

The New Paradigm for Cognitive Health

by Albert H. Mensah, MD, BCIP

Psychiatric disorders have long been challenging arenas in the field of medicine. In the early days, they were often considered a form of celestial punishment for familial wrong-doings, or individual curses in the form of demonic possession. Thereafter, the idea of generalized internal dysregulation due to unknown causes (often believed to be due to parasitic infection or poisoning) came into being. Barbaric practices for treatment often included corporal punishment (to “beat” the affliction out of someone) with pain as the catalyst for healing. Leaching at one point was considered almost a panacea for all illness both mental and physical.

Thankfully, we have moved on from the “dark ages” of psychiatric treatment. Since that time, emotional instability was thought to be due to trauma of some type stemming from either parental or societal influences. Relationship challenges produced depression or anxiety. Long periods of sleep deprivation could induce schizophrenic changes.

Understanding “cause” was one issue, “treatment” was another. We sought assistance from our understanding of neurotransmitter imbalance and delved deeper into the realm of serotonin, dopamine, and norepinephrine manipulation to achieve symptomatic improvement. Tremendous research has yielded a quantifiably impressive armamentarium of psychiatric tools to battle mental health challenges and at least help keep patients stable if not functional. Categories of medications evolved

from antidepressants to anxiolytics to antipsychotics and on to atypical antipsychotics. Without question, many of these medications have proven functional for many people. Yet, for many others, the side effect profile proved to be too much to continue, or tolerances developed over time that necessitated dosage adjustment and often increase.

Despite all our efforts, little progress had been made in the realm of true cause and effect until pioneers like Abram Hoffer, MD, PhD, and Carl Pfeiffer MD, PhD, began to delve deeper into the world of molecular interaction and dysregulation. They began to re-evaluate the role of co-factors in biochemical reactions. What they discovered was truly amazing. Absolute concentration of co-factors such as vitamin C, zinc, vitamin B6 bore relevance to cognitive dysfunction. By evaluating chemical reactions in bio-synthetic pathways, these early pioneers developed treatment regimens that not only stabilized patients, but brought them back to thriving status, many without the use of pharmaceutical assistance. Patients with bipolar disorder and catatonic schizophrenia were normalized by correcting underlying imbalances that made these individuals susceptible to the triggers that produced these conditions. In other words, we now had insight into the areas of weakness in the biochemical “armor” that we all possess. The strength and capacity of an individual’s armor is not always predictable, but we now know how that armor can be made vulnerable due to biochemical imbalances.

In order to move forward, we actually had to re-evaluate certain foundational dictums of traditional medical training. We are taught early in medical school that vitamins bear little relevance outside of corporal health and that only minor concentrations are necessary to achieve systemic homeostasis. We now understand quite the opposite to be true. William Walsh, PhD, joined Carl Pfeiffer in his research and further elucidated the true capacity of *Nutrient Power* (which is the title of Dr. Walsh’s highly recommended book). He and Dr. Pfeiffer studied over 1 million chemical assays in over 30,000 patients with “mental illness.” Consistently, the same categories of chemical imbalances manifested that when corrected yielded positive, if not life changing, results for those treated.

I will never forget when Dr. Walsh once said to me, “Albert, a true scientist must be willing to throw away his or her most cherished belief when presented with truth to the contrary.” I was a particularly unflinching skeptic until, working with Dr. Walsh, I saw consistent healing with patients that traditional medical approaches could not begin to help.

Interestingly, this is NOT what I would call alternative medicine. This is a more comprehensive approach, looking deeper at molecular interactions that should be relevant to almost any subspecialty of medicine, but especially psychiatry, family medicine, internal medicine, and OB/GYN.

Let’s examine some case histories.

Case 1: Jeffrey, a 49-year-old man struggled with a great deal of inner

tension, stress intolerance, rage, and a propensity for alcohol “overuse.” He relates that he has always been this way and that it has taken its toll on his family. His wife told him that if he did not seek help, this would be the end of their marriage and she would take their two children and leave. We performed biochemical testing and discovered kryptopyrrole (KP) levels of 35 (N=10) and zinc level at 60 (N=90). We began a corrective nutrient protocol to treat the pyrrole disorder and zinc deficiency. Within three months, his symptoms had improved dramatically.

Let’s discuss the science. KPs are molecules derived from RBC destruction that under conditions of oxidative stress form strong molecular bonds with two key elements necessary for balanced neurotransmitter production i.e. zinc and vitamin B6. Without these two nutrients in the correct concentrations, serotonin, dopamine, and GABA synthesis is challenged. As a result, erratic mood swings, anxiety,

depression, rages and a vicious cycling of these mood states occurs. Many individuals with this condition have been misdiagnosed as being “rapidly cycling bipolar” and placed on medication when simple blood and urine tests are available that elucidate the true underlying cause and direct corrective and restorative treatment via more appropriate means.

Case 2: Carol, a 60-year-old female, presents with a 40-year history of severe depression, fatigue, anxiety, and fibromyalgia. She had been placed on several medications over time and was told at one point that her conditions were caused by her hormones earlier in life combined with emotional trauma and that little could be done to address said conditions. Upon testing, we found that Carol was an estrogen dominant female who had copper dysmetabolism. She had inherited the inability of her system to regulate copper. With treatment, she has not only normalized, but now shares how she is not sure that

she ever really knew what the emotion of “joy” felt like. She thought everyone experienced the world as she had in the past.

The science: copper inhibits three enzymes in the glycolytic pathway in the first phases of carbohydrate metabolism resulting in decreased ATP production and therefore decreased electron transmission in oxidative phosphorylation and the electron transport system-end result...fatigue. With regard to anxiety and depression, copper pushes dopamine into the norepinephrine pathway (fight or flight with nowhere to go and no discernible cause).

Case 3: Eddie (name changed to assure anonymity), a seven-year-old male, has a history of behavior disorder. Birth history was significant for prematurity at 28 weeks, secondary to maternal preeclampsia. His parents related a history of Tourette’s, dysgraphia, anxiety and impulsivity



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➤ that resulted in a special education placement in school. His initial biochemical profile revealed high copper levels, pyrrole disorder, low zinc, and over-methylation. One year after biochemical treatment, his father sent the following email to our office:

Just wanted to pass along some feedback I got during my son's IEP meeting on Monday. He is doing really, really well. No anger/aggression. He communicates when

he's frustrated and stays focused and on task. They are still working on some impulsivity but said it's mostly because he's always very excited, especially when he knows the answers. They even talked to him about putting him back in regular school because he is thriving! I'm so glad I took a chance on Mensah Medical; the protocol really works!

These are just a few examples of the clinical ramifications of biochemical

imbalances. I would posit that, in time, we will come to see that many "psychiatric" disorders are actually medical in nature – i.e. there is a testable, discernible cause that when addressed, symptom resolution and condition resolution occurs. The lines between quite a few of our sub-specialties is becoming blurred in reciprocal directions, all to the great benefit of our patients.

While we are eternally indebted to the rebellious Carl Pfeiffer for challenging the previous paradigms surrounding mental illness evaluation and treatment, I am personally grateful to my mentors, the great Robert Devito, MD, (neuropsychiatry) and the amazing William Walsh, PhD. Together they have changed and continue to change the world of science and medicine around psychiatric and cognitive health. Much credit also needs to be given to the ever-discerning Judith Bowman, MD, whose research and ongoing evaluations in the field of nutrient imbalances in women's health is unparalleled while her expertise in autism is similarly inspiring.



Dr. Albert Mensah received his undergraduate degree from Northwestern University (Evanston, Illinois) and his medical degree from Finch University of Health Sciences-Chicago Medical School. Following residency in family medicine, he completed additional fellowship training in academic development at John H. Stroger Cook County Hospital (Chicago). He is board certified in integrative pediatrics by the American Association of Integrative Medicine (AAIM). From 2005 to 2008, Dr. Mensah treated patients at the former Pfeiffer Treatment Center. Dr. Mensah co-founded Mensah Medical in Warrenville, Illinois, with Dr. Judith Bowman in 2008. The clinic specializes in the treatment of biochemical imbalances, and the cognitive (and physical) disorders caused by those imbalances. As a physician in this specialized field since 2005, Dr. Mensah has treated over 30,000 patients using all-natural, non-pharmaceutical, advanced targeted nutrient therapy. Dr. Mensah

currently serves on the board of the Walsh Research Institute, and as a faculty member of the Walsh Research Institute's International Medical Practitioner Education Program, training doctors around the world in the use of advanced nutrient therapy to treat biological and biochemical imbalances.

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