

DR. MICOZZI'S

INSIDERS' CURES

THE DEADLY TRUTH BEHIND BIG PHARMA'S BLOCKBUSTER PILL

*Big Pharma's "happy pills" are more likely to kill you than cure you...
But here are 7 steps to boost your mood safely AND naturally*

It's been 22 years since the book *Prozac Nation* was first published. Since then, we've branched beyond Prozac to become Zoloft Nation, Paxil Nation, Wellbutrin Nation...and on and on.

Let's face it...we've become a nation of antidepressant users.

In fact, a study found that between 1996 and 2005, the percentage of Americans taking antidepressants *nearly doubled*.¹ One in ten Americans used antidepressants eleven years ago, and you can bet it's more today.

And the truly depressing thing is these drugs *barely even work*. I've written before about how research shows that antidepressants—including selective serotonin reuptake inhibitors (SSRIs) like Prozac, Paxil, Zoloft, Lexapro, and Celexa show hardly any benefit over placebos. And even then, it's only in the most severe cases of depression.²

Not only that, but a growing body of research shows these so-called "happy pills" can actually make mental health issues worse.

Violently worse, in fact. I've been telling you for years about studies linking SSRIs to skyrocketing suicide rates. I'll share some of that research with you in a moment... and how big pharma and the federal government appears to be wearing blinders to this compelling evidence in a deadly "folie a deux" (to use a psychiatric term from the French) of crony capitalism.

And that's not the only harm antidepressants can cause.

Violent behavior is just the tip of antidepressants' deadly iceberg of side effects

If an antidepressant user doesn't become violent, there are a whole host of other life-threatening side effects he or she can succumb to.

I'm talking about heart disease, organ damage, breast cancer, and bleeding in the brain. Not to mention serious mental conditions like psychosis, mania, and hallucinations. And significant birth defects in children born to women who took antidepressants while they were pregnant.

But the good news is that the vast majority of people don't even need these dangerous drugs. It's entirely possible to fight depression naturally. In fact, you can do it in seven easy steps.

In a moment, I'll share my scientifically proven, natural program to help alleviate depression and improve your overall mental health.

But first, let's take a closer look at just how dangerous antidepressants are, and the reasons they're so ineffective.

The pill as lethal as a bullet

Back in 2012, I was one of the first people to report research showing that the common link between many of the world's tragic mass shootings is not illegal guns—it's antidepressants.

I know because as a consulting forensic medical examiner in the 2000s, I saw the tragic side effects of these terrible drugs. Time and again, I saw how depressed people who had harbored suicidal thoughts for years finally decided to act on those thoughts. Why? Because they started taking an SSRI.

It makes perfect sense. When people are depressed, they turn inward. They close themselves off. And they're often tormented by endless, negative thoughts running through their brain. Many times, these thoughts are about harming themselves or others.

But because depressed people tend to lack energy, they are usually not physically capable of acting on those thoughts. Psychiatrists call this *thought substitution*. It's the body and brain's way of protecting itself from harm.

But let's say a depressed person starts taking Paxil or Zoloft. These and other SSRIs artificially raise levels of the supposed "feel-good" chemical serotonin in the brain—which, in theory, should make people feel less depressed.

But unfortunately, that theory simply doesn't work for the vast majority of people (I'll tell you about the science behind that a little later). This means that all too often, that endless loop of negative thoughts doesn't disappear.

What SSRIs do instead is increase people's energy. And some of those people use that energy to actually put their negative thoughts into action. Including turning a gun on themselves—or others.

The definitive science showing how antidepressants lead to violence

Of course, I'm not the only medical professional who has now seen how antidepressants help incite violence.

In fact, last September, the prestigious *Public Library of Science* published a comprehensive examination of the link between SSRIs and violent crimes. And, not surprisingly, the researchers found that people who take SSRIs commit more of these types of crimes than those not on antidepressants.³

What was surprising to some medical professionals (but not me) was *how many people* on antidepressants are likely to be violent. The researchers found that young people age 15 to 24 were a whopping 43% more likely to commit homicide or other serious crimes if they were taking SSRIs.

And this wasn't just a tiny little study that can be easily dismissed by big pharma and big government. It was conducted in Sweden and involved 856,493 people—and every single violent crime committed in the country between 2006 and 2009.

Of course, Sweden is hardly the crime capital of the world (until the recent influx of illegal immigrants). America has the dubious honor of being the nation with the most mass shootings (but certainly not the only nation, despite what certain politicians like to claim). But it turns out the link between antidepressants and violence doesn't discriminate by geography.

The Alliance for Natural Health recently reported that out of 23 high-profile violent crimes in the U.S. over the last few decades, about half of the perpetrators were taking or had just recently stopped taking antidepressants or antipsychotic medications.⁴

And the news is just as grim for antidepressant-related suicides in the U.S. In fact, a recent editorial in the

British Medical Journal shared the disturbing information that the FDA underreports these types of suicides.⁵

For example, in one study, FDA data showed there were only five suicides in 52,960 antidepressant users. However, the FDA only counted suicides that occurred within 24 hours after a person stopped taking an antidepressant.

But every medical professional knows it can take weeks for the toxic effects of antidepressants to leave people's systems after they stop taking the drugs. And, of course, many suicides happen when people are still taking antidepressants—which really defeats the whole purpose of taking them in the first place.

So when you broaden the scope of the FDA investigation to account for these facts, the real number of antidepressant-related suicides is *15 times higher* than what the FDA reports.

The government's feeble attempts to "warn" the public about antidepressants

These studies aren't news to the U.S. government. The FDA knows antidepressants are dangerous. So much so that in 2005, it required that SSRIs carry a "black box" warning. And in 2007, it expanded this warning to an even broader range of antidepressants.

Once you get past the bureaucratic mumbo-jumbo, this black box basically says that antidepressants may give children, adolescents, and young adults increased risk of suicidal thinking and behavior. And may also worsen their depression.

Unfortunately, the black box doesn't mention how antidepressants increase homicidal thoughts and actions—despite the definitive research I just mentioned.

And how these violent tendencies affect people of other age groups as well.

Ideally, the FDA's black box warning should be like going on "death row" for a drug. It should be the last step before the agency takes the drug off the market—and finally puts it out of our misery. But in far too many cases, the FDA issues the black box and the drug remains

on the market for decades.

Granted, some antidepressants are safer than others. But the FDA certainly doesn't seem in a rush to take any of these drugs off the market.

Other ways antidepressants can kill you

The FDA's black box also completely ignores antidepressants' many scientifically proven side effects. The most dangerous of these include:

Birth defects. The CDC recently conducted a study of over 27,000 mothers of children with birth defects. The researchers found that the women who took Prozac and Paxil during their first trimester of pregnancy, or the month before they became pregnant, were substantially more likely to have children with significant birth defects.⁵

Specifically, they found that these poor children had a *two to 3.5 times* greater risk of obstructed blood flow from their heart to their lungs, holes in their heart walls, missing pieces of their brains and skulls, and irregularly shaped skulls. Abdominal wall defects were also a possibility, although the evidence wasn't as strong.

This isn't the first study linking birth defects to antidepressants, but it's one of the largest and most definitive.

Bleeding in the skull. A recent study of about 4 million South Koreans found that those who combined *any kind of antidepressant* with NSAID painkillers like aspirin or ibuprofen had a staggering 60% chance of bleeding inside their skull.⁶ This can lead to strokes, brain damage, or even death.

And another study of 2,500 people with an average age of 59 found that these bleeds could start as late as four years after someone first took an antidepressant. Unlike the Korean study, this study found that antidepressants alone could cause brain bleeding, and SSRIs posed the biggest risk. The researchers concluded that doctors should be careful about prescribing SSRIs—especially to older people.⁷

Breast cancer. Research shows that 70% of cancerous

breast tumors increase in size when estrogen levels rise.⁸ And Paxil has been found to have an estrogen-like effect on the body.⁹ So it's certainly not a leap to assume that taking Paxil can increase a woman's risk of breast cancer.

And since SSRIs have the same basic mechanism of action, it's a (un)safe bet Prozac, Zoloft, Lexapro, and Celexa can escalate your risk of breast cancer just like Paxil does.

Heart problems. In 2013, I reported on research showing that the SSRIs Celexa and Lexapro are linked to dangerous heart rhythm abnormalities.¹⁰ And we've known for decades that older types of antidepressants called tricyclics (Norpramin is the most common brand) can cause sudden cardiac deaths.

Fortunately, you don't see many prescriptions for tricyclics these days. But even though the FDA issued a warning about Celexa's heart issues in 2011, many uniformed doctors still encourage their patients to take it.

Liver damage. In an exhaustive study, French researchers found 158 different scientific reports since 1965 that showed that up to 3% of people who took antidepressants had signs of liver damage.¹¹

The researchers discovered that this damage could potentially begin within a few days of first taking a wide variety of antidepressants. And older people appear to be most vulnerable—no matter what dosage they took.

Mental health problems. Ironically, the very drugs designed to alleviate one mental condition may actually create more mental conditions.

There is evidence linking antidepressant use to anxiety psychosis and mania. And, as I wrote in an October 2014 *Daily Dispatch* ("Antidepressant drug shuts down brain connectivity within three hours"), research shows that just a single dose of an SSRI can reduce connectivity in the brain. Meaning these drugs could create an emotionally blunted, lobotomy-like effect in some people.

Why antidepressants don't work

All of these risks make anti-depressants just as dangerous as another darling of the drug industry: statins.

You know how detrimental statins are for your health. In fact, I've written a whole report about it: *The Insider's Guide to a Heart-Healthy and Statin-Free Life*.

But at least statins actually do what they're supposed to—lower cholesterol. In most cases, antidepressants don't even deliver on their basic promise to alleviate depression.

That's because antidepressants are based on backward science—a flawed understanding of the brain's chemistry. According to the theory that spawned SSRIs, depressed people have low levels of serotonin—the supposed “feel-good” neurotransmitter—in their brains. So SSRIs are designed to help increase the serotonin available to the brain.

But a recent study argues that depressed people actually don't suffer from low serotonin.

The researchers reviewed 50 years worth of studies and discovered that the brain releases more serotonin when people are depressed.¹² So, according to this theory, it may be more appropriate to lower serotonin levels than to increase them!

The surprising way depression may help you

I've always believed that measuring mood based on the levels of only a single chemical in the brain is a pathetically inadequate way of understanding or trying to address the mind or the human condition.

After all, depression has a variety of causes. You may be susceptible to seasonal affective disorder (SAD) caused by long winter days without sunshine, like now. You may have thyroid disease or another hormonal condition.

And there's a theory I've always supported: Depression may be an evolved emotional response to complex problems. In essence, it may be the body and brain's natural way of coping with stress or emotional trauma.

In fact, studies show that mildly depressed people can more accurately assess circumstances and dangers...and deal with them more effectively than people who don't suffer depression after a trauma.

But rather than help their patients tackle depression in natural ways that actually address the cause of the problem—instead of just the symptoms—many doctors just reach for the easy, one-size-DOESN'T-fit-all solution: antidepressants.

So it's no wonder that so few people who are prescribed antidepressants actually get relief. A single, “simple-minded” pill can't “cure” a complex disease like depression.

Of course, that's just the way big pharma likes it.

How depression is the perfect condition for big pharma

Antidepressants are a multibillion-dollar business for drug manufacturers, so they just keep inventing more and more of these mostly useless and dangerous pills.

In fact, depression may be the perfect condition for big pharma: incurable, common, long-term (even with these so-called “treatments”), and involving multiple medications.

And contemporary psychiatry's relationship with the drug industry has created a pharmaceutical mindset to treat mental illness. In fact, a few years ago, researchers discovered that three-quarters of psychiatrists who write the definitions of depression used in the standard psychiatric practice manual have links to drug companies.¹³

Even though, as I wrote in a February 2014 *Daily Dispatch* (“How lackluster drugs become blockbuster drugs”), a mother lode of unpublished studies on antidepressants conducted by big pharma itself showed “little evidence to support the prescription of antidepressant medication to any but the most severely depressed patients.”

But here's what can help...

My 7-step plan to treat depression naturally—INCLUDING my Triple Nutrient Cure

In an October 2014 *Daily Dispatch* (“Prozac nothing more than a costly placebo”), I discussed a study that

Even if you're not depressed, your doctor may still prescribe antidepressants

In recent years, big pharma has developed a problem with its antidepressant cash cow. The patents on flagship drugs like Prozac and Paxil have expired. So guess what the drug industry has done?

It's *created new conditions* that antidepressants can supposedly treat. And new patents for old drugs.

For example, I told you in the September 2014 *Insiders' Cures* ("Urgent warning for women!") how big pharma is now marketing paroxetine (better known as Paxil) for menopausal symptoms under the brand name Brisdelle. So basically, the drug company just changed the name from Paxil to Brisdelle and voila—a new billion-dollar patent for the same drug.

And that's not the only bait-and-switch technique big pharma has pulled regarding antidepressants. Recently, *Scientific American* reported on the rise of so-called "all-purpose" antidepressants.¹⁸

This fascinating article pointed out that studies show that 25 to 60 percent of SSRI prescriptions are written for conditions that have *nothing to do with depression*.

The list of health issues SSRIs are supposedly able to treat is staggering. Arthritis, fibromyalgia, nerve pain, irritable bowel syndrome, autism...even premature ejaculation.

Based on this evidence, is it any wonder why so many people take antidepressants these days? Busy, distracted doctors, prodded by big pharma, are treating these drugs like the "tonics" that used to be sold by snake-oil salesmen—designed to cure anything that ails you.

showed that it didn't matter whether depressed people took a placebo or an antidepressant. What did matter was whether the person thought the treatment would work before it began. Meaning that the placebo worked just as well as the drug simply because a person believed it would.

In other words, don't underestimate the power of your

own mind when it comes to alleviating depression. Or any other illness, for that matter.

That said, let's take a closer look at my seven steps to alleviate depression.

Talk therapy. Before antidepressants were invented, people used to fight depression by talking about their problems. But now, psychiatrists think they can replace this proven method with a pill.

They're wrong, and research proves it. Recently, Danish researchers published a study involving about 5,000 people who were so severely depressed that they had attempted suicide. The study participants were divided into two groups. The group that underwent only six to 10 psychological counseling sessions had 26% fewer suicide attempts over the next five years, compared to the group that didn't have any counseling.¹⁴

So if you're depressed, talk about your problems. A licensed counselor is ideal, but there are also benefits in talking to your family, friends, or clergy.

Light therapy. Spending time in front of a light box is an effective approach for people with seasonal affective disorder. And now a new study shows it may also alleviate other types of depression.

Researchers divided 122 people with major depression (that wasn't seasonally related) into groups. After eight weeks, 40% of the group that got 30 minutes a day of bright light treatment was no longer depressed. But only 20% of the people who took Prozac had the same result.

You can buy light boxes at drugstores for \$100 to \$300. Some insurance plans cover the cost. I recommend sitting in front of your light box half an hour a day shortly after you wake up—perhaps while eating a healthy breakfast.¹⁵

Spending time in nature. Many studies show that getting out in the fresh air can improve your health and help reduce depression. And in a March 2015 *Daily Dispatch* ("Trees may hold the secret to a happier life"), I wrote about a study that showed that Londoners who live on streets with the most trees take the fewest antidepressants.

Behavioral therapy. Research shows you can actually

turn negative thoughts into positive thoughts. Some common ways to do this include:

- Making a to-do list every day. This helps you feel in control of your life and gives you a sense of achievement when you cross things off the list.
- Making an "I'm thankful for..." list. Gratitude is one of the healthiest feelings, and can give your mood a positive anchor.
- Creating something. Writing, drawing, photography—anything that engages your senses creates an opportunity for positive feelings.
- Listening to music. Cheerful, soothing sounds give your brain something to concentrate on other than negative thoughts.

Exercise. Countless studies show that simply getting out and moving helps lift depression.

In fact, in one study, researchers gathered 126 people who had been taking SSRIs for at least two months but still felt depressed. But after four months of mild exercise, nearly one-third of the people reported that their depression had disappeared.¹⁶

Eating right. Last year, *finally*, mainstream psychiatrists admitted in a major medical journal that good nutrition can prevent and even treat mental health problems, including depression.¹⁷

Of course, I've been saying that for decades. Here's my simple, clinically proven plan to significantly reduce your risk of depression (and improve your overall mental and physical health):

- Cut out sugars and processed carbs like white bread and pasta
- Eat 7-8 servings of fruits and vegetables a day
- Eat protein with every meal. Research shows the top mood-boosting proteins are meat, eggs, seafood, and organ meats
- Include healthy oils like olive or nut oils in your diet every day

The Triple Nutrient Cure. The following supplements have been proven in hundreds of scientific studies to help fight depression, but also many, if not all of the conditions antidepressants are currently being prescribed to help.

By incorporating these three powerful nutrients into your daily routine, and thereby overcoming a possible deficiency within your body, you could begin to turn the tides on depression for good.

Here are the specific recommendations for the Triple Nutrient Cure...

1. Vitamin D. 10,000 IU a day

I recommend having your vitamin D levels checked every 12 months through a routine blood test. Your doctor will order the test during your annual check-up. But between visits, and especially at the end of a long, dark winter like this one, you should keep an eye out for 10 signs you may have a vitamin D deficiency.

We know vitamin D helps produce adequate levels of serotonin, a critical neurotransmitter in the brain that produces feelings of well-being. And many solid, independent studies link low vitamin D levels with depression.

Evidence reveals low vitamin D with increased anxiety, which frequently accompanies depression. Aside from clinical conditions like anxiety or depression, vitamin D's effect on serotonin can impact mood in anybody. So if your mood is off, it may be a sign of vitamin D deficiency.

And it's not just *deficiencies* either. Research published in *Psychosomatic Medicine* revealed "vitamin D supplementation may be effective for reducing depressive symptoms in patients with clinically significant depression."¹⁹

When researchers tested vitamin D supplementation against depressive symptoms of 441 overweight subjects, they saw a relation between serum levels of vitamin D and symptoms of depression. Supplementation with high doses of vitamin D seems to alleviate these symptoms.²⁰

And for severe mental disorders such as bipolar disorder, schizophrenia, and impulsive behavior, research has shown vitamin D along with omega-3 fatty acids may help prevent and modulate the severity of brain dysfunction.²¹

And that's only the beginning. Researchers have shown congestive heart failure, high blood pressure, chronic pain, muscle weakness, and respiratory illnesses can all be linked to low levels of vitamin D.

2. B vitamins

I recommend a high-quality B vitamin complex that contains at least 200 mcg of folate, 50 mg of B6, 12 mcg of B12, 50 mg of B2, and 50 mg of choline.

Even though you find B12 in foods like eggs, red meat, and milk. These are all the things we've been told we should avoid. So millions of men and women think they are following doctor's orders by limiting eggs, red meat, and dairy but they then go on to develop a B12 deficiency. And they don't even realize it because most doctors don't test B12 levels unless there's a problem.

But it's a huge problem for your brain, mood, and overall neurological health.

B vitamins offer many brain benefits — including preventing and reversing dementia and age-associated brain changes. In fact, a new study shows brain levels of vitamin B12 do decrease with age, but they are prematurely low in people with autism spectrum disorder and schizophrenia.

In fact, B vitamins are so important to brain function, they're called "neurovitamins" in Europe.

The American Journal of Clinical Nutrition reported that in elderly adults, high total intakes of vitamin B6 and B12 are protective against depressive symptoms.²²

And the *Journal of Psychopharmacology* found low B12 status is a great indicator of major depression, but also oral doses of both folic acid and vitamin B12 should be tried to improve the treatment and outcome in depression.²³

3. Omega-3 fatty acids. 1-2 grams of high-quality fish oil daily

Many experts consider omega-3s one of the keys to the Mediterranean Diet. And a number of studies link the Mediterranean diet with mental health benefits. In fact, recent studies show adults who follow the Mediterranean Diet most closely for four to five years had a 40 to 60 percent reduced risk of depression.

Further, research published in the *Journal of Clinical Psychiatry* found a direct correlation between the severity of anxiety and levels of EPA and DHA levels within the body. The lower, the more severe.²⁴

And when one study compared omega-3's oils directly to antidepressant—reviewers wrote, "our review finds comparable benefit."²⁵

And this is an all-natural treatment that has been tested against antidepressants—readily available to you at a fraction of the cost.

The Triple Nutrient Cure is powerful because each component supports the brain and keeps it healthy... which fights depression at the root of the cause. And that is something none of the pharmaceutical antidepressants can do.

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