

# Population Density Stress Is Killing Us Now!

Greeley Miklashek

You may not want to hear it, and when I started medical practice 46 years ago, I certainly did not plan on finding it, but human overpopulation and our modern life-style choices are causing physiological changes responsible for our top ten killing “diseases of civilization”. I spent 41 years in active medical practice treating 25,000 patients with 1,000,000 Rx and talk therapy. My training was in medicine and psychiatry, and the majority of my patients suffered from “anxiety” and “depression”, but I became increasingly aware of the direct association of their psychiatric problems with other general medical conditions. Eventually, I came to realize that nearly all psychiatric conditions, and most general medical problems as well, could be explained as resulting from our overactive stress response. Our chronically overactive stress response was generating abnormally elevated blood levels of the adrenal stress hormone cortisol, and researches dating back over 100 years indicated a direct connection between these elevated cortisol levels and the comparable diseases of civilization in research animals. But, then, I discovered a parallel line of animal crowding researches dating back to the 1940’s, which also implicated elevated cortisol levels with diseases and deaths associated with population density stress. As the supporting evidence accumulated, I applied this population

density stress model to my clinical medical practice and achieved remarkable results.

Numerous conscious and unconscious environmental stressors in our daily lives arouse our stress response and elevate cortisol levels, as well as other aspects of our over-activated stress response. This over-activated stress response results in our feelings and symptoms of anxiety and depression. I knew that properly administered antianxiety and antidepressant medications relieved these symptoms and signs of anxiety and depression. Numerous peer reviewed scientific papers demonstrate the lowering of cortisol levels as a result of these medications, as well as massage, meditation, and exercise, and both my patients and myself could see this effect first hand. Chronic stress was causing their anxiety and depression and cortisol lowering medications were restoring them to normal. But what about their other general medical problems?

An extensive medical scientific literature dating back to the beginning of the 20<sup>th</sup> century, had demonstrated the connection between our overactive stress response and elevated cortisol levels with many diseases: hyperthyroidism (Graves disease), atherosclerosis and heart disease, obesity and diabetes, cancers, immune system suppression and increased risk of infection, high blood pressure, kidney disease, peptic ulcers, heart attack and stroke, etc.: “the diseases of civilization”.

However, our contemporary and historical hunter-gatherer ancestors have few of our diseases. They suffer from a wide range of communicable and parasitic diseases associated with their ecosystems, but they rarely have our most prominent diseases. Their life-spans are comparable to ours. A case in point: in 1932, British physicians examined 238,851 rural Kenyans in the course of treating them for various native medical conditions, but they did not find a single case of heart disease. Heart disease is the number one fatal disease in our Western urban populations. The only factors separating the two populations are physical activity levels, sparse diet, close-knit clan living, and population density. We do not know the cortisol levels of these Kenyans, but they had few or none of our “civilized” diseases, and the same phenomenon has been reported by physicians working in similar rural hunter-gatherer and pastoralist populations all over the world.

So, a broad picture of population density stress emerged. And, then, I read several books and papers from 19<sup>th</sup> century neurologists practicing in large eastern cities in the US, who had reported numerous cases of a then new medical condition they were seeing and treating. They coined the term “neurasthenia” and later “nervous exhaustion” for this new medical condition. They made long lists of their patients’ symptoms and I realized that they matched the symptoms that I was seeing in a large sub-population of my patients.

This group of patients seemed to be suffering from the opposite of my anxious and depressed patients, leaving me to guess that they might no longer be able to make cortisol. They, like the neurasthenia patients, were totally exhausted all the time, they craved salt and were light-headed on standing, and they were plagued by either new or returning symptoms and signs of a whole array of autoimmune diseases: multiple sclerosis (MS), rheumatoid arthritis (RA), lupus erythematosus (LE), psoriasis, myalgic encephalitis/chronic fatigue syndrome (ME/CFS), fibromyalgia, etc. Cortisol regulates the immune system and neither too much or too little are healthy. So, I asked these patients to get cortisol blood levels first thing in the morning, just like I had with many of the over-stressed, anxious, depressed patients described above. Many of these poor souls were making almost no cortisol at all, while the anxious and depressed patients often had very high levels. Can you see the pattern here? These cortisol depleted patients seemed to be suffering from “adrenal fatigue”, which occurred after long periods of high stress or a serious illness, just like the neurasthenia patients in the 19<sup>th</sup> century. Fortunately for us, I could refer these cortisol depleted patients to James Wilson’s self-help book *Adrenal Fatigue*. “Doc” Wilson has an ND, DC, and PhD in nutrition, and nutritional supplementation, along with lifestyle changes, are necessary for recovery from worn-out adrenal glands. Now, is the picture getting any clearer for you, the reader, because it was getting crystal clear for me! Population density stress was making us sick and killing us, first

through the “diseases of civilization”, and then as a result of adrenal fatigue!

This has been a brief overview of what my patients taught me over a 41 year clinical medical practice. If the reader would like the details, just Google “Stress R Us” for a free e-book PDF in the MAHB library. This book goes into great detail demonstrating the connection between human overpopulation, population density stress, our rapidly increasing “diseases of civilization”, environmental collapse, and the other topics touched on above. The solution is simple. We need to voluntarily restrict our future worldwide reproduction to one-child per couple on average, which will bring our worldwide population down to the 1950 level of two and a half billion (2,500,000,000) by 2,100. The alternative is increasing disease, increasing medical interventions, decreasing quality of life, unbearable medical costs, and misery, as well as continued environmental exhaustion. Which do we prefer for ourselves and our offspring?

Thank you for your time and consideration!

Greeley G. (“Gregg”) Miklashek, MD (retired)

gmiklashek950@gmail.com