Mind-Body Medicine in Depressive and Bipolar Disorders

Sheela S. Chokshi, M.D., sensed that something was missing when she was practicing Internal Medicine in the 1990’s. Dr. Chokshi, the daughter of a physician, grew up in India where a holistic approach is an integral part of the culture. On October 11, 2005, Dr. Chokshi spoke at our Blanchard Lecture Series on Mind-Body Medicine in Depressive and Bipolar Disorders.

In 1998, the first CME’s (Continuing Medical Education) in the Mind, Body, and Spirit Approach to Medicine were presented at Harvard University. Dr. Chokshi attended this week-long seminar and in 2004 she established the Holistic, Alternative, and Complimentary Approach to patient care at Tampa General Hospital. She is also an associate fellow at the University of Arizona with Dr. Andrew Weil.

The Mind-Body Approach to medicine is based on the premise that diseases are often times manifestations of spirit level or emotional level injury and that each person has inner resources with which to help himself to heal. Disease is the end result of an imbalance in the body. Restoring balance to the spirit, mind, and body will help.

The emphasis in a holistic approach is the whole person, not just the physical symptoms. Treatment may involve psychiatry, psychology, as well as other mainstream medical practices. Healing involves much more. Each individual can discover healing routines, techniques, disciplines that are right for them. Dr. Chokshi states that doctors need their patients to be active participants in their own healing. The doctor is limited in what he/she can do to heal a patient because it is the patient who is in the driver’s seat.

Although this approach may sometimes result in a decreased need for some medications and treatments, Dr. Chokshi is not advocating any changes without consulting your physician.

Dr. Chokshi refers to diseases as imbalances that injure the spirit. Even a major surgery such as a heart valve replacement can be seen as an imbalance. By helping the patient to deal with their fear, anxiety, and their negative self talk, the patient can participate more effectively in their own care and healing. For example, by remaining calm, a cardiac patient’s heart rate and blood pressure will decrease, fewer stress hormones will be released, and immune function will be enhanced. The sequelae are endless—the mind affects the body in innumerable ways. Some of the different aspects of healing include making peace with ourselves, accepting the state and age that we are now, and replacing negative self-talk with new thought patterns. The mind is a tool we use and we need to “un-stick” the mind from the spirit. Thoughts are energy and thoughts (energy) can be changed and revised.
Our “Monthly Featured Member” is Ray Moore. He is a horticulturist and has been coming to DBSA about a year. You can find out more about him on page 7.

We invite you to submit material for review and possible publication in the newsletter. These kinds of articles allow us to get to know one another in greater depth and to learn of the many talents, interests and assets of our members.

Articles, poetry and/or drawings can be on anything pertaining to:

* Experiences you have to share regarding depression and/or Bipolar Disorder: what it is to live/cope with it; how you learned of it, what helps, what doesn’t, etc., etc., etc.
* Any other mental health issue or problem that you are passionate about.
* Tell us about yourself and how you spend your time and what’s important to you.
* A report on a mental health event you attended or a mental health book you have read.

Drawings should be black and white, line or half-tone.

Your work may be submitted to JoAnn, Leroy or Lynne at DBSA Riverside meetings.

It may be mailed to:
JoAnn Martin
16280 Whispering Spur
Riverside, CA 92504

E-mail it to: JoAnnMartin1@aol.com
FAX to: 951/780-5758

Materials submitted may or may not be published, at the discretion of the editors, and may be edited for length.

Get your creative juices flowing and share your knowledge and experience with your DBSA friends through The Thermometer Times.

Thank you.
Lynne Stewart

“The intensity of their suffering lies in how much they are holding onto who they were a week ago.” --Ram Daas
The path to positive energy takes many forms including religion, meditation, affirmations, diet, enjoying nature, exercise, sleep schedule, music, journaling, and a combination of these and other practices. For example, all religions utilize repetitions (chanting, praying, rituals) which, states Dr. Chokshi, can “hypnotize the amygdala,” a part of the limbic system and the center of negative emotions (fear, anger, etc.) Research has demonstrated an increase in blood flow to the limbic system on PET scans when people pray, chant, or meditate. For many people, their religious beliefs are healing and sustain them. However, spirituality is enhanced in many other ways, as well. The above list of positive energy sources includes processes for healing the spirit, the body, and the mind.

Our fast-paced Western society is not conducive to healing, and, in fact, creates imbalances. The plethora of flashing lights, computer screens, late-night television, and digital age technology is hardly relaxing. Over-stimulation leads to insomnia and sleeplessness followed by other physical and emotional problems. We need to be aware of our surroundings and how they affect us, and make changes that enhance healing.

We also need to take time to sit in silence, to love and be loved, share what we have learned, to listen to our heart. The wisdom will flow if we listen.

Reported by Jane Trilling
Source: DBSA TAMPA BAY NEWSLETTER
March-April-May 2006

Join an On-line Recovery Group

The Mary Ellen Copland Center for Wellness and Recovery is starting a new on-line group. This information was published in the November 2005 edition of the “Mental Health Recovery Newsletter”.

By Marty Roberts

We invite you to join the Mental Health Recovery On-line Support Group.

You can use the Internet to connect with others for support and to share information. When you join an online support or discussion group, you will receive the messages that people write to the group, and the messages that you write to the group will be sent to all the other members. This is a great way to connect with people all over the world.

(You can also choose not to have mail sent to you and instead read the group mail on the website). The Mental Health Recovery Group is a place to talk about wellness, recovery and WRAP, and to ask for and receive support around mental health and wellness issues.

To join either group, go to http://groups.yahoo.com. If you are already a member of Yahoo, type the name of the group, mentalhealthrecovery and click on “Search”. Then, follow the instructions to join the group you choose. If you are not a member of Yahoo, you have to join first. Click on “Sign up” in tiny print at the top of the page, and follow the directions. When you have signed up, you will see the white box. Type in the name of the group, mentalhealthrecovery, click “Search” and follow the directions.

You will shortly receive confirmation of your membership, and some basic directions. If you have any questions or difficulties with these instructions, please write to Marty at robertsm@sover.net.

Source: DBSA-Topeka, NAMI-Topeka Newsletter April, May, June 2006

A free Internet-based journaling and charting tool is available to help people keep track of their moods and symptoms, along with things that affect them.

Called PsychTracker, the system was created by Derek Wood, a psychiatric mental health registered nurse who works with chronically ill children and adolescents. Wood also has a diagnosis of schizoaffective-bipolar.

The system involves users logging on daily (or multiple times a day) and charting on a scale how they are feeling on a number of symptoms, as well as making note of significant events that occur each day.

When used consistently, the company said, the system can be of tremendous help in managing symptoms and can act as a tool to help in the therapeutic process.

The online version of the tool is available at www.psychtracker.com

MIND-BODY (Cont’d from page 1)

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New reports link mental ill-health to changing diets

News release from the Mental Health Foundation in UK, January 2006

As new figures show that mental ill-health is costing the UK almost £100 billion a year, evidence released by the Mental Health Foundation and Sustain reveals that changes to the human diet in the last 50 years or so could be an important factor behind the major rise of mental ill-health in the UK.

A body of evidence linking the impact of diet on mood and behavior has been growing for many years. Now scientific evidence reveals that food can have an immediate and lasting effect upon a person’s mental health and behavior because of the way it affects the structure and function of the brain.

Significant changes in the way food is produced and manufactured have not only reduced the amounts of essential fats, vitamins and minerals consumed, but have also disturbed the balance of nutrients in the foods eaten. The proliferation of industrialized farming has introduced pesticides and altered the body fat composition of animals due to the diets they are now fed. As a result, the population’s intake of omega-3 fatty acids has decreased whilst the consumption of omega-6 fatty acids has increased. According to the research, this unequal intake combined with a lack of vitamins and minerals is associated with depression, concentration and memory problems.

At the same time, the UK population is consuming less nutritious, fresh produce and more saturated fats and sugars. According to the Mental Health Foundation and Sustain, new substances, such as pesticides, additives and trans-fats have also been introduced to the diet. These, alone and in combination, can prevent the brain from functioning effectively.

There have also been remarkable changes in the way that the population prepares and cooks food. The research shows that only 29 percent of 15-24 year-olds report eating a meal made from scratch every day, compared to 50 percent of those aged over 65. It is also reported that a high proportion of younger people are eating insufficient amounts of fresh fruit and vegetables, instead eating unhealthy foods.

Amino acids are vital to good mental health. Neurotransmitters in the brain are made from amino acids, many of which need to be derived from the diet. A deficiency in certain amino acids can lead to feelings of depression, and leave a person feeling unmotivated and unable to relax.

The two charities assert that many nutrients can improve a person’s mental health, and dietary changes may hold the key to combating specific mental health problems including depression, schizophrenia, attention deficit hyperactivity disorder, and Alzheimer’s disease.

Source: DBSA-Topeka & NAMI-Topeka Newsletter April, May, June 2006

NAPA/U.S. probing state mental hospitals/California to let in feds under consent decree

Jim Doyle, Chronicle Staff Writer
Friday, May 5, 2006 San Francisco Chronicle

California officials have agreed to allow federal investigators to enter Napa State Hospital and another state mental hospital in Los Angeles County to probe allegations that the centers have failed to provide adequate treatment for patients.

The agreement between the state and U.S. Department of Justice comes after several months of negotiations and is part of a 92-page consent decree that was filed Tuesday in U.S. District Court in Los Angeles by lawyers for the Justice Department’s civil rights division.

Simultaneously, Justice Department attorneys filed a lawsuit against Gov. Arnold Schwarzenegger, his mental health director and two hospital directors.

The suit accuses the California officials of violating the constitutional rights of patients at Napa and Metropolitan State Hospital in Norwalk (Los Angeles County) by failing to provide adequate psychiatric, nursing, pharmaceutical, dental and nutritional services, as well as for failing to protect patients from harm. The suit also alleges that these hospitals continue to hold some patients even after professionals determine that they should be transferred to community facilities.

Last summer, a Justice Department official accused California officials of impeding a probe into conditions at Napa, Atascadero State Hospital in San Luis Obispo County, and Patton State Hospital in San Bernardino County, where investigators said they found “widespread and systemic deficiencies” that put patients’ lives at risk.

In a June 27 letter to Schwarzenegger, acting U.S. Assistant Attorney General Bradley Schlozman accused state officials of blocking the federal probe of Napa and of denying investigators’ access to conduct on-site tours, interview patients and staff, and obtain patient records.

The consent decree provides a plan of corrective action, including steps for the proper psychiatric diagnosis, nursing and rehabilitation therapy, as well as steps taken by hospital staffs to protect patients from harm.

Under the consent decree, the court has appointed Dr. Mohamed El-Sabsawi to monitor the state’s implementation of the agreement. The decree may last five years, unless both parties agree that the state is in substantial compliance with the consent decree and has maintained “sustained compliance” for 18 months.

In his June 27 letter, Schlozman cited Napa State Hospital’s failure to document its use of psychiatric medications, or so-called chemical restraints.

Continued on page 5 (NAPA/U.S.)

DBSA - Riverside -July, 2006 Page 4
Study: Prevent depression in kids by treating mother

By Lindsey Tanner
The Associated Press

Chicago - Treating a mother’s depression can help prevent it and other disorders in her child, say researchers in a provocative study that may influence family health care.

It’s the first time doctors have documented what might seem like common sense, but the results have potentially big public health implications, the study’s authors and other experts say.

“It’s a very dramatic and important finding,” said co-author Dr. A. John Rush, a psychiatry professor at the University of Texas Southwestern Medical Center.

Depression runs in families and has a strong genetic component, but environmental factors can trigger it. The study results indicate that for children of depressed mothers, that trigger is sometimes their mothers’ illness acting up, said lead author Myrna Weissman, a researcher at Columbia University and New York Psychiatric Institute.

Effective treatment for mothers could mean their children might avoid the need for prescription antidepressants, the researchers said.

“Depressed parents should be treated vigorously. It’s a two-fer -- the impact is not only on them but it’s also on their children,” Weissman said.

In the study, those children whose mothers’ depression disappeared during three months of treatment were much less likely to be diagnosed with depression, anxiety or behavior problems than those whose mothers did not improve.

The results are “very plausible and very convincing and very useful,” said Dr. Nada Stotland, vice president of the American Psychiatric Association and a psychiatry professor at Rush Medical College at Chicago.

“Our society gives a lot of lip service to how important mothers are but, in fact, we don’t always appreciate just how profound their effects on their children are,” said Stotland, who was not involved in the study.

The study appears in today’s Journal of the American Medical Association and involved 114 depressed women assessed after three months of treatment. Of the 114 children participants, aged 11 to 12 on average, 68 had no psychiatric disorder when their mothers began treatment.

Thirty-eight women went into complete remission from depression during treatment, which for most was Forest Laboratories’ antidepressant Celexa.

Forest supplied the drug and several study authors have financial ties to other antidepressant makers, but the study was funded by grants from the National Institute of Mental Health.

Source: Riverside Press-Enterprise
March 22, 2006

NAPA/U.S. (Cont’d from page 4)

Schlozman also said investigators had uncovered evidence at Napa of “excessive patient-on-patient assaults, patient suicides and trafficking in contraband, including illegal street drugs.” He said investigators also found evidence that “excessive and inappropriate use” of seclusion and physical restraints at Napa was often employed to punish unruly patients or for the convenience of staff rather than for patient safety.

Dave Graziani, director of the Napa hospital was unavailable Thursday for comment.

Mental Health Director Stephen Mayberg acknowledged that federal investigators were rebuffed at times, partly because “these interviews and site investigations that they wanted are very time-consuming and expensive, and we thought that limited resources really should be spent on patient care and changing our system, rather than litigation.”

In 2003 and 2004, the Justice Department issued two investigative reports on conditions at Metropolitan. The Justice Department began its investigation of Napa in early 2004.

Justice Department lawyers also sent two additional letters Tuesday to Schwarzenegger, indicating that its investigators had found “significant and wide-ranging deficiencies in patient care” at Atascadero and Patton, which investigators toured last fall.

Source: E-mail Jim Doyle at jdoyle@sfchronide.com.
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More than half of disabled people hold jobs

Washington -- More than half the nation’s disabled people hold jobs, but they often have lower incomes and less education and are less likely to have health insurance than people without disabilities, the government said today.

Nearly one in five Americans -- about 51 million people -- had physical or mental disabilities in 2002, according to the Census Bureau. About 33 million of them had severe disabilities.

The Census Bureau surveyed 26,800 households for the report, asking people about their health and if they had difficulty performing various tasks, said Sharon Stern, chief of the bureau’s poverty and health statistics branch.

People were classified as disabled if they had difficulty performing tasks such as seeing, hearing, bathing or doing light housework, or if they had conditions such as Alzheimer’s disease or autism.

They were considered to have severe disabilities if they were unable to perform any of those tasks, or if they had severe cases of specific conditions.

About 56 percent of disabled adults, ages 21 to 64, had jobs in 2002.

Among those with severe disabilities, 43 percent had jobs. The median income -- the point at which half make more and half make less -- was $12,800 for people with severe disabilities, $22,000 for those with no disabilities.

Source: Riverside Press-Enterprise
May 12, 2006
Expert: Treat people, not ills

AGING: He discusses the links between mind, body and soul at a Palm Springs conference.

Wednesday, May 10, 2006

BY DAVID OLSON
THE PRESS-ENTERPRISE

Dr. Carl Hammerschlag’s core message Tuesday to a Palm Springs conference on aging was simple: Making personal connections with people can be more important than providing the correct medicine.

Riverside’s Don Curtis said it was a profound message that comforted him and will spur him to show more emotion to fellow residents or Air Force Village West, a retirement community for military officers and their spouses.

“I’m 87 years old, and this tells me there’s a larger family to help me,” Curtis said. “And I know this will help me reach out more to others.”

Hammerschlag spoke at the annual meeting of the California Association of Homes and Services for the Aging -- which represents nonprofit groups that provide housing for seniors -- at the Wyndham Hotel and Convention Center in Palm Springs.

A psychiatrist and author, Hammerschlag is a proponent of psychoneuroimmunology, which teaches that mind, body and spirit are interconnected.

He was chief of psychiatry at the Phoenix Indian Medical Center for 16 years. He said it was his interaction with American Indians that caused him to recognize the importance of focusing more on the heart and soul of patients, and not just the body.

Hammerschlag said he learned that simple gestures, such as a smile, can improve patients’ lives, as can finding out more about patients’ beliefs and sharing his own ideas.

Irma Dickens plans to take what she learned from Hammerschlag back to the South Bay Retirement Residence in Compton, where she works as an administrative assistant. She said showing residents that she cares about them is critical to building strong relationships and keeping spirits high.

“If you see someone who may be having a problem, reach out and hug them. Everyone needs a hug, and it lets them know you are with them.”

Dory Scudler, who lives at Air Force Village West, said many fellow residents feel alone and isolated because they have little or no family nearby.

Showing feelings and emotions “gives them confidence and hope,” she said.

Curtis handles the financial affairs of a couple at Air Force Village West who are no longer able to do so for themselves. He said he realized Tuesday that he needs to help provide for their emotional needs as well as the practical financial ones.

“I’ve become a bit impatient with them, but this encourages me to stay the course,” he said.

Source: Reach David Olson at (760) 837-4411 or dolson@PE.com

Study Reveals Connection Between Stress, Memory Loss

By Ralph E. Schmid

How many people have arrived home after a blindingly stressful day and realized they’ve forgotten some important event or errand? Well, now at least there’s a scientific explanation for the oversight. Stress makes you forgetful.

People going on stage, taking an exam or finding themselves in similarly tough situations already knew this, of course. But a team of researchers has found how it happens, a discovery they say could point the way to better treatments for illnesses such as schizophrenia and bipolar disorder.

“Stressful situations in which the individual has no control were found to activate an enzyme in the brain called protein kinase C (PKC) which impairs the short-term memory and other functions in the prefrontal cortex, the executive decision part of the brain,” said Dr. Amy FT. Arnsten of Yale Medical School. The findings were reported in the journal Science.

The PKC enzyme also is active in bipolar disorder and schizophrenia, and Dr. Arnsten notes that a first psychotic episode can be precipitated by a stressful situation such as going away to college for the first time or joining the military.

By affecting that part of the brain, the researchers say, PKC could be a factor in the distractibility, impulsiveness and impaired judgement that occurs in those illnesses.

“The finding that uncontrolled stress activates PKC indicates seeking drugs that inhibit PKC,” Dr. Arsten said. “These new findings may also help us understand the impulsivity and distractibility observed in children with lead poisoning,” she said. “Very low levels of lead can activate PKC, and this may lead to impaired regulation of behavior.”

Source: Lawrence Journal World, Oct. 29, 2004
As seen in The Rollercoaster Times Spring, 2006

Reality is that which, when you stop believing in it, doesn’t go away.

Philip K. Dick (1928-1982)
Novelist
Ray was born in Covina, California. He spent the first three years of his life growing up on the Foothill Ranch, a farm of thousands of acres that his father managed. Ray has fond memories of roaming the ranch, swimming in the pool and he especially remembers their cat that ate the corn harvest every year. He had a brother and sister. His brother died recently from Lou Gehrig’s Disease.

His family moved to Riverside in 1952 where his father worked at the Citrus Experiment Station, starting the Citrus Rejuvenation Program at the University of California, Riverside (UCR). In 1960, when Ray was in Grammar School, the family moved to Indio where his father managed another large farm. Three years later they moved back to Riverside and his father became Superintendent of Agricultural Operations at UCR.

At age 13, for the first time in his life, Ray found that he had to adjust to adverse circumstances. He had been very popular in Indio, but he found out that he was a nobody in Riverside. He was not accepted and either had to fight or talk his way out of fights. He made friends with troublemakers and they became his companions. For the first time he was threatened with jail after stealing liquor from supermarkets. High school was no better for Ray as he continued to hang out with troublemakers.

As an adult, Ray was diagnosed with ADHD, but it was not known during his school years. Needless to say, Ray often skipped his homework, much to the anger of his parents and received low grades. This was particularly disturbing to his father who had graduated from UCLA with honors.

Depression was well on its course during these school years and Ray could not satisfy his parents. He became very rebellious. For Ray there was no high school prom or taking part in extracurricular school activities. When he could, he would go out to the hills with his friends and get drunk on weekends. At least there he found acceptance.

After graduation from high school the alternatives for Ray seemed limited. The Viet Nam War was going full scale and Ray’s high school grades precluded student deferment and the military seemed to be the only option. Another depressing choice in Ray’s life. He joined the Navy and was constantly in trouble, ultimately court martialed for possession of marijuana and spent time in the Navy brig.

The most crushing blow in the service came when Ray was in Guantanamo Bay and the girl he was going to marry sent him a letter breaking up with him. By this time Ray was only twenty years old but he was mired in depression. He dealt with his misery by using alcohol and marijuana and hanging out with other rebellious sailors.

After getting out of the Navy, Ray became a certified hobo, catching freight cars and hitch-hiking around northern California, Oregon and Washington. A year later Ray decided to go back to school on the GI Bill. He attended classes for several years, but once again his ADHD interfered and prevented him from being successful.

Out of desperation, his father, who is quite brilliant, felt that he’d better do something about his wayward son. Ray and his dad started a nursery business. For the first time in Ray’s life he felt joy and accomplishment. They were making money and he felt useful. Ray still had an alcohol and drug problem but he no longer wanted to continue on this path. One night he got down on his hands and knees and said a simple prayer of help. The feeling of joy and rapture came immediately and he knew that God had heard his prayer. That was the end of Ray’s drug and alcohol use. After fifteen years the nursery

Continued on page 8 (Tragedy)
TRAGEDY (Cont’d from pg. 7)

went bankrupt, but Ray managed to stay sober with God’s help for the next 13 years until a chronic pain situation interfered and he started taking pain medication.

After the bankruptcy Ray was fortunate to find a job managing a 350 acre farm in the desert. However, the owner of the farm was a practicing alcoholic and Ray found himself in one argument after another with his boss until the obvious happened. Ray was fired after two years for insubordination. Ray stayed sober all this time, but in spite of the best he could give, life once again seemed to be against him.

By this time Ray had enough experience working with plants to be considered a horticulturist and it was easy for him to find a job as a Senior Nursery Technician at UCR where he worked for the next thirteen years. After several years, injuries on the job seemed to plague Ray. He tore cartilage in his knee, suffered two herniated discs in his back, got carpal-tunnel syndrome in both hands and has fibromyalgia. Although Ray has not drank alcohol, once again he turned to chemical relief, and like any good alcoholic he sometimes abuses his medicine.

Today Ray is between a rock and a hard place. He can’t stand the physical pain he suffers, but being addicted is a far cry from serenity. Living a joyful life is something Ray has almost forgotten.

Ray has found hope, however. About a year ago Ray was told about DBSA meetings at Riverside Center for Behavioral Medicine (Knollwood) after detoxing from drugs there, yet one more time. The very next Saturday Ray attended his first DBSA meeting. Now, every Saturday morning he wakes up with hope. He knows that he is going to a meeting. At DBSA meetings, he has found many friends who have the same problems as he has. DBSA has been most helpful to Ray through talk therapy and by referrals to where he can go to get more help. He has found many friends at DBSA, the most precious gifts anyone can have.

Study of Minorities with Mood Disorders

University of Cincinnati (UC) researchers want to determine why African-Americans seeking help for mood disorders, such as depression or bipolar disorder, are often misdiagnosed with schizophrenia—putting them at risk of receiving incorrect treatment.

UC will lead a four-year multi-center, national study to determine why these misdiagnoses occur, whether they lead to excessive use of antipsychotic drugs among African-Americans and whether misdiagnoses are happening in the Latino population as well.

“Research has already shown that African-American patients are being improperly diagnosed,” said Stephen Strakowski, M.D., professor in UC’s Department of Psychiatry and lead investigator for the study, “but we need to find out why.”

Treatment for mood disorders is different from that typically used for schizophrenia, Dr. Strakowski pointed out.

“Patients suffering from depression or bipolar disorder who only receive medications for schizophrenia will continue to experience their original symptoms,” he said, “and they will be at risk for very poor outcomes.

“Untreated mood disorders result in functional impairment both at work and in the home. These patients are also at an increased risk for suicide.”

Funded by nearly $10 million from the National Institute of Mental Health (NIMH), the UC-led study will also include Howard University in Washington, D.C., the University of California, Los Angeles, the University of Medicine and Dentistry of New Jersey, the University of Michigan, and the University of Texas, San Antonio.

Source: Reintegration Today, Winter 2006
As seen in: The Initiative, Spring 2006

Taking aim at modern stresses

BY AMELIA ROBINSON
COX NEWS SERVICE

Do you spend all your time screensucking, taildogging and frazzing? Are you constantly dealing with doomdarts and kudzu hurled at you by info addicts? Is the Megaloctopus about to chomp you?

If you answer yes, author, psychiatrist and ADD expert Edward M. Hallowell says you may be “CrazyBusy.” In his new book, “CrazyBusy”: Overstretched, Overbooked and About to Snap! Strategies for Coping in a World Gone ADD” (Ballantine, $24.95), he shares ideas about monitoring your mood at work, being systematic about how you invest your time and pushing your brain’s reset button if necessary.

“CrazyBusy” includes terminology created to describe problems workers face today. Here’s a sampling:

**Screensucking:** Wasting time looking at any screen — TV, video game, computer, etc.

**Taildogging:** Allowing the tail to wag the dog. Going fast or pushing harder on yourself, your kids or your business just because other people are doing so and you don’t want to be left behind in life’s great race.

**Frazzing:** Ineffective multitasking.

**Doomdarts:** An obligation you have forgotten about that suddenly pops into your consciousness like a poisoned dart

**Kudzu:** The unstoppable, unkillable stream of unexpected minor requests from people everywhere that slow you down.

**Info addicts:** A person addicted to keeping up second by second with what is “going on” and relying totally on other people’s judgment to select what belongs under that term.

**The Megaloctopus:** A beast made of people trying to steal your time. It extends its tentacles and tries to stop what is “going on” and relying totally on other people’s judgment to select what belongs under that term.

Source: Riverside Press-Enterprise April 13, 2006
Family/Friends Support Groups

Riverside County Dept. of Mental Health Offers Support groups for families and friends of people with severe and persistent mental illness. These Support Groups are offered throughout the County of Riverside.

The County also offers the NAMI Family-to-Family Education Program This program is a 12-week series of educational meetings for family members. There is NO COST TO YOU.

For information on dates, times and location, Please contact:

Riverside Co. Dept. of Mental Health The Family Advocate Program (909) 358-4987/1-800-330-4522

The Starting Point SUPPORT GROUP FOR DEPRESSIVES AND BIPOLARS Mesa Clinic, 850 Foothill Blvd., Rialto Mondays from 10:30 to 12:10 For more info: *82 (909) 864-4404

Join us for the July 4th Picnic Tuesday, July 4, 2006 at noon at Jo Ann’s

Swimming, badminton, spa, food and more...

Bring a salad, main dish, or dessert.
If you can’t bring a dish, come anyway. Meat & beverage will be furnished.

Other Holidays include: Memorial Day, Labor Day, Thanksgiving, and Christmas.

See page 1, lower left column of this newsletter for directions.

Check us out on the web!
Website for DBSA Riverside:
http://www.geocities.com/mddariv
E-mail addresses: DBSA, Riverside: dbsaofriv1@aol.com.
DBSA, California: dbsaofca1@aol.com.

Do you have a Medic Alert Bracelet?
Do you wear it? All the time? In an emergency, would others know what medication you are taking and why? Always wear your Medic Alert bracelet. It could save your life. If you don’t have one, ORDER ONE TODAY! (Available through most pharmacies)

ORIGINAL MATERIAL WANTED
Do you have a story to tell, or a poem or art work? We welcome submissions to our newsletter. If you have something you think we could use, please send it to:
EDITOR DBSA P.O. Box 51597 Riverside, CA 92517-2597 FAX 951/780-5758
Phone Phriends
If you need someone to talk with, you may call one of the following members at the specified time.

Leroy
6 a.m. to 9 p.m.
951/686-5047

Yen
951/315-7315

Kevin
kevin2004n@aol.com

calling all interested consumers!

NAMI—In Our Own Voice:

Living With Mental Illness

We are looking for consumers who are interested in sharing their personal recovery stories. In Our Own Voice: Living With Mental Illness (IOOV) is a recovery-education program conducted by trained presenters for other consumers, family members, friends, and professional and lay audiences. Individuals need not be active in mental health advocacy at this time, but

▶ They have “been there.”
▶ They are able to present professionally.
▶ They are in recovery.
▶ They have the time to be trained.
▶ They believe in treatment, with medication as the cornerstone for recovery.
▶ They periodically present at 1–2 hour workshops, during working hrs.

Stipends will be paid for presentations.

For more information, or to be put on a waiting list, please call:
Allison Hoover, IOOV Coordinator
951/686-5484

A collaborative effort brought to you by:
—The Riverside County Mental Health Department—
—NAMI, Western Riverside County—
—Jefferson Transitional Programs—
Due to route changes, no RTA regular bus crosses County Circle Drive anymore. However, several routes stop at the Galleria (Tyler Mall), which is only a three-block walk from where we meet. Those routes include Canyon Crest, Corona, Country Village, Hemet, La Sierra, Perris, Norco, and Sun City.* For meeting-day route times, please call RTA at 800/266-6883 toll free. If you qualify for Dial-a-Ride, a door-to-door service for the handicapped, info is available at the same phone number. * as well as other parts of Riverside.

About DBSA-Riverside

DBSA of Riverside is a support group for people who have depression or bipolar (manic-depressive) disorder and who have sought or are seeking treatment for their illness. DBSA is totally patient run, which means we need volunteers like you to help with mail-outs, telephoning and planning. A work time is held at the home of JoAnn Martin on the Saturday afternoon following the last sharing meeting of each month to assemble the newsletter for mailing. Directions are printed on the lower left corner of the front page of this newsletter. You may reach JoAnn or Leroy at 951/780-3366. Our sharing meetings are held every Saturday of each week from 10:00 a.m. to 12:00 noon at the Riverside Mental Health Administration Building, 4095 County Circle Drive (off Hole Avenue near Magnolia), Room A. We welcome professional care providers and adult family members and friends. Please note our new area code - 951, effective on July 17, 2004.

MEMBERSHIP INFORMATION

Individual membership for the Depression and Bipolar Support Alliance of Riverside is $20.00 per year. This helps defray the cost of the monthly newsletter and helps pay for the cost of our meetings. Subscription to the newsletter is $10.00 per year. If you are unable to help financially, the newsletter may be sent upon request. Volunteers are always needed. If you would like to volunteer, please indicate below.

Mail to DBSA of Riverside, 16280 Whispering Spur, Riverside, CA 92504

DATE _________________ Please Print  ☐ New ☐ Renewal

NAME _____________________________________________ PHONE __________________

ADDRESS ______________________________ CITY_________________ STATE ____

ZIP ___________ E-MAIL ADDRESS ____________________________

Please check one of the following:

I have: ☐ Bipolar Disorder (Manic-Depression) ☐ Depression
I am a ☐ Family Member ☐ Professional
None of the above

Birth Date (Optional) : Month _________ Day ______ Year _____

Enclosed is my payment for DBSA Membership _____ $20.00 (includes newsletter).

Enclosed is my donation of $ ___________ to help others receive the newsletter.
I would like a subscription to the newsletter only. $10.00 (12 issues per year).
I would like to volunteer my time and talent to help. ☐