

DEPRESSION

Depression is a mental disorder characterized by an episodic course of illness. Affected individuals exhibit a markedly low mood, lack of interest, joylessness, and disturbances in motivation. Depressed patients are entirely unmotivated and experience significantly reduced activity. They display passive behavior and are unable to perform even the simplest everyday tasks. Often, they remain in bed for days. Depression is the most common mental disorder. It is estimated that over 10% of people will develop a clinically significant depression in their lifetime, with women more likely to be affected than men.

MAIN SYMPTOMS

- joylessness or deep depression, persisting for at least 14 days
- decreased interest in social and work environment
- persistent fatigue and lack of energy / feelings of powerlessness
- suicidal thoughts
- loss of appetite
- fear of the future
- sleep disturbances and excessive daytime fatigue
- headaches and/or body aches

CAUSES AND PATHOGENESIS

- multi-causal
- genetic predisposition
- permanent stress
- trauma or experience of loss
- psychosocial or biological change
- loneliness
- lack of sun light
- chronic diseases such as diabetes, dementia, heart attack, ...
- alterations in Trp metabolism
 - → serotonin deficiency, quinoline acid increase

THERAPY

- regulate tryptophan and catecholamine metabolism (depending on the report)
 - amino acids (Trp, Phe, Tyr)
 - melatonin
 - griffonia, curcumin, quercetin, indole-3-carbinol, passionflower
- compensating for nutrient deficiencies
 - cofactors like vitamin B1, B3, B6, B9, B12, D
 - cofactors like magnesium, selenium, zinc, copper, ...
- methyl group donors, especially SAM
- eliminate inflammations and ROS
 - omega-3 fatty acids, vitamin C, E
- treat mitochondrial dysfunction and RNS
 - coenzyme Q10, NADH, vitamin B12, ...
- additional phytotherapeutics such as ashwagandha or balmn
- conventional medical approaches:
 - psychotherapy
 - antidepressants
 - physical therapies, such as light therapy
- other general approaches:
 - Balanced diet with plenty of fish, fruit and vegetables
 - Reduce or completely avoid alcohol, nicotine, caffeine and simple sugars
- stress reduction
- sleep hygiene
- regular physical activity

DIAGNOSTICS





SF600A DEPRESSION BASIC PROFILE

Material: T928

Catecholamine metabolism

 dopamine, noradrenalin, adrenalin + precursors (Phe, Tyr)

Tryptophan metabolism

- Trp, serotonin
- important metabolites and enzymes

Relevant cofactors

- vitamin B3, B6 (cystathionine), B12 (MMA)
- BH4 (tetrahydrobiopterin)

Methylation capacity

- methyl group donors (SAM, betaine, choline)
- methylation activity (SAM/SAH)

Mitochondrial function (screen))

- lactate, pyruvate + ratio
- citrate, suberinate
- NO formation (citrulline)
- fatty acid metabolization (L-carnitine)

Immune activation

neopterin

Intestinal factors influencing inflammation

- TMA, TMAO, choline, betaine
- bacterial uremic metabolites

SE600C

SF600C DEPRESSION

COMPLETE PROFILE

Material: T923, T928, TBio1, 2EDTA, Hep, S

In addition to the Midi Profile:

Other neurotransmitters

GABA, glutamate

Hypothalamic-pituitary-adrenal gland axis

cortisol diurnal profile



ADDITIONS

In s/o food intolerances

- C044 PreScreen B
- B180 wheat germ agglutinin

In s/o genetic dispositions (for doctors only)

 H350 depression genetics (contains: TPH2, 5HTT/SERT, 5HTR2a, COMT und MAO-A)



SF600B DEPRESSION MIDI PROFILE

Material: T923, T928, 2EDTA, S, Hep

In addition to the Basic Profile::

Other tryptophan metabolites

melatonin

Other cofactors

- vitamin B9, D3
- magnesium, copper

Antioxidant minerals

zink. selenium

Mitochondrial function (screen)

coenzyme Q10

Vascular protective factors

• fatty acid status (omega-3/omega-6 fatty acids)

DIFFERENTIAL DIAGNOSTICS

■ fatique

- iron deficiency → G612 small blood count,
 Fe (S), transferrin, transferrin saturation
- anaemia → D160 complete blood count
- hypothyroidism → F200 TSH, fT3, fT4

■ irritable bowel symptoms

 see irritable bowel profiles SA710A, SA710B or SA710C

