Justin's Recovery from the damage of psychiatry

All disease is either toxicity and/or deficiency. Everything is cause and effect.

Mental health and gut health are inextricably linked or more simply put, they are entangled. Despite this the medical and pharmaceutical industries would like you to, well, actually need you to believe otherwise and always want you to believe the effect is the cause, which perpetuates the problem and helps the great death and suffering cult make more profit.

Justin's story bears this out. His story shows the power that we all have, that you have, when you take charge and full responsibility for your own health and then seek out and draw to you the information, people and methodologies in order to allow your recovery by focussing on your recovery. Once you address the real cause and provide the correct environment, raw materials and removal of toxicity, your body can recover very quickly. It knows what to do. Everyone is capable of doing this for themselves. You are capable of doing this for yourself.

You know you, and you know your body and you know what you are feeling more than anybody else can. Your health and your well-being are your responsibility.

Justin reached out to me with a question about whether he would be okay drinking distilled water and would it leach out specific vitamins and minerals from his system.

This led to some questions and then a very interesting email conversation

ensued. During the course of this email conversation it became apparent to me that so many of you could benefit from hearing Justin's story.

What follows is excerpts from the emails that, with his permission, I have put together in order to tell Justin's story. Justin has said he is more than happy to answer emails from anyone that has questions about his story. I will put his email address in the show notes for this episode. You can go to ForTheLoveOfTruth.co.uk

To quote him:

"I was being drugged by psychiatrists for 10 years and misdiagnosed before I finally had enough and learned about orthomolecular medicine."

During this podcast I will be referring to some test results. Please see the show notes for a link to a blog entry that will have the full text of this podcast together with the test results.

So let us begin:

I'm a 32 year old man living in Alabama, USA. I believe I live in one of the most free places left in the world, but they're cracking down on us more all the time.

I don't believe one bit of this fraud. I don't believe in germ theory or contagion in the mainstream sense.

I believe the real pandemic in the world today is parasites parading around as human beings. I believe they've had fraudulent control for a long time and have influenced every single part of our societies in an attempt to control us

and keep us dumbed down and dependent on their system, all while convincing most people that they enjoy the oppression.

I first started seeing how messed up things were about 6 years ago, and 3 and a half years ago I had my big revelation about psychiatry and the true nature of mental health.

We all have been given an extraordinary opportunity for freedom in light of current events. We've been given an opportunity to understand more truth than ever before, and for a lot of people mental health challenges are the biggest problem keeping them from being free, but there is a lot of truth out there and now is a perfect time to find it.

I want people to know that there are many factors that contribute to mental health and that a patient holistic approach is crucial. People need to enjoy the journey and believe in their hearts that their symptoms are just a reflection of simple things that can be identified, adjusted and corrected. No matter how severe the symptoms.

Even though there are very many things that cause mental health symptoms, we are very fortunate that over 90 percent of clinical cases are rooted in five main biotypes with 6 or 7 nutrient factors that dominate the synthesis or function of neurotransmitters. Meaning for most people a simple checklist of traits and symptoms and perhaps some lab tests can clearly show where their problems lie.

Learning how to keep yourself healthy is the goal.

Patience with yourself and the healing process is crucial, and what's waiting for you on the other side is empowerment, a better quality of life and a wonderful opportunity to share knowledge and hope with other people. The times we're living in are just an opportunity to do a lot of good and make a difference in the world, one person at a time.

The back story

Here's how it started. My mom's family has mental health challenges. My great grandmother recieved shock treatment for schizophrenia, as did her sister. My grandmother is schizophrenic and bipolar. My uncle is bipolar and my aunt has major depression. There's also lots of addictions to be mentioned too.

My mom doesn't have any of these issues, so my home life was very stable. As a boy I was afraid that I would inherit the same issues as my family. I had OCD issues and a lot of anxiety, but at the time I never identified these things as being abnormal. When I was 13 there was an incident where my father and uncle got into a big heated argument. I loved them both so the situation was very stressful for me. I got very angry. It was a full body type of rage that I had never felt before and I started crying uncontrollably. This was the first time in my life where I thought something was wrong with me and I feared I'd become bipolar.

That same summer I went from being social and being a trainee instructor at my taekwondo school to being very nervous, quitting my taekwondo training and basically having bad social anxiety. I know now that my undermethylation is what caused me to have anxiety and OCD as a boy (methylation status stays the same from the first 20 days of gestation throughout life, meaning it was always present).

The rage I felt was my pyrrole disorder kicking in. It normally starts during a stressful time or during puberty. Those days of zinc deficiency caused a pain in my spleen whenever I ran, poor growth which can still be noted by my thin wrists and ankles and stretch marks on my thighs from my growth spurts. So the signs were there early on and the deficiencies made me quite unhealthy.

My clinical level mental health issues started in the summer of 2007 when I was 18 and had just graduated from high school. I faced bedridden depression

and panic attacks. At some point I also started having delusions about my value and what people thought of me. In October of that year through October of 2017 (exactly one decade) I saw many doctors and took many psychiatric drugs. The drugs all affected me differently. Some seemed to help a bit for a while, others like Wellbutrin caused me to have a lot of anger. The withdrawals were terrible and my sleep was also affected from time to time.

When they found out my grandmother was bipolar they pinned that label on me. They later changed it to 'rapid cycling bipolar disorder'. (Whenever something doesn't fit their flawed view they just make something else up to justify why they're wrong.)

The last doctor I saw was a complete psycho. He told me SSRI's don't work for me and put me on an antipsychotic even though depression and anxiety were my only symptoms. I took the antipsychotic only once and had the worst experience of my life. I felt like a legitimate psychopath. I was cold and empty. I only thought logically and felt no connection to anyone. I also couldn't sleep for 3 whole days. I went back to Dr Psycho one more time and he seemed angry at me. He was not happy that I wasn't benefiting from the treatment and told me he would try to prescribe me something one more time and if it didn't work he would have me admitted to an inpatient facility by way of police force. He then prescribed me a new antipsychotic drug as well as an SSRI. (Remember that he had just told me SSRI's don't work for me)

The counselor who I spoke to there was there when he said it and only looked at me with equal frustration.

Let me paint this picture clear.

1) I was of no threat to myself or anyone else.

2) I only reported depression and anxiety to them.

3) They never tested me for anything, but tested many drugs on me that only made me more sick.

4) They blamed me for not getting better and threatened me with police force.

Do you have any idea how scary it is for a man who has panic attacks who's just coming off of a psychotic drug to be told he's being taken away? It was cruel. It was also the last push I needed to step away from the psychiatric machine and towards my own healing.

By divine intervention a YouTube video popped up on my suggestions list with a title that stated that I wasn't bipolar but had a sick body. The video resonated with my story so I contacted the man who made it. He told me about orthomolecular medicine, Dr Abram Hoffer and Dr Carl Pfeiffer. The term orthomolecular is what led me to the five biotypes of depression and my discovery and successful self-treatment of pyrrole disorder.

It didn't take me long to find the five main biotypes of depression and I noticed that one of the five biotypes was a perfect description of me, not just the mental symtoms but very specific physical symptoms as well. It was then that I began to understand every health issue I'd ever had in my life.

What I thought was bad luck or a curse became practical and easily explainable. I began to recover very quickly by taking two nutrients that my body depletes rapidly. I stabilized, but still didn't feel good.

I functioned well for two and a half years with the pyrrole disorder treatment with less severe depression and anxiety. Fast forward to last summer (2020) when I finally went to a Dr trained by Dr Walsh (walshinstitute.org) and got my testing done for all five biotypes. I was amazed to learn that I had not one, but two of the five.

Not only was I genetically predisposed to depleting b6 and zinc, I also have a specific SNP that causes undermethylation. My body doesn't properly create the enzyme that converts methionine into SAMe (s-adenasyl-methionine). It just so happens that SAMe is the primary methyl donor in the body, and I am undermethylated.

If you are wondering how b6 and zinc deficiency in pyrrole disorder affect mental health so much and why correcting those deficiencies leads to rapid

improvement:

The active form of b6 (p5p) is an essential cofactor in producing serotonin. A deficiency of b6 can cause depression, anxiety and memory issues. You can tell when you have enough b6 in your body went you remember dreams regularly. Many people with pyrrole disorder have no recollection of dreams at all.

The lack of serotonin will cause a lack of melatonin as well, so insomnia is a common issue in pyrrole disorder.

Zinc plays a vital role in the production of GABA, our calming neurotransmitter. Zinc deficiency can cause panic attacks and anger issues. Zinc also regulates NMDA receptors and is involved in many aspects of your physical health. Signs of zinc deficiency may include white spots on the fingernails, sensitivity to lights and sounds, morning nausea and loss of taste/ appetite.

Some of these signature symptoms make pyrrole disorder very easy to identify. It's also the easiest and fastest biotype to correct.

Unfortunately, I didn't **choose** a good doctor and their compounded nutrients (personalized multivitamins) made me very sick. They went against Dr Walsh's protocol and gave me a couple of things that they shouldn't have. They also cut my zinc intake down and caused a bad three month zinc deficiency. The only good that came from seeing that doctor was learning about my undermethylation and starting methyl therapy.

This was my methylation profile results. You can see the low SAM (methyl) levels and the higher SAH levels. SAH antagonizes the function of methyl, so that ratio of SAM/SAH was the definitive sign of my poor methylation. The good news is those tests can be ordered privately without a doctor being involved.

DOCTOR'S DATA INC

LAB #:
PATIENT:
ID:
SEX: Male
DOB: AGE: 31

CLIENT #:
DOCTOR:

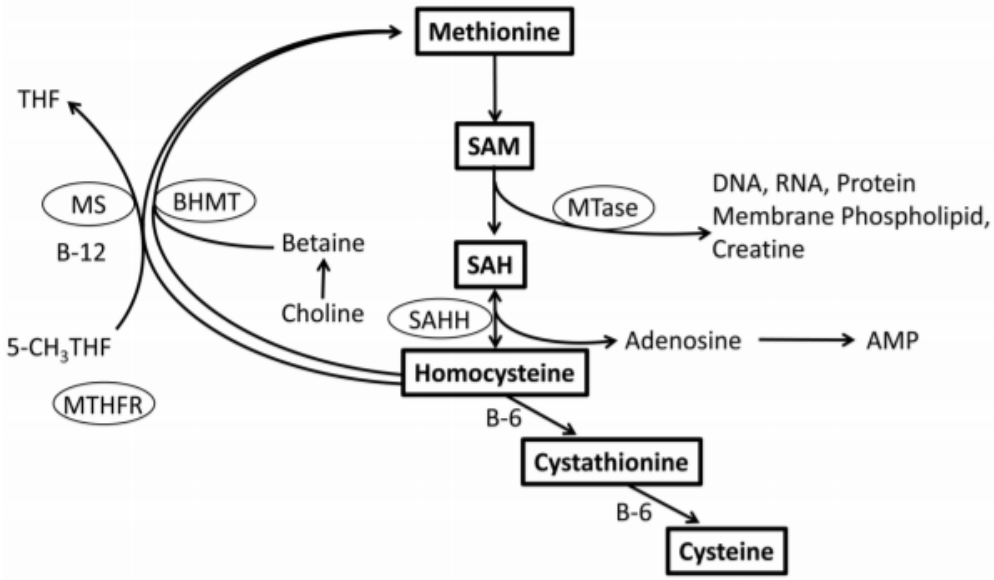
Methylation Profile; plasma

PRIMARY & INTERMEDIATE METABOLITES	RESULT/UNIT	REFERENCE INTERVAL
Methionine	2.3 µmol/dL	1.6 - 3.6
Cysteine	28 µmol/dL	20 - 38
S-adenosylmethionine (SAM)	82 nmol/L	86 - 145
S-adenosylhomocysteine (SAH)	17.2 nmol/L	10 - 22
Homocysteine	6.3 µmol/L	< 11
Cystathionine	0.01 µmol/dL	< 0.05

PERCENTILE: 2.5th, 16th, 50th, 84th, 97.5th; 68th, 95th

METHYLATION INDEX	RESULT	REFERENCE INTERVAL
SAM : SAH	4.8	> 4

PERCENTILE: 68th, 95th



SPECIMEN DATA			
Comments:			
Date Collected:	06/03/2020		
Date Received:	06/05/2020	<dl:	less than detection limit
Date Reported:	06/17/2020		
Method:	LCMS		v02.11

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Testing your hair

For those of you that do not know your hair is an excreted material and contains so much history of what is going on in your body. Analysing the hair is a very powerful and revealing test.

This is the hair elements test I had done that shows my low lithium levels from where I stopped drinking tap water and only drank bottled water. It also shows my high aluminum and barium levels.

You can see my hair zinc levels were on the high end of normal even though I'd been zinc deficient at the time. I read that seeing a lot of zinc on a hair test is a sign that the body is not absorbing it well. That's why it ends up in the hair and not the cells.

The other test indicates that my free copper levels were a bit high. To determine free copper levels you take the ceruloplasmin number and multiply it by three, then subtract that sum from your serum copper number. If the sum is greater than 25 it can be problematic as copper rapidly converts dopamine into norepinephrine.

In my case the ceruloplasmin was 21.9 and the serum copper was 95.
21.9 x 3 = 69.75
95 - 69.75 is 29.3.
Meaning 29.3 percent of my copper was not bound to ceruloplasmin and was thus free copper.

DOCTOR'S DATA INC.

LAB #:
PATIENT:
ID:
SEX: Male
DOB: AGE: 31

CLIENT #:
DOCTOR:

Toxic & Essential Elements; Hair

TOXIC METALS		RESULT µg/g	REFERENCE INTERVAL	PERCENTILE 68th 95th
Aluminum	(Al)	13	< 7.0	
Antimony	(Sb)	< 0.01	< 0.066	
Arsenic	(As)	0.046	< 0.080	
Barium	(Ba)	3.0	< 1.0	
Beryllium	(Be)	< 0.01	< 0.020	
Bismuth	(Bi)	< 0.002	< 2.0	
Cadmium	(Cd)	< 0.009	< 0.065	
Lead	(Pb)	0.13	< 0.80	
Mercury	(Hg)	0.05	< 0.80	
Platinum	(Pt)	< 0.003	< 0.005	
Thallium	(Tl)	0.001	< 0.002	
Thorium	(Th)	< 0.001	< 0.002	
Uranium	(U)	0.009	< 0.060	
Nickel	(Ni)	0.18	< 0.20	
Silver	(Ag)	0.04	< 0.08	
Tin	(Sn)	0.08	< 0.30	
Titanium	(Ti)	< 0.04	< 0.60	
Total Toxic Representation				

ESSENTIAL AND OTHER ELEMENTS		RESULT µg/g	REFERENCE INTERVAL	PERCENTILE 2.5th 16th 50th 84th 97.5th
Calcium	(Ca)	944	200 - 750	
Magnesium	(Mg)	29	25 - 75	
Sodium	(Na)	18	20 - 180	
Potassium	(K)	7	9 - 80	
Copper	(Cu)	8.8	11 - 30	
Zinc	(Zn)	200	130 - 200	
Manganese	(Mn)	0.14	0.08 - 0.50	
Chromium	(Cr)	0.37	0.40 - 0.70	
Vanadium	(V)	0.027	0.018 - 0.065	
Molybdenum	(Mo)	0.027	0.025 - 0.060	
Boron	(B)	0.75	0.40 - 3.0	
Iodine	(I)	1.0	0.25 - 1.8	
Lithium	(Li)	< 0.004	0.007 - 0.020	
Phosphorus	(P)	153	150 - 220	
Selenium	(Se)	0.74	0.70 - 1.2	
Strontium	(Sr)	0.90	0.30 - 3.5	
Sulfur	(S)	46800	44000 - 50000	
Cobalt	(Co)	0.021	0.004 - 0.020	
Iron	(Fe)	10	7.0 - 16	
Germanium	(Ge)	0.040	0.030 - 0.040	
Rubidium	(Rb)	0.013	0.011 - 0.12	
Zirconium	(Zr)	0.14	0.020 - 0.44	

SPECIMEN DATA

COMMENTS:

Date Collected: 06/02/2020
Date Received: 06/08/2020
Date Reported: 06/10/2020
Methodology: ICP/MS

Sample Size: 0.107 g
Sample Type: Head
Hair Color: Black
Treatment:
Shampoo: Head Shoulders

RATIOS

ELEMENTS	RATIOS	RANGE
Ca/Mg	32.6	4 - 30
Ca/P	6.17	0.8 - 8
Na/K	2.57	0.5 - 10
Zn/Cu	22.7	4 - 20
Zn/Cd	> 999	> 800

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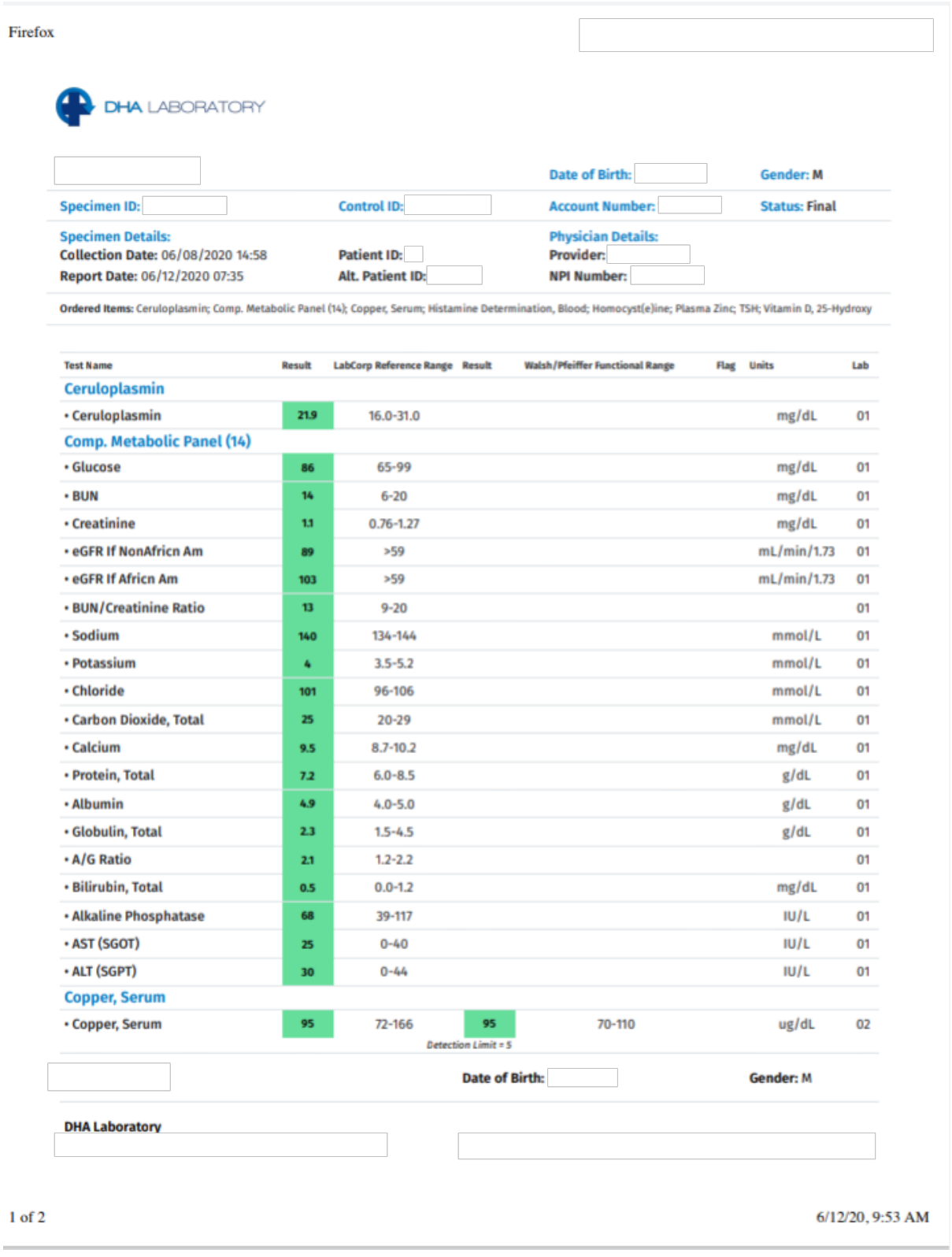

Firefox

DHA LABORATORY

Date of Birth: Gender: M

Specimen ID: Control ID: Account Number: Status: Final

Specimen Details:
Collection Date: 06/08/2020 14:58
Report Date: 06/12/2020 07:35

Patient ID:
Alt. Patient ID:

Physician Details:
Provider:
NPI Number:

Ordered Items: Ceruloplasmin; Comp. Metabolic Panel (14); Copper, Serum; Histamine Determination, Blood; Homocyst(e)ine; Plasma Zinc; TSH; Vitamin D, 25-Hydroxy

Test Name	Result	LabCorp Reference Range	Result	Walsh/Pfeiffer Functional Range	Flag	Units	Lab
Ceruloplasmin							
• Ceruloplasmin	21.9	16.0-31.0				mg/dL	01
Comp. Metabolic Panel (14)							
• Glucose	86	65-99				mg/dL	01
• BUN	14	6-20				mg/dL	01
• Creatinine	1.1	0.76-1.27				mg/dL	01
• eGFR If NonAfricn Am	89	>59				mL/min/1.73	01
• eGFR If Africn Am	103	>59				mL/min/1.73	01
• BUN/Creatinine Ratio	13	9-20					01
• Sodium	140	134-144				mmol/L	01
• Potassium	4	3.5-5.2				mmol/L	01
• Chloride	101	96-106				mmol/L	01
• Carbon Dioxide, Total	25	20-29				mmol/L	01
• Calcium	9.5	8.7-10.2				mg/dL	01
• Protein, Total	7.2	6.0-8.5				g/dL	01
• Albumin	4.9	4.0-5.0				g/dL	01
• Globulin, Total	2.3	1.5-4.5				g/dL	01
• A/G Ratio	2.1	1.2-2.2					01
• Bilirubin, Total	0.5	0.0-1.2				mg/dL	01
• Alkaline Phosphatase	68	39-117				IU/L	01
• AST (SGOT)	25	0-40				IU/L	01
• ALT (SGPT)	30	0-44				IU/L	01
Copper, Serum							
• Copper, Serum	95	72-166	95	70-110		ug/dL	02
			Detection Limit = 5				

Date of Birth: Gender: M

DHA Laboratory

1 of 2 6/12/20, 9:53 AM

The body has a clever system to ensure we don't have too much or too little neurotransmitter activity in synapses. It can be called the methylation/acetylation ratio but it mainly comes down to the methyl/folate ratio. Folate of course being vitamin b9.

Folate, as well as niacin (b3) and pantothenic acid (b5) stimulate the production of transporter proteins that quickly remove neurotransmitters from synapses in a process known as re-uptake. (SERT is the transporter protein that removes serotonin and DAT is the one that removes dopamine.)

It is methyl's job to deactivate the expression of those transporter proteins.

It's like a tug of war where you don't want either side to win. You want a healthy balance. If you're low on methyl you won't slow the production of the transporters and you'll be too efficient at re-uptake. Meaning your body removes neurotransmitters too quickly.

If you're too high in methyl in ratio to your folate (over-methylated) you're body would be too efficient at hindering re-uptake and that would allow for an accumulation of neurotransmitters - too many. That is an equal recipe for disaster.

The cause of over-methylation is simple. 70-80 percent of the body's methyl gets used in the production of one substance, creatine. The same creatine you can buy at your local gym. Some people genetically lack the enzyme that helps makes creatine, so their bodies don't spend enough methyl making creatine and end up with an accumulation of unused methyl. This methyl hinders the production of the transporter proteins I mentioned before and leads to the high synaptic activity of neurotransmitters.

Over-methylated people are the one's that get worse on SSRI antidepressants. The SSRI's disable the transporter proteins and further increase their synaptic activity of serotonin. Those are the people that get suicidal and homicidal while on SSRI's. Virtually all school shooters have been otherwise sweet over-methylated kids that had recently been put on an antidepressant. That's a statement from Dr Walsh.

Under-methylated people, on the other hand, tend to do well on SSRI's aside from the side affects. A better way for them to deal with their depression

would be to increase their methyl levels and prevent the problem from ever happening. It's no coincidence that 38 percent of depression patients are under-methylators and 40 percent of antidepressant takers report long term improvement. Modern psychiatry treats every depressed person as if they're under-methylated.

I noticed my diet played a big role in my mental health and went on a strict gluten, soy and dairy free diet. My mood stability would fluctuate based on diet and sometimes I would have a bad crash after a meal. The reason why my diet made my moods fluctuate was the amount of folate I was eating in my vegetables and anything enriched with folic acid. Within 20 to 30 minutes of eating those things I would crash because I didn't have enough methyl to counterbalance it.

I started getting better after my first dose of b6 and zinc and had that area of my health corrected within two months. I must note that my zinc therapy triggered both the worst flu of my life and a bad copper detox early on.

I've now learned which supplements to take for both conditions as well as what kind of diet to eat and have achieved a good balance.

I take 400mg of SAMe daily, because my body isn't converting methionine into SAMe efficiently. 38 percent of depression patients, the same ones who report improvements on SSRI's, could override this problem and achieve balance with this one nutrient. It could correct all the problems of having poor methylation with none of the side effects. It's simply giving the body a nutrient that it can't properly make. It's more like a dietary change than a drug. That's why the pharmaceutical companies would rather you not know about it.

How I feel now

These days I feel very stable and functional and I'm working towards feeling much happier. It's a tricky and sensitive balance. I'm having to address gut health and look out for inflammatory foods. I eat an all whole food diet with emphasis on protein and moderate amounts of nuts, fruits and

vegetables. I also lift weights 6 days a week.

On a wellness scale of 1-10 I spent most of my adult life feeling anywhere from 1 to 4. These days I'm at a 7 or 8 and moving towards the goal of 10. Considering that I've only recently made the necessary adjustments to my protocol I think that's pretty remarkable.

For those not confident or capable with helping themselves, there are nearly 1000 practitioners trained by Dr Walsh and listed on his website walshinstitute.org that can help them get started and learn how to take care of themselves independently and achieve health.

If you want to email me and asked me questions about my journey you can reach me at **jutfitness@gmail.com**