Undoing Depression: What Therapy Doesn’t Teach You and Medication Can’t Give You

Richard O’Connor, PhD.
Renowned author of Undoing Depression and private psychotherapist

Lecture: Tuesday, June 8

When it comes to depression, Dr. Richard O’Connor has been there, done that. He clawed his way out of the pit of chronic despair, took one look back, and dedicated his life to helping others move forward. He’s one of our favorite authors, (see the review for the new edition of Undoing Depression on page 4), and a sensitive and practical therapist.

Dr. O’Connor believes one key reason people stay depressed is because they are unable to imagine an alternative. We blame ourselves for our illness, and perhaps don’t think we deserve to feel better. Over time we become creatures of habit, with ways of thinking and feeling and seeing the world that make us experts at “doing” depression. This June, we’re honored to have Dr. O’Connor teach us specific ways to undo all that. Back by popular demand, this warm, personable, and right-on-target speaker has great insights into how we can move beyond what’s become normal for us, and start down the road to true recovery.

Don’t Let it Get You Down! Resources for Building a Purposeful and Independent Life

Dwayne Mayes
Director, Howie T. Harp Advocacy Peer Specialist Training Center

Lecture: Tuesday, September 14

Dwayne Mayes recently received the Robin Hood Foundation Hero of the Year Award, and a hero he is, indeed. A man who fought his way out of unemployment, homelessness, substance abuse and severe depression, Dwayne is a master of resources

The Wizard of Psychopharmacology Is In: Answers to Your Most Pressing Questions

Ivan Goldberg, M.D.
Psychopharmacologist and Medical Advisor to MDSG

Q&A: Tuesday, October 5

Think you’ve tried everything under the sun to get your depression under control? Dr. Ivan Goldberg is sure you haven’t. Come to our Q&A on October 5 for a healthy dose of creative problem-solving.

Dr. Goldberg’s reputation as the wizard of psychopharmacology stems from his prodigious knowledge and deep experience in treating seemingly intractable mood disorders. He’s
Passings: Ben Grayman

Wonderful spring had just arrived in New York when MDSG learned the tragic news that one of our most well-liked and valued members, Ben Grayman, died peacefully in his sleep at the age of 32.

When Ben first came to MDSG, it was apparent that he was someone with a lot of energy who could help in many ways. Ben would volunteer without being asked. “Here, let me help you with that,” he would say. Or, “Sure, I’ll be there early.”

Ben started out as a facilitator. Then he became the coordinator of our East Side Friday night site. He organized many details for the monthly lectures, and managed the tricky job of coordinating and scheduling approximately 30 facilitators and 16 groups, so that our two sites could operate smoothly…a job no one else would take on. Eventually Ben was appointed to the MDSG Board of Directors, to help with policy decision making. He was its youngest member.

Ben’s commitment to MDSG has been extraordinary. We honor him and his life with an outpouring of affection and sadness.

MDSG Membership

The $5 contribution for meetings doesn’t cover anywhere near all of MDSG’s expenses for the more than 600 individual support groups we run each year, or for our distinguished lecture series, our telephone information service, our website, and this newsletter.

Our annual membership is $45 for individuals and $65 for families. Your membership card gives you free admission to support groups, and it gives you a discount on lectures, too!

Send your check, payable to MDSG, Inc. to:
MDSG, Inc., P.O. Box 30377 New York, NY 10011

$45 Individual Annual Membership
$65 Family Annual Membership

Is this a renewal? Yes   No

Name ________________________________

Your contributions are tax-deductible. Thanks for your support.
I feel like I’ve tried it all: lithium, Depakote, and Tegretol have all been unsuccessful at preventing Bipolar episodes. I’m reluctant to take antipsychotics or any of the recently developed anticonvulsants. Is there any medication I might be able to take to help?

The combination of lithium, divalproex (Depakote) and cabamazepine (Tegretol) has been found effective in preventing episodes in some people who have failed to do well when taking the same medications singly.

I’ve been on lithium for many years, but still have rapidly-cycling moods. My doctor just-started me on Topamax, and now I have to go for frequent blood tests to check my lithium levels. Why?

Adding topiramate (Topamax) to lithium occasionally causes the amount of lithium in your blood to increase. Frequent blood tests are the only way to know if your lithium levels have risen dangerously.

NOTE: Dr. Goldberg will be speaking at our October 5 lecture! Email your questions in advance to lecture_questions@mdsg.org.

Dwayne Mayes, cont’d from page 1

and “how-tos” for building an independent and full life.

Dwayne Mayes advocates for all of us with psychiatric disabilities, and he works hard so we won’t have to struggle as much as he did. Make his work easy: come hear what Dwayne has to say on September 14. He’ll inspire us with his journey, and wow us with his knowledge of mental health resources. Bring paper and pencil to write down his great ideas for finding employment, housing, continuing education, social networking, and affordable on-going treatment.

The Wizard is In, cont’d from page 1

MDSG’s long-time medical advisor, and an unending source of ideas. So whether you’re concerned about treatment strategies, optimizing doctor-patient relationships, or how to work towards a meaningful and sustainable recovery, Dr. Goldberg has answers. Come with your thorniest questions. You’ll go home with new tactics... and new hope.

MentalHealthHumor.com

By: Chato B. Stewart

No! I’m the most important in here. You and your buddy xanax are NOTHING!

Oh, Ya! without us and Paxil you’d be just SEA SALT...
The Reader’s Corner with Betsy Naylor

*Undoing Depression: What Therapy Doesn't Teach You and Medication Can't Give You*

by Richard O'Connor, Ph.D.
Little, Brown and Company, 2010
Completely Revised and Updated

One of our most popular speakers at the monthly lecture series is Richard O'Connor. He’s a terrific human being, and I urge you to come hear him on June 8. His 1997 book, *Undoing Depression*, continues to be the most sought-after book among dozens that MDSG sells. Now Dr. O’Connor has revised and updated the book to incorporate the latest research, and the new *Undoing Depression* is even better than the old one. The opening paragraph says:

"Once we understand the hidden meanings and motives behind our behavior, and see how we keep repeating behaviors that prevent us from feeling good about ourselves and getting to where we want in life, *why don't we just stop?*" Part of the answer is that when we are depressed, depression becomes part of our self-identity. It leaves an imprint on our brain. Alternative ways to think or act don't cross our minds. No different coping skills are considered. No change seems possible.

O'Connor has suffered through depression himself, and he makes spot-on observations of how it unfolds. Reading the book, I felt as if someone I knew very well was reflecting me back to myself, while teaching me important facts about anxiety, relationships, depressive thinking, defenses. As I grew out of my teens, I began to lose self-esteem and I felt so sad. This state, I assumed, was just how life was. Being depressed – with all its accompanying dysfunctions – felt absolutely natural. Dr. O’Connor points out that it’s well worthwhile to take a look at the origins of the feelings which started a long time ago. He writes, "Because children can't see their parents objectively, they make the way their parents treat them part of themselves; if you are treated like dirt long enough, you begin to feel like dirt. Instead of understanding that Father is too critical, the child experiences himself as inadequate; instead of understanding that Mother is cold, the child experiences himself as unlovable. These feelings persist into adulthood."

With mood disorders, we tend to loose our ability to perceive shades of grey between the black and the white. Without realizing it, certain ways of thinking become habitual: making judgments, feeling paranoid, making repeated mistakes in how we perceive others. We hang on to erroneous thoughts because even if they're wrong, they help us maintain the equilibrium we have found in depression. But some of these habitual patterns of thinking can be recognized, then shaken up a bit by reading this new edition of *Undoing Depression*.

Dr. O'Connor is a strong advocate for therapy for people with mood disorders, especially cognitive therapy. In his experience, medication helps greatly. Dr. O’ Connor recommends mindful meditation as the strongest healing mechanism. Mindfulness is a slightly detached state in which you observe your feelings, thoughts, and experiences openly, allowing yourself to wonder what is going on. Being aware of what you're feeling is the first step toward figuring out what you can do to make things better.
Ask the Lawyer:

Marc A. Strauss, Esq.

I have to go to a Social Security Disability hearing in front of a judge. Can I bring other witnesses along?

Yes, you can bring a witness to provide input into the nature of your condition. This person can be a family member, friend, support group worker, social worker, doctor or anyone else whose testimony attests to how Bipolar Disorder prevents you from being able to hold a job. (Note that professionals will generally charge you for their time spent testifying.)

Witnesses are helpful if you’re not likely to be able to effectively verbalize how you’re doing. They should also be able to describe what your life is like on a daily basis. For example, they might describe how much of the day you spend in bed, or whether or not you can travel alone. This kind of supplemental information validates the medical records you’ve already submitted, and helps the judge assess your case.

Having a witness does not get you out of testifying, though. You do have to go to your hearing, and you must try to speak to the judge yourself. You may bring a person along for moral support, but it cannot be the same person as your witness.

I just got a notice of something called a Continuing Disability Benefits Review. What is it, and what do I have to do?

Once you receive Social Security Disability benefits, your case may come up for review every few years. This happens so that a judge can assess whether or not your disability has changed. This happens less frequently if you are age 50 or over.

You will be asked to submit medical evidence to substantiate your disability. It is very important that you can show that you have been under continued care while receiving benefits. Appropriate evidence might include a narrative by a doctor, medical records, and hospitalization dates. It’s good practice to keep a file with the names and contact info of all the doctors you’ve seen, so you don’t have to reconstruct the information later.

After you’ve submitted the evidence, you may be asked to attend an informal meeting with a disability review specialist. (This doesn’t happen in all cases.) If your disability has remained the same or gotten worse, your benefits will most likely be re-approved. If they are not, you can request a hearing in front of an administrative law judge.

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**Buying a graduation present, a Father’s Day gift, or honoring an anniversary? You can give a gift to MDSG at the same time, at no extra charge!**

Any time you buy something through Amazon.com a portion of your purchase can benefit MDSG *automatically*. Here’s what to do:

1. Go to MDSG.org
2. Click on this icon
3. Shop!

It’s that simple. Nothing special to do at checkout, no secret codes to enter. Free to you, and a portion of every dollar you spend is given to MDSG.
Psychiatric Service Dogs: Going Beyond the Canine Companion

Are dogs man’s best friend? Nowadays, they may be more. People with Bipolar Disorder and other mental illnesses are finding that Psychiatric Service Dogs can make it easier to negotiate life.

Service Dogs are different than pets: they’re specially-trained animals who perform specific tasks to help you function better. For example, a Psychiatric Service Dog can be trained to:

- rouse you from bed when you’re deeply depressed
- remind you to take your medication
- bring tissues, lick your tears, or provide deep body compression when you’re sad
- be alert to signs of impending mania or panic attacks
- call 911 if you’re feeling suicidal

All this in addition to friendly companionship? What’s the catch?

Dogs for Disabilities

First, your mood disorder must be severe enough that it is considered a disability. If you’re receiving Social Security Disability benefits, you’re in the clear. If you’re not, you’ll need a letter from your psychiatrist or therapist saying you are disabled and that your use of a Service Dog is medically necessary. This is because the Americans With Disabilities Act gives Service Dogs special access privileges in public buildings, on airplanes, in pet-free housing, and on mass transit. Using a Service Dog without justifiable cause (or pretending your pet is one when it isn’t) can lead to legal trouble.

Next, you need to weigh the tradeoffs. Part of the price of having a dog who gets you to work every day (and calms you so you can be productive) is having your boss and co-workers know you need some sort of help. While you’re not obliged to go into details with curious co-workers, you will have to be comfortable admitting you have an invisible disability. Fortunately there are online listservs on Psychdog.org and Dogster.com full of people who have been through this, and can offer help on how to graciously handle thorny questions.

A Different Breed

Most dogs are what are called emotional support animals: pets who provide comfort and companionship. You may also be familiar with therapy dogs, special canines that have been trained, tested, certified and insured to work in an institutional setting to cheer people up.

Psychiatric Service Dogs go many steps further. They are trained to perform specific tasks that can make life with Bipolar Disorder easier and more manageable. The word most mentioned by people who use Service Dogs is independence. A Service Dog can make what was previously overwhelming do-able. You can’t toss your meds or kiss your therapist goodbye, but in a very real sense, you won’t ever be alone with your disease again.

Finding and Training a Dog

Service Dogs come in all shapes, sizes, and breeds. Which dog is right for you is partly a matter of chemistry, but purebred puppies have the highest rates of success. The Psychiatric Service Dog Society recommends working with a professional dog trainer one-on-one as you train your Service Dog. It’s a big commitment – but the payoff can be huge.

Resources

Psychiatric Service Dog Society (Psychdog.org) Has a lengthy Q&A, news stories, and a free, downloadable brochure to bring to your doctor or therapist to explain the need for and use of Service Dogs.

Delta Society (DeltaSociety.org) – another great site. Search their Service Animal Trainer Directory to find trainers with experience in training dogs for psychiatric support.

Doris Day Animal League (Ddal.org) – has a free download called Friends For Life, which outlines your right to a Service Dog in all types of housing.
Mood Disorders Support Groups and Lectures  
Spring 2010

Support Groups

Manhattan – West Side  
Every Wednesday

St. Luke’s Roosevelt Adult Outpatient Psychiatric Clinic  
411 West 114th Street  
(between Amsterdam and Morningside)  
Doors open at 7:00 p.m.; groups begin at 7:30 p.m.

Manhattan – East Side/Downtown  
Every Friday

Beth Israel Medical Center, Bernstein Pavilion  
2nd floor, Enter on Nathan Perlman Place  
(between 15th & 16th streets, First & Second Avenues)  
Doors open at 7:00 p.m.; groups begin at 7:30 p.m.

Support groups enable participants to share personal experiences, thoughts, and feelings in small, confidential gatherings. Separate groups are available for newcomers, unipolar (depressive), bipolar (manic depressive), family members, and friends. At both locations, groups meet at the same time, including the under-30 group. Support groups are free for members, and a $5 contribution is suggested for nonmembers.

Upcoming Lectures

Held at the Podell Auditorium, Bernstein Pavilion, Beth Israel Medical Center  
Enter at Nathan Perlman Place between First and Second Avenues and 15th and 16th Street

June 8  
Tuesday  
7:30 p.m.

Richard O’Connor, PhD  
Noted author and private psychotherapist

Undoing Depression: What Therapy Doesn’t Teach You and Medication Can’t Give You  
The author of one of our favorite books talks about insights and techniques that can lead to sustained recovery.

Sept 14  
Tuesday  
7:30 p.m.

Dwayne Mayes  
Outspoken mental health advocate; Director, Howie T. Harp Advocacy Peer Specialist Training Center

Don’t Let it Get You Down! Resources for Building a Purposeful and Independent Life  
A master of resourcefulness shows how to find help with employment, housing, education and affordable treatment,

Oct 5  
Tuesday  
7:30 p.m.

Ivan Goldberg, M.D.  
Renowned psychopharmacologist and MDSG Medical Advisor

The Psychopharmacologist is In! Bring your questions about medication, treatment strategies, and how to improve doctor-patient relationships.

Lectures are usually held on Tuesdays (call 212-533-MDSG and listen to message for last-minute changes). Doors open at 7:00 p.m., lectures begin at 7:30 p.m. Lectures are $4 for members and $8 for non-members.

Contact us for more information and a copy of our newsletter.  
THE MOOD DISORDERS SUPPORT GROUP, INC.  
(212) 533-MDSG  
P.O. Box 30377, New York, NY 10011 * Fax: (212) 675-0218  
E-mail: info@mdsg.org * Web: www.mdsg.org
“It is more important to know what sort of person has a disease than to know what sort of disease a person has.” — Hippocrates

**Stay Healthy, Keep MDSG Healthy**

We all know it takes a huge amount of work to keep ourselves stable and healthy. MDSG plays a key role in supporting us in those efforts. The cost of membership and lecture admission doesn’t come close to covering our expenses. Your financial support is crucial. Please give what you can.

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I’ve enclosed: $1,000  $500  $250  $100  $75

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