

Oxytocin – The Bringer of Creation and Destruction

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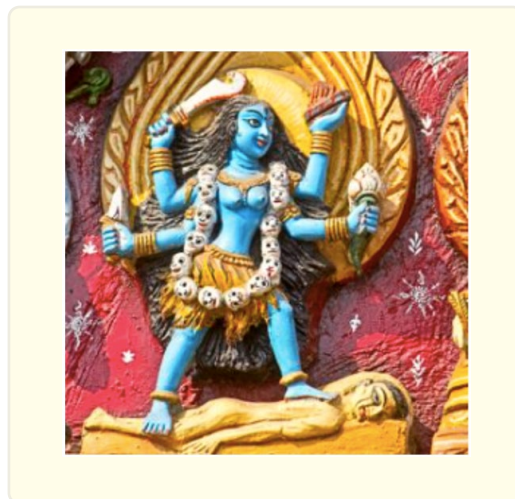
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Psychoendocrinology is a field of study but almost nothing from this field is applied in a practical way that can actually help people. I hope to make a small dent herewith in my discussion of the hormone oxytocin (not to be confused with oxycontin).

I believe oxytocin is perhaps the most powerful neuropsychiatric intervention on the planet. Very few know about it outside its application in Maternal Medicine or how significant an influence it is in all our lives.



There is a dark side to this hormone/neurotransmitter and it has to do with all the relationships it has destroyed, or should I say the lack of this hormone has destroyed untold relationships and marriages. Oxytocin deficiencies are at the root cause of so much distress, misunderstandings and destruction of our relationships that it has led many to self-medicate especially alcohol, because alcohol does cause an oxytocin release.

Given this hormone is not well appreciated or understood, permit me to review some salient points. There are extraordinarily beneficial uses of the hormone/neurotransmitter called oxytocin. Oxytocin is also accurately described as a neuropeptide, and it's produced in both women and men. Although it's often associated with female reproduction, more recently oxytocin has become known as "the love hormone" as it brings forth feelings of trust, security, connection, calmness, and contentment.

I first came to learn about oxytocin in my work with brain-injured patients where it was used to mitigate the anxiety issues they often contend with. My primary focus was using oxytocin with children living with cerebral palsy, as well as environmental encephalitic syndrome (which is erroneously called autism and most often triggered by vaccinations).

Over time, I came to discover the profound potential for healing that oxytocin offers related to many of the great ailments of our time—including mental illness, addictions, sexual dysfunction, cancer, and grief.

My knowledge of using oxytocin in the treatment of grief is first-hand. In 2007, my beloved 16-year old son Galen was killed in a train accident, sending me into a chasm of what I came to view as pathological or persistent grief—where I was unable to modulate obsessive thoughts about how my son died, what he might have experienced, what if I had been able to be there, and so on. This collection of fear, anxiety, and panic took on a life of its own, as if it were a separate thought-stream that I had no control of. It was suffocating and debilitating.

Although I had become adept at using oxytocin for treating fear and anxiety in children on the autism spectrum, it took me over three weeks after my son passed until I had the idea that it might help me too. I was so far down the rabbit hole of grief that I could feel a circadian miasm, of sorts. Let me explain. There are periods each day—the hour before sun-up and the hour after sundown—that the ancients acknowledged as being especially potent times. They referred to the hour before sunrise as “the hour of the wolf” and the hour after sunset as the bewitching hour. On mornings when I was sleeping during that predawn period (the hour of the wolf), I would have the most distressing and horrible nightmares. When someone is already in a state of distress panic and fear can be greatly intensified in these hours.

Once I finally had the epiphany that I should try oxytocin on myself, I waited until I was under the influence of one of these unpleasant miasms and then began my experiment. One night, I set my alarm to wake up before this period and dosed myself with oxytocin, and the outcome felt nearly miraculous. The severity of obsessive negative thoughts during this acute grieving period were altered within minutes after using oxytocin. Whereas before I had to breathe through this emotionally difficult hour as if I were in a Lamaze class, that survival strategy became unnecessary with the use of oxytocin. This time, I was actually able to play music until the sun came up.

It took about ten minutes to experience the full effect, and with each passing minute a great sense of emotional equanimity took place - I could feel it doing something in less than a minute. The panic and fear dropped away from me as if I were shedding clothing. If I wanted to think about my son’s train accident, I could. But the moment I didn’t want to think about it, the accident faded into the background of my mind. It wasn’t there hammering away at me as if it had a life of its own. By successfully diverting these negative feelings from wherever they would have taken me, I was able to process my grief without the interference of negative obsessions. This was invaluable, to say the very least, and kept me from developing severe post-traumatic stress disorder (PTSD)...because that was certainly where I was headed.

Forty-five days after my son passed in 2007, I was giving a lecture at the MIND Institute at the University of California at Davis about how hyperbaric oxygen therapy can influence damaged neurons in the brains of autistic children. In private, I met with Dr. Robert Hendren, then the head of the MIND Institute before leaving to Chair the Child Psychiatry department at UCSF. After talking with him about my work with autistic children and oxytocin, I then told Dr. Hendren of the relief I had found from my grief and the website I had established for others needing help out of the quicksand of despair – www.GriefSOS.com. Interestingly, in 2009 the MIND Institute invited Dr. Eric Hollander, Chair Child Psychiatry, Mount Sinai School of Medicine to lecture on the use of oxytocin in those diagnosed with autism (the lecture is viewable in its entirety on YouTube [1]).

To date, I have never prescribed oxytocin for a patient in grief who did not report significant benefit from its use. However, do understand that there are rare individuals that do not respond to oxytocin, no matter how much they may need it or how much you give them - it is as if they have no oxytocin receptors - fortunately very rare. As for myself, after just a few weeks I was able to completely stop using oxytocin. In that short period of time, it gave me the ability to deal with the worst kind of emotional pain without getting

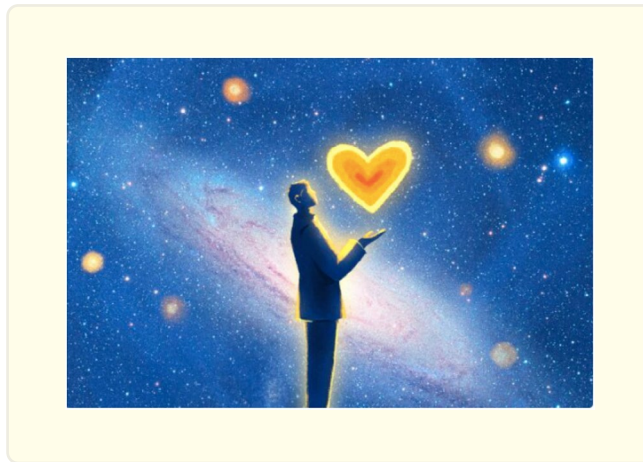
completely swallowed up by it.

It is past time for this potent hormone to become widely known and understood both within the medical field and in the general population. For its absence can turn one's life inside out and upside down.

Oxytocin – An Overview

How is oxytocin made?

Oxytocin is a hormone manufactured in the hypothalamus, the part of the brain that (along with the hormone vasopressin which allows the body to regulate its water content by reducing urine output. From the hypothalamus, oxytocin travels to the posterior lobe of the pituitary gland and is released when needed.



Oxytocin and its relationship to fear, anxiety, and trust

There are oxytocin receptors in the brain of both sexes, as well as in the uterus of a pregnant woman. One of the key effects of oxytocin is to block fear, anxiety, and panic input into the amygdalae. The amygdalae is the almond-shaped group of [nuclei](#) located deep within the [medial temporal lobes](#) of the [brain](#) and is part of the limbic system, which modulates [emotion](#), behavior, long-term memory, and olfaction.

The amygdalae is also the part of the brain that modulates trust. In effect, by blocking fear, panic, and anxiety, there can be trust. I don't think oxytocin engenders trust as much as it blocks fear, because one does not trust when one is in fear. So, it would probably be more accurate to say that oxytocin is the hormone of blocking fear rather than to call it the trust or love hormone. In any case, researchers have confirmed a strong link between oxytocin and sociability. In other words, when we're emotionally and physically healthy and in balance, we are naturally social.

Fear is the opposite of love. Fear is **not** how things work and if one is operating out of fear...things will not work out.

Oxytocin and childbirth

Oxytocin is one of the primary hormones associated with childbirth. During labor, the receptor cells that allow a woman's body to respond to oxytocin are greatly increased. And it is oxytocin that stimulates powerful contractions, which helps to dilate the cervix and move the baby down and out of the birth canal. This distension of the lower birth canal and stimulation of pelvic autonomic nerves leads to oxytocin release if there is no epidural. In fact, if a woman does have an epidural she may need to be given additional oxytocin to minimize the need to use forceps [2]. Although low-dose (as opposed to high-dose) oxytocin and epidural anesthesia will increase cesarean section rates [3]. When women in labor need help to trigger or strengthen their uterine contractions, the drug they are given

is called Pitocin®, which is, in fact, oxytocin, but synthetic version.

Oxytocin in pain relief and wound healing

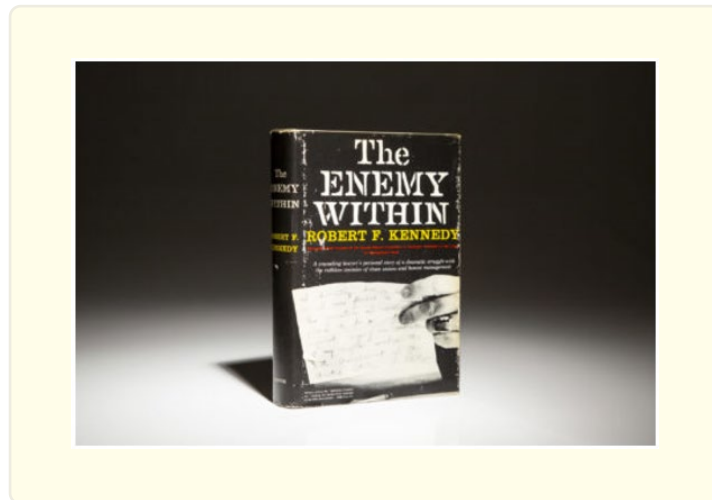
Oxytocin exerts an analgesic action by reducing the depolarizing action of gamma-aminobutyric acid (GABA) on the nerves that respond to pain, known as nociceptive neurons. GABA is the primary inhibitory neurotransmitter and oxytocin upregulates its action. Researchers have found that oxytocin relieves pain in newborns and makes the delivery process less problematic for the newborn [4]. And seems to be effective in relieving low back pain in children and adults as well [5].

Oxytocin has even been shown to play a role in wound healing, which stands to reason when we connect the dots. Understandably, when a person gets injured, stress, anxiety, and fear tend to increase. However, when we have adequate oxytocin levels, the cascade of stress hormones (primarily cortisol) is reduced and doesn't interfere with the wound healing process [6].

Is oxytocin a mind-altering substance?

Although I have experienced the dramatic emotional impact of using oxytocin at a critical moment in my life, results aren't dramatic in every case. For example, when oxytocin is administered to an emotionally and physically healthy individual, it's likely that that person would notice minimal changes. Oxytocin does not get one "high," nor does it alter one's level of consciousness.

If you used oxytocin before going to a dinner party, would you be more outgoing and gregarious? Would you interact with greater ease and laugh more often? It could happen, but the effects would likely be rather subtle. To put it in perspective, think of a woman in labor. I, for one, have never seen a laboring mother who was given Pitocin® (synthetic oxytocin) radically change her demeanor and ask her nurses and midwives to join hands and sing a round of Kumbaya during the birth process. But it does help her move through labor.



Oxytocin deficiency: the enemy within or how the lack of this one hormone is tearing at the very fabric of our society

It is not my intention to single out the females of our species here but the truth is women are very emotional beings and are the most impacted by fluctuations in oxytocin levels as well as other hormones. I recall a quotable line from a Spider-Man movie where Uncle Ben tells his nephew, Peter Parker, "With great power comes great responsibility."

I submit women have great emotional power, which is a problem if you do not also know the responsibility for having that power is also great. Again, I am not picking on women, I am only stating the truth as I understand it. Women have great emotional power, and men often put women on a pedestal in awe of their emotional power, but they are no more emotionally intelligent than men are, and

that, I am afraid, is a really big problem. For starters, women should not be put on a pedestal for any reason. We are all imperfect human beings, and if one is interested in a viable long-term-relationship (LTR), putting someone on a pedestal will work against a stable LTR. If you treat someone like royalty one might expect Noblesse Oblige, but more likely one will eventually experience an execution, “Off with your head.”

Polymorphisms or SNPs (mutations or variation) on the OXTR (oxytocin receptor gene) are very common in the human population and they will cause a functional oxytocin deficiency regardless of adequate oxytocin levels. For example, one of these SNPs will cause women to feel lonely all the time and have a lot of anxiety.

My point is genetics complicates what is already a very complicated situation. I think the best we can do is educate ourselves about how various hormones affect our behaviors and try to get ahead of any potential problems. I realize I am asking for a lot, but I will give you a small example. I educated parents in my medical practice about the importance of telling their young adolescent daughters about oxytocin, specifically that this hormone could cause them to make life decisions based on false assumptions.

When these young gals have their first puppy-love they will be flooded with oxytocin. That will greatly impact their perception of reality as most American teenage girls are under all the high levels of stress and anxiety our unnatural modern cultural landscape imposes on adolescent girls in our unlovely society. That guy they fall in love with will have little to nothing to do with making them feel so wonderful - that it is their own oxytocin not the guy. I would tell the parents this knowledge needs to be shared with their daughters to help them stay grounded. Make appropriate decisions for themselves. But this was years ago and even though I was incorporating psychoendocrinology into my medical practice with practical advice, I had no idea back then just how helpful as well as dangerous this hormone is.

I think of oxytocin akin to the Hindu god Kali - both creator and destroyer. Without emotional intelligence oxytocin has destroyed and will continue to destroy.

Oxytocin receptors may decrease in a diseased or aging brain, and if receptors are destroyed or limited, such as what may happen in a child with a post-encephalitic syndrome, normal physiologic levels of oxytocin may not be enough to get done what oxytocin needs to do. Also, an injured brain may not be able to manufacture the amount of oxytocin required to do the job at hand. Using the example of a vaccine-injured child who has developed an autoimmune encephalitis, receptors on the neurons in the brain could fall victim to the attack—be they folate receptors, NMDA receptors, or—as in this example—oxytocin receptors.

There can be changes in the oxytocin levels inside the brain or cerebral spinal fluid that are independent of oxytocin levels circulating in the blood. As there isn't yet a practical way of measuring how much oxytocin is being pumped out inside the brain, one's need for oxytocin must be determined either by circumstance or empirically (by observation).

In general, oxytocin levels are supposed to increase with age; although, not everyone agrees.

Plasencia et al. found otherwise and that the effect of this deficiency on women is much more profound than with men.

It is clear from my clinical experience that in most, the oxytocin levels do drop and this is incompatible with the maintenance of a domestic/romantic relationship. But even if the levels don't drop, if the receptors are destroyed or missing it still causes the same problem.

ORIGINAL RESEARCH article

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Oxytocin Release Increases With Age and Is Associated With Life Satisfaction and Prosocial Behaviors

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Plasma oxytocin and vasopressin levels in young and older men and women: Functional relationships with attachment and cognition

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Affiliations + expand
 PMID: 31606581 PMCID: [PMC6943921](#) DOI: [10.1016/j.psyneuen.2019.104419](#)

Abstract

A growing literature associates the neuropeptides oxytocin (OT) and arginine vasopressin (AVP) with affiliative and cognitive outcomes. The majority of this work in humans, however, considers

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RESEARCH ARTICLE

Oxytocin blocks enhanced motivation for alcohol in alcohol dependence and blocks alcohol effects on GABAergic transmission in the central amygdala

Brendan J. Tunstall , Dean Kirson , Lia J. Zallar, Sam A. McConnell, Janaina C. M. Vendruscolo, Chelsea P. Ho, Christopher S. Oleata, Sophia Khom, Maurice Manning, Mary R. Lee, Lorenzo Leggio, George F. Koob, Marisa Roberto , Leandro F. Vendruscolo 

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Oxytocin deficiencies do drive some to drink. Our interpersonal, especially romantic relationships, are deeply affected by the lack of this hormone. And problems in this area drive many to drink. A woman could have a good partner, a pleasant home, and wonderful children but if she has little to no oxytocin she will open the gates of her emotional brain - the limbic system - to inappropriate fear and panic. She will then be at risk of going into fight or flight mode regardless of the lack of a legitimate reason, this will then turn off the Love light in her relationship. You can't express love and be in fear at the same time - they are polar opposites. Once that Love light is turned off it is off for good and with that any romantic interest in her current partner.

Over 11% of girls in the US are victims of sexual abuse and that does cause serious psychological trauma. I think it is higher than 11%, but I can't back that up. These traumas are often unresolved and buried deep in the subconscious mind, but with inadequate oxytocin there is no gatekeeper repelling these fragmented memories from the amygdala and the rest of the limbic system, so these memories can subconsciously slip into the emotional centers of the brain and then Bingo - fight or flight kicks in having little to nothing to do with her present reality. Unfortunately, slipping into fight or flight is not usually a recognizable event in the context of LTRs - it more like a thief in the night - you don't see it or hear it coming and the sequelae could be very subtle as the emotional bond a couple has imperceptibly deteriorates until by the time it is recognized, if it gets recognized at all, it is too late.

Again, this is all done below the conscious mind, and in fact the frontal cortex, where we do our logical thinking, gets turned down very low when one is in fight or flight mode, so one's behavior becomes driven by one's fears and anxieties - the primitive reptilian mind and the home of one's ego. Ego will have its way when one is in fight or flight unchecked by the higher executive aspects of one's consciousness. There is no reasoning with that lizard brain. The trigger could be a childhood trauma that had been locked away, but with low oxytocin levels this trauma gains access to the amygdala and the rest of the limbic system and its Game Over by the time she says, "I am not happy."

In dating, if a woman has had multiple dysfunctional relationships and has been treated with disrespect, she will be like a PCR test that is cycled so high it will always find something untoward. She could go out with a good man who does something innocent and benign but because fight or flight is her go-to emotional response, thanks to her (relationship) PTSD, she will check out of that relationship with that good man. It could be something as inane and irrational as ordering the wrong dipping sauce for Buffalo wings, or wearing the same type of shoe her abusive ex wore.

This is why it is really important for women to protect their innocence. I am not saying that because I am some holier-than-thou prude. A heavy price is paid by many women for having participated with the hook-up culture, especially if these women were treated poorly. I have always said just because you can do something doesn't mean you should, but that comes back to morals, which few seem to have today. Also, a lot of men will not consider an LTR with a woman with a history of many partners - they do not want to go where so many have gone before. In truth, a gal who has been very promiscuous often does not have the psychological tools to support and maintain a LTR and men seem to sense that once promiscuous always promiscuous. Bottom line is just like women look for men with a high status (hypergammy), men look for women with a good reputation.

Where have all the hormones gone?

A study was done recently that showed that women who were not on birth control pills would be attracted to men whose genetics complemented their genetics - they could literally smell the genetics of a potential partner. If the woman had a mutation on the MTFHR gene she would find a man attractive if he did not have that same mutation. What was found was the women on birth control pills could not pick the men who complemented their genetics. I submit that when these gals get married to the wrong genetic guy and they go off their birth control pills they will have no attraction to this man anymore, they might even be repulsed and they certainly will not want to bear his children.

▶ Proc Biol Sci. 2008 Aug 12;275(1652):2715–2722. doi: [10.1098/rspb.2008.0825](https://doi.org/10.1098/rspb.2008.0825) ↗

MHC-correlated odour preferences in humans and the use of oral contraceptives

[S Craig Roberts](#)^{1,*}, [L Morris Gosling](#)¹, [Vaughan Carter](#)², [Marion Petrie](#)¹

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Abstract

Previous studies in animals and humans show that genes in the major histocompatibility complex (MHC) influence individual odours and that females often prefer odour of

Many men will state that their partner is not the woman they married nor the woman they fell in love with because in a very real sense that gal is gone, checked out. She may look the same and have the same voice but that person has been, in a sense, lobotomized because her frontal cortex is not working well - at least not in the context of their current relationship, which will be perceived as being the source of her problems.

Men are unaware that when they date, or fall in love, or get married they are in a sense interfacing with someone with a specific level of certain hormones, in other words they are on a date with or make a commitment to someone with a set of hormones in a certain ratio. Unbeknownst to most... if those hormones shift then a new version of the gal will present herself with a different hormone balance or more likely imbalance. She literally won't be the same person.

One mundane example here is how crampy, irritable and moody many women get the second half of their menstrual cycle (some get near-homicidal). Many suffer with this burden until menopause, but for most it is because they are making insufficient levels of the hormone progesterone and if they only supplemented progesterone in the second half of their cycle the severe cramps and emotional liability would vanish - or at least be much milder. For whatever reason, a lot of gals don't make enough progesterone in the second half of their cycles.

So, entering into a committed relationship is a real gamble for men, even though they consciously understand none of this, because hormonal changes could change the apple of their eye into a kiwi, a grape or an orange in another phase of the relationship. This is a gamble many men are no longer willing to take. On some level it is being recognized that the hormones females have to navigate can dramatically alter their personalities to the point that they are not psychologically recognizable as the same person.

As her hormones shift, the woman may develop a pervasive sense of victimhood, fear she has lost herself in her relationship, fears she is missing out, or that she feels trapped, or her partner is distant, boring or unsafe. She may feel stuck, unhappy, or in a cage. And they will almost always point to their partners for being responsible for this unhappiness. But no one is responsible for anyone else's happiness (an ignored truth). And the Catch-22 is even if someone outside yourself could make you think you are happy, it certainly won't be the man who is perceived as being the cause of the problem in the first place.

This hypothetical woman will do everything she can to get out of that relationship or marriage that isn't making her feel safe, fulfilled or happy, even if that means infidelity, which interesting enough will cause her oxytocin levels to go up and she will feel calm and euphoric and quite justified in ending her LTR or marriage without any idea she is being run by a hormone.

But there is something else that will run interference. True lifelong monogamy doesn't really exist with primates; although, some species come very close. Humans are not one of them. Just as human males are programmed to seek out young and attractive women, human females are hard-wired with hypergamy. Hypergamy is a fancy way of saying part of their consciousness is always looking for a better situation for themselves, usually a wealthier partner. It may be buried deep in the subconscious, but it is there - it is always there and it comes out of hiding when fight or flight kicks in.

Where there is an emotion there is a neurotransmitter coupled with it, and if we decide to be led around by our emotional chemistry in an unconscious way then that really will lead to unhappiness. If the gal has created a monkey-branch relationship (an affair) she might feel that it makes her feel like herself - and it may feel like she has found her dream man, but it is all an illusion doomed to collapse, because she is unconsciously being led around by her hormones as if she had a ring in her nose and oxytocin, in this example, was pulling her in only one direction - *keep doing whatever is making more oxytocin and don't stop*. That underlying oxytocin deficiency is still there, but temporarily mitigated, and when the novelty of a new relationship wears off, she will repeat the dysfunctional scenario regardless of how much money her new partner has.

Neither she or her (ex)-partner(s) will ever know that it was all due to an oxytocin deficiency, and while one can apply oxytocin to the situation at that point it won't, in all likelihood, turn back on the Love light once turned off. The only practical application of this knowledge is to supplement oxytocin proactively but I doubt that would ever catch on for years, or even decades because no one knows what I have just revealed to you..

Now, why didn't this phenomenon seem to happen in older generations? Well, often there were extended families and close knit communities. There were more defined gender roles. Interacting with that extended family and having the support from a supportive community kept oxytocin levels high enough to prevent what I just described. We don't have that now, today we have this one man and this one woman and the truth is that is not enough people - this sounds cliché but it takes a village to support marriages or LTR's. In the past, there were also more individuals in western society that had a strong spiritual foundation.

We have been living through a very dystopian period where both men and women have lost their moral compasses. This isn't about attending church or temple; it means people knew they weren't the center of the universe and couldn't just do or think anything they wanted with impunity. There were more gals who had better relationships with parents and family members. They had interests and hobbies and didn't rely on their relationship to fulfill all their needs. Family goals were more aligned than they are today. The problem with losing one's moral compass is that Nature abhors a vacuum, so instead of a moral compass you get a mental illness in its place. And where there is mental illness there is often self-medication.

One in six women in the US are on antidepressants and with that comes potential sexual dysfunction further complicating an already delicate situation and what has been found is ~25% of women with anxiety disorders or major depression will self-medicate.

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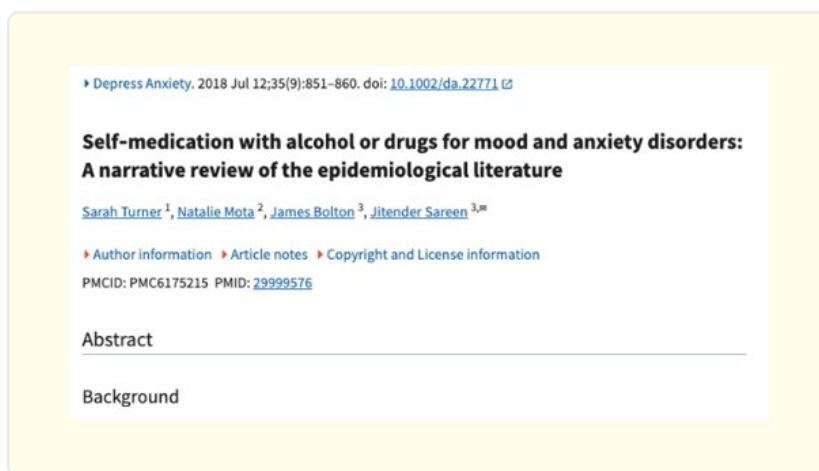
Antidepressant-Induced Female Sexual Dysfunction

[Tierney Lorenz](#)¹, [Jordan Rullo](#)², [Stephanie Faubion](#)³

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PMCID: PMC6711470 NIHMSID: NIHMS1046615 PMID: [27594188](#)

To use non-medical jargon that is pretty fussed up, and while we understand these quality of life issues and relationship issues can drive substance abuse, the medical community has little to offer.



In the past, women who wanted children often had some experience in helping their mothers with siblings. Not so much today where too many gals have no idea what they are signing up for. Motherhood is loaded with pitfalls and when the reality of motherhood sinks in it can be a shock. There was also more emotional maturity than we see today as well. People had more respect for each other. Not saying the past was perfect because it was far from perfect, but something has been lost.

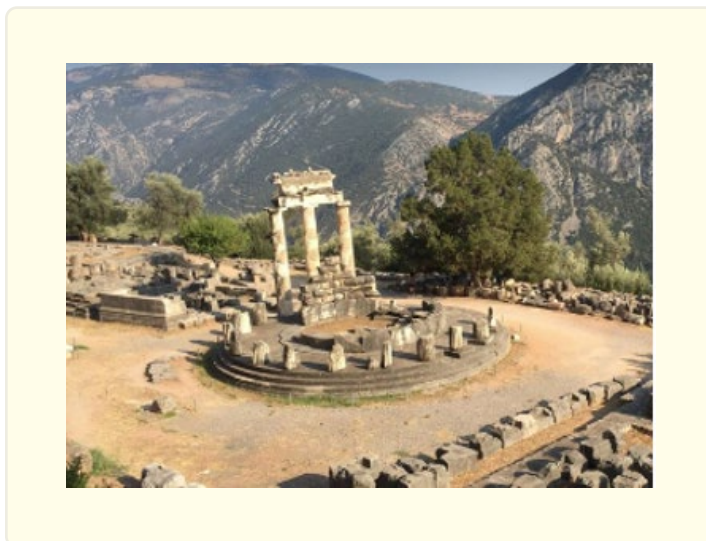
By the way, marriage is not about romance...

Marriage is a legal construct and its original purpose was humble and simple - bring a man and woman together to procreate and have children... that was all it was meant to do. The marriage was usually arranged and viewed as a job more than anything else, and that job was to keep the family unit together, but we naively enter into this institution knowing nothing about it, its history, what is required or what a marriage can and cannot do. And the big clencher is we really don't know who this other person is, nor if they are mature enough not to be run by their hormones alone. I am not saying most men know who they are, but at least they don't have massive fluctuations in hormones running interference.

Alas, love is blind and we think the other person is who we think they are not who they actually are, and of course, unless we have had sisters in our families, men are clueless about how hormones can rule the roost and run the show.

Men and women are miserable because they are not being true to their authentic selves. They have followed an algorithm set up by our culture to be considered a valuable member of society. There is a lot of pressure to be something that we are not. But if we don't know who we are (and most don't), if we are not grounded in our bodies we will not be authentic human beings. We will just be a vessel for our egos. We will make decisions based on false assumptions that are not in our best interest, and we will be miserable. What was written on the entrance to the Temple at Delphi? "Know Thyself" or gnōthi seauton. It is a piece of the Ancient Wisdom now almost lost to time.

The steps to discover one's true self are different for everyone but the common denominator is giving yourself the space for reflection and introspection where you can ask yourself if you are living a life consistent with who you are vs living a life you think others think you should be living. This is hard to do when you are miserable or mentally ill, and some people just don't have the psychological tools to carry this off, but it can be done.



Agape & Eros

Now, don't expect an institution designed to create and raise children to also be a vessel of passion and fulfillment. Those of us who became parents know just how much work and devotion it takes to raise a child correctly. It is a whole lot of work and today both parents are deeply involved if they are being responsible. Be that as it may, many women don't have a clue how to take care of babies and raise children, but I don't think it was ever meant that they do this on their own. Few are prepared for the stress, demands or sleep deprivation of being a mother. Then there is the societal pressure to be a "good" mother. The feminist movement made women think they could have a career, be a mother and do both well, but that was a lie.

In many respects, having children is a romance killer if not a marriage killer outside of a supportive extended family and community, because even as oxytocin levels drop by themselves in an LTR, having the stress, and responsibility of being a mother can accelerate the drop in oxytocin levels faster than you can say irreconcilable differences.

This is one of the factors that literally drives many to drink. Is that a problem? Yes, alcohol is a neurotoxin and will pickle your brain and destroy your liver to name two. Oxytocin deficiency does facilitate alcoholism and other addictions, but few have connected the dots.

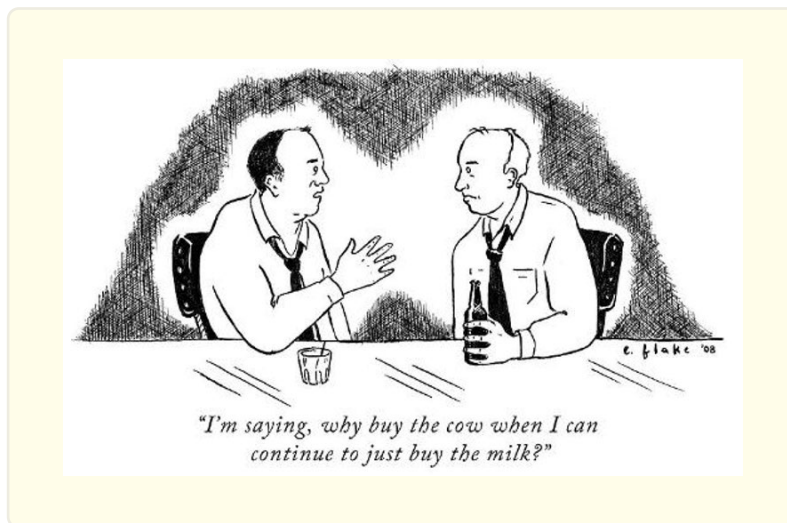
When the wind blows the cradle will rock

Now, typically, there is a lot of sex when a couple gets together with an LTR in mind, then they may get married and the sex goes from 3x a day to 3x a week and then 3x a month and then 3x a year. In the context of an LTR, men have sex to help solidify an emotional bond and reinforce trust - that is really why most men even got married in the first place. Now, this is poorly understood by both men but especially women even though this is not rocket science, but when the sex goes, so does the trust and that marriage is over. It may go on for years afterwards but in name only. No amount of therapy will help this. It would be like taking someone who has lost a lot of blood to a talk therapist when what they need is a transfusion.

What was driving all that physical intimacy at the beginning of a relationship? Oxytocin. What stopped the intimacy? Lack of oxytocin. Now, oxytocin does not affect men the way it does women. Giving oxytocin to men does not increase their libido, men have testosterone to drive their libido. Oxytocin **does** increase the libido of most women, so if the oxytocin is not there then there is no interest in sex. It is a great way to deconstruct a relationship, but if you know what is going on hormonally, you don't have to be an unconscious slave to these physiologic minefields. Knowing one's oxytocin levels drop in an LTR, one can proactively supplement with bioidentical

oxytocin if that LTR or marriage is something you want to keep healthy or even keep at all. If women understood this trap, it would be so easy to mitigate the problem, but there is almost no one who understands what you just read.

For men, sex is a biological drive - it is not just a desire. That drive is fueled by testosterone, the level of which in western men is dropping faster than you can say Soy-Boy. In the past, the only way men could get sex was to get married but that is no longer the case in the west. You know what they say, “why buy the cow when you get the milk for free”.



Promiscuity has been destroying men's interest in getting married. They can get what they want without marriage. Sexual freedom may feel liberating and it was, but it was also limiting - it limits a woman's ability to obtain an LTR or marriage with a man. Promiscuity may be the final nail in the marriage coffin, but I degrees.

Since drinking alcohol increases oxytocin levels many women turn to alcohol to increase their oxytocin levels so they can accommodate their partners without understanding why this is needed, but that is not a healthy way to increase one's oxytocin levels and obviously can and often is a gateway to addiction.

Some will say sex is in your head, and that is partially true for if that oxytocin is not in a woman's head she will not be interested in sex. It is there for free at the beginning of relationships and then it fizzles out. I would argue this is a universal physiologic guarantee, but not understanding this facilitates a preventable relationship collapse.

There are many reasons for supplementing oxytocin other than relationship issues, but on a personal level we all need to understand that oxytocin plays a crucial role in social bonding, trust, and emotional regulation—key components of a healthy marriage.

I will summarize how the lack of oxytocin can disrupt one's life:

1. Reduced Emotional Bonding & Trust

- Oxytocin is essential for forming and maintaining social bonds, including romantic relationships.
- Low levels will reduce feelings of closeness and trust, leading to emotional distance between partners.
- Depression – Low levels are linked to mood disorders, including major depression.
- Loss of empathy - Impaired ability to recognize emotions in others.
- fMRI Studies: Brain imaging studies reveal that lack of oxytocin decreases activity in brain regions linked to love and attachment.

2. Increased Stress & Conflict
 - Lack of oxytocin will increase cortisol (stress hormone) levels.
 - A deficiency will make couples more reactive to stress, increasing the likelihood of arguments and conflicts.
3. Impaired Conflict Resolution
 - Lack of oxytocin helps promote negative communication during disagreements.
 - Without oxytocin, couples will struggle to empathize with each other and resolve conflicts effectively.
4. Decreased Physical Intimacy
 - Oxytocin deficiency will lead to reduced physical affection and sexual satisfaction, which are vital for marital stability.
5. Memory and Learning Deficits – Oxytocin is involved in memory, particularly social and emotional memory.
6. Increased Risk of Metabolic Disorders – Some research links oxytocin deficiency to obesity and insulin resistance.

Scientific Evidence

- Studies on Oxytocin show it is indispensable for healthy muscle maintenance and repair.
- Supplemental oxytocin improves Lean Muscle Mass and Lowers LDL Cholesterol in older Adults.

Switching to the post-menopausal set, I submit they should be on oxytocin as if it were a vitamin because it causes anabolic bone metabolism preventing osteopenia and/or osteoporosis. That would solve the fight or flight problem for the post-menopausal women, but even this suggestion will not fly in the medical paradigm we have been dealing with for decades. Nothing gets promoted if it isn't making Big Pharma money.

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Oxytocin is an anabolic bone hormone

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Abstract

We report that oxytocin (OT), a primitive neurohypophyseal hormone, hitherto thought solely to modulate lactation and social bonding, is a direct regulator of bone mass. Deletion of OT or the OT receptor (Oxtr) in male or female mice causes osteoporosis resulting from reduced bone formation.

Now, if it ever became common sense knowledge that this is what could cause these irrational behaviors (remember rationality is the domain of the frontal cortex) and relationship destruction, people could have their radar out for this and proactively take oxytocin to mitigate this pathos, but we are nowhere near that level of understanding.

We do understand there is postpartum depression, which is an extreme example of this phenomenon, but how do we treat postpartum depression if it gets treated at all? SSRI's perhaps. I would be recommending supplemental oxytocin with a chaser of saffron, which is a serotonin analog. Serotonin is an interesting neurotransmitter that for most makes them feel happy and relaxed. But postpartum depression is a red flag that this new mother may be at risk for an oxytocin deficiency if she doesn't already have one.

Look, there is no one out there helping couples understand any of this, because no one seems to understand this, and I am not saying supplementing oxytocin is a 100% fix but being aware of the problem, and taking the appropriate intervention, such as supplemental oxytocin, could save a few relationships.

I can only offer a quantum of solace to men who have been on the receiving end of a relationship that went from dream to nightmare without rhyme or reason - oxytocin deficiency was the cause and it wasn't anything that they did or didn't do. They never had a chance. It is the enemy within and this enemy always wins - ALWAYS.

I am not talking about abusive relationships, a gay husband, a broke-ass man with a substance abuse problem, or finding out your partner is a flaming narcissist - these problematic relationships are real so there is a real reason to get out of them. I am talking about relationships where all the ingredients for a harmonious partnership were there but for the oxytocin deficiency and that happens far too often.

Unfortunately, this information is not known to health-care providers or the general public, and it could be decades for others to catch on to this. But do we have decades? In the past people paired up because they had to in a sense, options were limited. That is not the case today in our affluent society relative to how things were 100 plus years ago. This is a non-trivial issue as it could eventually cause a societal collapse and I don't say that lightly. If it happens will it only be the fault of low oxytocin levels? Of course not - it is never just one thing, but the oxytocin issue is completely unrecognized. Also unrecognized is that in the last 100 years our connection to nature and natural cycles have been bred out of us and this disconnection from nature and our true natures has led to innumerable problems.

Endnotes

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