## Tryptophan for anxiety, depression and insomnia: why quality is key and the critical co-factors (part 1 of 2)

- The benefits of tryptophan for anxiety/mood/insomnia and why Trudy only recommends Lidtke
- Tryptophan history and why safety and quality is key
- Concerns about neurotoxic quinolinic acid
- Tryptophan 500mg, kids chewable, Tryptophan Complete, and tryptophan for pets
- Why use lysine, vitamin B3, B6/P5P, folate and curcumin with tryptophan
- Other serotonin co-factors, 5-HTP and prescription tryptophan
- Client feedback and how to use these amino acids



Trudy Scott:

Welcome to Season 4 of *The Anxiety Summit*. I'm your host Trudy Scott food mood expert, certified nutritionist, and author of *The Antianxiety Food Solution*. Today our topic is "Tryptophan for anxiety, depression and insomnia: why quality is key and the critical co-factors." And today we have Ronald Sturtz from Lidtke here to talk about tryptophan and talk about quality and why it's so important. Welcome Ron.

Ron Sturtz: Hi Trudy. Good to hear from you.

Trudy Scott: It's a pleasure to have you here today. A lot of my clients know

that I'm a big proponent of the Lidtke tryptophan. If you've been

following me online or heard me speak or have worked with me you will have heard that I only recommend the Lidtke tryptophan. And recently I had a wonderful conversation with Ron from Lidtke and decided that I wanted to interview him for *The Anxiety Summit* so you can hear it from the founder of the company. He's a wealth of information. And using tryptophan has just been transformational for my clients. And I'll share some stories, some results that some of my clients have seen and you're going to hear a lot of the science and some of the factors as to why quality is so important when it comes to tryptophan. So it's really a pleasure to have you here today Ron. I'm excited to be sharing this information with my community.

Ron Sturtz:

Well, we're happy to be here. Go ahead and ask anything you want.

Trudy Scott:

Okay. So I'll go ahead and read your bio just so people have a background on what you do and then we will go into it because we've got some questions around quality, then we've go some questions around possible concerns that some people have. So we're going to cover a lot today and I'm excited to get into it. Let me go ahead and read your bio first and then we will get right into the questions.

Ron Sturtz founded Lidtke in January 1994 following his work on a National Institute of Health Research project. But his career in nutrition began almost from birth battling chronic health problems when no one seemed to realize that food can make you sick. In college he began a serious search for alternatives to conventional medicine and was amazed in 1968 when he came across Adele Davis's book Let's Get Well. I must say that was one of my favorite books and that's how I got introduced to nutrition as well before I ever became a nutritionist - so it's great to hear that you did as well. Then as a starving college student in the '60s he hitchhiked great distances just to find unique books on nutrition and health. Ron still remembers buying his first bottle of tryptophan in 1974, it seemed to be a significant moment but he didn't know why until 20 years later. After returning again to college in 1977 he continued his habit of spending long hours in university medical libraries reading medical journals, books and homeopathic collections often hidden away in library basements, unread and collecting dust. After years at universities and after signing the last payroll check closing out the NIH Inner Age Research Grant on December 31, 1993, the next day Ron founded Lidtke. Ron's first customers were doctors who were looking for hard to find specialty biochemicals to use in their practice. In this

environment Lidtke introduced L-tryptophan, which at the time was nearly impossible to find. There was no marketing or advertising, just doctors referring other doctors, so business continued to grow. Once the Internet was up and running the name Lidtke was circulated more widely and at that time the decision was made to provide non-prescription products directly to consumers. From our beginning Lidtke has been fanatical about purity and safety, driven by the controversy in 1990 over contaminated L-tryptophan. Ron learned of a research project at the FDA in early 1994, in which they were testing tryptophan from every source on the planet. In the course of discussing this project with the lead scientist, Ron discovered who was manufacturing the purest tryptophan in the world and became committed to reintroducing it to the American market. This commitment to safety and precision has always been Lidtke's goal and it applies to everything Lidtke makes.

What a wonderful beginning and I love the fact that you hitchhiked all around the world. You sound like a kindred spirit. I've done a lot of travel myself and with Adelle Davis's books and your emphasis on quality I think is beautiful. Before we start with the whole quality aspect I just want to preface this for folks who are new to the work that I do. A big part of the work that I do is using targeted individual amino acids for helping to raise neurotransmitters, one of them being serotonin, which helps with alleviating anxiety and depression, addressing insomnia and emotional eating. With low serotonin, anxiety is often anxiety in the head, the worry, the ruminating thoughts, the obsessive tendencies. And using an amino acid like tryptophan can boost serotonin and provide relief and hope very quickly. So I use Lidtke products in my practice together with GABA. GABA and tryptophan are the two most common amino acids I use with my clients. It is absolutely amazing. My clients see amazing results. And this is the reason I wanted to have Ron here to talk about the quality aspect and then some other aspects when it comes to biochemistry. So let's just go into this whole aspect of quality. Ron you say that you're fanatical about purity and safety and in the bio you mentioned the 1990 controversy. So let's start with that and tell us a little bit about what you learned when all of that was going on.

Ron Sturtz:

Well, I was using tryptophan myself in the late 1980s, 1988, '98 1989 and 1990 until it was taken off the market. And it was actually shortly after that that I got involved in the National Institutes of Health Research. But I started looking into why it was taken off the market. Apparently the story goes that the

manufacturer where it all is was coming from, tainted contaminated poisonous tryptophan was being produced by one company in Japan. And that didn't become immediately obvious. People were falling ill from it and the FDA began collecting sample bottles, but the thing is if you go into a health food store you see thousands of brands and that doesn't really tell you much where the tryptophan came from. Because the vast majority of those brands have their products made by contract manufacturers.

So the FDA tracked those brands back to the contract manufacturers that they use that do the blending and encapsulation and bottling of products and then they deliver those to the brands who then sell to the health food stores. So it took months to track back all the tryptophan that was making people sick because not every bottle of tryptophan that was sold back then was making people sick and so they had to track only those that were making people sick and trying to find out where they came from.

So then once they got to the contract manufacturers they would ask them okay, here's a bottle with a lot number that came from your facility, where did you get the tryptophan? And so they had to go back through their records, and often times they'll buy from different manufacturers. So that's kind of one of the good things about the FDA oversight is that it does encourage companies to have an accounting trail so they can trace back when there is some kind of a problem like that. But anyway, they were able, after months of work, to track it all back to one company in Japan. And after investigating that company, and there was a Dr. Morton Walker who wrote a three-part series in the Townsend Letter for Doctors & Patients back about that time and it was probably the most thorough investigation that anyone had done. And he had come up with all his facts by camping out in the law offices of some of the people who were suing that company in Japan and he had stacks of documents that were taken from that company. So he went through all of that and he concluded that it is was all do to the genetic modifications or the genetic engineering of bacteria that are used in the fermentation of the tryptophan.

And that is pretty much universally used [fermentation]. It's the most efficient way to do it and when done properly it's extremely safe. To extract it from animals or vegetables would be astronomically expensive and no one would be able to afford it. So the fermentation process is by far the best process, but apparently they had tried to take shortcuts. One of those was to genetically modify the organisms to get a better yield, for every batch they would do they'd get a better yield of tryptophan. And

another thing they did was they cut back on the purification processes and the cleaning up of the material at the end of the fermentation process. And so the combination of those two things, introducing a new organism that had not been verified for safety that was producing many, many contaminants and impurities that no one had ever characterized chemically, and then not bothering to purify them out and selling it to the American market and around the world. And basically because they were able to produce it at such low prices after all these corner cuttings they were pretty much taking over the market.

And I've read that at that time probably 90 percent of the tryptophan that was being sold, into this country at least, was from that one manufacturer. So that was a very dangerous situation and who knows how much of it was still on the shelves, even after they got to that point. So it was off the shelves and health food stores and quarantined and an import alert was put on it so that any tryptophan coming into this country could not be sold as a supplement. They still were allowing it to be sold for pharmaceutical uses as an intermediate in the manufacture of other pharmaceuticals and strangely enough also in baby foods. It was allowed for that because it's well known that babies need tryptophan to grow. And it's an essential amino acid so if they're not getting their tryptophan they're going to die.

So I think probably after that I would say it's my guess that the import alert was not enforced for certain companies. Once they got a better idea and were able to target the company it was coming from, there were still some other quality manufacturers making tryptophan and I suppose most of it was coming from those other companies, but it was still coming into baby food. And also in hospitals IV solutions that sort of thing or you need for survival, not growth but survival. It was still allowed to be used there and pet products, but otherwise it was taken off the market for everyone else, for all human use as a supplement. So it was a matter after that that once it became known, that it was a contamination that caused it

*Trudy Scott:* 

We didn't actually mention what the problem was. We didn't talk about the fact that we were seeing this EMS eosinophilia-myalgia syndrome.

Ron Sturtz:

That is what people were suffering from - a very high eosinophilia content of their blood and also the myalgia, the extreme muscle pain and it grew to the point that several dozen people died, not only in this country but also in England and other countries and

thousands were affected by it. And there are many around today, they even have support groups for EMS survivors. And I've talked to those people and I actually wrote an article on this whole controversy a number of years ago called The Tryptophan Wars and I sent copies of that down the survivors group and I sent a whole stack of them down there so they could distribute them so they could alert other people to the importance of safety in supplements. And I think they were relatively happy to get all that from us. So we did cover a lot of that in that article, but, of course, that's what people were coming down with extreme muscle pain and evidence of some kind of infectious process going on in their body. Beyond that they really didn't know what was happening.

And there were those who were trying to investigate that part of it. For example, at the Centers for Disease Control Robert Hill, and I've spoken to him, he was the lead scientist in an effort to identify what in the tryptophan was poisoning people. That went on for several years. And I think their final article was in 1994. And by that time they had stated that there were 61 impurities in the tryptophan coming from that company in Japan. And I'm a little reluctant to name that company because they may have mended their ways, they may have completely changed their policy and their boards of directors and all that kind of thing and they may be doing excellent quality work right now so I'd hate to be mirch their name at this point. But that tryptophan that had come from that company, Robert Hill and his staff identified 61 impurities, but they didn't all match up with people who had gotten sick. Basically they were just showing up as peaks on chromatograms. A chromatogram will show a peak for every chemical constituent of a material and the tryptophan, of course, would be a very big spike in the middle of the chromatogram and then you have minor spikes on either side. And they are not immediately identifiable. That takes a lot of work, if you don't know already what they are it could take years to identify what a particular spike is. So they had come to the conclusion that the ones that really matched up for all the victims were six different spikes. And so it took them years to identify chemically what those spikes were.

And the main one was EBT and they nicknamed EBT, it's a long chemical name, you might not want to hear it [editor: 1,1'-ethylidene-bis-L-tryptophan] but that was the one that they suspected was the most heavily implicated. They never could identify exactly which ones were toxic or in combination. It could be like numbers one, two and five in combination were deadly or two and six in combination more deadly or maybe just six alone was deadly. They never were able to determine that because they

never found an animal model to use in research because when they would feed the rats or any other kind of animal, lab animal they had samples of this known toxic tryptophan, none of them responded the way humans do. They have a very different gut flora and metabolism and they never responded the same so they weren't about to use humans in any of these clinicals so they never really could tell which of those six were the worst, but they strongly suspected that EBT was the worst.

That kind of leapfrogs to what I was going to say about the FDA's investigation. The Europeans took it very seriously. They changed their pharmacopeia in quite a few different tests that they added. One of them was specifically for EBT. And they have a limit. And their tests specifies that you cannot have more than 10 ppm EBT in tryptophan sold as pharmaceutical grade in Europe.

Now we have tested many, many, many samples of tryptophan for EBT content and some of it's amazing. There's one European country, actually I don't know how they sell it for human use but they sent us a sample of tryptophan and we tested it and it was almost as bad as the material from that one company in Japan. I might give just sort of a caveat here, there are other manufacturers in Japan that manufacture wonderful quality tryptophan. And so I would not condemn and entire country just over what one company did, and that's true of every country in the world actually where it's coming from. You'll find some people who are cutting corners and other people who are fanatical about quality.

So that aside, the Europeans also have another test that we like and that's for testing the total amount of impurities on the left-hand side of the tryptophan peak in the chromatogram and the total amount of impurities on the right-hand side of that peak. And the Europeans require it can't be more than 100 ppm everything combined because there's no way you can identify every single peak. You don't know what they are so you just say there's a total limit on the total amount and they have that limit 100 ppm on the left-hand side, 300 ppm on the right-hand side. But just to show you where our standards are, we would not accept anything that was just European quality that was 10 ppm EBT.

We don't want to see any EBT in our tryptophan, but it's getting more and more difficult to find laboratories who even know how to test these tests, they just don't know how. There used to be the gold standard of quality assurance that you had your material independently tested. That just doesn't mean anything anymore because people just makes a lot of mistakes. There's a lot of

human error at and the education level in the United States keeps going down. People who knew things are replaced by people who don't know things so it's kind of a constant challenge to make sure that you're getting good test results and that your material is safe. It's not something where you can just set up some procedures ten years ago and then assume that everything is going to be okay today. It's a constant challenge.

So the last time we had the EBT tested it was actually the people who we got the tryptophan from had it tested down to 50 parts per billion and it wasn't detectable even at that level, which is 200 times lower than the European standard. And that's what we want to see when we send it out for testing. Every batch we want to have tested and right now we're working with two labs to work up the procedures because people just don't know anymore how to do those tests. So we're like fast tracking getting these laboratories up to knowing how to do these tests so that we can continue our quality insurance going forward.

But we don't want to see any EBT. I don't care what the standards are we don't want to see any, and likewise for all these other contaminants. Those numbers 100 ppm and 300 ppm they're too high for us. We don't want to see that. So anyway, that kind of clues you in on the challenge that we are up against and what we're trying to do to maintain our quality control in spite of all the problems that are going on in the world. Every once in a while you have to shift gears and there are disasters here and there and companies go out of business and other companies are being acquired and you have to shift your supply lines. Just to give you one example, and there are lots of examples like this, if you've been in business as we have for 22 years you have to be sort of nimble in your ability to keep getting quality ingredients for your products. But just one example is the disaster in Fukushima back in March 11 of 2011. And prior to that moment Japan was one of the premier places to get nutritional ingredients. They were fanatical in so many ways. They were doing a great job, but many of these big corporations have distributed their manufacturing facilities around the world. So actually most of the companies that are in China are actually owned and run by Japanese because they already have the technology and they don't always want to share the technology with any other country so they have the gift of employing people in another country. They're welcomed in. They build their factories and they run them according to their quality standards, but after Fukushima too when there's all this radiation that's being poured out into the ocean and into the air. There are a lot of people who say "just tell us that your tryptophan doesn't

come from Japan." Well, it doesn't, but prior to Fukushima that was not a bad thing. They were making among the best in the world. So anyway, the supply chains they do change so there's all these different challenges of just trying to produce a good product.

Trudy Scott:

It's wonderful to hear that you're on top of it. And I just want to summarize the discussion that you've had just for people to get a synopsis. So in summary, and correct me if I'm wrong here, the EBT was the main contaminant that was found to be an issue with the people who had this EMS, eosinophilia-myalgia syndrome. The Europeans are testing it and they're looking at 10 ppm and you don't want to see any. And in your latest testing you found 50 ppb, which is 200 times of lower than the European standard, which is better than what we see in the U.S. So did I summarize that well?

Ron Sturtz:

Yes you did. But it was actually not detectable at 50 ppb. That was the detection limit of the equipment and it was not detected there. So we were happy. That makes us happy when we see that.

*Trudy Scott:* 

That's excellent. Wow. That's amazing

Ron Sturtz:

You have a lot of economic forces, agricultural interests and that sort of thing, food manufacturers, you might ask the same question about why is it that they can use pyridoxine hydrochloride in food and declare it as vitamin B6? That's not the best form of vitamin B6, your body has to metabolize that in your liver to produce a phosphorylation reaction in order to get P5P, which is in all the amino acid pathways. So why does that happen? Well, I can think of one reason pyridoxal hydrochloride is about ten to 12 times cheaper than pyridoxal 5 phosphate. So you might pay \$20 a kilogram, but it would cost you \$250 possibly more for the pyridoxal 5 phosphate.

So if you require that all the tryptophan for food uses and cattle uses, agricultural uses and so forth meet the European standards that's going to add a lot to the cost of not only making it but testing it. The tests are going to add thousands of dollars each time you run the test. Those tests are not cheap, just where USP would cost several thousand dollars if you want to do the total battery per the Europeans. Outside of a couple of manufacturers that have their own laboratories in the United States, outside of that I personally don't know of any labs who routinely would know how to do those tests so you have to pay them for development costs. And luckily the two labs that I'm working with right now they're not requiring it. I know the people, they're fanatical in the way they go about things so they're just out of their own curiosity they're interested in

learning how to do it. But if you just walk into a laboratory they're going to say well we want another \$4500 just to develop a procedure and then we'll charge you for the test after that. So there are economic reasons for why even in Japan the last time I checked the Japanese pharmacopeia it was pretty much a mirror of the U.S. pharmacopeia so what other reasons are there?

Trudy Scott:

Yeah. Usually there's a money reasons. And it's so interesting that you talk about the money because I'll post something on Facebook about Lidtke tryptophan and I'll hear someone say I found a cheaper tryptophan somewhere else and to me you get what you pay for and this is why I'm such a big proponent of your product just because the quality is so big. And just hearing what you've just described here I hope that this is going to get through to a lot of people that when it comes to something like this with the dire consequences that the people experienced in the past, quality is so important. And I talk about this when I'm talking about food quality is so important; what we put in our bodies can have such a big impact. And the same as food, we've got to look at quality and nutrients that we are using and why use something that's not the best quality? So we are on the same page here. We definitely are.

Ron Sturtz:

Well, interesting you brought up food, I don't know if you've spoken or lectured before much on gluyphosates, but they are very important to the food supply, and particularly with regard to tryptophan because why would people want to take tryptophan as a supplement?

Well, years ago, decades ago Dr. Charles Jarowski who was the inventor of our original formula of Glycotrol and he got the patent supporting it and he was the Director of Research and Development at Pfizer, which became the largest pharmaceutical manufacturer in the world. But before that he actually was the founder of their research and development department and headed it over 20 years and did this research for decades.

The other pharmaceutical research he was doing he was looking for the answer to the question how would you make the most efficient formulation of amino acids to produce the fewest waste products, the least nitrogen containing waste products? And this was kind of got going, it didn't really get started with this but it dovetails with the space program because they were asking back then, well everything has to be as light as possible going into space trying to carry it up in a rocket, how can we have food that is efficient, metabolized efficiently, takes care of all the needs of the

astronauts and yet doesn't have a lot of waste to it, wasted weight or wasted metabolic waste products.

So they had discussions with NASA so they were also looking into making the most efficient protein for taking into space. So that kind of got them started. But he continued on with that research even after the space program was kind of closed down, at least as far as space exploration. And he finally formulated something that could be given as a supplement by anyone with meals and they wouldn't have to change their diet. He knew that that would be a very tough thing to get everybody to change their diet so he wanted to come up with a supplement that had a few things in it they could take before their meal and it would balance out the protein in their meal so they would have very little in the way of waste products and it would optimize the metabolism of the tryptophan in their diet and everyone would be healthier and they wouldn't have the deficiencies and the certain essential amino acids.

So he spent decades working on that and he finally came up with this formula and it contained the four most lacking essential amino acids - and tryptophan is the most lacking amino acid. And then next to tryptophan was methionoine and then valine and then lysine. And so he also put in some cofactors that would help the metabolism of those. After he retired from Pfizer he became a Professor of Pharmaceutical Sciences at Saint Johns University and when he finalized his formula he contacted the pharmaceutical companies, including Pfizer, and that's just not part of their business model. They're looking for patented ingredients and none of the ingredients in Glycotrol is patentable and they've probably all been found together in formulas of one kind or another so it wasn't really patentable. The research that went into it, and a certain collection of the ingredients is, but they weren't interested. They wanted chemicals that had to be patentable, not something that was found in nature, something that they had contrived or invented. None of them would accept his formula. None of them wanted to go into production and he tried many. And as many people as he knew in that industry and as many people that respected him, there again the economic issue came to play and that was always the thing that killed the deal. No one wanted to come to market with it, they thought well everybody's going to copy this or attempt to copy it. So something that was potentially so useful, because he was able to demonstrate that it helped to balance out blood sugar and by balancing out blood sugar you balance out cholesterol and triglycerides and you balance out of the blood sugar and maybe a month later you check your cholesterol and in his research he found that that would come back to normal

once your blood sugar did, there was just a delay in it, and also triglycerides maybe a month later he would notice that those would come down. And so as potentially beneficial as that product was none of the pharmaceutical companies were interested in it.

Trudy Scott:

No, they wouldn't would they

Ron Sturtz

They wouldn't. And we crossed paths because the son-in-law of his called up one day and said well we'd like to buy about a 25 kg drum of tryptophan from you. And so I got to talking with him and he started telling me about his father-in-law's research and I said this is fantastic. And so then I got to talking to Charlie and I thought this is great. This is a great product at the public needs to have. So we were the ones who went into production with it and so we've been doing that for nine years, ten years something like that we been offering Glycotrol and we've added a few other cofactors to it that mirror the more recent research that's been done. But they build on his original research, which still stands.

Trudy Scott:

Excellent. I'm not familiar with this product. I look forward to looking into it. And we know blood sugar control is so important when it comes to anxiety so that will be a good one for me to look into.

Ron Sturtz:

But this goes back to what I wanted to get to was that he demonstrated the deficiency of tryptophan in the diet, in the standard American diet. But now something that was not occurring when he was doing his research is the spraying of weed killer - it's almost universal now. And the chemical that is used world wide that hundreds of millions of pounds of this weed killer being all over in the food crops and that's glyphosate. Started now it out as the trade name Roundup, but that patent ran out in the year 2000 and so now there are dozens of companies that are all producing glyphosates and selling them as hundreds of different products and people are using them, like I say almost universally spraying them over food crops and spraying waterways and people on their homes and in their gardens they're all over the place.

And those are contributing to the decline of tryptophan. And this is why - this particular chemical works by inhibiting the production of the aromatic amino acids. The aromatic amino acids are phenylalanine, tyrosine and tryptophan. And in the growing weeds and in growing food plants alike, if they're sprayed with that they will die. If they're in growing phase they will die. So that was seen as kind of a breakthrough revolution. And then the question was well how do you just get the weeds to die and not food crops?

Well, the food crops became genetically engineered to resist the glyphosates. So go over with planes or whatever and spray in the air, spray over the entire field, they don't have to selectively go after the weeds, they can spray the whole field now because of the food products, the food crops have been genetically modified so that they are not killed by that chemical but the weeds are.

But the food crops still absorb the chemical, they still soak it up and then they're sent to market and you buy them and you cook them and you eat then and then you soak it up. Well, you don't produce tryptophan or phenylalanine, but your gut bacteria to do. And preferentially the beneficial gut bacteria tend to be killed by the glyphosates. So when that happens the pathogenic bacteria tend to dominate. And then when that happens when they grow kind of out of control then even more tryptophan is used up by the macrophages, which then attack the pathogens.

So you have tryptophan being reduced in a variety of ways so even 40 years ago people only were deficient in tryptophan because of their poor selection of foods, nowadays you can think well we're going to have more vegetables and things like that and eat more healthy and that will take care of it. Well, unfortunately that truth of 40 years ago is no longer true today.

*Trudy Scott:* 

I'm so glad you brought this up. Because it's a big issue and we're seeing such a rise in anxiety and depression and we're questioning why, it's this poor diet or is it all these other factors? I actually interviewed Dr. Stephanie Seneff on Season 1 of The Anxiety Summit and she knew all about glyphosates [and serotonin] and then Jeffrey Smith talked about it in his interview so it's on people's radars. For those people who don't know about it it's sprayed on wheat, it sprayed on sugarcane before it's harvested so we're getting it so many different areas our diets and so many people are eating wheat. A lot of people are saying well is this the issue with wheat? Is it the gluten or is it the glyphosate or what is it? And it's probably a combination of everything. So I'm glad you brought it up. And this is a big reason as to why low serotonin is such a factor. Other aspect is the gut bacteria so I'm glad you brought that up. And there is so much research now showing this connection between the microbiome and good gut bacteria and good gut health and mental health and this is probably a big part of it as well. So I'm glad you brought it up. Now are we ready to talk about some of the tryptophan products that you have? Because I'd like to talk about the three different ones that I'm familiar with.

Ron Sturtz: Okay. Sure.

Trudy Scott:

So you've got a 500 mg tryptophan, and this is the one that I use primarily in my practice, together with a kids chewable, which is 100 mg. And the kids chewable is really nice obviously for kids, it's also nice for adults who can only tolerate a small amount. They only need a small amount to get the effects because as everyone know who've been following me - what I teach is the fact that we're all unique, we have our own biochemistry and some need higher amounts, some need less. So for some people 100 mg is enough and the chewable is really enough for kids because it's an easy way for them to get it in.

Now the 500 mg is the one that I use a lot and I just want to share a story from a client of mine, she had joined one of my programs and she'd been using another brand of tryptophan before she joined the program and had seen some benefits. And then when she was in the program she heard me emphasize Lidtke tryptophan, she switched over and the results were amazing. She said consistently taking tryptophan, and this was the Lidtke tryptophan, the last month and a half has been life-changing. "My mood has lifted tremendously; it is night and day from where it was. It's been like a miracle pill for me. Tryptophan is my new best friend and I will be sure not to leave home without it. It's lifted my spirits and given me great hope." And this is what I love about the amino acids they give hope right away because they work so quickly and they start to raise serotonin and make you feel less anxious and less depressed and help you sleep while you're dealing with all these other things that you need to deal with like your diet and the gut. And maybe you've got Lyme disease or maybe you've got something else that's contributing to the low serotonin.

So I love the 500 mg tryptophan, I love the chewable, and I want to talk a little bit about the Tryptophan Complete in a second, but any comments on both those products before we go into some of the biochemistry?

Ron Sturtz:

Well, the tryptophan chewable, of course, when you have carbohydrates in the diet that creates a spike of insulin and then the insulin has a tendency to drive the branched-chain amino acids into the muscle cells. There are certain carriers for the amino acids going to the brain through the blood brain barrier and the large neutral transporters. Tryptophan competes with several other amino acids for the transporter to get through the blood brain barrier into the brain. And those other amino acids are the aromatic amino acids and the branched-chain amino acids, once again, the aromatic amino acids are phenylalanine, tyrosine and

tryptophan and the branch-chain amino acids are leucine, isoleucine and valine.

So if you have equal amounts of those in your blood tryptophan has a lot of competition getting through the blood brain barrier. One thing that carbohydrates do by elevating insulin levels is to facilitate the passage of the branched-chain amino acids into the muscle cells and then tryptophan has a lot less competition, just the phenylalanine and tyrosine and so it goes through much easier and much more of it. And so once that goes in then, of course, there's more for the production of serotonin.

I know that one of the first batches we were doing with the tryptophan we were falling asleep just testing it for flavor and that sort of thing and people would take one or two and they already feel like taking a nap. So that theory does work. Of course we try to make them delicious and we're coming out with other flavors. Heather will tell you that we're coming out with a green apple flavor pretty soon and we have the maple flavor and so forth, but it works and a lot of people like that.

*Trudy Scott:* 

Excellent. I like the maple flavor one. I must say it's very nice. My only concern with the chewable is I like to use it when I do a trial because that way you can get the results very quickly because you're getting the absorption through the blood vessels in the mouth. My concern is for people that are addicted to sugar, and a lot of my clients with low serotonin are addicted to sugar and they're trying to break that addiction. So you've just got to be a little bit careful with that taste of sugar and feeling like it's a candy. So that's just a caution that I have with many of my clients because it tastes good so you could eat quite a lot of them.

Ron Sturtz:

I know. There are some people who will just snack on them continuously. That's true. Also we found that when we came out with a chocolate flavor. We had a carob flavor once and then people would say why don't you just have chocolate? Why are you doing this carob? So that's the kind of feedback. When we have a lot of feedback in one direction or another we think okay maybe they're right. So the next production run we came out with a chocolate. And then we got all the fallout from that, people saying well they're fighting chocolate addiction; how dare we come out with a chocolate flavor. So everybody has a valid point. So I think we'll just keep coming out with different varieties so people can find whichever one they like.

*Trudy Scott:* 

Good. I appreciate the fact that you are open to suggestions and you change things. I must say I remember the carob flavor. I was working in Julia Ross' clinic at the time and I must give a shout out to her. She's such a pioneer in the use of amino acids and she was the one who said Lidtke tryptophan is the way to go and I've been using Lidtke since I worked in her clinic a number of years ago. We used the chewable there. And then I remember it was the carob flavor, which I thought was pretty nice. And I do have a concern about the chocolate as well because a lot of people are trying to give up the chocolate.

I did want to ask you a quick question about this whole aspect of chewable and opened onto the tongue. When I do a trial with my clients I'll have them open up the 500 mg tryptophan onto their tongue and hold it in their mouth for two minutes. That way they'll rate their symptoms on the questionnaire: "I feel anxious - a nine out of ten" or "I feel worried or I'm craving cookies - nine out of ten." Then they'll put it on their tongue and in less than one to two minutes they'll be able to say: "yes it's improved one or two notches" or maybe five notches. Doing it onto the tongue is very helpful for doing the trial. And then some people actually find continuing to do it on the tongue get better benefits than swallowing it. Any comments on that?

Ron Sturtz:

No. I would agree with that that your response is definitely going to be quicker because if it goes into your bloodstream through your oral cavity it's a lot quicker than waiting for a capsule to dissolve in your stomach and so forth. That sounds like a great idea.

Trudy Scott:

So now we need a nice flavor for the 500 mg tryptophan, maybe some vanilla or something in there because I'll have my clients add in inositol or I'll have them mix it with a little bit of mashed banana or some applesauce just so they're getting a bit of the carbohydrates and then they're getting a better taste. So I'm giving you some feedback.

Ron Sturtz:

Putting some flavor in the capsule. We're going to run out of space there I'm afraid. Well, I don't know it depends on how much flavor they need. Tryptophan, as you know, there's a little bit of a bitter taste to it so it takes quite a bit of sweetener and that's why there's more sweeteners than there is tryptophan in the tablet because it takes quite a bit to mask that. But if they don't need too much sweetener then we probably could fit it in a capsule.

*Trudy Scott:* 

I can be your guinea pig and I can help because I think a little bit of vanilla in there, even with no sweetener may work. Just some

sort of natural flavor, a little bit of vanilla or maybe licorice or something just to give it a natural sweetness. It might just take away some of the bitterness. My client's still do it and they take it because they're seeing the results, but they do say that it doesn't taste that good. But it's wonderful because they get amazing results.

I wanted to share some feedback on the 100mg chewable, this is a short story I share a lot when I do presentations. A young girl who had really bad rage issues; she was diagnosed with Reactive Detachment Disorder; bad anxiety; couldn't sleep; absolutely exhausted. It turned out she had low iron and she had gluten issues and as a result of the gluten issues damaging her gut probably contributed to the low serotonin (likely because of the glyphosate, which you were just talking about), low iron, so she didn't have the co-factors to make serotonin, and 100 mg of chewable was just amazing for transforming her in the office. She wasn't willing to give up the gluten. She wasn't willing to give up the candy and very upset that I was talking to her about it. And with 100 mg of chewable tryptophan, within two minutes she turned around and she was smiling and saying I can give this up. I can do this. And this is an 11-year-old little girl. She started on 500 mg of tryptophan at night and then in the mid afternoon and it totally turned things around, together with getting off the gluten and addressing the low iron. So a simple change like that just completely transformed this little girl and her mom is happy and she's much happier, which is lovely.

Ron Sturtz: Wow. That's great.

*Trudy Scott:* Yup. Really good. We know it works. So we have got so much more to talk about here. Before we go on is there anything else on

the 500 mg or the chewable that you wanted to say?

Ron Sturtz: I don't know of anything else to say other than as far as I can tell it's a purity issue so we just try to produce the best tryptophan that we can and there's nothing else in it other then tryptophan. There's no fillers or flow agents of any kind that are used in it so it's just

pure tryptophan.

I might say another thing just about quality control, recently we've been going through kosher certification and we probably found some benefits from that working with the Star-K people, they're one of the strictest and a rabbi was here from Baltimore a couple of weeks ago. We spent about four hours there talking and going over procedures and he went around and checked all our raw

materials and everything and I thought well this is really worthwhile to have all the more people involved in the managing the quality of our supply chains and the manufacturing. There can't be too many quality control people involved in this and I love having that. And the requirement of all the raw materials that go into our products have to be kosher certified and, of course, all the certificates and everything else. I like the fact that other people are helping out in this regard.

Trudy Scott:

Excellent. I love it. I love that you bring in so many people so the emphasis is on quality and improvement. I think that's really, really great. So this has been fantastic. We've covered so much and we were hoping to cover more in this hour so I think what we're going to do is a part one and a part two and we're going to end this interview here.

I just want to say thank you so much for a great interview. And what we'll do is we'll do part two where we're going to talk about some of the other concerns with using tryptophan. There are some practitioners who do not want to use tryptophan at all because of the concern about the neurotoxic quinolinic acid. And you've created a product called Tryptophan Complete, which addresses some of these concerns.

So we're going to end it here and then we will do part two to talk about the quinolinic acid concerns, the other product Tryptophan Complete, and then also talk about pet anxiety and tryptophan with pets.

So let's end it here. This is the end of part one with the interview from Ron from Lidtke and I encourage you to tune in to part two as we go deeper into some of the biochemistry. Before we end I just want to end to say thank you for this interview Ron. It's been a real pleasure interviewing you.

Ron Sturtz:

Thank you very much Trudy. We really appreciate this opportunity to share some of our experience.

*Trudy Scott:* 

Okay. Great. And I know that you have very generously offered a 15 percent discount on the Lidtke products and you just go to Lidtke.com through the month of June and you use anxietysummit as your coupon code and then you can try some of these wonderful Lidtke products. So thanks very much for offering that. We really appreciate it.

Ron Sturtz:

Thank you Trudy.

Trudy Scott:

Okay. So please join us for other interviews on *The Anxiety Summit*. And do tune into part two of this interview "Tryptophan for Anxiety, Depression and Insomnia: Why Quality is Key and the Critical Co-factors." This is Trudy Scott signing off of part one of this interview with Ron on Lidtke tryptophan.

Speaker Blog: <a href="http://www.everywomanover29.com/blog/tryptophan-anxiety-depression-insomnia/">http://www.everywomanover29.com/blog/tryptophan-anxiety-depression-insomnia/</a>

Ron Sturtz, Owner/President, Lidtke Technologies



Ronald G. Sturtz, B.A., M.S. founded Lidtke on January 1st of 1994 following his work on a National Institute of Health (NIH) research project. But his career in nutrition really began almost from birth, battling chronic health problems when no one seemed to realize that food can make you sick. In college he began a serious search for alternatives to conventional medicine, and was amazed in 1968 when he came across Adelle Davis's book, Let's Get Well. Then, as a starving college student in the sixties, he hitch-hiked great distances just to find unique books on nutrition and health.

Ron still remembers buying his first bottle of L-Tryptophan in 1974. It seemed to be a strangely significant moment, but he didn't know why until twenty years later. After returning again to college in 1977, he continued his habit of spending long hours in university medical libraries reading medical journals, books, and homeopathic collections often hidden away in library basements. unread and collecting dust.

After years at universities, and after signing the last payroll check closing out the NIH research grant on December 31, 1993, the next day Ron founded Lidtke. Ron's first customers were doctors who were looking for hard-to-find specialty biochemicals to use in their practice. In this environment, Lidtke introduced L-Tryptophan, which at the time was nearly impossible to find. There was no marketing or advertising, just doctors referring other doctors, so business continued to grow. Once the internet was up and running, the name Lidtke was circulated more widely, and at that time the decision was made to provide non-prescription products directly to consumers.

From our beginning, Lidtke has been fanatical about purity and safety. Driven by the controversy in 1990 over contaminated L-Tryptophan, Ron learned of a research project

at the FDA in early 1994 in which they were testing L-Tryptophan from every source on the planet. In the course of discussing this project with the lead scientist, Ron discovered who was manufacturing the purest L-Tryptophan in the world and became committed to re-introducing it to the American market. This commitment to safety and precision always has been our goal, and it applies to everything Lidtke makes.

**Trudy Scott**, CN, host of The Anxiety Summit, Food Mood expert and author of *The Antianxiety Food Solution* 



Food Mood Expert Trudy Scott is a certified nutritionist on a mission to educate and empower anxious individuals worldwide about natural solutions for anxiety, stress and emotional eating. Trudy serves as a catalyst in bringing about life enhancing transformations that start with the healing powers of eating real whole food, using individually targeted supplementation and making simple lifestyle changes. She works primarily with women but the information she offers works equally well for men and children.

Trudy also presents nationally to nutrition and mental health professionals on food and mood, sharing all the recent research and how-to steps so they too can educate and empower their clients and patients.

Trudy is past president of the National Association of Nutrition Professionals. She was recipient of the 2012 Impact Award and currently serves as a Special Advisor to the Board of Directors. Trudy is a member of Alliance for Addiction Solutions and Anxiety and Depression Association of America. She was a nominee for the 2015 Scattergood Innovation Award and is a faculty advisor at Hawthorn University.

Trudy is the author of *The Antianxiety Food Solution: How the Foods You Eat Can Help You Calm Your Anxious Mind, Improve Your Mood and End Cravings* (New Harbinger 2011). She is also the host of the wildly popular *Anxiety Summit*, a virtual event where she interviews experts on nutritional solutions for anxiety.

Trudy is passionate about sharing the powerful food mood connection because she experienced the results first-hand, finding complete resolution of her anxiety and panic attacks.

## Ron Sturtz – Tryptophan for Anxiety, Depression and Insomnia – Part 1 www.theAnxietySummit.com – June 6-16, 2016

The information provided in The Anxiety Summit via the interviews, the blog posts, the website, the audio files and transcripts, the comments and all other means is for informational and educational purposes only and is not intended as a substitute for advice from your physician or other health care professional. You should consult with a healthcare professional before starting any diet, exercise, or supplementation program, before taking or stopping any medication, or if you have or suspect you may have a health problem.