



Fast Acting Nutrition and Lifestyle Solutions for Chronic Anxiety

Guest: Trudy Scott

Niki Gratrix: Hi everyone, this is Niki Gratrix: and welcome to the Trauma and Mind Body Super Conference. And in this episode, I'm very excited to introduce everybody to Trudy Scott.

Now, Trudy is a nutrition professional, she's an expert in nutrients and food and lifestyle solutions for healing anxiety. And she's really one of the world's leading experts on using amino acids, she's got great expertise in a condition called pyroluria we're going to talk a lot about that later.

She very importantly, resolved her own chronic anxiety issues that she had from childhood with the solutions and the practical recommendations that we're gonna be talking about in this interview. Super important interview.

Trudy has got a lot to offer in this, so she's also got the book there you can hopefully see the background, *The Anti Anxiety Food Solution*. This is a super book, most of us nutritionists have that in our reference library. That's how important it is in terms of guidance and how comprehensive it is.

So Trudy, you've also been an ex-president of the National Association of Nutrition Professionals, you're a sought-after expert on this topic. Thank you so much for being part of the Trauma Summit.

Trudy Scott: Well, thank you, Niki, it's an absolute pleasure to be here and I'm really thrilled to have this opportunity to share some of these powerful nutritional interventions that can have such a big impact and so quickly for so many people.

Niki Gratrix: Wonderful. And we're going to talk about amino acids, we're going to talk about pyroluria and then we're going to talk about practical, easy steps that people can take immediately to alleviate anxiety and their mood imbalances.

So get ready, put your seatbelt on, because there's going to be a lot of things that people can do immediately to start to help themselves.

There'll be a group of people listening on the Summit who might have had trauma in childhood, have had trauma, know they have anxiety, depression, and they may look at a lot of psychological approaches. But don't realize how much nutrition, diet and lifestyle has to offer, and that if they put everything into place that Trudy's going to share, they could be 50 percent better, they could be 100 percent better.

So let's talk about one of the most powerful, quick, fast, life changing interventions that someone can do who's got anxiety. Amino acids, go for it.

Trudy Scott: Yes. So amino acids are precursors to brain chemicals or neurotransmitters. So think serotonin, think GABA, think the endorphins. And what they do is they help to raise levels of these neurotransmitters so we can feel better.

And what I do with my clients is use them on an individual basis and used according to each person's unique needs. So someone may have signs of low serotonin then we'll use a specific amino acid.

If they've got signs of low GABA, then we'll use the amino acid GABA to raise the GABA levels. And the best way to figure out where your deficiency is, is to look at the symptoms and then do a trial and see how you do.

So it's very simple and you get feedback right away. So the great thing about the amino acids is you get results right away. And what I do is a trial method so I'll have someone look at the questionnaire, we'll look at their symptoms, we'll do a trial of the amino acid, and you'll get results within five minutes. And a lot of people think, no, that's impossible. There's no way you could get results so quickly, but you really do. And the way you do that is to use them opened up onto the tongue and you get feedback pretty quickly and then you adjust accordingly.

So I'm happy to go through each of the different areas one by one, and we'll talk about the different symptoms of each of the neurotransmitter deficiencies, and which of each of those amino acids are.

When I'm working with someone and have them fill in this questionnaire of symptoms and we'll look at low serotonin, low GABA, low endorphins, you'll also look at low blood sugar and low catecholamines. And I'll say which area resonates with you the most and we'll tackle that one first.

So if they say to me, I've got this worry in my head and I've got this ruminating thoughts and I can't switch my mind off, and I've got panic attacks, they will start with low serotonin.

If they've got physical tension and they can feel it in their body and their neck, they will start with low GABA. So it really depends on each person and a lot of people will have deficiencies in all those areas. But if we start with low serotonin, should we start with that one first?

Niki Gratrix: Yes.

Trudy Scott: So low serotonin, there's a strong correlation with trauma, of course, because if you've had some kind of trauma, you've got those ongoing fears, you may be reliving the situation, you may be reprocessing things that have gone on in the past, you may feel overwhelmed by everything. Those are classic signs of low serotonin.

The other things that we see with low serotonin are panic attacks, phobias, afternoon and evening cravings of each of the neurotransmitter deficiencies is a cravings or an addiction aspect. And with low serotonin, it's afternoon and evening.

We also see irritability issues, anger issues, insomnia, PMS and any kind of hormonal imbalances, TMJ and pain issues as well, and digestive issues. So these are all classic low serotonin issues.

So if someone comes to work with me or they look at the book or they're doing the questionnaire on their own. They would look at some of those symptoms and say, that sounds like me. That sounds like me, I can relate to that. Let's do a trial of the amino acid that helps to raise serotonin and the amino acid in this case is either tryptophan or 5-HTP.

I usually start with tryptophan the starting doses, 500 milligrams. Some people do better on one versus the other. So some may do better with 5-HTP and the starting dose for that is 50 milligrams. And I'll have them pick two symptoms on their questionnaire and rate them on a scale of 1 to 10.

So they may say, well, I've just got this, I can't stop thinking about this issue, I'm worrying about it so much, it's a 9 out of 10. And I just feel anxious, overwhelmed the whole time, it's also 9 out of 10. And then I have them trial the amino acid, tryptophan and I like to start with tryptophan. And if that doesn't work, then we'll go to 5-HTP, but I'll have them trial the tryptophan by opening up the capsule onto their tongue there and then, if I'm working on the phone, they'll do it over the phone, if I'm working in person we'll do it there and then. And within 5 minutes they should be able to say, Wow, I can't believe it, I'm feeling much better. And I'll say, well, what about that worry that you were thinking about, that thing that you were concerned about? Oh, haven't been thinking about it.

And they'll often say to me, well, maybe it's because I'm here with you, because I'm seeing someone's caring for me. I'm seeing someone's taking an interest in what's going on with me. So there is a little bit of disbelief that it could work that quickly. But the best way to determine if it is going to work if you're skeptical, is to try it yourself, it really does work.

I remember working with a young girl of 11, when I first started working with the amino acids and she had reactive attachment disorder, very, very severe anger issues. She had insomnia, anxiety, immense really intense cravings for sugar. And she had no idea, she didn't know anything about the placebo effect, she didn't know anything about what we were doing. And I was working with her mom and I talked to her about whether she would consider giving up the candies that she loved. She just loved colored candies and what she considered giving up the bread and. No, no. Didn't want to talk about it, she was angry and she was in a swivel chair. She turned her back on me and she didn't want to talk about it. So I continued to talk with her mom, we figured out, yes, it looked like low serotonin might be an issue. And I said, "could we try some tryptophan with her?" And her mom said, "yes." And I gave her 100 milligrams of a tryptophan chewable. I like to start on a much lower dose with children, typically it's 500 with her, I tried 100 milligrams. And I said to her, "will you try this and then we'll talk a little bit later." And I gave her the 100 milligrams of the chewable tryptophan and she still didn't want to talk to me, but she chewed this amino acid. And within about 5 or 6 minutes, she turned her chair round, she looked at me and she

smiled and she said, "yes, I can do it." And she was now engaged, she was interested, she was no longer angry. And she said, "yeah, I can get off the sugar." And with her the parents didn't have a lot of money to spend. It was adding in tryptophan, it was getting on a gluten free diet and we'll talk about that a little bit later as another approach. She was low in iron, and that's a cofactor for making serotonin, so we made sure that she was getting enough iron in her diet. And those three things completely turned this little girl's life around and her parents, of course, as well.

But that, to me, was a turning point to show, for anyone who's skeptical that someone who's got no idea that these amino acids could work and can work as profoundly, just has to try them and just see those amazing results.

Niki Gratrix: That's amazing and so very interesting. What about people who might be on meds right now, just so that you obviously say something is super exciting. They might want to go and try stuff and they are already on a serotonin reuptake inhibitor SSRI or something like that?

Trudy Scott: Yes, good question. So there are some contraindications with the amino acids and certainly with anything that raises serotonin levels, you've got to be worried about potential serotonin syndrome. So using tryptophan or 5-HTP in conjunction with an SSRI, one of these antidepressants has that potential.

So when I'm working with someone, I will only work with someone and have them use tryptophan if they are only on one SSRI and then with permission, the doctor who's prescribed the antidepressant. And then I'll have them move the SSRI to the morning because we want to dose tryptophan mid afternoon and evening and it needs to be 6 hours away from the antidepressant.

So working in conjunction with the prescribing physician and doing it 6 hours apart.

Now I will say, Niki, that there is research showing that, I think two studies show that they're actually added tryptophan with someone who was taking an SSRI to make it more effective. And there is not one study that has shown that the combination of an SSRI and tryptophan has caused serotonin syndrome. But we do just err on the side of caution and be aware that there is this possibility because it is very serious when we've got too much serotonin being produced.

Niki Gratrix: Lovely. And obviously people should never come off any medications without going specifically to see that prescribing licensed medical professional. But I imagine you could also use some of these amino acids to help somebody maybe who, working with their GP also to come off their meds. Would it be better to help someone to do that, for example, working with the GP?

Trudy Scott: Absolutely. And I'm so glad you said work with your doctor and it needs to be a slow taper. And often, I have a lot of people come to me, they hear about the work that I do. They've now got side effects from the SSRI. They only work for about 50 percent of the population who use them, and then even those people who find benefits start to get side effects.

So a lot of people want to get off their medications and often it's a matter of educating the doctor who may not be aware that they are amino acids, and may not be aware of how effective they are, and may not be aware of the 6 hour window. So I'll work with them and then we will get the okay from the GP or whoever their prescribing physician is, and he will monitor as they're tapering. And I think it's really important to hear, a lot of people hear this and think I want to stop my medication.

I find the best results when we address all the nutrition deficiencies first. So get the diet sorted out, get the gut sorted out, get all these other nutritional deficiency sorted out that can impact mood and then start a taper. And it needs to be a really, really slow taper.

Benzodiazepines have a strong reputation for needing a super slow taper, sometimes six months, sometimes a year. A lot of time with SSRI not much time goes into considering that maybe we should do a slow taper and for a lot of people that slow taper is really important.

So often even educating doctors who may not be aware, I think is really, really important. So it's a team effort, it's working with your client, with the doctor and with the nutritionist all working together. And I'll say to my clients, give your doctor a copy of my book and they'll read it and they'll be engaged and excited. Sometimes they may not be, sometimes they'll just be hands off and say, look, I'll monitor the meds and I'll have your nutritionist monitor the amino acids. And sometimes I'll say, look, I don't think it's going to work.

So just be aware you might get different feedback from the doctor.

Niki Gratrix: Okay. Wonderful. That's absolutely brilliant, it's great already. OK, next. I wanted to speak about a really important topic, this thing called pyroluria. This is a biochemical condition and this can be a cause of so much anxiety. And people might be thinking it's trauma from childhood and they probably have got trauma from childhood, that's there. But there's also this biochemical component and I think it's an epidemic.

So let's talk about it, when we say this thing called pyroluria, what is it and what are the implications? If somebody may not realize they've got it. I think most of the people listening have got it. So what are the symptoms of it? What is it?

Trudy Scott: So pyroluria it's very common for a start. The prevalence, it's long been considered a genetic condition that causes social anxiety. And there's a number of other traits that we'll see with pyroluria, the classic is being fearful, anxious since childhood and having this kind of inner tension where you hide your feelings and you push through and you deal with it.

I have it, I just grew up thinking, well, I'm socially anxious, I didn't really have a term for it. I just knew that I was uncomfortable in social settings. I preferred the company of one or two people rather than big groups, so these are the classic signs that we would see. Some people have bouts of depression and exhaustion. You are very sensitive to alcohol, to medications, poor dream recall is classic so either having no dreams at all or having nightmares. And these are a lot of things that Dr. Carl Pfeiffer identified when he was working with schizophrenics in the 1970s. And he put all these symptoms and traits together and said

people who have this condition have a lot of these traits and symptoms. And I say traits and symptoms because some of them are a little bit unusual.

One of them is coming from an all-girl family. So having look-a-like sisters coming from an all-girl family, it can also be if you're a boy, you've got mostly girls in your family. Maybe your mom has got mostly sisters in the family. Other things that we see are not really liking breakfast in the morning. So having nausea often and not really liking breakfast in the morning. Having white spots on your nails and this could be because of low zinc.

So there's specific nutrients that are, and we'll talk about those in a second, that tie into each one of these different symptoms or traits.

Now, when I wrote my book, *The Anti Anxiety Food Solution*, I looked at Carl Pfeiffer's work, I looked at Joan Matthews Larson's work. I consider her a pioneer in the work of a pyroluria. And I started to look at some of the feedback I was getting from my community and my clients, and I added a bunch of questions to the symptom questionnaire. And I use a questionnaire as well, you can do a urine test. It is useful, but there are a lot of false negatives. So I like to use a questionnaire and then use the response to the supplements. And right now, I've got 47 questions on this question. It's on my blog and it's in the book. People do the questionnaire and then we use the nutrients to try and shift some of those emotional symptoms.

I'll just give you a few more, because I'm sure people are listening to some of these things that I'm talking about and thinking, this could be me or this could be a client or a patient that I'm working with. I have a lot of practitioners say, "wow, when I heard about that, I thought about all of this person and that person and that person who it could apply to."

The other thing that we see is joints that pop or crack or ache. So any kind of physical pain issues are very common, very fair skin and maybe prone to being sunburned is very common, not liking proteins. So often vegetarian and that can be a sign of low zinc and then sensitive to bright light or bright noise. And then another classic thing is pain, like a stitch in your side when you run. And I remember as a kid always having that stitch in my side when I ran. And then, of course, we've got a gluten sensitivities, PMS, neurotransmitter imbalances, a very common one is, and I always say this when I do my presentations and I'm in a big hole, I'll say all of you people on the outside of the room, I think you probably have a pyroluria. Because pyrolurics don't like to be sitting in the middle of a room, in a restaurant or in a conference room. They all like to sit on the edges rather than sit in the middle. And when I say that in a big hall, everyone just laughs and they say, "yes, you're absolutely right." So that's unusual things that you might not think about.

The other thing that we'll see is stretch marks, crowded teeth, bad breath, prone to skin problems like eczema or psoriasis or acne. Very common is early graying of hair, a lot of people with pyroluria can say, yes, I went gray when I was 25 or I started to get gray hair when I was 25. You can see I have lots of gray here for a long time. So these are, this is a very, this cluster of symptoms. And there are nutrients that can alleviate some of this and I know you've got some input that you want to share about the trauma aspect.

But before we go there, any questions on what I've been talking about?

Niki Gratrix: Yeah. Brilliant. And so just specifically, biochemically. If you have this condition, what are the lost nutrients? And therefore, what essentially you did is you took the nutrients and it resolved your emotional anxiety.

Trudy Scott: The social anxiety. Yeah, absolutely.

So the nutrients are zinc and vitamin B-6. And what happens is when you're under a lot of stress and pyrolurics are more prone to the effects of stress. So if there's some kind of trauma or there's fires or if there's a pandemic going on, they are more prone to those effects.

So what happens is they dump their zinc and their B-6, so then their symptoms get worse, so it becomes a vicious cycle. For someone who grows up with it, doesn't realize that they have it, and then they get on these nutrients zinc and vitamin B-6. The symptoms can resolve and they can start to resolve within a week, you can start to feel a lot better.

I remember one gentleman that I worked with, he was in his 40s. He had never dated in his whole life because he had such severe social anxiety. And within three weeks of being on the pyroluria protocol, he had his first date.

So the results are pretty profound, pretty quick. And the other nutrient as well as the zinc and the B-6 is Evening Primrose Oil it's an omega 6. And it tends to be low in this population of people and it helps absorption of zinc, so it enhances absorption of zinc. And as well as looking at the nutrients like the B-6 and the zinc, you've got to think about what might be affecting your zinc levels or your B-6 levels.

So if you're under a lot of stress, as I said, you're going to dump the zinc and the B-6. If you are a woman and you've got a copper IUD that's going to affect your copper levels, you're gonna have higher copper levels and therefore it's going to lower your zinc levels. If you are someone who's on a paleo diet and you're not eating any gluten and then instead you're eating a lot of nut breads made from nut flours, you may have a lot higher copper levels.

So you've got to think about things in our environment and our diet that can affect our zinc levels. A high consumption of sugar can affect our zinc levels, and that can in turn effect pyroluria. The interesting thing is fish oil is well recognized in the mental health community for helping with mental health, depression and anxiety. But in this population of people, fish oil can actually be detrimental because pyrolurics tend to absorb the omega 3s from the foods that they eat. So if they're eating grass fed beef, if they're eating oily fish, if they're eating nuts and seeds, if they're eating leafy greens, they're able to extract the omega 3s from those foods and they often don't need omega 3s, and I've seen that in test results.

So it's very interesting how we can completely change what we consider someone's personality, because there is actually a link between pyroluria and introversion, and that is considered a personality trait. And I've had a lot of people get on a pyroluria protocol and say I no longer feel like I'm an introvert.

Or if they, a lot of people get upset with that and they say, don't change me, I'm quite happy

as an introvert. I've got these good qualities as an introvert, but at least they can be an introvert who can go and socialize and not feel socially anxious.

Niki Gratrix: OK, brilliant summary. What I would just add, we talked about this in the pre-interview about, what I am seeing clinically with pyroluria and I'm getting that Dr. Dietrich Klinghardt, who is also part of the Summit as well, he's been writing about this for quite a while as well. I'm just seeing that I think that pyroluria is at epidemic levels because I think it can be, Carl Pfeiffer did say, can be induced by stress. But I think it can be, those kinds of people can be starting to get the kind of symptoms you talked about, not necessarily from childhood. But they start to notice they've become more stressed or not comfortable in social situations.

So actually thinking there is a sort of adult onset pyroluria and it is caused by stress, and you're going to lose your zinc, as we mentioned, the B-6 and these are the essential nutrients.

The impact is massive because as soon as you're losing zinc as you know, that's essentially disarming the immune system. You've got vitamin B-6, which is involved with methylation and methylation impacts everything. So Klinghardt has pointed out that he thinks that all the people with Lyme disease, chronic fatigue syndrome, Parkinson's, I think Alzheimer's is in there, ADHD. That essentially pyroluria triggered by stress then you get deficient in those nutrients, then you've got this whole range of different illnesses.

Heavy metal build-up and this is what I'm seeing most. You need your zinc and you need methylation to get heavy metals out of the body. So that's one point and the other, just to share clinically what I'm seeing is stress is a factor in this.

This whole Summit is basically showing people that everybody's stressed, because everybody has development Just about the ACEs study, adverse childhood event study showed that 67 percent of all adults have early life stress. We're not talking about trauma that is a one or discrete incidence. We're talking about failure to bond with key caregivers.

We have Dr. Diane Poole Heller, the world's expert on attachment, saying, yes, less than 50 percent of adults attach healthily. We've got 67 percent of all adults report adversity in childhood. So mental anxiety and instability is the order of the day.

So people who are skeptic about, oh, I don't think everybody's got pyroluria. In my experience, the whole point of this Summit is that we live in a chronically stressed society and the result of that can be pyroluria. That would explain why, yes, I think most people actually do have it and then all the issues from that.

So that's my little piece that I wanted to add, any comments that you would add to that would be great.

Trudy Scott: I agree 100 percent, it's a huge thing. And I do see it a lot in adulthood because you are more resilient when you're younger often. And then as you get into sort of perimenopause, hormones start to change and that can affect your hormones, and your neurotransmitters, so that can be affected. But the stress, the fact that we are under so much

stress these days with everything that's going on. That is such a huge factor and I totally agree with Dr. Kinghardt and Lyme disease and these other conditions.

I'm also seeing a connection between Ehlers-Danlos syndrome, selective mutism. You mentioned chronic fatigue, dystonia, which is a muscle contraction syndrome, where you're having muscle spasms.

I actually had someone in my community who is a musician and he could no longer play the guitar because he had these spasms in his hand. And when he's trying to play the guitar, his hand sort of goes into spasm like this. And just by chance, he went onto the pyroluria protocol because he had social anxiety. And lo and behold, his muscle spasms went away and now he's playing proficiently again.

So it's amazing how many downstream impacts that we see with pyroluria. As far as the original research done with these sort of what I would call that the old guard like Joan Matthews Larson and Abram Hoffer. They found that they initially said it was 11 percent of the healthy population. They found it in 40 percent of people with mood disorders. Joan Matthews Larson reports 30 percent in those with schizophrenia, 25 percent of people with alcoholism, and then also in Down syndrome, 71 percent and Down syndrome.

And my unofficial stat is of the woman that I work with, with anxiety and depression, about 80 percent, I would say and that's probably gone up now. When I first started working, I would say it was around 80 percent. I would say maybe about 90 percent, so it fits in with exactly what you're saying. I think it is way more prevalent than we realize. And to have such a simple solution, adding in these nutrients and reducing stress, we've got to try and reduce that stress as well, we can't just add in the nutrients. And the wonderful thing is zinc and vitamin B-6 are cofactors for so many things, like you mentioned methylation, for immunity, for detox, but they're also needed to make our neurotransmitters.

So to help us to make serotonin, they help us to make GABA, they're needed to help us make our hormones. So the ramifications are huge.

Niki Gratrix: Yeah. And the interesting thing is as well, I found that when I start bringing those nutrients in for my clients, we do have to pay attention that they might start getting heavy metal release. So the detox side of that, work with a practitioner that can help take you through a proper detox protocol with heavy metals. If you still feel bad taking, so you take B-6 and zinc and you're not feeling good it's possibly because you're now releasing heavy metals. Check in with the practitioner who's qualified, who can help you on a heavy metal detox protocol.

And the other last piece that I'd mentioned on this is to your point about stress. I found and this is the amazing thing, I thought that if I had pyroluria, I think there's a subgroup that may need to supplement for life and you've mentioned that. But what I found and this is the key and how it links to the Summit as well, those people who were adult onset, as I mentioned it in those terms, yes, they need to supplement to help get themselves back to normal and to get healthy again. But they will get deficient again if they don't deal with, say, unresolved stress and trauma from childhood.

Now, if they correct the nutrients and then do the other things on this Summit to help resolve the emotional stress that they're carrying around that's become part of their way of life. They will then not need to supplement anymore as long as they work on resolving the trauma, but also make things like vagus nerve stimulation a way of life, for example. So we've got to keep off the stress and resolve the stress that we're internally carrying with us. So that's what I'm finding, is that I've found a way to have people not have to supplement for life, as long as it's not being genetic and it was this type of adult onset. So that's the last thing I'll mention, that I've experienced and seen with my clients as well.

Trudy Scott: Great. And I saw the lineup of speakers and the topics and it looks fantastic, so there's gonna be so many resources for people.

I wanted to add one more thing related to the B vitamins. My colleagues, Bonnie Kaplan and Julia Ruklidge, they publish research on Broadspectrum multi mineral formula and they've looked at research, they've looked at anxiety and ADHD, but they actually published a randomized trial and it's called *A Randomized Trial of Nutrient Supplements to Minimize Psychological Stress After a Natural Disaster*. And they looked at folks who were traumatized in New Zealand after the earthquakes. And then they did a similar trial in Canada looking at folks who were traumatized from floods in southern Alberta and Canada. And they found that there was significantly less stress and anxiety when they were using this multi mineral broad spectrum formula or if you just looked at a B complex. So here we've got those B vitamins again that are having an impact. So it's pretty amazing what we can do with nutrients. It really is.

Niki Gratrix: It's so true. It's such there is so much promise and hope for people that's the point that we're giving people a smorgasbord of things to look at and say, well, maybe that'll help, maybe this will help, maybe it's pyrroluria or maybe it's super powerful what's on offer here from the naturopathic functional kind of nutritional diet, lifestyle approach?

Can we touch on say just some last pointers, maybe 4 or 5 pointers, things that people should think about if they've got mood disorders, anxiety, things that practically they can do, diet and lifestyle. The things that you look at and say, right, this could make a big difference, perhaps start with diet.

Trudy Scott: One thing that you said to me is so powerful and I totally agree, is eating for blood sugar control. And although I talked about how beneficial the amino acids are using tryptophan or GABA, or one of the other amino acids some people don't need the amino acids, not everyone needs them, not everyone needs to supplement. For some people, it's as simple as starting to eat real whole food. And Dr. Felice Jacka, she's a nutritional psychiatry researcher, if you Google nutritional psychiatry or you go to PubMed and you look at the research, there's now this term called nutritional psychiatry, and it's just eating real whole foods. And part of that can be also making sure that you eat according to your blood sugar control. And that is having protein throughout the day to keep your blood sugar even because when your blood sugar takes a huge dive, you can feel anxious, you can feel agitated, you can have poor focus, fatigued.

So just making sure that you're getting quality protein in the diet. And I'm a big fan of animal protein, so have quality grass fed red meat, wild fish, eggs, pastured eggs, getting

that quality protein in. And there's a big drive these days talking about fasting and I think intermittent fasting is great. So skipping breakfast and having a long time from your dinner time to the next meal. But when you first start out having breakfast first thing in the morning, I found it to be very helpful to help keep blood sugar stable, and it can make a huge difference.

So think about this term nutritional psychiatry. I mean, who would imagine that we would have ever come up with this term and making some of those dietary changes? Some of the other things that are key is getting off caffeine and a lot of people say my anxiety is too severe, caffeine obviously couldn't make a difference. And I can tell you time and time again, it's the one thing that so many of my clients hold on to. But getting off that caffeine can have a huge turnaround.

I like to quote one particular study where folks were getting therapy, they were on anti anxiety medications, nothing was working, they had them go off the caffeine and anxiety completely resolved. So they are a subset of people who are more prone to the effects of caffeine and other things are food sensitivities, I mentioned gluten right up front. That is a very common issue, we've got a lot of research on anxiety, social anxiety, schizophrenia, depression, even bipolar disorder.

So figuring out if gluten is an issue and it's a common issue, as you know, Niki.

And then all the other great things, exercise, getting enough vitamin D, getting outside, getting in nature. I'm a big fan of getting in nature and getting in sort of greenery, black forest bathing, which is a Japanese term where you get out to nature and you get exposed to greenery. And that can lower your cortisol levels, it can improve your mood, it can reduce anxiety.

And if you are indoors and you can't get out, as we've just been through this pandemic, a lot of people were isolating at home and looking at a poster of a green tree can be a stopgap while you can't get out. Having some indoor plants can make a big difference as well. So that greenery is really, really important. And then, of course, exercise. And if you can do the exercise outdoors, all the better. Every single exercise that you can imagine under the sun, from going to the gym to dancing, has research showing that it helps improve mood.

So I think the important thing is to find something that you enjoy and do it. I met my husband on a cliff face and we've spent 15 years rock climbing and there's even research showing that rock climbing can help with mood improvement.

So find something that works for you and get out there and enjoy it.

Niki Gratrix: What about magnesium?

Trudy Scott: Magnesium is a very common deficiency, thanks for bringing it up. It's needed as a cofactor to make our neurotransmitters as well, it's very calming and it's depleted by stress levels, so getting magnesium levels up. So for each person, it's finding what their unique needs are and addressing those unique needs. Not everyone will need to address low zinc, for example. Although I would say that low zinc is probably one of the most common nutrient deficiencies with anxiety.

The common ones are magnesium, as you say, zinc, iron, iron is a very common deficiency and can cause anxiety and ADHD and then B vitamins are very commonly low as well in people who have anxiety.

Niki Gratrix: Yes. And I think common sense. Some of these sound like common sense, like people will know they've heard some of these lifestyle factors. Exercise, sleep. We should talk a little bit more about the importance of sleep and the Harvard research behind that. But common sense is common practice and if somebody will just take a few things that you mentioned there and actually put them, just did them, just bring them into your lifestyle.

So what you mentioned there about a protein breakfast, having a good, some fats proteins at breakfast, don't skip breakfast. But maybe you also bring in some circadian rhythm management to help with sleep. So don't eat three hours before bed, maybe if you can do that with your blood sugar. These simple things like then getting outside activity during the day. When you start to build all these things together and you address nature deficiencies, too. You could be different, a totally different person, right?

Trudy Scott: Absolutely. And I'm glad you brought up sleep because sleep is something you could consider that as the anchor for so much of this. If you are sleep deprived it's going to make you more agitated and anxious and irritable, it's going to affect your immunity. We've now got research showing a very strong connection between good sleep and immune health. And the interesting thing is so many of the things that we've talked about today have a direct impact on sleep. If you've got low serotonin levels, you may have sleep problems. If you've got low GABA levels, you may lie awake feeling stuff intense at night. If you've got low zinc, you don't have the nutrients in order to make your serotonin and therefore make melatonin, which helps you sleep. If you've got gluten sensitivity that can cause low levels of serotonin and low levels of zinc, and therefore affect your sleep. You mentioned magnesium that can affect your sleep. You mentioned low blood sugar and how, that the fact that you don't want to eat too late. But if you have got low blood sugar, that's going to affect your sleep.

So there's, all of these things work together so beautifully and then we've got all the sleep hygiene. So don't sit on the computer late at night, be in a cold room, make sure you're in a dark room. I'm a big fan of having my clients use a mask to cover the eyes so it's really, really dark. So there's so much that we can do and we can have such a huge impact.

Niki Gratrix: Yes, that's so true and just drawing out with the sleep. It was life changing to me when I discovered the protein for breakfast, I was like, oh, I have more sustainable energy and I can think straight. And I'm sure there's a whole group of people being diagnosed with bipolar and actually, it's the blood sugar hypoglycemia issue, I'm sure that's happening.

So with sleep again as well. Things like, we have clock genes that are responding to environmental signals and it's things like temperature that you mentioned, cold room at night, things like light, exposure to light. I think just drawing out with the screen time, because I think that's now becoming another epidemic of getting the wrong light right before bed. We want campfire light, we want orange, so there's the blue blocking glasses. The blue light should be during the day, that's great, we want to be lifted by that. So the

timing of light was a big one as well. And this is Harvard, if people want to know about this it is called circadian rhythm work, it is Harvard backed research about how sleep deprivation is. It's going to cause mood disorders. It's going to generate a vastly increased risk of chronic complex illness when you have sleep issues as well, right?

Trudy Scott: Yes. And I love that campfire light at night, that sounds so lovely. Going back to what you said about protein at breakfast. I remember when I first started working with my clients before I was working a lot with pyroluria, I was trying to come up with inventive ways for them to eat protein at breakfast. Keep in mind that if you have pyroluria, you have this protein aversion and you have early morning nausea, and you don't want breakfast.

And my sort of work around was to have a smoothie in the morning because that's often more palatable. But what I started to find is once people got on the pyroluria protocol, the zinc, B-6 and the evening primrose oil, addressed the social anxiety then that aversion to protein and that aversion to breakfast, early morning breakfast went away.

So sometimes it's not an immediate result that we would see and we don't want to force it. We want to try and figure out if someone does have this ongoing nausea in the morning and they just can't tolerate breakfast. Then we want to maybe think about whether pyroluria is something that needs to be addressed.

Niki Gratrix: Lovely. I love that you just addressed it because that's the next step. Do you have any other tips for, this is the last thing perhaps, a lot of this is habit change, actually, isn't it? We have to practically do things. We have to change our lifestyle, vagus nerve stimulation I would also bring into that as a way of life, all the ways to stimulate the rest, digest, detoxify, feed and breed. The opposite of the fight, flight response, things like whether it's yoga, deep breathing, good positive social relations.

So with all of these things it's practical things that people need to bring into their life. They have to do it, we can't talk about it. You can listen to a Summit, but that's not going to make any difference that you have to actually do.

Any final tips on how people overcome those blocks? Love the little tip on how to help people who don't feel like eating breakfast in the morning, for example.

Trudy Scott: Well, the big thing that I find is, I agree habits are important and being motivated is important. And we hear how bad sugar is and we shouldn't have sugar and yet people are eating sugar.

So willpower will get the better of us most of the time and for a lot of people, they can white knuckle it and get through it because they've got that willpower. But that's where the amino acids are so powerful, you can make the changes easily, the dietary changes, getting off the gluten, getting off the sugar, even getting off the caffeine with ease because you're balancing your neurotransmitters and your brain chemicals, and now you don't have to use willpower and you don't feel deprived. So that's why I like to start with the amino acids, because firstly, it gives you hope from day one.

Secondly, it makes it easy to make all the diet changes without feeling deprived, without having to use willpower. And then also it takes away the overwhelm, so a lot of times when you are, have been through trauma, you're anxious, you're overwhelmed as well. And now you told, oh my gosh, I've got to look at my diet. I've got to think about breakfast. I've got to get rid of gluten. I've got to give up my coffee, which is this ritual that I love in the morning. All of these things, but when you use the amino acids, it just makes it so much easier.

So that's why I start with the amino acids. And then it gives us time and it gives us breathing space to address all these underlying factors, the other underlying biochemistry and then all of the psychological aspects that you talked about that are going to be covered by the other speakers on the Summit.

Niki Gratrix: Fantastic. That was wonderful. Thank you so much, Trudy. You run an amazing annual, biannual event, which is The Anxiety Summit where you go through all of this. And there's your book, tell people more about how they can stay in touch with you and find out, dig into more of this.

Trudy Scott: So my book, *The Antianxiety Food Solution* covers a lot of what we talked about today and it's DIY. You can take it and do it and figure it out on yourself, work with a practitioner if you need help. You can do a group program for me, some people like to be handheld through this.

Then I've got the Anxiety Summit, I'm doing the sixth Summit in November and the theme is Toxin's, Meds and Infections. And I look forward to interviewing you on that Summit, so we'll get to share your expertise on my Summit. And then I also teach how to use the amino acids and how to work with people with pyroluria to health professionals through the Anxiety Nutrition Institute.

So I want more and more people, more and more practitioners to be aware of the power of these nutrients for helping people with anxiety.

Niki Gratrix: And your website?

Trudy Scott: anxietynutritioninstitute.com

Niki Gratrix: Brilliant, lovely. Trudy Scott:, thank you so much. Just keep up the good work I have to say, it is life changing work and thank you so much for being so clear and I look forward to your next Summit as well.

Trudy Scott: Well, thank you so much for having me. And I look forward to sharing this with my community and tuning in to some of the other interviews. Thank you.

Niki Gratrix: Lovely. So thank you very much, everybody, hope you enjoyed this episode and got as much out of it as I think we did. So take care for now and see you in the next episode.