

POPULATION DENSITY STRESS IS KILLING US NOW!

An NPG Forum Paper
by Greeley (Gregg) Miklashek, MD

Introduction

NPG is pleased to present the newest addition to our Forum series, *Population Density Stress Is Killing Us Now!*, by Dr. Greeley Miklashek. Veteran NPG readers will quickly notice that this is a rather untraditional piece for NPG. We fully recognize that but encourage you to keep an open mind and finish the paper before you reach your conclusions.

Most NPG Forum papers present an argument for our cause based on new environmental reports or a recent trend in immigration policy. Dr. Miklashek attacks our common enemy, population size and growth, and the resulting decline in our quality of life, from an uncommon angle – the medical field. In the end, however, his basis for seeking what all NPG members desire – a smaller, truly sustainable U.S. population – completely aligns with our goals.

We are grateful to Dr. Miklashek for cooperating with NPG to allow us to deliver a different and unique perspective on a complex issue. We hope you enjoy reading this new paper and find it useful and relevant.

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, our dramatically changed physical environment, 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 prescriptions 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 high blood levels of the adrenal stress hormone cortisol, and research 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 research dating back to the 1940s, which also implicated elevated cortisol levels with these diseases, social disruptions, aberrant behaviors, 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.

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Numerous conscious and unconscious environmental stressors (noise, movement, strange faces, competitions on the highways, myriad visual stimuli, stressful media, disrupted families, economic and other worries, etc., etc.) in our daily lives trigger

our often unconscious stress response and elevate cortisol levels, as well as other aspects of our over-activated stress response, including over-activation of our sympathetic nervous system. This over-activated stress response results in our feelings and physical symptoms of “anxiety” and eventually “depression”. I knew that properly administered antianxiety and antidepressant medications relieved these symptoms and signs of anxiety and depression by temporarily restoring stress depleted neurotransmitter levels in our brains, once I learned how to prescribe them effectively and often in a manner other than recommended by the drug companies marketing these agents.

Numerous peer reviewed scientific papers demonstrate the lowering of cortisol levels as a result of these medications, as well as other non-medication “relaxation” modalities: massage, meditation, Yoga, Tai Chi, music, and exercise. Both my patients and myself could see this effect first hand and their lowered cortisol blood levels were proof positive. Chronic stress was causing their anxiety and depression, and cortisol lowering medications were restoring them to normal mood and arousal levels, just as the long-established relaxation modalities were known to do. Unfortunately, the non-medication relaxation therapies required burdensome constant practice and repetition, and the constant bombardment of environmental stressors required near continuous use. But what about their other general medical problems?

Extensive medical scientific literature dating back to the beginning of the 20th 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 and had, respectively few if any 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, except for our forced extensions by all manner of increasingly expensive medical technology

in our “modern” culture.

A case in point: in 1932, British physicians examined 238,851 rural Kenyans and citizens of neighboring African countries in the course of treating them for various native medical conditions, but they did not find a single case of heart disease. Dr. C. P. Donnison published these results in his 1937 book, *Civilization and Disease*, so rare today that I have the only copy in the entire state of Wisconsin!

Heart disease is the number one fatal disease in our Western urban populations. The only demographic factors differing between us and them are physical activity levels, sparse low sugar diet, close-knit life-long clan living, immersion in an undisturbed natural environment, and low population density. We do not know the cortisol levels of these rural Africans in the 1930s, 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 in varied climates and with varied diets. And, by the way, these same rural hunter-gatherer or pastoralist people develop all of our diseases within two years of moving to congested urban centers and taking up our Western lifestyle! Thus, some authors refer to these diseases of civilization as “lifestyle diseases” or the “metabolic syndrome” and attribute the sole cause to our “fast food” highly processed diet and sedentary lifestyle.

So, a broad picture of population density stress emerged. And, then, I read several books and papers from two 19th century neurologists practicing in large eastern cities in the U.S., Drs. Charles Miller Beard and Silas Weir Mitchell, who had reported numerous cases of a then new post Civil War medical condition they were seeing and treating in New York City and Philadelphia, respectively. They coined the term “neurasthenia” and later “nervous exhaustion” for this new medical condition. They made and published long lists of their patients’ symptoms and I realized that their symptoms matched what I was seeing in a large sub-population of my patients.

This group of patients, with a previous history of severe or chronic stress, seemed to be suffering from the opposite complaints of my anxious and depressed patients, leaving me to guess that they might no longer be able to make cortisol. Perhaps over use of their adrenal glands had simply worn them out, so

now they could no longer produce adequate amounts of 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 energy release as well as the immune system and either too much or too little is unhealthy. So, I asked these patients to get cortisol blood levels first thing in the morning, just as 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 most 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 even a brief serious illness, just like the neurasthenia patients in the 19th 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, is 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! The front cover of my 2018 book, *Stress R Us*, is a series of photos published by a German physician in 1944 (!) demonstrating the progression of adrenal gland over-activity in two men with high blood pressure and ending with an obviously exhausted, no longer productive shrunken example consistent with what I was seeing in clinical medical practice. This photo was published, again, in Hans Selye’s 1950 iconic 1025-page book, *The Physiology and Pathology of Exposure to STRESS...*, page 314.

Population density stress was making us sick and killing us, first through the “diseases of civilization”, and then as a result of adrenal fatigue! I knew that all of these diseases were increasing exponentially and that 55% of our American adults had at least one or more chronic disease! I, also, knew that one in three entering college freshmen was already taking an antidepressant and one in four adult women as well. Then it hit me like a bolt of lightning out of the blue, population density stress could be reframed as Mother Nature’s

population regulation mechanism! Of course, just when I thought that I must be the first observant fellow to come up with this earth shattering notion, I re-read Jeffrey Alan Gray’s *The Psychology of Fear and Stress*, 2nd ed, 1987, where in his section on “The general adaptation syndrome as a density-stat”, Dr. Gray stated on page 81 the following revolutionary novel theory:

“we have an immediate explanation not only of the suppression of reproductive functions which is part of this syndrome (GAS), but also for the decreased capacity to cope with tissue-damage and infection....For these changes are exactly what we would expect if the GAS has the function of restraining or reducing population density when it gets too high. On this view, it is not merely the case that high population density is one form of stress which activates the GAS; rather, the GAS has perhaps evolved precisely so as to act as a density-stat”

The attentive reader must be wondering what the devil this “GAS” is all about. The Austro-Hungarian/Canadian physician and early stress researcher, Hans Selye, MD, published a paper in 1936 describing his finding of a set of three pathological conditions in autopsied rats who had been experimentally stressed (tortured?): enlarged adrenal glands, shrunken thymus glands, and peptic ulcers. He consolidated these three findings under the abbreviation “GAS” for “General Adaptation Syndrome”. His 1950 book summarizing and documenting his research has already been noted above. So what, you may be asking? And what does this have to do with my medical practice or the central theme of this writing: the medical consequences of human overpopulation? Let me attempt to tie these threads together for you.

At about the same time that Dr. Selye was publishing his iconic tome on stress in 1950, three other research biologists were conducting projects on reproduction in rat populations. They were John B. Calhoun at the National Institutes of Health, J. J. Christian at the Penrose labs at the Philadelphia Zoo, and Charles Southwick at the University of Wisconsin. They all used a similar model of placing a few pairs of rats or mice in a small “utopian” enclosure where all their basic needs for food, water, housing,

and sanitation were met, thus mimicking an urban center but with rodent residents. Then, they watched and carefully recorded the population growth and individual behaviors of the labelled rodents. Calhoun published his iconic paper describing the behavioral evolution of his colony as the population grew and reached its maximum in the 1962 Feb *Scientific American*. In fact, you may view him at work in his utopia in a Youtube video entitled “Critical Mass” for \$1.99! His focus was on the development of social behavioral pathology as the population grew and eventually led to such overcrowding that mothers could no longer successfully raise their pups to weaning, thus leading to extinction of the entire colony. Southwick described the same phenomenon and reached the same conclusions as Calhoun. However, Dr. Christian, who I had the pleasure of meeting in Binghamton in 1979, became convinced that rising infertility was the ultimate cause of the extinction of his overcrowded colony and that overproduction of the stress hormone cortisol was the chief cause! Is the reader beginning to see a method to my madness now?

During my psychiatry training in 1971-1974 at Wisconsin, the leader of our family therapy seminar, Carl Whitaker, had passed out a copy of John Calhoun’s *Scientific American* article, which I had filed away. Somewhere along in my 42-year clinical psychiatry practice, I was sorting through some old papers and stumbled onto Calhoun’s paper, which sent me off exploring this whole area of animal overcrowding research, which I have never seen even mentioned in all the overpopulation or environmental collapse publications! And, by the way, guess what physical pathologies these rodent experimenters recorded when they autopsied their deceased animals? Did you guess “GAS”? Then, you are correct. They had enlarged adrenal glands, shrunken thymus glands (necessary for immune function), and peptic ulcers! Beginning to see the big picture now?

Over the last half of the 20th century, other medical epidemiologists (disease statisticians) and researchers were attempting to find the causes of our rapidly rising load of the diseases of civilization, often using experimental animal models. Many of them were finding similar strong correlations between high blood pressure, atherosclerosis and heart disease, stroke, cancer, ulcers, kidney disease,

immune deficiency (remember cortisol suppresses immune function and kills T-lymphocytes-formed in the thymus gland), addictive behaviors, anxious and depressive behaviors, etc., and correlations with overpopulation, population density stress.

Since my retirement from clinical practice and devotion fulltime to medical science writing, I have come to realize that the two prominent neurotransmitter chemicals now known to be depleted in anxiety and depression, dopamine and serotonin, are also released in the stress response and are known to be restored to normal levels by antidepressants. I was always frustrated by the number of patients who responded initially to antidepressants but then suffered a recurrence of their depression and anxiety symptoms after some months or years of effective treatment. These folks were either unable or unwilling to make the necessary lifestyle choices to reduce the stressors in their daily lives. It baffled me that sometimes, try as we might, they would not respond to any further antidepressants and we had to “augment” their medication regime with anything else we could possibly think of to regain the remission of their symptoms. The drug companies have remarketed many of their agents not initially intended to treat anxiety or depression to fill the void of useful agents in the treatment of these many “treatment resistant depression” patients.

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So, I have been forced to conclude that, again, our chronically over-active stress response, due to population density stress, is quite likely responsible for our epidemics of anxiety and depression, which often spill over into the other epidemic health problems including suicide, alcoholism, and addiction, newly named “the diseases of despair”.

Now, the attentive reader has begun to connect the dots between our overactive stress response, population density stress, the “diseases of civilization”, the epidemics of anxiety and depression raging in our society, the epidemics of alcoholism

and drug addiction (both turn off the stress response!), our stressor filled man-made artificial physical environments, our “hurry-up” sedentary lifestyle, the stress of overcrowding as revealed in hundreds of crowded overpopulated animal studies, the 4.3 billion prescriptions for medications largely used to treat our “lifestyle diseases” or “metabolic diseases” or “diseases of civilization”, our overburdened \$3.3T healthcare “industry” (predicted to reach \$5.9T by 2030!), and overpopulation. Let’s more carefully define “population density stress”.

My term “population density stress” includes the following: (1) the over activation of our stress response due to physical crowding among members of our own species, (2) loss of the incredibly supportive ancestral clan/band social system, (3) near constant exposure to our stressor filled man-made physical environment, (4) alienation from the naturally relaxing rhythms of undisturbed nature from which we evolved only recently, and (5) increasing exposure worldwide of individuals to near death traumatic experiences in war and other severe traumatic events resulting in the PTSD epidemic.

And for some icing on the stress cake, we have become a nation of stress “addicts”. Oh, didn’t I mention that the neurotransmitters released in the stress response are potentially addicting? You’ve heard about dopamine and serotonin, as well as cortisol, but now you are being told about the natural opiates (endorphins), anandamide (the natural THC found in marijuana), (nor)epinephrine, and others released in the stress response. Our physiology adapts to continuously high levels of any of these chemicals and then demands that we maintain behaviors that cause their continued release. Have you seen anyone lately with a tremulous hand, like myself, or a runner or performance athlete who just can’t stop running/performing, or attend any of the over 400 “12-step” groups for those of us addicted to myriad self-medicating behaviors, or sought mental health treatment for depression and anxiety, or...? I believe these are all conditions resulting from depletion of neurotransmitters due to our overactive stress response and addiction to our very own neurotransmitters!

When’s the last time you attended a public rally or sporting event or concert, with say 20,000 screaming strangers, or just drove across town during rush hour? Did it get your heart pumping (dopamine and epinephrine)? Do you find yourself “streaming” one

“exciting” movie after another or reading one exciting spy or murder mystery novel, or watching a car race or horse race or...? Do you pace your stress exposure and demand an equal number of “down times” for relaxation (serotonin)? No? Why not? Don’t want to lose that wonderful stress “high”? Jonesing for excitement? Hmmmm.

Are you familiar with the Nobel Prize winning research of Elizabeth Blackburn, PhD, on telomeres and the enzyme that keeps them fit, telomerase? Remember your childhood shoelaces, the ones with the plastic tubes on the ends to keep them from unraveling? Our chromosomes have similar tip constrainers on them called telomeres, to keep them from unraveling, otherwise we age rapidly and die. So, these chromosome end tip protectors are the secret to “living younger, healthier, longer” to quote from her 2017 book, *The Telomere Effect*. So, why have I gone off on this tangent? Guess what hormone disrupts the work of telomerase to prevent restoration of the telomeres at the end of our chromosomes and thus hastens our death? Yup, it’s cortisol again!

How about we consider human reproduction now, as it’s always a crowd pleaser? Did you know that one in six American couples (1/6) is unable to have a child after a year of trying, or that the same “problem” is occurring all over the developed world in urban centers? A single IVF treatment costs about \$18K and typically several are necessary before a pregnancy is established. Looking for a high paying job? The reproduction industry is actively recruiting physicians and technicians in Hong Kong and other similar crowded urban locations. Did you know that sperm counts have fallen by 59% over the past 38 years and Hagai Levine and his group in Israel are warning of a potential extinction event in the not too distant future? Fertility rates are falling throughout the developed world and only immigration is maintaining the American rate at 2.1. However, when we consider that the continental U.S. was only occupied by about 2 million Native Americans when Columbus arrived in the islands, that puts us at about 165 times more than the hunter-gatherer carrying capacity at that time! Worldwide the number approaches a factor of 3,000 for how many more of us are on the earth today than at the beginning of the agricultural revolution 7-12 thousand years ago when the global hunter-gatherer ancestral numbers were 2.6–10 million, depending on whose reference you’re

reading. Shouldn't we be attempting to reduce our population back down to sustainable levels for the sake of future generations? Just how many humans can our nation support in a world of dwindling natural resources? I can't answer this one, but somebody better figure it out and sooner rather than later!

George Chrousos has published his work at the NIH and established the endocrine mechanisms for population reduction. Basically, well you guessed it already, cortisol and the master stress hormone in the hypothalamus and amygdala, CRH (cortico-tropin releasing hormone) inhibit the synthesis and release of the reproductive hormone GnRH (gonadotropic releasing hormone) into the pituitary gland, which in turn causes the release of LH and FSH (leutenizing hormone and follicle stimulating hormone) from the pituitary gland. And these two hormones control the release of eggs and sperm. I don't need to draw you a picture of what happens from there on do I? So, now we've come full circle from the initial discovery in the 1930s by Hans Selye that his stressed rats lost their ability to reproduce, to population density stress naturally inhibiting reproduction in overpopulated humans. The biological evidence of human overpopulation generating population density stress and naturally turning down or even off human reproduction is piling up, right?

The biological evidence of human overpopulation generating population density stress and naturally turning down or even off human reproduction is piling up ...

The reader may or may not be familiar with one of my favorite movies, which all of us interested in the subject of human overpopulation should watch, "The Children of Men". It is derived from a prescient 1992 novel by the same name and written by the late mystery writer, P. D. James. It takes place in England in the near future, when all further human reproduction has mysteriously ceased and everyone is watching the youth age or perish. The country is overrun by immigrants, who are being forced into camps unless hidden by a violent pro-immigration militia. It is a real eye opener and totally unlike any other of Ms. James' novels. Needless to say, there exists a large repertoire of dystopic futuristic novels

like "Soylent Green", starring Charlton Heston and Edward G. Robinson in a miserably crowded urban setting where all are surviving on a daily allotment of a mysterious caloric supplement, Soylent Green. I don't want to spoil the conclusion for you, if you haven't seen it. You might wish to have a showing at your next local overpopulation group meet-up!

As we begin to wind this essay/forum paper down, let's look at the question of whether or not we truly are overpopulated and, thus, need to begin reducing our population on earth, as NPG is suggesting. What parameters can we use to gauge our current population level of approximately 7.7 billion. There are many excellent publications on the negative effects our current worldwide numbers are having on the physical environment, although it often seems that the mainstream media and us in general would rather look the other way when the topic is broached. I don't need to say anymore about the human contribution to global warming and climate change, do I? Ah, what the heck, I will anyway. I study this topic daily now that I'm retired and can scan the net far and wide, so here are a few factoids you may not have seen.

Only 15 of the over 60 transoceanic mega-container ships, you know the ones we spent billions widening the Panama Canal for, produce as much CO₂ as all the autos on earth daily, and there are over 60 in service, not to mention the 60,000 smaller ones. My reference is friend Jan Lundberg's culturechange.org website, which I highly recommend to anyone interested in the environmental effects of transportation of all kinds. East Coast sea level rise is one inch every 7-8 years, assuming the melting glaciers don't rapidly increase this number. The ocean heating is 13 Zetajoules/yr. That's 1,300,000,000,000,000,000,000,000 Joules/yr and like all of these human caused effects on the environment, rising exponentially. Just today, July 1, 2019, the Weather Channel is telling us that water temperatures in the Gulf of Mexico are ranging between the mid-80's and 90's and how all this heat energy will worsen any hurricane that may arise! You know, the old "hockey stick" curve reaching for the stars! According to the ocean warming international conference report on the net, we would be 65 degrees F warmer worldwide just since 1988, were it not for the ocean's capacity to store 4,000 times more heat than the atmosphere!

Then there's the question of feeding the 9.3 billion of us expected to be here in 2045, 26 years from now. One of my science heroes, E. O. Wilson, in his prescient little book, *The Future of Life*, states that we will all need to be vegans at that point in order to just survive. Why? Well, we Americans currently consume 20 times the average African, in general. But as for meat, the "Optimum Population Trust, Smil 2011" indicates that the worldwide weight of vertebrate land animals is comprised of 32% humans, 67% livestock (meat animals), and only 1% left wild. Ten thousand years ago, at the beginning of the agricultural revolution when we numbered 2.6 – 10 million, 1% were humans and 99% were wild. Now there's a wake-up call for the 6th Extinction! The reference here is Jonathan Austen's 2018 *Save the Earth...Don't Give Birth*. Gotta love that title!

Here in the Midwest, although you'd never see it in the mainstream media in farm country, a recent Reuters report, "Only 60 Years of Farming Left If Soil Degradation Continues", quoted a UN official. Other quotes included: "We are losing 30 soccer fields of soil every minute, mostly due to intensive farming". Is it any wonder that Mother Nature wants so desperately to get rid of our species? We are the great destroyers and denial is our middle name.

Ever heard of "Overshoot Day"? This year it is July 29. Last year it was August 8. It is the day on which we humans have used all the earth's renewable resources for the year and we are dipping into our biological treasury to extract the unrenovable principal. What possible better indicator of human overpopulation? Population density stress and the "diseases of civilization"? Hmmmm.

I am arguing that all of our "diseases of civilization" are "biological markers" of overpopulation generated by population density stress. A biological marker is something a scientist (or just a curious kid with a computer or library card or both!) can measure that has a 1:1 correlation with a biological phenomenon that is otherwise too difficult to measure, kind of like a scientific metaphor, if you ask me. And I believe this is particularly true of the rising indicators or biological markers of stress hormone levels, rising infertility, rising violent deaths, rising displaced migrants-UN says that number has reached 70 million, rising sea levels and temperatures on land and in the seas, the 6th extinction, the tiny fraction of wild animals left on earth, the growing weight of humans on earth,

the increasing resource wars, the increasing role of population density stress in every aspect of life worldwide, the suicides of 22 military veterans per day, the increasing dependency of Americans on prescription medicines just to maintain life (I wrote 1,000,000 of these!), the loss of spiritual connection to Gaia (the Greek personification of the living earth) or Mother Earth, the rapidly increasing climate change, etc.

However you want to measure it, we are massively overpopulated and destroying the very earth we so depend on. And we are running out of time to change course and do a 180.

However you want to measure it, we are massively overpopulated and destroying the very earth we so depend on. And we are running out of time to change course and do a 180. All the biological markers are there for us to see, if we can only find the courage to look the truth in the eyes and take responsibility for changing the otherwise dismal course of history for our offspring and Mother Earth and all Her creatures great and small.

This has been a brief overview of what my patients taught me over a 42-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 website library at Stanford, or purchase a paperback copy on Amazon Books. 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 to the problem of our rapidly increasing diseases of civilization, our increasing cortisol levels or their collapse, and the human overpopulation driving them 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. Such a worldwide effort demands ready access to safe, effective, and inexpensive contraception and freedom for men and women to make the decision to limit their reproduction in order to have a habitable earth for their child, and the generation following, if there is to be one.

Of course, Capitalism will necessarily have to find a new model of money management, if our species is to survive! “Degrowth” will be the new normal, if we are to survive on a habitable earth as a species. I should point out, in the final section of this paper, that all of the over 100 crowded animal experiments referenced above ended the same way, with total extinction of every single animal in the colony. Position in the hierarchy saved no-one in the end, when chaos reigned and no mother could raise her pups to maturity due to the breakdown of all social structures. The studies by J. J. Christian demonstrated a central role of elevated cortisol levels in the terminal die-offs.

The end was always truly dystopian as more and more individuals were sick and dying. Have I mentioned that 55% of American adults currently have at least one chronic disease for which we must regularly seek treatment? Or did I report that one in three (1/3) entering college freshmen and one in four adult women (1/4) are already taking an antidepressant? Now you know just how sick we are already!

The alternative to this voluntary human population reduction movement is increasing disease, increasing ever more costly medical interventions, decreasing quality of life, and misery, as well as continued environmental exhaustion, the 6th Extinction, and endless resource wars.

The alternative to this voluntary human population reduction movement is increasing disease, increasing ever more costly medical interventions, decreasing quality of life, and misery, as well as continued environmental exhaustion, the 6th Extinction, and endless resource wars. Which do we prefer for ourselves and our offspring?

Thank you for your time and consideration!



Dr. Greeley G. Miklashek is the author of the book, *Stress R Us*, available as a free PDF on Paul Ehrlich’s MAHB website in their e-library, or as a paperback on Amazon Books. Dr. Miklashek is a retired neuropsychiatrist who practiced clinical psychiatry for 42 years and retired to write 7 years ago. He has done numerous presentations on stress and population density stress to professional and lay audiences. He graduated from Wittenberg University in Springfield, Ohio, and the University of Wisconsin Medical School, followed by a Psychiatry Residency at the same school. He has held a number of academic and clinical positions, including the University of Rochester (NY) School of Medicine, Upstate Medical School (Binghamton campus), and Michigan State Medical School. His email address is: gmiklashek950@gmail.com.

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