Hypothyroidism & Iron Deficiency Diagnosed as a Psychiatric Disorder

By Stanford Field

The Incorrect Diagnosis followed by Drug Roulette

This is a story of my daughter’s encounter with psychiatric medicine. In her teenage years, Julie lived with her manic-depressive mother who alternated between taking prescribed drugs and throwing them in the toilet. Her mother would go into fits of screaming followed by lying on the floor staring at the ceiling. She had been released from the mental ward of a hospital when insurance had run out. To escape from such a horror, Julie experimented with various street drugs which caused her to become moody, distraught, angry, vulgar and depressed.

In her early 20s (1990s), she sought help from the public medical facility. A psychiatrist there decided that she should take Prozac. As Julie’s conditioned worsened, the psychiatrist incrementally increased the dosage of Prozac until it was four times what was originally prescribed. Despite this, Julie’s mental and physical condition continued to deteriorate.

The game of drug roulette was then stepped up. Julie was told to take Buspar with the Prozac. She continued to deteriorate. Her doctor then tried Haldol and Prozac. That combination caused Julie, in her words, to “freak out.”

She sought help from me after she had become glassy-eyed, nervous, cold, shaking and prone to a great deal of crying. She was in a non-functional condition when I took her to the emergency psychiatric clinic where she was admitted for a three-day stay.

The game of drug roulette continued at the clinic. She was given lithium and Prozac. She became violently ill with headaches and nausea. She was then put back on Prozac which had not worked in the first place. She had gone full circle after inept and irresponsible experimentation by psychiatric doctors. Throughout the entire encounter with all these drugs and doctors, she was never given a blood test or any other kind of test to determine any deficiencies.

At the departing interview prior to discharge from the emergency clinic, the psychiatrist told me that Julie needed to stay on Prozac for the rest of her life because Julie had inherited the mental sickness that was afflicting her mother. That conclusion was reached without any tests to verify its validity. Clearly, this was the subjective opinion of a doctor who was unable to diagnose the case.

A Break in the Storm

Julie began to sleep 14-18 hours a day. She was always cold and her fingers and toes were numb. She had no energy and was experiencing continual dizziness and crying spells. She continued to take four Prozac a day.

My partner-in-life, Judy, and I began to search through our medical books for the symptoms that Julie had. We ultimately found that a thyroid hormone deficiency and/or a lack of iron could account for these symptoms. A thorough blood test showed she had almost no thyroid hormones, and her iron concentration was well below the low range for normal.

After taking thyroid hormones and iron for 2-3 weeks, we could not believe our eyes. Julie had become energetic, fully alert and filled with vitality. After a great deal of convincing, in another 2-3 weeks, she had given up taking any Prozac.

She began a program of taking regular amounts of multivitamins, antioxidants, cod liver oil and nutritious food. She ate a great deal of fish, fresh vegetables and fruits, and drinks plenty of water. She avoided animal meat, greasy hamburgers, toxic oil-soaked French fries, soft drinks, and sugar. She was once again a wonderfully healthy person.

To start life anew, she moved to Honolulu and lived with other adventurers in a tent on the beach. To survive, she became a waitress.

I sent money to help her along, but little did I know that it was going to support a heroin addiction that she acquired from the lost souls that were part of her life. She told me that the money was for tuition at a junior college.

Julie’s good health and positive outlook allowed her to consider helping her manic-depressive mother who was surviving on antidepressant drugs and other drugs for sleeping. To care for her mother, Julie convinced her mother to move to Hawaii. Eventually, they both moved back to California. Julie had become her mother’s caregiver.

Unrelenting Pain and Early Death

Even so, I could not give up on my daughter. I convinced her to go to a junior college with the target of a degree in journalism from a university. Subsequently, she graduated from a junior college with high honors. She then began to pursue a degree in journalism from San Francisco State University. Best of all, she had regained a great deal of self-confidence, and she became a kind, friendly, and thoughtful person.

However, I didn’t know about the heroin addiction until it was too late. Heroin is a narcotic that smooths the mind and creates euphoria. However, it also gradually shuts down the body’s own pain-killing chemicals called “endorphins.” That shutdown requires more heroin and you are then addicted (“hooked”).

Julie became “a recovering heroin addict” by going to a local clinic that gave her a bottle of methadone pills to help her. However, the pain in her body became worse. She went to five different doctors (doctor shopping) to get pain and sleeping pills. My precious Julie died in pain with an overdose of methadone in October 2006 at age 35 years.