

Fish oil as substitute for psychiatric drugs in children

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Background

- In 1997 at the age of 6 my 3rd child (out of 5) was diagnosed with Tourette Syndrome (TS)
- Classical TS symptoms- motor tics, hyperactivity, rage tantrums, obsessive thoughts and behavior.
- Quality of Life was deteriorating rapidly for him and the whole family
- A local neurologist diagnosed him and prescribed Haloperidol (Haldol) which is a strong neuroleptic drug often used to treat schizophrenia and manic conditions
- Side effects of Haldol- drowsiness, lethargy, fatigue, phobias, loss of IQ (all appeared)
- Situation was unacceptable, without the drug a hyperactive ticing tiger, with the drug a zombie.
- Searching for alternative solutions we tried all alternative medicine techniques- homeopathy, herbal medicine, psychological therapy, and behavioral therapy, nothing worked.
- Until we found omega 3 fish oil and nutrition
- I started my son on a program to wean him from the drug while increasing his dose of fish oil gradually until after 3 months he was clean of the drug and on a high dose of fish oil with only minor tics, minor rage tantrums and acceptable hyperactivity.
- During the next 5 years while changing his diet and upping the dose of omega 3 my son was completely cured of TS. At the age of 13 his tics completely disappeared, his rage tantrums gone and also his allergies were gone.
- This was the basis for The Omega Protocol™

Target of the protocol

Cure patients with psychiatric disorders on drugs (or not) by nutrition

Nutritional changes

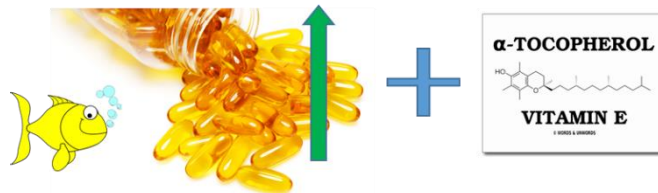
1. Reduce sugar and white starch from the diet



2. Eliminate trans-fat and high omega 6 vegetable fats (processed foods)



3. Increase consumption of omega 3 EPA+ DHA (fish oil) + vitamin E!!!



Drug changes

Gradually reduce the drug dose at 1 week intervals and steps of not more than 20% of the dose until complete weaning



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- The protocol was developed gradually while I was helping other families cure their children, first from TS and then from disorders like ADHD, OCD and depression and even a few early stage autistic children. Success rate was high but a need for a clear process with systematic steps was apparent
- Officially launched the Omega Protocol in 2010
- 3 main reports that the caregiver (Typically the parent) fills:
 1. Drug Report- specifies all the drugs and doses the patient takes along with any known side effects
 2. Weekly Nutritional Report- specifies the types of food the patient consumed during the last week
 3. Weekly Symptom Report- specifies the symptoms and their severity that the patient experienced during the last week along with drug dosage and fish oil dosage

In addition to this the caregiver signs a disclaimer and a consent form and a onetime telephone call is held where the protocol and filling of the forms is explained to the caregiver. If required a onetime face to face meeting is held

- Since 2010 until today about 120 families have gone through the protocol
- Main syndromes – ADHD, TS, OCD, Depression/ Anxiety
- 90% of patients under 20 years of age.
- Assessment by caregiver of the patient condition by Quality Of Life (QOL) on a scale of 1-5.

QOL scale	1	2	3	4	5
QOL condition	Unbearable	Bad	Acceptable	Good	Perfect

- Typical protocol time until weaning off drugs is 3 months. During these 3 months the protocol is reported weekly. After that the reporting frequency goes down to bi-weekly, then monthly and finally the family is on their own and stop reporting

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Results Summary

Since May 2010 to May 2014 ~120 families have treated their children with The Omega Protocol

Syndromes treated and main outcomes:

Syndrome	n*	Avg Age	QOL _F	QOL _L	n drugs _F	n drugs _L
ADHD	50	10.8	2.1	3.4	0.9	0.25
TS	52	12.0	2.4	3.6	0.8	0.3
OCD	14	13.1	1.8	3.4	1.0	0.85
Depression /Anxiety	13	20.8	2.3	3.6	2.0	0.8
Others**	19	15.7	2.0	3.2	1.4	0.8
Total*	148	Average:	2.22	3.49	0.98	0.39

*Total > 100% due to comorbidity

** Autistic spectrum, bi polar, and some rare syndromes

QOL_F – Average Quality of Life as reported by caregiver in the first report

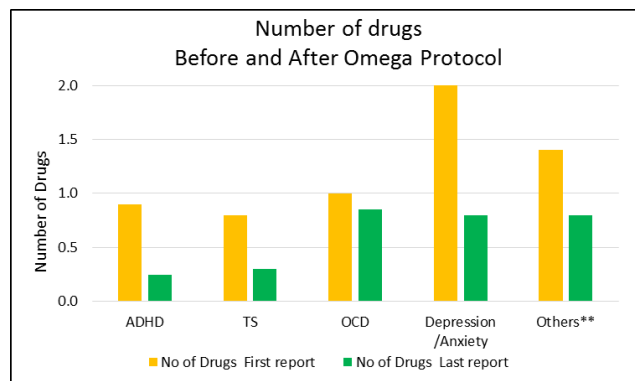
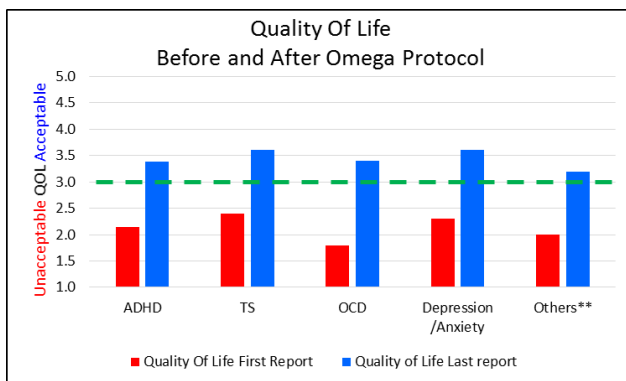
QOL_L – Average Quality of Life as reported by caregiver in the last report

n drugs_F – Average number of drugs per day per child as reported by caregiver in the first report

n drugs_L – Average number of drugs per day per child as reported by caregiver in the last report

Average time of protocol reporting – 7 months. Weekly reporting- 3 months

Dropout rate ~20%. Main drop out reason is “no report” (Caregiver failed to send in reports without reason)



Main observations

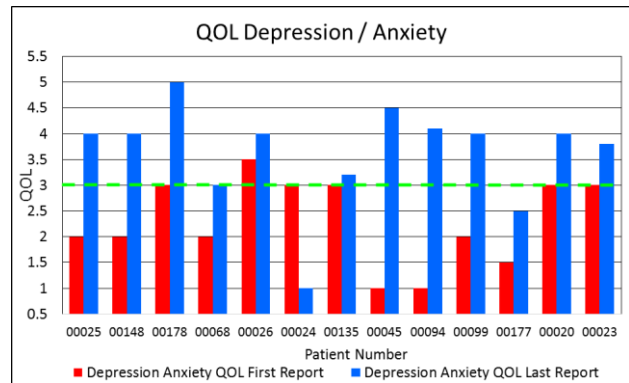
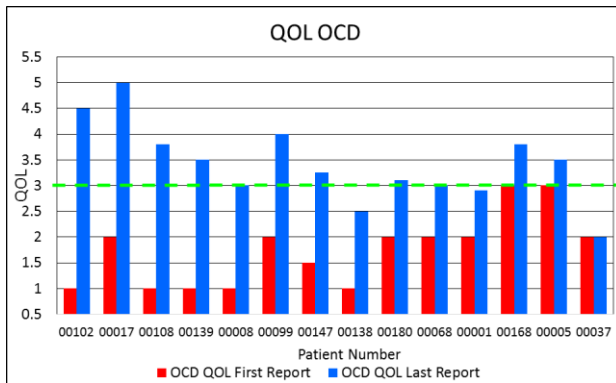
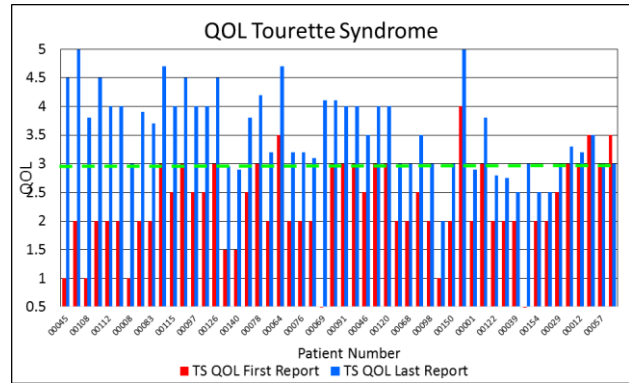
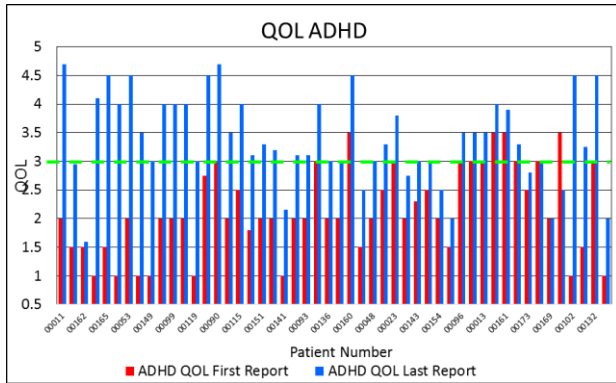
- Almost all patients improved their quality of life from unacceptable to acceptable or better
- Patients in all categories improved their QOL. The protocol is effective for all of these syndromes
- Most of the patients reduce their drug use dramatically and most are drug free after 3 months of the protocol
- Note: This study gives a snap shot of more than 120 patients at different stages and did not filter them for length of treatment by the protocol. Obviously for some of them this is work in progress and complete weaning off drugs is still ahead of them. The results for a select group of those who have completed the protocol are even better

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Detailed Results All Patients

Quality Of Life Before and After the Protocol



QOL scale	1	2	3	4	5
QOL condition	Unbearable	Bad	Acceptable	Good	Perfect

Discussion Conclusions and Future Plans

More than 120 families have gone through The Omega Protocol™ with very high success rate while implementing two main strategies, the effect of which is independent and complimentary:

- High normalized dose of active ingredient EPA and DHA at a ratio of 2:1.** The effective dose is between 1 gram active ingredient to 33 kg body mass and 1 gram per 5 kg body mass. Between 1gr/33kg and 1gr/5kg the effect is dose dependent. We use only gel caps of 200 mg DHA + 400 mg EPA, total 600 mg active ingredient.
- Reduction of sugar and starch** and increase of fat consumption. A mild ketogenic state is very favorable.

Drugs are synergistic with fish oil. As fish oil dosing is started an initial improvement in symptoms is seen but as the dose is increased beyond the minimal effective dose of 1gr/33kg a fast increase

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in side effects of drug overdose is typically seen. This requires very slow titration of each drug separately and concurrently a very slow increase of fish oil dose. Typically 3 months are required to safely transit from drugs to fish oil. After the transition is completed the patients are typically symptom free and without the side effects of drugs.

Vitamin E is crucial for the success of the protocol. Vitamin E (alpha tocopherol specifically) is a universal antioxidant for unsaturated double bonds and is especially critical for protecting the omega 3 double bond which is most prone to oxidation. We have seen many cases where fish oil supplementation even at a high dose does not affect the patient until vitamin E is added to the regimen.

Dropout rate is ~20%, mostly due to failure to send the weekly reports. A small number (~5%) of patients is non responsive. The chance of being non responsive is higher at older ages. Most problematic are adults who have been on psychiatric drugs for many years. We are still trying to figure out why these individuals are non-responsive and what to do.

Low Cholesterol- we often get blood test results of the patients. In many cases their cholesterol level is extremely low. Numbers as low as 140 to 120 mg/dl are common. I think this fact is meaningful and requires further study. We also see very low vitamin D in these patients but this is not uncommon in Israel in general.

Conclusion- The Omega Protocol™ is an effective protocol for treating patients with diverse psychiatric disorders while weaning them from drugs and hence eliminating their side effects. The success rate is at least 80%, success meaning that their quality of life goes from negative (unacceptable) to positive (acceptable or better).

Future plans

1. Develop a metric using the Omega 3 Index (Omegamatrix) for adjusting the fish oil dose in the protocol
2. Develop an on line automated application for a simplified use of the protocol by parents and caregivers

Interested in the Omega Protocol and curing children with psychiatric disorders by nutrition and fish oil as a substitute for psychiatric drugs?

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