

Dr. Rodger Murphree's Blog:

# THE FIBRO DOCTOR

*Internationally Acclaimed Author and Fibromyalgia Specialist, Dr. Rodger Murphree,  
Speaks About Treating and Beating Fibromyalgia and Chronic Fatigue Syndrome*

As Seen on TV...  
abc NBC CBS



Most doctors don't get it. I DO. Fibromyalgia is real and it robs a person of their health, family, friends, job, and often all hope.

-- Dr. Rodger Murphree

Hi good evening this is Dr Rodger Murphree, TheFibroDoctor.com, author of Treating and Beating Fibromyalgia and Chronic Fatigue Syndrome; heart disease which your doctor won't tell you, and treating and beating anxiety and depression with ortho-molecular medicine. Thank you for joining me tonight for me first Tuesday of the month, treating and beating fibromyalgia teleconference. Tonight we're going to discussing fibro fog. If you're like [many] patients that I work with on a daily basis, you'll find that over the years as your fibromyalgia has become more pronounced, you've had more and more trouble with your memory and mental clarity, and just being able really to get your mind to work as it used to. We're going to talk about why that is tonight and we're going to talk about ways that you can start to reverse that symptom that is associated with fibromyalgia.

A little bit about me. I'm a board certified chiropractic nutritionist. I've been in private practice since 1990, going on goodness gracious 23 years. The last 13 years I have specialized in fibromyalgia. For a number of years I ran a very large [integrated] medical practice here in Birmingham Alabama on the campus of Brooklyn hospital, where I employed 5 medical doctors and a very large support staff. We specialized in suing integrative medicine, which is a combination of natural medicine, which I continue to practice, and very judicious use of prescription drugs when needed. Our focus was on chronic illnesses, mainly fibromyalgia, chronic fatigue syndrome, heart disease, high blood pressure, Type 2 diabetes, anxiety, depression, some of these other things that are mentioned in my book. But for the last 7-8 years, I have been in practice by myself ... I guess 2003 since 10 years ago.

I sold my medical practice and I do mostly phone consults with patients all over the world. I'm able to do that because in my practice, I don't write prescriptions for drugs. What I tend to do is to use high doses but the right doses of vitamins, minerals, amino acids, essential fatty acids; the building blocks that make the hormones, that make the brain chemicals, that make the thyroid nutrients that you need. I use the building blocks to change the person's bio chemistry and by doing that, by correcting the causes of their [] symptoms, I'm able to reverse the symptoms associated with fibromyalgia. I also use anti inflammatory diets and metabolic plans that allow the person to increase their energy and improve their sleep. A large part of my practice involves using functional medicine, which is the science of using medical tests, typically tests that are kinda cutting edge, that are not used in traditional medicine. These tests look at how well a person's different systems or organs are functioning. Certainly we're concerned about pathology and I order blood work that is then ... the patient, whether they're here in Birmingham Alabama to a local lab, or they're in Cleveland Ohio and they go to a lab in Marytown. I write a prescription, they go get the blood work and I look at it.

Oftentimes the blood work that I'm ordering is blood work that's never been ordered by their physician. These are cutting edge tests, it's not rocket science being a good doctor. Unfortunately fibromyalgia typically gets passed from one

doctor to the next. On the average it takes 7 years and 12 doctors before you ever get the diagnosis. Most of the time, patients when they have found me, it's because they're falling through the cracks. They can't find anybody that understands what they're going through. They certainly can't find anybody that can help them manage and reverse their symptoms of fibromyalgia. The reason that is is because in traditional medicine, the treatment is managing symptoms, just treating symptoms not causes. If you've got poor sleep, they put you on a sleeping pill. Now the symptom is poor sleep, the cause is something else; whether that's an elevated cortisol level at bedtime, whether that's because you're depleted in melatonin because you're taking tricyclic antidepressants over the years or non steroidal anti inflammatories, or you're low in a brain chemical called serotonin because you've gotten under too much stress and you've depleted your stress coping chemicals; chief among those is serotonin.

Poor sleep is a symptom, it's not a cause. Fibromyalgia is a group of symptoms, a syndrome that has numerous symptoms associated with it, including poor sleep, chronic achy muscle pain, fatigue, headaches, irritable bowel syndrome, low moods, anxiety etcetera. The downfall of traditional medicine in treating a syndrome like fibromyalgia is that again, the focus is on treating the symptoms. The problem with that is there's so many symptoms associated with fibromyalgia, before you know it the patient's on 12 different drugs; each drug competing with another drug and causing an additional side effect. Traditional medicine is a dead end long term for fibromyalgia. That's where functional medicine testing, functional medicine comes in. By locating where the person's broken down biochemically through the right testing, now it's a matter of changing the biochemistry. Once you do that, you change the physiology. Once you change the physiology, now you change how the person feels, how they sleep, how they lose weight or how they're able to exercise etcetera.

That's the real focus of my practice, what I've been doing for the last 13 years when I encountered those with fibromyalgia and chronic fatigue syndrome. Tonight, what we're talking about is fibro fog. In fibro fog, you find that you have problems recalling known words. You typically use the incorrect words, you can't remember people's names, you have short term memory problems like forgetfulness, inability to remember what you've just read and what you've just heard, or maybe you saw a movie last week, you don't remember anything about it. You oftentimes have problems with directional disorientation, so you're not able to recognize familiar surroundings; get lost, it's hard to read a map. You become disoriented very quickly in a shopping mall if you're not overwhelmed because you've bankrupted your stress coping chemicals, you don't handle a lot of stress including being in a crowd. You have trouble recalling where things are; where did I put my keys, where did I put my blue socks, where did I put my [towel]. You get trouble with just getting your mind to click in and work correctly. You have lots of problems with multitasking. You have inability to pay attention to more than one thing.

Forget balancing a checkbook or doing any type of math, rudimentary math problems because your brain is not working and I call it the mind mush. Fibro fog, where you often are walking in a cloudy type mindset where things just don't come together for you. You easily get distracted. Patients that are talking to me, we're going over their health history and []. They're talking about something that happened 20 years ago, has nothing to do with their health. Oftentimes when they talk to me, they will forget their spouse's name who is sitting right next to them when they're talking to me. "You know, what's your name, what's your name?" It's this fibro fog, this cloudy thinking that is oftentimes as disabling as the pain and the fatigue. Me and my patients, when they rank the things that they want to work on when we work together in a program, oftentimes fibro fog is number one. They want to get their mental clarity back. They want to get

their brain working like it used to, because for many of them they're not able to work. A big reason is certainly because of the pain and the fatigue, but also because they can't process the information that they used to. That's incredibly important if you have a very high demanding mental task oriented job like an accountant or an attorney or a banker, anybody that's handling finances. Certainly once your mind starts to go, certainly your livelihood is threatened.

With this fibro fog, this mental clarity, this cognitive dysfunction that we call in medicine, you have problems with day to day challenges; what I call or other people call senior moments. You forget what you're talking about in mid sentence, you forget where you put things like your keys, you forget people's names; your sister, you can't remember what's my sister's name. It's easy once that happens, when you start going through that, that you start to feel like you're losing your mind. Unfortunately because you've got so many symptoms, pain, fatigue, low moods, irritable bowel, you might have headaches, you might have chemical sensitivities where you can't be around strong smells, strong odors; you can't go into an office depot or an office [mess] because you can't take the smell. When you have all these different symptoms and you start to relate those to other people and even to a doctor, oftentimes the doctor will tell you that it's all in your head. They may not come out straight, but oftentimes they will refer you to a psychologist, a neuropsychologist or a psychiatrist, or they want to give you an antidepressant; not so much like Cymbalta or Savella, but they want to give you an antidepressant because they think it'll help you deal with this mental illness that you have, that's what's implied.

It's easy to feel that you are becoming crazy because some people lead you to believe that. They are totally in the wrong but unfortunately we have many doctors out there, and ignorant family and co-workers who really don't understand what you're going through. It's unfortunate but it's true. What's happening in fibro fog is the same mechanism that's driving this cloudy thinking, is what's driving the fibromyalgia in general, and that is stress. Stress is the catalyst for disease, I don't care what disease it is; whether that's fibromyalgia, brain fog, irritable bowel syndrome or cancer or heart disease, it doesn't matter. Stress is the catalyst for disease including fibromyalgia and the fibro fog that comes with it.

What happens in fibromyalgia is once your autonomic nervous system, which is your self regulating system that regulates your heartbeat, your temperature, your sleep awake cycle, your bowel movements, your pain level, your moods, your immune system, how you digest food; once that becomes compromised, then all these different systems start to break down. This is a dysfunction in the hypothalamus-pituitary-adrenal or the HPA axis. Once that starts to go haywire, there's no drug that can correct that. The only way to correct that is to start to build up and repair your stress coping chemicals and mechanisms, so that the stress is now taken off the HPA axis. Until you do that, then you're always going to have fibromyalgia, you're always going to have symptoms of fibromyalgia, whether that's poor sleep, achy muscle pain or low moods, it doesn't matter. That's going to persist. I don't care what drugs you take. In fact the problem with prescription medications in fibromyalgia is that what brings on the illness is too much stress.

Prescription medications are just another stressor, they can be helpful, they can be your only option sometimes. So I'm not anti drug, I'm anti wrong drug, I'm anti too many drugs and I'm anti drug only philosophy. You see nobody has a drug deficiency. There's a time and there's a place, but what you want to be thinking is, why is it I can't sleep? It's not because I have an [ambient] deficiency. It has to be something else. Once you start thinking along those lines, then you realize this paradigm, the way we think, the way we've been taught to think about health; managing symptoms instead of

correcting causes is, really it's totally missing what true health is all about. Because synthetic medications are a stress on the body with the potential side effects, then we have a doctor or a profession or a philosophy, a way of doing things that's saying look, we're going to give you drugs to help you manage these symptoms. Short term, they may be helpful. No doubt about it. Oftentimes they're not but short term they can be helpful. But long term they're causing more stress because they're causing more side effects and they're very stressful to your body. They're stressful to your detoxification pathways, to your liver; if you're taking non steroidal anti-inflammatories, they can cause leaky gut and perforated ulcers and bleeding in the stomach, all sorts of nasty things.

Each medication that you're taking oftentimes will deplete a crucial nutrient. When that nutrient becomes depleted, then you start to have problems, case in point, non steroidal anti-inflammatories actually deplete your natural sleep hormone melatonin. Once your melatonin level goes low, now you start having trouble with your sleep. We can trace that back to 10 years earlier when you were taking a lot of non steroidal anti-inflammatories, and you've never been able to build up your natural melatonin levels. Or could be that you have a very low DHEA level because of all the stress. Then combined with taking non steroidal anti-inflammatories for a period of time, or steroids or steroidal things that will deplete melatonin including tricyclic antidepressants and regular antidepressants, whether that's Savella or Prozac; combined with a low DHEA level will drastically lower your natural sleep hormone melatonin. There's all kinds of things that come into play that start to drive these causes, not the symptoms but the cause of fibromyalgia.

The big thing that we're looking at with fibro fog, is that once the hypothalamus-pituitary-adrenal s become affected, now your mental clarity starts to suffer. A big part of that is because of this poor sleep. Stress is magnified even more so when you don't get a deep restorative sleep. A survey by the fibromyalgia network reports that 62% of patients that had emotional or physical stress preceded their symptoms. I find when I'm interviewing my patients, that's one of the number one things I ask them- What was going on or when was the last time you felt good? Typically people will say 5-10 years ago. Then I ask them going back and I'm saying 10 years ago, what was going on 11 years ago? "Oh my gosh, I went through a divorce, I lost my job, I lost my house, I went through bankruptcy." It could be something as mundane, something that you would not even think about, that you were working a lot of hours and you got sick with the flu and you've never really felt good since. It could be you're working a lot of hours, started to feel kinda run down, your sleep [] a little bit but then you got in a car accident, and you've never been the same.

There's some stressor or stressors that then trigger this thing called fibromyalgia. If you think back, typically you can uncover that. Years of poor sleep, chronic pain and illness take their toll bankrupting your stress coping chemicals and your hormones like DHEA, which is a master stress coping hormone; cortisol which is incredibly important for being able to handle long term stress; serotonin which is the happy hormone. The more stress you're under, the more serotonin you need. Dopamine, norepinephrine, Gamma Amino Butyric Acid, these nerdy sounding names are neurotransmitters; like dopamine, they help you be able to handle pain and be happy. They give you pleasure and drive and zip and ambition. When they're compromised because of too much stress, now you start to have problems. Unfortunately because those chemicals are low, now you find that stress is magnified. Not only those chemicals are very low, it's hard to deal with stress, but now when you encounter stress it becomes even more difficult to have stamina and resiliency. As you stay under stress, now you start to have problems with your thyroid function, so your metabolism goes down. Once that goes down, now you find that you start having more problems with fatigue, you might have high blood pressure, elevated cholesterol, tingling in your hands and feet, cold hands and feet, hair loss, constipation. All these

things start to show up and then unfortunately what typically happens is now you start getting a drug for each of these symptoms that start to show up.

If there's tingling in the hands and feet, you might get on [Gabapentin] and Lyrica. If it's problems with cholesterol, elevated cholesterol, now you get on a cholesterol medication which then depletes your CoQ10 and you start having muscle pain, so they put you on a muscle relaxer like Flexeril which then can cause problems with depleting your natural sleep hormone melatonin. It's just this domino effect; if you're not careful you get in the system, and it's very hard to get out. Really the big trigger is this chronic stress and the inability to handle stress. We know that what drives that is this poor sleep. When you're not going into deep restorative sleep, you have an elevation of Substance P, which is a hormone that increases your pain; it lowers your pain threshold so pain is magnified. You have less Growth Hormone, Human Growth Hormone or HGH, which is supposed to be repaired during the night to repair muscles; the soft tissue, the tendons, the ligaments and muscle tissue. All during the day we're using muscles; whatever we're doing we're using our muscles. Even if you're sedentary you still have muscle cell turnover that has to be repaired during the night. But if you're not getting that deep restorative sleep, that isn't happening.

We know that if you're not getting that deep restorative sleep, you also are compromising your mental clarity. You start to have problems with mental recall, you start to have problems with being able to process data, whether that's a math problem or being able to remember a grocery list. As the stress is compounded because of poor sleep, now you start having problems with low thyroid. Once your thyroid becomes compromised, now everything slows down. Your metabolism is controlled by your thyroid, so if your thyroid function's low, everything slows down including your mental capacity. If thyroid gets under too much stress, which is the beginning of Hashimoto's thyroiditis, and it's not caught in time, then you can go years and years with all the symptoms of low thyroid as I mentioned previously and never be caught, because most doctors are testing you for TSH and T4. Those don't pick up the beginning of Hashimoto's thyroiditis, which is an autoimmune disease, which is the number one cause of low thyroid.

To catch that, you need to do some specialty labs which I do routinely and should be done routinely but they're not, but you need to do that. Once you catch that, you can right that. Unfortunately as I mentioned earlier, most doctors are treating the symptoms of fibromyalgia and not the causes. That leads to a lot of problems we see with mental clarity issues. If you look at the common fibromyalgia drugs, drugs that are being used in fibromyalgia today, tricyclic antidepressants like Elavil and Trazodone, amitriptyline, Doxepin and then we look at Klonopin and other benzodiazepines or tranquilizers, Ativan, Xanax sometimes, sometimes Valium but Klonopin is the big one. Restoril is kinda having a [surge] here. Then you have the atypical antipsychotics like ... they're just mind [zapper], they just fry your brain; Abilify, [ ] ... couple of others, Zyprexa, those medications are just incredibly dangerous and incredibly life threatening. They just are so damaging to your biochemistry. Lyrica, Neurontin, Felexeril, Hydrocodone and Ultram, Mirapex for restless legs syndrome; SSRI antidepressants like Celexa, Paxil, Prozac, you have the newer SSRNIs which are Cymbalta, Savella, Effexor, Pristiq. All those medications are common in the fibromyalgia world.

The problem with those medications is if you look at them, they have the potential side effects and many of the symptoms that you experience with fibromyalgia, including especially fibro fog. If you look at Trazodone, they can cause confusion, fibro fog, anxiety. All the tricyclic antidepressants like Elavil, Trazodone, Doxepin, amitriptyline, that whole class, they deplete CoQ10. Once you deplete CoQ10 which is the spark plug of every cell, your cellular metabolism goes

down. Now you can have all sorts of side effects including neurological problems, tingling in the hands and feet; you can become depressed, you have problems with mental clarity, you can become anxious, you can have cold hands, cold feet, all sorts of things start to show up neurologically. Oftentimes it can't be explained with a nerve conduction test or [even] to the neurologist. Simple as going and looking, being a detective and figuring out it's the Trazodone you've been on 10 years that's causing this peripheral pain that you have in your legs. Nothing else, that's what it is; you don't need to be on Lyrica for that, you just need to come off Trazodone.

Then the question is, I can't come off Trazodone because I can't sleep. But you don't have a Trazodone deficiency, which figured out is what's causing you not to sleep. It's probably some functional medicine testing that you need to have done. Once you know that, now it's a matter of solving that biochemical problem instead of covering up a symptom. When you look at those medications, the tricyclic medications that I mentioned earlier, they deplete your natural sleep hormone melatonin. We look at Flexeril which causes depression, fibro fog, anxiety, hangover, mental clarity issues; Elavil is another tricyclic antidepressant. Ambien and Lunesta cause memory loss, short term and long term problems with memory, confusion, hallucinations, anxiety, depression. What's happening right now with Ambien is patients are having very difficult time getting refills for that medication, because FDA has gotten so much feedback from doctors and patients telling them about the side effects; waking up in the middle of the night and eating the entire refrigerator, or getting in the car and going to the grocery store and getting a gallon of ice cream, eating it and not remembering any of these things. Driving a car and having no memory is pretty dangerous. Those are some of the things that we're encountering with Ambien.

I think that in the grand scheme of things, if you try everything naturally and Ambien is the only thing that works, then you need to be on Ambien. I think it's a disservice to just cut people off Ambien. I've got some patients that I've been working with who ... I'm a realist and if it comes down to, you need to be on Ambien, you've tried everything else, then you need to be on Ambien because you need to sleep. Having said that, don't let that be a cop-out because if you've not tried everything else, if you've not worked with me or other doctors who work like I do and use the protocols like I do, then you've not tried everything. I'm not going to let you off the hook to tell you that you can stay on Ambien, because Ambien has a lot of potential side effects; chief among those is flu like achy muscle pain. What does that sound like? That sounds like fibromyalgia and chronic fatigue syndrome, doesn't it? It can cause anxiety, depression, fibro fog; all those are side effects of the medication that really is a mirror image of fibromyalgia. So I'm not going to let you off the hook; other sleep medications that are typically used would be the benzodiazepines that are also used in anxiety. Those again will be Xanax, Restoril, Ativan, Valium, Klonopin. Those medications don't produce deep restorative sleep. They knock you out but you're not getting in that delta wave, deep restorative sleep, so you're not building up your stress coping chemicals. You're not repairing damaged muscles, you're not doing things that you need to do, and those medications are notorious for being addictive. If you've been on them for as short as 2 weeks, it's hard to get off them without having withdrawal symptoms. They're also notorious for causing depression, fatigue, fibro fog and tardive dyskinesia. Tardive dyskinesia is the shakes, the tremors. 60% of the adult population over the age of 60 who have been on those medications will not be able to come off them and they're addicted. They will then go into [] tremors.

Oftentimes they're mistaken at least early on, that they have Parkinson's. Actually it's the benzodiazepine, the Valium or the Xanax that they've been on for years. These medications cause insomnia long term because they deplete your natural sleep hormone melatonin. You take something to knock you out, but really you're not getting that delta sleep, so

you're not getting in a deep delta wave sleep and you're not making deposits into your stress coping savings account, so you never really feel good. These medications also deplete CoQ10; I talked about that. Also we see common drugs that we think that how could they affect me, but non steroidal anti-inflammatories can cause problems with mental clarity issues. It as I mentioned earlier, depletes melatonin. Non steroidal anti-inflammatories also can affect your ability to absorb B12. When you get low in B12, you start having problems with pre senile dementia; you don't really think very well. Non steroidal anti-inflammatories also can cause achy muscle pain. Sounds kinda crazy but I've gotten patients that I've gotten off Mobic or their Celebrex, and use natural protocols to help with their pain. But then what they found was, a lot of their pain just went away coming off their medicines.

Then you look at pain pills. Pain pills are notorious for causing anxiety, depression, thought disorders including poor memory, mental clarity issues. Beta blockers like Inderal, Toprol and Tenormin, those medications slow down the thought process so they can give you problems with mental cognition, certainly memory and they're also notorious for causing mood disorders including depression. Things like anti-histamines which you tend to think can be pretty safe, but Benadryl, Tavist, Claritin, Zyrtec, even those in the right person may cause mental confusion, psychosis, even hallucinations. Now here's the thing. When you look at the literature, you see that a potential side effect for Benadryl is mental confusion, but it's probably 2% of people who take it, so 2 out of 100. Now if you're 1 of those unlucky 2 people, it doesn't make any difference whether the odds are low or not. If you're 1 of those 2 people, you're affected. We get kinda jaded ... we hear all these side effects being read off in a television commercial; we just turn an ear, we don't even listen to it anymore. We've become so jaded to it. The problem with that is, oftentimes we're experiencing those side effects and we don't even know it's from the medication we're taking. We don't even know that we're having it because we just think we don't feel good, we just think it's our fibromyalgia.

We think, "I'm not thinking, I'm losing my mind, can't remember anything." We think it's the fibro fog because we're run down, and it certainly could be; don't get me wrong. But a lot of times it's the medication that we're taking. It could be the Lyrica, it could be the Ambien, it could be Zantac or [Texor] or Librax, because those medications are known to cause mental confusion, dementia, even delirium. These are proton pump inhibitors, these are stomach acid drugs. They're designed to help with heartburn. Even those medications in a certain population, can cause mental clarity issues and problems with your thinking. Neurontin and Lyrica are notorious for causing mental confusion, being in a fog, just can't think at all ... disorders, even hallucinations. Those medications are a disaster. Provigil, Ritalin, Concerta, these are stimulants; Ritalin, Concerta and Adderall, those three are amphetamines. If you sold them on the street, you could go to jail but they're prescribed. They affect the brain like cocaine does. They can cause mania, psychosis, depression, irritability, anger issues, problems with mental recall. They stimulate so that you're more alert, more focused but long term these medications can do damage to the neurotransmitters in the brain cells and the receptors. Long term they deplete DHEA and other things that help you deal with stress.

If you're fatigued, the way to treat the fatigue is not by giving you an amphetamine. The way to fix the fatigue is to find out what's causing you to be fatigued. Is that because you don't sleep at night, or you do sleep at night but you're not getting deep restorative sleep because you're taking a medication like Klonopin that doesn't allow you to feel refreshed next day, or is it because you have low thyroid that your doctor keeps missing year after year. You have to investigate these things. If we look at Mirapex or restless legs syndrome, that can cause amnesia, mental confusion, memory loss. Then as I mentioned earlier, drugs deplete essential nutrients that you need for mental clarity. Statins, Lipitor, Zocor,

Vytorin, Crestor, those medications deplete CoQ10. You need CoQ10, without it you start having problems with your thinking as well as neurological issues, pins and needles, pain in your hands and feet, muscle pain, mitral valve prolapse, high blood pressure. Celebrex depletes Folic acid. Folic acid is one of the most potent anti depressant substances out there. When your Folic acid level goes low, you really start having trouble with your neurotransmitters, your brain chemicals, so it definitely can cause problems with [thought] disorder.

Steroids, Prednisone, Cortisol; these things can cause problems with depleting magnesium and zinc so you start getting problems with muscle spasms and low moods. It affects your ability to get a good night's sleep, lowers your immune system. Antacids block B12 which when your B12 gets low, it can bring on pre senile dementia. Estrogen medications deplete B6. B6 is needed to make the neurotransmitters, the happy hormones, serotonin, dopamine, norepinephrine, Gamma Amino Butyric Acid. When you're low in B6, you don't make serotonin, the happy hormone. Also when you're low in B6, you don't dream at night, you don't get into that deep restorative sleep. Estrogen medications whether it's hormone replacement therapy or birth control pills also deplete omega 3, these are essential fatty acids which are your natural anti-inflammatory hormones. When those are low, you tend to have more inflammation. Estrogen medications deplete magnesium which is in 300 different bodily processes and is a natural muscle relaxer. It does all sorts of things. Diuretics deplete B6 and magnesium. When you're taking these medications, you need to realize that they start depleting these nutrients. When you get low in B12, you tend to have issues with anxiety and depression, dementia, fatigue, fibro fog. B1 or thiamine, when that becomes low, you tend to start having problems with anxiety, depression, fatigue and pre senile dementia. B6, we've already discussed that. B2 is affected by many other medications out there. When it's low, it affects your ability to be happy; it affects your sleep, it affects anxiety and depression levels. B5, when that goes low, then you really have trouble dealing with stress because B5 or pantothenic acid is the main stress coping vitamin. You really need high levels of that to be able to handle stress long term. Also when you get low in that, you become fatigued, irritable and depressed.

We talked about Folic acid. Now we see that in the literature, 92% of those taking Folic acid were able to cure their depression, compared to 70% taking antidepressants. This is out of PubMed and it's out of my book, Treating and Beating Anxiety and Depression. Antidepressants are no better than a sugar pill 70% of the time. That comes out of a meta-analysis where they looked at thousands and thousands of patients, hundreds of different studies that showed that antidepressants oftentimes are no better than a sugar pill. We know that fibromyalgia patients are deficient in these B vitamins. They're deficient in minerals that they need, they're deficient in the essential fatty acids that they need to make these chemicals. That's why I talk at length in these presentations and talk at length in my book about the fact that you need to make sure that you're building up your stress coping savings account. You do that with the right supplements, with the right nutrients. If you don't do that, the problem is that you're going to continue to stay depleted in these chemicals. Without those chemicals, you're not able to make the hormones that you need to be able to get to deep restorative sleep, to be happy, to combat low moods, anxiety, depression. It's a domino effect really because when you don't have these nutrients, then you don't handle stress very well. Because you don't handle stress very well, you further deplete what nutrients you do have.

The whole goal of righting fibromyalgia really is to make sure that you're building up enough stress coping chemicals and you're building up your stress coping hormones like adrenal cortisol, DHEA and you make sure your thyroid's working, so that you can take the stress off the body. If you don't do that, it doesn't matter what drugs you take, it doesn't really

matter what you do, you're really going to stand very little chance of ever feeling good again. Looking just at the essential fatty acids, when we see the omega 3 that you typically get from fish oil and they're low, then you have problems with your brain cells being able to communicate, one with another. You start having problems with ADHD, poor mental clarity, poor immune function, increased inflammation and pain. We also know that through testing; there's no blood test, although the parameters weren't being counted right now, I'm not sure what to make of it yet, but there's really no blood test for fibromyalgia. However there is an amino acid assay test that can be done that 84% of the time shows that those with fibromyalgia are deficient in certain amino acids which are the building blocks of a protein. These essential amino acids meaning that your body can't make them, you have to get them in your diet, when they're low, they cause problems. Those amino acids are tryptophan; tryptophan which makes serotonin the happy hormone, L-phenylalanine which gives you energy and methionine which is part of SAM-E, S-adenosyl methionine which is a potent antidepressant, it helps to [blow] up pain, great for the sulfur dependant detoxification pathways of the liver. All those amino acids are low and that creates all sorts of problems.

Wrapping up tonight's presentation, what you've got to do to reverse your fibromyalgia, fibro fog associated with your fibromyalgia. First for all, you've got to look at the medications, you've got to know what you're taking. You need to explore that on the Mayo website or looking in my book, but you need to explore what it is you're taking and what are the potential side effects, and look to see could you be having some of those side effects? Then work with your doctor to change to a different medication; even better to wean off. There's a right way to do it with someone who knows how to help you, and then do the natural protocol. That's what I do with my patients. Typically my patients are on 12 different drugs when they start with me, and by the time I'm finished working with them in a program, then they're down to 1 or 2 or none. Certainly I get them down to the lowest drugs. Sometimes there's a medication they can't come off of. If they have heart arrhythmia, they have to stay on their medication. If it's high blood pressure medication, typically I can get them off that. If it's diabetes medication, that's covering up a symptom. They have an elevated blood sugar but that's a symptom, that's not the cause. The cause is they're overweight, or we need to change their diet.

Once you start to look at these drugs, again you need to work with somebody whether that's me or a doctor who will work with you to reduce and eliminate these drugs, and put you on a different natural protocol. A lot of your fibro fog is going to disappear; you're going to find your thinking certainly becomes clear. The other thing you've got to do, you've got to restore that deep restorative sleep. You've got to fix any sleep issues. If you've not done that yet, that's really the place to start. You've got to get that deep restorative sleep. You can read more about that in my book. You can go to the [TheFibroDoctor.com](http://TheFibroDoctor.com) or my blog and you can see a little blurb about how to order my sleep program, which goes into step by step. There's a video, there's an audio and there's a written report that's just been updated that goes into detail about how to restore deep restorative sleep; whether you're on drugs or not, how to do it. There's some bonus things that go with that. You can order that for a nominal fee, [DoctorRodgerMurphree.com/sleep](http://DoctorRodgerMurphree.com/sleep) program. Again look on [TheFibroDoctor.com](http://TheFibroDoctor.com) and you'll see how to do that. But you've got to get that deep restorative sleep. You've got to build up your stress coping chemicals, your adrenal glands. So you need to know what your cortisol levels are. The best way to do that is to be tested to see what your cortisol levels are, that is four samples that you would get through a saliva test. That would tell you a great deal about what state of stress your body's in, how you're doing.

From that, once you start to work on the low adrenal function, because just about everybody with fibromyalgia has adrenal fatigue, you've got to repair that. If you don't, you might get that deep restorative sleep and that's one way to

really help the adrenals take some of the load off that stress coping gland, but you'll find that if you don't prepare your adrenal glands, then you're going to have ups and downs. You're going to feel good after sleeping and you're going to crash; there's going to be this pattern that you get into. So you've got to prepare the adrenal glands as well.

The other thing that you really need to look at is you need to find a doctor who will order the right thyroid test, and will help you to uncover do you have a low thyroid problem, because I find about 60, maybe 70% of my patients with fibromyalgia have low thyroid. Of that 70%, probably 60% of those have been misdiagnosed; they haven't been diagnosed properly and they've been missed year after year. You really need to explore, do you have low thyroid? The other thing is you want to make sure that you also get tested to see what your DHEA level is. That's a blood test, you can do it in a saliva test when you do the cortisol adrenal test or you can do a blood test, either way. The thing about the DHEA, doctors don't order; they just [] do but it's one of your main stress coping hormones. It's also incredibly important for mental acuity. Helps to lower anxiety and boost mood, so it's really great for low moods and anxiety. It's super important for your immune system but very, very important for mental clarity.

If your DHEA level is low, then you can't hang on to serotonin very easily. Serotonin is one of the main keys in treating fibromyalgia, the cause of fibromyalgia. So you definitely want to know what your DHEA level is. The parameters for DHEA are very wide in a blood test; it's 35-430 which is ridiculous. If you're 36, they tell you it's normal. You're at 36 and John's at 429, and you're both normal; something can't be right. What's wrong is the old guard is not caught up with the scientific literature which shows clinically that without a doubt, females do better at 300-350 and males do better between 450-590. That's the optimal levels. We want you to be at optimal blood levels, lab levels. We don't want you to be at sub-optimal, we don't want you to be a D student or an F student, we want you to be an A student. If you do those things and you're still not improved, then if you're female, you probably need to get your estradiol level checked and you need to get your progesterone level checked.

Estradiol level should be around 100-200 if you're post menopausal; there's ways if you're still on your menstrual cycle to check it to see where it is, make sure it falls in the right numbers. But if you're non menstruating female, your estradiol level should be around 100-200 especially if you're on hormone replacement therapy. Many doctors will tell you that if it's a 30 or 40 on a blood test, it's going to say it's normal. Again we're looking at optimal. Your progesterone should be between 1.0 and 2.0. For men, your sex hormone testosterone is the key. When that's low, you're at risk of death from all mortality by the way; increased risk of heart attack and stroke and from all illnesses. So you want to make sure it's pushing the higher level of what are considered normal. Again that would be optimal. Typically, for my patients I find I don't have to do a lot of the sex hormones because I'm repairing the adrenal function. It's the adrenal gland where a lot of these things are made. If you repair that, then typically pregnanolone and DHEA, the master hormones that make estrogen, progesterone, testosterone; they'll take care of itself.

Having said that, there's a time and a place that the sex hormones need to be [replaced] and you can read all about that in my Treating and Beating Fibromyalgia and Chronic Fatigue Syndrome book. As I finish up tonight, we're closing in here on the hour. I want to let you know I've got some exciting things coming down the road here very soon, there's going to be announcements in the next couple of weeks about a very exciting program. Look for an email coming soon; it's going to explain the new program that I'm starting/ I'm very, very excited about it. It'll allow me to help hundreds, potentially thousands of people I've not been able to reach yet and I'm very excited about that. People are asking about the 5<sup>th</sup>

edition book. I assure you I'm pushing them as hard as I can but we're still looking at the fall before that book comes out. It's 560 something pages I think, so it's a little shorter than War and Peace, but it's certainly packed with the latest health information to help you uncover what your problem is with fibromyalgia and then reverse it. I'm really excited about that book coming out this fall.

This is Dr Rodger Murphree, TheFibroDoctor.com, author of Treating and Beating Fibromyalgia and Chronic Fatigue Syndrome. if you'd like to more about the clinic, I encourage you to go to TreatingAnd Beating.com. Certainly feel free to give my clinic a call. My staff does a wonderful job at answering questions, helping any way they can, including setting up a phone consult or in-clinic consult if you're in Birmingham Alabama and would like to come visit us. The number to call is 205-879-2383. Wish you all the best and hopefully a good night's sleep.