

Pure Facts

Newsletter of the Feingold® Association of the United States



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www.feingold.org

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How can parents help their ADHD child?

In the controversy over whether or not to use medication, some important issues are often ignored.

Focus on Mom

How Mom feels is important! Raising any child is challenging, but raising a child with ADHD symptoms can be overwhelming; how can anyone be a good parent under these stressful conditions? What makes matters worse is that we have found when a child has ADHD symptoms, at least one of his parents shares these traits as well. Mom will have a hard time parenting if she is experiencing the symptoms at the same time as her child.



The practice of blaming mothers for nearly everything has gone on for decades. At one time, autism was believed to be the result of cold, uncaring mothers, and asthma was said to be caused by overprotective moms. *Editor's note:* Yes, of course, there are bad parents out there, but I have found that the ones who struggle with the option of giving their child a drug are the best parents, not the worst.

Listen to your child

One size doesn't fit all; each family is unique, children are unique, and a therapy that works well for one child might not be a good fit for another.

If your child is on a prescription, find out how he feels.

Does it improve any of these?

- 1) The child's self-esteem and social interaction with other children.
- 2) His ability to learn. And is he able to retain the information he has learned while he is on it?
- 3) His quality of life.

In other words, is he happier? This seems to be the case for Lucas, the little boy described in the article on page 4.

Or is the effect similar to what another mom found? — also on page 4.

Does the drug cause:

- 1) Physical discomfort?
- 2) Unwanted thoughts or feelings, like his real self is not good enough?
- 3) Side effects like sleeplessness, depression, or lack of appetite?

Does the child resist taking the prescription, and if so, why? Have you tried taking one of the pills? If your doctor cautions you not to do this, ask why.

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Is ADHD a disorder or a collection of symptoms?

Research shows that symptoms of ADHD can be triggered by many things. They include: food additives, salicylates, too little sleep, celiac disease, sensory dysfunction, lead exposure, lack of beneficial bacteria in the gut, and the side effects of a medicine, as well as a deficiency in zinc, iodine, or other nutrients. Just being the youngest in a class has been found to increase the chance of a child being given an ADHD label.

The belief that it is a disorder, that the problem always exists within the child and not in the environment, implies that parents cannot identify and address the causes. But many thousands of parents have done just that, and their children no longer have the troublesome symptoms.



Neuroscientist Bruce Perry argues that ADHD is not a real disease. He notes, "It is best thought of as a description. If you look at how you end up with that label, it is remarkable because any one of us at any given time would fit at least a couple of those criteria."

The Feingold Association of the United States, Inc., is a non-profit organization that was founded in 1976. The program is based on a diet eliminating synthetic colors, artificial flavors, aspartame, and the preservatives BHA, BHT and TBHQ. Our mission is to increase public awareness of the effects of foods and additives on behavior, learning and health.

Special focus on drugs for ADHD

How can parents help? *from page 1*

Review what you have already done

Parents often believe they have “tried everything” to help their child, but this is rarely the case. “Getting rid of food dyes” or “cutting back on additives” is not the same as a trial of the Feingold Program, using the information that has been developed over the past 40 years. If it were easy to do this on your own, there would be no need for our support group.

Behavior modification techniques can be helpful, but they work best for the child who is actually capable of controlling his actions. Children who are in the throes of a reaction are not able to control themselves any more than the person who has consumed too much alcohol. (You can’t talk someone out of being drunk!)

If you’ve already tried charts with stars and they haven’t helped, it may be time to look elsewhere.



Consider this

If a normal child eats an abnormal substance (such as a petroleum-based additive), why wouldn’t he behave in an abnormal way? Can Cheetos, Kool-Aid and Froot Loops *really* be called food? If a human can thrive on a steady diet of synthetic chemicals, wouldn’t *that* be abnormal?

A child with celiac disease can have ADHD symptoms, but is the best option to add chemicals to his system or to remove gluten? And if his hyperactive behavior is due to a lack of sleep, isn’t the solution obvious?

Many things you can do

Take the steps you believe are needed, but at the same time, don’t overlook other options such as adding nutrients, a trial of removing milk, or looking into sensory therapy. There are supplements that have been found to work as well as drugs, especially omega-3 essential fatty acids. And there are a number of supplements now available that are specifically designed to reduce ADHD symptoms. Magnesium and zinc can make a big difference in a child’s behavior and ability to learn and so can an antioxidant like pycnogenol. All of these are beneficial for most people. (But if you use more than a modest amount, it is best to do so under the guidance of a qualified health care professional.)



Even if your child is taking medicine for ADHD, he still needs to eat and will still be exposed to chemicals in his environment, but, happily, it isn’t hard to minimize possible problems. Be alert for things that could be setting your child off. Something as simple as getting rid of plug-ins and scented candles and switching to a fragrance-free laundry detergent can make a difference.

As you do your grocery shopping, reject any product that has fake sweeteners (such as aspartame or Splenda) and fake dyes (such as Red 40, Yellow 5, etc.) This will result in a higher quality of food for your entire family.

If you eat out, consult the Feingold Association’s *Fast Food and Restaurant Guide*. The ingredients in most restaurant foods are shocking, but there are a growing number of good alternatives for eating out.

Focus on the doctor

Ask your child’s doctor to take a look at the studies that have tested non-drug options for treating ADHD symptoms. You will find brief abstracts of the major research on the Feingold Association’s web site (www.feingold.org). Print them out and take copies to the professionals who will be working with your child. If the doctor is unwilling to listen to your concerns, he/she might not be the best person to help you.

Has your doctor told you that there could be harmful side effects from ADHD drugs? If he/she is unaware of the “black box warning” required to be included with the medicine, then there is a problem. If the practitioner is aware of this information and does not share it with you, then there’s another problem.

If you opt for using medicine for your child, find a professional who will be able to help you in the event there are unwanted side effects.

We believe that parents and patients deserve to have complete, accurate information on all of the options available, that they should be able to choose the option that is the most comfortable for them, with the physician to advise them if and when needed.

“Just eat real food,” advises Dr. Jessica Hutchins of the Cleveland Clinic. “Food dyes ... have definitely been shown to increase hyperactivity in a subset of children. There are countless case reports in the biomedical autism/ADHD community of behavior improving with removal of the dyes.” She asks, “What is the harm in demanding better quality nourishment for our kids?”

I chose the easy way

The well-worn phrase, “If Mama ain’t happy, ain’t nobody happy,” certainly applies here.

There’s a common assumption that parents who use diet for their ADHD kids look down on those who use medicine, but that isn’t the case, certainly not for those of us who “run the store” here at the Feingold Association. We know that the most important consideration in helping a child is the primary caretaker — generally Mom. While most mothers have some difficult days, the mother of a child with behavior problems is likely to have nothing but bad days. To make her job even harder, she may find that the people she turns to for support are the very ones who blame her for the child’s problems. If the professionals she trusts assure her that the best option is to use a drug, and if it provides some relief, who can blame her?

No parent should feel guilty for doing what she believes is in the best interest of her child — or for doing what she needs to do in order to keep from going stark raving mad!

When I was in the throes of dealing with a badly-behaving daughter, I searched for help, for relief. TV gave me a break and so did her preschool, where I could have a temporary respite. (I even remember wishing I liked alcohol...I thought it would be nice to not be bothered by her behaviors.) None of the people I turned to for help suggested Ritalin because back in the 1970s, doctors did not believe that girls were “hyperactive,” and the term ADHD had not yet been invented.

Nobody knew what to do with this perplexing little girl, but if a doctor had told me there was a pill that would improve her behavior, I would have gladly used it!

When I heard of Dr. Feingold’s diet, I did not want to try it...why would I add even more stress to my difficult life? I did give it a half-hearted try but saw no changes. It was only when my husband found that it was the solution to his dreadful three-day migraine headaches that I gave the Feingold Diet a fair trial. My daughter’s behavior improved rapidly, and it was clear to me that changing some of the foods I bought was much easier than dealing with the out-of-control reactions caused by the old brands I had been using. In short, I chose the easy way! It didn’t take long before the program became routine and I was rewarded with a dramatic change in my daughter, and a husband who was no longer sick.



Laura doing well on Feingold

Having “walked in the shoes” of the stressed-out mom, I feel enormous sympathy for all of them. But my colleagues and I have a much different opinion of the doctors who dole out Ritalin, Adderall, etc. It isn’t that we are opposed to the use of medicine — drugs have saved countless lives, and many children appear to be helped by the ADHD products — what we criticize is the knee-jerk reaction of prescribing them without even considering the cause(s) of a child’s problems.

We criticize the prescriber who assures parents that there are no serious side effects even when he or she knows that it is a “Schedule II” product — a legal drug with the greatest potential for abuse.

We criticize the doctor who does not tell parents that there are effective non-drug treatments for ADHD. We fault them for not reading the medical research that supports these treatments, including probiotics, omega-3 EFAs and various vitamins and minerals, as well as the Feingold Diet.

We blame the Food and Drug Administration for spending our money to protect Big Pharma and the chemical industries, not the consumer.

We blame the past politicians who changed the rules so that the FDA gets paid by the drug and chemical industries, as well as the taxpayer. We blame the current politicians who trade their votes for campaign contributions. We blame the pharmaceutical companies who increase their profits by encouraging the use of drugs for babies and who prey on children in foster care.

We blame the small number of well-credentialed medical professors who create fake disorders and promote drugs for them, while they are rewarded with millions of dollars under the table.

We blame those doctors who promote the vaccines they have created because they earn money from every dose sold.

Others might blame Mom for doing what she feels she needs to do, but not us.

*Jane Hersey, National Director
Feingold Association of the US*

Not all children have the same reaction to drugs

“I Admit It: I Like My Child Better When He Is Drugged” by Kristen Mae

Kristen is a talented writer with a refreshing sense of humor who blogs at “**Abandoning Pretense.**” But one thing she is very serious about is helping her little boy, Lucas, who fits the ADHD diagnosis. She avoided using drugs for 3 years and now struggles with the Mommy Guilt that often accompanies this decision. But unlike Ravae’s story (below), Lucas is doing well on medicine and feels very good about himself. On it, he’s pleasant to be around, able to focus, successful in class and says that “school is fun” now that he realizes he’s good at it. What’s more, Kristen’s world has become brighter, and she is better able to handle the weekends when Lucas is not taking the Focalin, and the old behaviors are back in force. She no longer fits the image she previously had about herself as a short-tempered, impatient person — a yeller.



She concludes, “I’m telling myself that the medicine does not make Lucas a different person or a better person. He was already a good person, already enough, before medication. The medicine does not change who he is. It clears away the excess noise in his mind and allows him access to his thoughts. It lets him be who he was meant to be.”

“That’s what I tell myself.”

Visit www.abandoningpretense.com

One mom recalls the dark years

Gionna (Gigi) was such an easy infant, sleeping well and thriving on breast milk. But all this changed when she was 9 months old — the time she was introduced to table food.

The crisis came when she was 7 and was going to need to repeat first grade. Her behavior was not good, and she was unable to focus on school work. To make matters worse, she didn’t seem to care. I was desperate to find a way to help my daughter; I couldn’t let her fail in school. It was at the doctor’s office when I first heard “ADHD,” and my ears felt numb. I went into autopilot, reaching for the prescription. My head was swirling as I drove to the pharmacy with tears streaming down my face. I got the pills but desperately did not want to give them to her. Here’s why.

As a child, I felt like I had been through hell, and now I was facing the same situation, but this time the child was my little girl.

I was just a little older than Gigi when I was first put on Ritalin. It made me feel horrible! My stomach hurt, and I couldn’t sleep. I felt nervous and remember not being able to laugh; it was almost like I was a robot. If I didn’t take it, the rebound effect made all the symptoms much worse. I felt like I was having an out-of-body experience, watching myself go completely berserk and unable to control it.

Continued on page 5

Some unsolicited advice for Kristen

Don’t beat up on yourself; be glad that life is better for both you and your son but don’t stop considering other things that could be triggering his ADHD symptoms. You might be able to have equally good results using other options or using them along with a reduced dose of the drug. (Plus, if the Focalin stops working after 2-3 years, you will want to have alternatives.) Another unsolicited comment — when there is a child with these symptoms, there invariably is a parent with an adult version of them.

There might be things in Lucas’ diet that are setting him off. Food additives can cause excess noise in the brain. I recognize that you call yourself a “health nut,” but considering that you list Taco Bell as your favorite fast food, there could be quite a few additives lurking in food or non-food products in your home, not to mention the whole salicylate thing.

Many different views

One reason there are so many differing opinions about the use of drugs for ADHD is that most of the studies that have supported their benefits have been conducted for a short time. The few studies that have looked at the long-term effects found that the gains seen by children in the beginning do not last beyond two or three years. [Sources include a 1999 study by Professor William Pelham, a study funded by the National Institutes of Mental Health and published in the *Journal of the American Academy of Child and Adolescent Psychiatry*, March 2009, and a similar study in the March 2013 issue of the same journal.] And, of course, the concept that any one drug would work in the same way in millions of different people is contrary to every rule of pharmacology.

The Dark Years, from page 4

As much as I hated it, as much as the drug made me into someone I didn't like, the worst part was that my mother and my teachers praised these changes and told me how well I was doing. But "I" wasn't doing anything; I was just "being!"



The message I got was that the real me wasn't good enough, and, in fact, the real me wasn't even there anymore!

My grandmother didn't understand why I didn't want to take the medicine, and to gain my cooperation, she took one of the pills herself. After about an hour she felt horrible. She told me, "You will never take that as long as you are in my house," and used to say, "I wouldn't give that to my worst enemy;" she still talks about it today. She used to argue with my mother, "How can you make her take that?" Sadly, my mother never tried the Ritalin and remained adamant that I had to follow the doctor's directions.

Even as a child, I knew that my symptoms got worse after I began taking Ritalin, but because the effects of withdrawal were so extreme, this was believed to be an indication that I needed the drug.

By the time I was 16, I was a full-blown heroin addict, living on the street and in abandoned houses. While I was in that life, I met so many teenagers who had the exact same story as mine! Like me, they were living on the street, eating out of dumpsters. Some of them had no apparent "reason." They had not experienced any trauma; they were just put on medication, hated it, and were praised for the changes that made them feel like zombies. These teens were not taking illegal drugs in order to get high but to silence the dark memories.



Both girls are doing great!

I have been clean for 12 years now, and looking back, I believe that the ADHD drugs we give children change everything about them — how they feel, what they think, and how they act — basically who they are. Then, everyone praises them for this new person they've become. At such a young age, it makes you feel like the real you isn't good enough, like you have to change everything about you in order to be good. Taking a street drug didn't seem so different from what our parents had given us, but why not take a drug that actually makes you feel good, a drug that covers up the thoughts of not being good enough? Heroin makes you feel like you're perfect, like you're Superman!

Fast forward to today

Back to the present and my little girl. I held on to the pills but could not bring myself to give them to her. Our doctor had mentioned that we should avoid red dye, but I had not heard of the Feingold Diet. About two weeks later, a friend mentioned Feingold, and I began trying to use a version of it from bits and pieces I found on the Internet. But the information was full of contradictions and confusion, and I was so frustrated trying to find suitable food I was ready to give up. Some more Internet research led me to the Association and as I watched a YouTube film and learned more about the organization, my skepticism dissipated, and I felt there was a way to really help Gigi.



I received the member package and began the program, but didn't say a word to Gigi's two teachers. After just a few days on Feingold I saw one of them at school and she was excited. "Wow," she said, "Gionna has been so good. I've never seen medicine work that fast and that well. It's amazing!" That's when I told her we had not used any medication but were on the Feingold Diet. Her response was, "Whatever you are doing, keep doing exactly that, because you are awesome!"

Continued on page 6

The Dark Years, from page 5

Both of the teachers have been wonderful and totally support the diet. Even more, when a child from a different class brought cupcakes to share, the teachers said that those cupcakes are not allowed in their classroom. They really “get it” that the same food additives that have such a profound effect on Gigi are harmful for all of the children. Our doctor has been impressed as well, and I am providing information for her to give out to other parents.

At the first parent-teacher conference after beginning Feingold, I sat with the teacher and listened to her tell me how well my child was doing. She said, “Gionna is so happy and energetic, but it is a contained and well-controlled energy. She stays focused.” I kept peeking at the name on the computer monitor to be sure it was Gigi she was speaking about! Once again, I drove home in tears, but this time, they were tears of sheer joy!

No more talk of repeating first grade!

Now in second grade, Gionna has been named Student of the Week three times in the three months we have been on Feingold and excels academically; she is a whiz at math and consistently receives 100% on her spelling tests. A recent assignment involved composing, writing and typing a report. She zipped through her own assignment and then helped several of her classmates, typing up their finished papers. Her teacher told me she had not yet finished typing the paper for one friend and said she would stay in at recess so she could complete it. Her teacher also told me that Gigi got to “be the teacher,” helping the other children three times that week!

On the few occasions she has been at a place where a natural alternative was not available, Gigi didn’t mind skipping the food; she has seen that even one single chocolate chip with fake vanilla will affect her! I know this sensitivity will lessen as she stays on the diet for a longer time, but I doubt that will change her belief that those additives are “poison!”



Our family has benefited in many ways

When we first began the diet, I did not think my older daughter, Jadeica (Jadi), was a candidate for the diet. But one time, after she had a lot of salicylates, I noticed she was chewing on her shirt. Now, on Stage One, there is no more chewing and she is more organized than she had been. I’m a lot more organized as well, and while it used to be rare for me to arrive somewhere on time, the opposite is true today. It’s unusual for me to be late. I’m able to focus now and am much better at remembering things.

Yesterday, I was messaging a woman on the non-members FB page. I had posted how this was the first school break where my girls had not fought the entire time! Usually, I am ready for them to go back to school before we get home, before the break even starts!

The other mom told me how her 9-year-old daughter was very mean to the family, and she didn’t know what to do. I started telling her how Jadi had been like that. I assumed that because she was 9, it was hormonal. I thought her excessive crying and yelling about how mean we were to her was just her not knowing how to deal with the changes she was beginning to go through.

She got great grades, but she often forgot her homework, was a little flighty and would freak out on her sister for almost nothing, hurting her, digging her nails into Gigi, screaming. But after we started “Gigi’s diet” I noticed how they have not been fighting.

Of course, my memories of those terrible years as a child and teen will never go away, but now it is consoling to know that much good has come from them.

Ravae Loper



“As a child I was a bit chunky, but the Ritalin made my stomach hurt and I didn’t want to eat. I lost so much weight that the elementary school guidance counselor would ask me repeatedly (in a million different ways) if I had an eating disorder.”

PIC REPORT

The following products have been researched and may be added to your *Foodlist*.

Products with this symbol ^ are available in Canada.

To understand the codes listed in parentheses, refer to the first section of your *Foodlist & Shopping Guide* book.

Stage One

CONFECTION CRAFTS Sparkles (All are CS,GF,CF):

Natural Golden Sheen, Natural Deep Green,
Natural Royal Purple, Natural Yellow,
Natural Bright Blue, Natural Orange,
Natural Holiday Red, Natural Black

CONFECTION CRAFTS Sprinkles (All are GF):

Lemon White Chocolate, Sunflower Yellow Party
Perfect, Zinnia Blend Party Perfect,
Primrose Pink Party Perfect,
Wildflower Blend Party Perfect

CONFECTION CRAFTS Modeling Chocolate Basic

Colors (All are CS,GF): White, Chocolate, Pink,
Yellow, Green

CONFECTION CRAFTS Golden Glimmer Dust (GF,CF)

CONFECTION CRAFTS Chocolate Coating (All are GF):

White, Dark

CONFECTION CRAFTS Temper Chocolate (All are GF):

White, Dark

CONFECTION CRAFTS Titanium Dioxide (GF,CF)

To order, visit: www.confectioncrafts.com

Thank you to Nancy Kemble

Since 1990, Feingold mom Nancy Kemble has been providing delicious candy made with real chocolate, real vanilla, real butter and a great deal of love. She began making candy for her son many years ago when Feingold-acceptable options were not available, and this grew to become the Squirrel's Nest candy shop in Middletown, Delaware. She recalls when there were no natural lollipops, marshmallows or gummy candies for our kids to enjoy. Jelly beans and candy canes were only a dream, but today there is a huge assortment of treats of all kinds, and some are so beautifully colored it's hard to believe they are made with natural dyes.

Stage Two

CONFECTION CRAFTS Sprinkles (All are GF):

Raspberry Dark Chocolate, Raspberry White
Chocolate

Chocolate Crafts Kits, a popular resource for natural confectionary decorations, has changed its name. They are now "Confection Crafts." Check your *Foodlist* for a huge selection of Feingold-acceptable products.

Campbell's bows to consumer demands

As of July, foods containing genetically modified ingredients (GMOs) sold in the state of Vermont will be required to be so labeled. States Attorneys General in New Hampshire, Washington, Maine, Massachusetts, Illinois, Hawaii, and Maryland have expressed their support. Industries that profit from GMOs have fought hard to prevent such legislation, spending nearly \$150 million in their attempts to defeat state initiatives. This contrasts with a mere \$2.5 million spent by pro-labeling groups.



EXAMPLE OF A GMO LABEL

Campbell's, which has spent \$740,000 in an attempt to defeat the legislation, has decided to throw in the towel and will be noting GMOs on their package labels.

The soup giant knows that having different labels for different states would be difficult and expensive, so theirs will now say "partially produced with genetic engineering." But this is not easy to find as it appears on the bottom in small print.

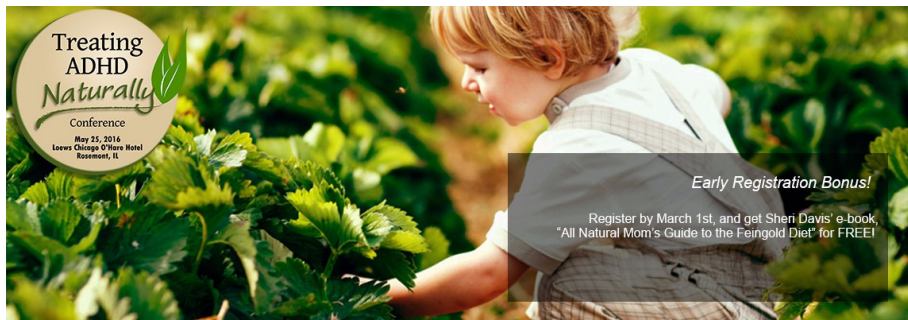


Natural Gatorade?

PepsiCo, another big contributor to the non-labeling effort, will be offering an organic (non-GMO) version of their Gatorade!

So, she has decided to retire and spend more time as a grandmother. Nancy has touched countless lives and made them sweeter — in so many ways.

The Feingold Association does not endorse or assume responsibility for any product, brand, method or treatment. The presence (or absence) of a product on a Feingold *Foodlist*, or the discussion of a method or treatment, does not constitute approval (or disapproval). The *Foodlists* are based primarily upon information supplied by manufacturers and are not based upon independent testing.



In this one-day conference, you will hear from five determined moms who didn't stop searching for answers until they found solutions that worked for their children. With conditions including ADHD, autism, sensory processing disorders (SPD), dyslexia, seizures, apraxia, Tourette syndrome, food allergies and more, these moms set out to discover natural ways to help their kids. Each of their strategies was unique, yet alike in many ways.

Wednesday, May 25, 2016—Loews Chicago O'Hare Hotel, Rosemont, IL

From the Feingold Diet to restoring and healing the gut, listen as they unveil how they eliminated many of their children's behavioral, sensory, and learning challenges, as well as some physical ailments, naturally and effectively.

For details on receiving a Feingold discount and to register, visit: <http://tinyurl.com/MomsConf>

Pure Facts

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Pure Facts is published ten times a year and is a portion of the material provided to members of the Feingold Association.

Membership provides the *Feingold Handbook* which includes recipes and a two-week menu plan, a national *Foodlist* book containing thousands of acceptable brand name foods, a telephone and E-mail Help-Line, and access to our members' Facebook with information and support from experienced volunteers, a *Fast Food Guide*, *Getting Started Foodlist*, as well as a subscription to *Pure Facts*.

For more information or details on membership outside the US, contact FAUS, 11849 Suncatcher Drive, Fishers, IN 46037 or phone (631) 369-9340.

The articles in this newsletter are offered as information for *Pure Facts* readers, and are not intended to provide medical advice. Please seek the guidance of a qualified health care professional concerning medical issues.

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Vitamin D is especially important in winter months

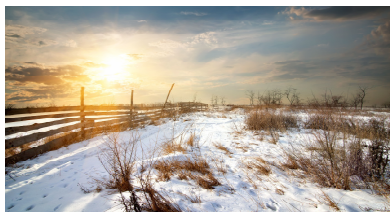
Our bodies make vitamin D3 when our skin absorbs sunlight, so the colder winter months are when we are most likely to lack it.

"Over the last decade, an increasing body of evidence has shown an association between vitamin D deficiency and an increased risk for acquiring several infectious diseases, as well as poorer outcomes in vitamin D deficient patients with infections." This is the conclusion of a Canadian study.

An update on the association of vitamin D deficiency with common infectious diseases, *Can J Physiol Pharmacol* 2015 May.

Earlier research on the vitamin has found that it significantly reduced the chances of getting the flu.

Randomized trial of vitamin D supplementation to prevent seasonal influenza A in schoolchildren, *Am J Clin Nutr* 2010 May.



This vitamin has been shown to improve the quality of life for those who suffer from **IBS** (irritable bowel syndrome). Researchers from the University of Sheffield conducted a study of patients with IBS and found that 82% of them had insufficient levels of vitamin D3. They conclude, "Vitamin D supplementation could play a therapeutic role in the control of IBS." The pilot trial was reported in the Dec. 2015 issue of *BMJ Open Gastroenterology*.

Depression is another condition that is associated with low levels of vitamin D. A study from Oregon State University found that "...lower

vitamin D3 levels are related to clinically significant depressive symptoms." **Associations between vitamin D levels and depressive symptoms in healthy young adult women,** *Psychiatry Research* March 25, 2015.