

PROZAC – NOT A MIRACLE

CURE by Ann Gerhardt, MD (subscribe to DrG'sMediSense at www.medisense.com (07/2006))

A recent article in the Journal of the American Medical Association “proved” what eating disorder practitioners have known for a long time – that Prozac does not prevent relapses of eating disorders.

Prozac and other SSRI anti-depressants are used to treat people with eating disorders because these patients also have underlying psychiatric disorders. They don't decide to starve or gorge food then vomit because they are normal, well-adjusted people with nothing else to do. They almost always have depression, with varying degrees of bipolar, obsessive-compulsive, psychotic and substance abuse disorders.

Prozac and other anti-depressants help a patient break through the paralysis of denial and addiction to their disordered eating. These drugs often help to prevent suicide, which is the leading cause of death in anorexics.

For some, the anti-depressants induce a ‘honeymoon’ period, during which they feel fewer urges to binge and purge. After that, problems with food return to a variable degree until therapy succeeds in moving the patient past the need to use food for psychological reasons. Using food, via either starvation or bingeing, as a coping mechanism can't be prevented by a drug: It only stops when a person can respond to life stress without the need for an external coping mechanism or when they choose a different addiction.

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