseling, the risk of a pre-term delivery was reduced by 18%, whereas treatment with an antidepressant increased it by 31%.
- Another harm is the neonatal abstinence syndrome, which occurred in 30% of 60 newborns exposed to SSRIs in utero, including jitteriness, poor muscle tone, weak cry, abnormal crying, respiratory distress, seizure, abnormal behavior, sleep abnormalities, poor feeding, vomiting, uncoordinated sucking, and lethargy.
- Studies of children exposed in utero to SSRIs show an elevated risk of being diagnosed with ADHD, autism spectrum disorder, and affective (emotional regulation) disorders.

Long-Term Unknowns:

- Lack of robust data on effects of multi-year use; concerns about neuroplasticity

Natural alternatives to antidepressants

Despite decades of use, the precise mechanism by which antidepressants alleviate symptoms remains unclear. The **monoamine** hypothesis (serotonin, dopamine, norepinephrine imbalance) is increasingly seen as oversimplified. This doesn't mean antidepressants are useless—they can be life-saving for some. But it does suggest a need for:

- **More nuanced prescribing**: Tailored to individual biology, history, and symptom profile.
- **Greater emphasis on alternatives**: Psychotherapy, lifestyle interventions, trauma-informed care.
- **Informed consent**: Patients deserve full transparency about risks, benefits, and withdrawal protocols.

Two Natural Antidepressant Drug Powerhouses

Two of the most potent, underutilized antidepressant alternatives are—**exercise and sexual pleasure**—not just for their biochemical effects, but for their capacity to restore vitality, connection, and agency.

Exercise: A Neurochemical Powerhouse

- Physical activity is 1.5 times more effective than antidepressants for mental health, with walking and strength training providing powerful therapeutic benefits
- Boosts serotonin, dopamine, and endorphins
- Increases brain-derived neurotrophic factor, supporting neuroplasticity
- Regulates cortisol and calms the HPA axis (stress response)

Best Modalities for Mood:

- Cardio (jogging, cycling), Strong antidepressant effect; dose–response curve favors intensity
- Strength training, Builds resilience and self-efficacy
- Yoga/Qigong, Combines movement with breath and mindfulness
- Dance, Adds rhythm, expression, and social bonding

A 2024 meta-analysis of 218 studies found that vigorous workouts outperform SSRIs for mild to moderate depression.

Sexual Pleasure: Hormonal, Emotional, and Symbolic Restoration

- Releases oxytocin, dopamine, and endorphins
- Improves sleep, immune function, and pain tolerance
- Enhances circulation and parasympathetic activation: Reduces Cortisol, lowers chronic stress, which is tightly linked to depressive symptoms. Slows Heart Rate & Breathing, promotes calm, reduces anxiety, and improves emotional regulation. Enhances Vagal Tone, strengthens resilience and mood stability via vagus nerve pathways.
- Improves Gut–Brain Signaling, supports serotonin production and emotional balance through vagal afferents. Supports Sleep & Recovery, better sleep = better mood regulation and cognitive clarity = less depression.

Psychological Dimensions:

- Reconnects you to pleasure, intimacy, and embodiment
- Counters emotional blunting often caused by SSRIs

Synergy: Movement + Intimacy

- Regular exercise improves sexual function by increasing blood flow, testosterone, and confidence. Together, they form a feedback loop of vitality—physical, emotional, and symbolic.