

MOODS

Serving People with Depression & Manic Depression, Their Families & Friends Since 1981

2004, No. 2, \$2.50

June Lecture: Stress and Mood Disorders



Richard O'Connor PhD

Renowned author of Undoing Depression and practicing psychotherapist

June 7, 2004

**The Perpetual Stress Response:
Breaking its Terrible Hold on Mood Disorders**

The phone is ringing, your e-mail in-box is full, your boss wants to speak to you *right away* and you've scarcely had any face time with your friends and loved ones all week. Can the stresses of modern society have an effect on depression and bipolar disorder? You bet they can, says Richard O'Connor, our June lecturer and author of the widely-praised book, *Undoing Depression*. Understanding how our bodies react to such stress is a key component in managing a mood disorder. "Our nervous systems are 160,000 years old and they're just not designed for the level of input we have today," says Dr. O'Connor. "And not only are we getting a lot of information, we're getting a lot of conflicting information. With so many things to buy and so many opportunities, we're told we're supposed to be happy. But we don't feel happy." The constant adrenaline rush we feel as result of

all this input means that cortisol—the so-called "stress hormone"—is constantly coursing through our bodies. That's bad news for anyone, but for someone with a mood disorder it's a major double whammy. "If we really want to get better, we need to be aware of how all of this comes into play," says Dr. O'Connor.

Come hear Dr. O'Connor speak about this important issue. His past MDSG lectures have packed the house and he is back by popular demand. This time, he'll discuss the best ways to reduce stress—from lifestyle choices to mindfulness meditation and other relaxation techniques. Learn how to stop stress from running your life.

For details on Dr. O'Connor's lecture as well as information on other upcoming lectures, see page 5.

Inside...

Depakote and side effects. 3

The FDA warning on teen suicide. . . . 3

Reader's Corner: Carrie Fisher's novel about being bipolar. 4

How to get the most out of attending one of our groups . . . 6

Plus
There once was a comical contest . . .
Our limerick competition is back. . . . 2

Limerick This

By Howard Smith

I once took a pill for my manic
It even smoothed out my panic
It quadrupled my weight
Despite what I ate
And my libido went down like Titanic

If you can't laugh at mental illness, you're crazy. So once again, here's a contest with a humorous slant. It's a reprise of one of this newsletter's most popular competitions which last appeared seven years ago. To win you must write a limerick that follows the traditional form and style of this kind of ditty, but its subject has to be mood disorder topics like depression, mania, anxiety, medications, psychiatrists or any other aspect of this hilarious illness.

First prize: Dinner for two at Mumbles
Second prize: A copy of Anne Sheffield's latest book, Depression Fallout
Third prize: A tin of Nate's famous brownies

Send your name, phone number and as many entries as you like to Limerick Contest, MDSG-NY, PO Box 30377, New York, NY 10011, or e-mail us at newsletter@mdsg.org. You *must* include your name and phone number. The decision of the judges is final. The deadline is July 7. Here are several more examples, but we're sure you can do better:

My wife Mary spent all of our money
She also stopped calling me honey
She talks night and day
Changed her name to Tammy Faye
If it wasn't so sad, it'd be funny

Henrietta's home was a mess
"I'm not really a slob," she'd confess
She never went out
"Oh God" she would shout
It's just that I'm so damned depressed

Bill's brain is all out of order
The doctor said "Bipolar Disorder."
He just bought a yacht
With credit he don't got
Maybe Bill's shrink can afford her

Mood Disorders Support Group
New York
MOODS

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P.O. Box 30377, New York, NY 10011
Phone (212) 533-MDSG
FAX (212) 675-0218
E-mail address: info@mdsg.org
Web site: www.mdsg.org

Sarah Schmidt
Editor

Betsy Naylor
Chair

Ivan K. Goldberg, M.D.
Medical Advisor

Michael Horowitz
Webmaster

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Letters to the editor and other submissions are welcome and will be printed at the discretion of the newsletter editor. Contributions sent via mail go to:
Newsletter Contributions,
MDSG-NY
PO Box 30377 New York,
NY 10011
E-mails should be sent to newsletter@mdsg.org

Ask the Doctors with Dr. Ivan Goldberg, Psychopharmacologist...



Q: I have been taking Depakote for about two years and it has done a good job of stabilizing my moods. The one problem I have with Depakote is that since I have been taking it, I have been losing my hair. Is

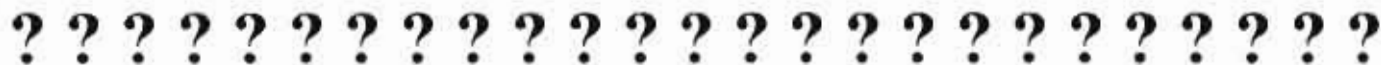
there anything that can be done to reverse this side effect?

A: The hair loss that sometimes accompanies the use of Depakote (divalproex) seems to be the result of the drug's effect on the body's metabolism of copper and selenium. Taking supplements of zinc and selenium can often reverse divalproex-induced hair loss. About 25 mg of zinc and 100 mcg of selenium taken twice a day are usually effective. Minoxidil can also be helpful.

Q: I have just about totally lost interest in sex since taking

SSRIs. Is there anything that can be done about this?

A: There are a number of techniques for increasing sexual interest in people who have been taking SSRIs. Probably the most effective is to switch to an antidepressant, such as Wellbutrin (bupropion), Remeron (mirtazapine) or Serzone (nefazodone) that does not lower sexual interest. And among some of the medications that have been added to SSRIs to help people regain interest in sex are dexadrine, ginko biloba, Ritalin, symmetrel and testosterone (as a patch), Viagra and Wellbutrin.



...and Dr. Joe Nieder, Pediatric Psychiatrist

Q: My 17-year-old daughter has been on Zoloft for almost a year and it seems to be effective at controlling her depression. Now I read that SSRIs are linked to teen suicide. How can I tell if she's at risk?

A: If the Zoloft helps your 17-year-old daughter's depression, it should not be suddenly stopped because of the FDA warning concerning SSRIs and suicidal ideation. The FDA notice is simply a caution about suicidal risk, not a prohibition about the use of SSRIs. The information was gathered among various studies, with a pooling of information regarding possible

negative effects of SSRIs in children. In the British data, there were no suicides in the children studied, but an increase in suicidal ideas. However, it is noted that depression as an illness may be accompanied by suicidal ideas or even suicidal attempts, even without the use of SSRIs, as part of the nature of depression. If the SSRIs were dramatically effective in the treatment of depression, the risk of increased suicidal ideas might be warranted. However, because it has been so difficult to demonstrate a therapeutic effect on depression in children, the benefit vs. risk ratio tips to

greater caution. Of great importance is the warning that patients being treated for depression should not suddenly stop medication on their own, without medical supervision.



The Reader's Corner with Betsy Naylor



The Best Awful
by Carrie Fisher
269 pp.
New York:
Simon and Schuster, \$24.00.

Reading *The Best Awful* could be compared to listening to a terrific, book-length share in an MDSG group. I was completely drawn in by Carrie Fisher's story about a few years in the life of her bipolar character. The quirky, low-key tone and constant humor make for a fun read.

The story is set in a generic Hollywood, where Suzanne Vale lives with her 6-year-old daughter Honey. Bipolar Suzanne is stable on her meds, but a recent event has shaken her sense of herself: Her husband has acknowledged that he is gay and gone to live with his boyfriend.

In many respects, of course, the

book is autobiographical. Suzanne's circumstances overlap with many publicly known facts about Carrie Fisher: Fisher has also been diagnosed as bipolar for years, she has a daughter, and her former husband is indeed gay.

And in Suzanne's musings, Fisher writes with an authenticity that only a person who has had the same feelings could pull off. Suzanne thinks back:

"...she'd never taken her bipolar diagnosis that seriously...She really considered it some quirky tendency...never an overriding issue...Suzanne thought it hilarious that there was an illness whose symptoms were spending sprees, substance abuse, and sexual promiscuity."

Inevitably, Suzanne's rationalizations talk her out of taking her medication.

"Suzanne had given regularity and calmness a fair run," Fisher writes. "The traits the doctors diagnosed and sought to medicate were some of her favorite aspects of herself."

Following her mother's ups and downs is Suzanne's daughter, Honey. Suzanne knows full well that she is damaging Honey, but she can't help it. Honey has become a hyper-vigilant child always watching adults to figure

out what her response should be. Suzanne is already planning for Honey's years of therapy.

Not surprisingly, Suzanne becomes manic and her antics lead her into a dangerous, out-of-control scene requiring rescue. And that rescue ends in a one-way ride to the hospital.

The hospital, with its likeness to jail, ever-present staff and obnoxious fellow patients, does not seem like a place to get better. But getting better happens inside a person. And Suzanne does get better.

Many people will enjoy *The Best Awful*. People with mood disorders will have the added treat of finding such an authentic character with a mood disorder.

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MOOD DISORDERS SUPPORT GROUPS AND LECTURES

May - September 2004

Support Groups

Manhattan - West Side/Carnegie Hall
Every Wednesday

Doors open at 7:00pm, groups begin at 7:30pm
Jewish Board of Family and Children Services,
Third floor, 120 West 57th Street
(between 6th and 7th Avenues, east of Carnegie Hall).

Note: No groups on Wednesday May 26, 2004

Manhattan - East Side/Downtown
Every Friday

Doors open at 7:00pm, groups begin at 7:30pm,
Beth Israel Medical Center, Bernstein Pavilion,
2nd floor, Enter on Nathan Perlman Place
(between 15th & 16th Sts and 1st & 2nd Avenues)

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, all groups meet at the same time, including Youth Group (around the age of 30 and under). The Support Groups are free for members. A \$4 contribution is suggested for non-members.

Lectures

June 7, 2004

Richard O'Connor PhD

Renowned author of Undoing Depression, practicing psychotherapist and popular lecturer.

The Perpetual Stress Response: Breaking its

Terrible Hold on Mood Disorders Hear how stress can affect depression and bipolar disorder and what you can do about it. Dr. O'Connor is back by popular demand—his past MDSG lectures have packed the house. *Learn how to stop stress from running your life.***

September 13, 2004

Gary K. Zammit, PhD

Director, Sleep Disorders Institute, St. Luke's Roosevelt Hospital Center

Sleep Disorders and Mood Disorders: The Crucial Connection. What do sleep disorders and mood disorders have in common? Dr. Zammit, a top researcher in the field will discuss the latest breakthroughs and newest treatments. Don't be sleepless in New York any longer.

October 4, 2004

Frank M. Mondimore, MD

Faculty member, Johns Hopkins University School of Medicine, Award-winning Author, Bipolar Disorder: A Guide for Patients and Family.

Bipolar Depression/Unipolar Depression: Same or Different? The Debate The latest research into the nature of depression is bringing fresh insights. The findings can even affect treatment. Dr. Mondimore, a psychiatrist and researcher specializing in chronic mood disorders, will discuss the fascinating implications.

Lectures are usually held Mondays (call and listen to message for last minute changes). Doors open at 7:00 pm; lectures begin at 7:30 p.m. in Podell Auditorium, Dazion Pavillion, Beth Israel Medical Center (enter at northwest corner of 1st Avenue and 16th Street). Lectures are free for members. A \$4 contribution is suggested for non-members.

**Fundraiser: \$10 non-members, \$6 members

Contact us for more information and a copy of our newsletter.
THE MOOD DISORDERS SUPPORT GROUP, INC.

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e-mail: info@mdsg.org web site: www.mdsg.org

Get the Most Out of Group

By Li Lippman

How can you get the most out of your MDSG support group experience? In my many years as both a group member and facilitator, I've learned that there are many answers to this question. The experience starts even before the group does. MDSG runs about 16 groups a week between the two sites and when participants arrive, they must sign in and pick which group they want to attend. Some people choose by room because they like the consistency of the same room each week, no matter who the facilitator or other group members are. Other people like particular facilitators and will sign up for their favorite facilitator's group regardless of where they are. Adventurous members may even try both Friday and Wednesday sites, attend groups run by any facilitator and try out any room. Which way is the best? It depends on the person, of course. For some, living in a city as unpredictable

as ours with a very unpredictable illness means it's nice to have the same routine every week. For others, mixing things up a bit each week is a good way to add variety to the often monotonous days of depression. No matter how you chose your group, though, it's important to remember that support groups are about being around other people so considering them is as important as considering your own needs. Do what you can to make things run smoothly—it will not only help your fellow members, it will help you, too, by contributing to a better group dynamic overall.

So, number one, come on time. It's such a rich experience to hear and feel how a group builds, unfolds and winds up from beginning to end, so you don't want to miss anything. And of course it's *(continued next page)*

Department of Neuroscience, New York State
Psychiatric Institute
And the
Department of Psychiatry, Columbia
Presbyterian Medical Center

Are you or someone close to you currently depressed?

If you or someone you love is depressed and between the ages 18 - 75, you may be eligible for a state-of-the art brain imaging study. We will provide up to 6 months of outpatient treatment for Unipolar and Bipolar Depression at no cost to the patient. One night stay at the Medical Center necessary.

Inpatient treatment also available.

For more information, please call

(212) 543-5834.

just plain disruptive and disrespectful to the others to come late.

Second, sign-up for a group at the sign-in table right away instead of waiting until the last minute before group starts. Signing up at the last minute makes it impossible for the leaders to know how many people are in each group and which is the best room for the group.

Third, when you sign up for a group, go to that group. Don't switch groups. Again, you are creating a logistical nightmare for the administrators as well as compromising everyone else's group experience if you go to a different group than the one you signed up for or switch groups part way through.

Fourth, practice listening. This may be the hardest part of all, but it's important. After all, hearing other people's stories is a crucial part of what

makes the group experience such a valuable one. As a group participant, I find that listening makes me aware of what people are trying to tell me. Sounds so simple, but it can be a hard lesson to learn! And as a facilitator, I find that the more I let the members talk, the more I get out the group.

Fifth, attend some lectures. Sometimes, hearing a different professional perspective and the latest research helps me feel hopeful. I learn something at every lecture and get a sense of community with MDSG when I've been to a lecture.

So happy grouping. Whichever group you attend, whether you go regularly or sporadically, in the same room or different rooms, be considerate of others in the group and the leaders who are trying to make the groups work for everyone. See you all at the sites sometime soon!

More Lecture Tapes Available

Did you miss a lecture of great interest to you? Most of the people who come to hear these experts speak, tell us how helpful the information has been. Not only do we find out about the latest scientific breakthroughs, but we also learn new coping skills from these cutting edge researchers, clinicians and authors. Tapes of these popular lectures are available through the mail. Below is a listing of the most recent presentations.

<u>Tape #</u>	<u>Date</u>	<u>Presenter</u>	<u>Subject</u>
38	4/12/04	Paul H. Wender MD,	ADHD and Its Impact on Mood Disorders. (NEW!)
37	3/1/04	David P. Bernstein PhD.	What's Personality Got To Do With It? (NEW!)
36	2/2/04	Anne Sheffield	Subject: Love, Sex, Relationships and Mood Disorders. (NEW!)
35	1/5/04	Donald F. Klein MD	What's Typical About Atypical Depression?
34	12/1/03	Panel of Employment Lawyers	Working the Workforce
33	11/3/03	Heidi Wehring Pharm D	Medications: Getting the Full Effect, Losing the Side Effects
32	10/13/03	Francis Mas MD	Identification and Treatment of Mixed States
31	9/8/03	Stephen J. Donovan MD	Anger, Irritability and Mood Disorders
30	6/2/03	Michael Craig Miller MD	The Latest in Mood Disorders
29	5/5/03	James J. Fyfe, PhD	Confrontations Between the Police and the Mentally Ill
28	4/7/03	David Hellerstein, MD	Ask the Psychiatrist Anything
27	3/3/03	Sarah H. Lisanby, MD	Transcranial Magnetic Stimulation and Mood Disorders
26	2/3/03	David J. Miklowitz, PhD	Can You Survive Bipolar Disorder?
25	1/6/03	Robert Cancro, MD	Different Types of Depression & Their Treatments
24	12/2/02	James H. Kocsis, MD	What if My Antidepressant Doesn't Work?
23	11/4/02	Joseph F. Goldberg, MD	Rapid Cycling
22	10/7/02	Ellen Frank, PhD	Social Rhythms Therapy
21	9/9/02	Frederick Goodwin, MD	Suicide
20	6/3/02	Judge Sol Wachtler	"His Manic Fall From Power"
19	5/6/02	Charles Nemeroff, MD	Remission and Treatment
18	4/1/02	Charles Murkofsky, MD	Eating Disorders & Mood Disorders
17	3/4/02	Michael Scimeca, MD	Substance Abuse & Mood Disorders
16	2/4/02	Andrew L. Stoll, MD	Omega-3 Fatty Acids in Treatment

Tapes are \$13 each (including postage and handling) or \$25 for two, \$35 for three. To order write a letter requesting any tape by number, *make check out to MDSG Inc.* and send to: Lecture Tapes c/o MDSG PO Box 30377, New York, NY 10011

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We Get By with a Little Help from our Friends . . .

MDSG provides award-winning services to thousands of New Yorkers—over 600 individual support groups a year, the distinguished lecture series, our telephone information service, our website, this newsletter. And all at the lowest possible cost, through volunteers.

The \$4 contribution for meetings doesn't cover all our expenses. We need your help to pay the phone bill, print the newsletter, promote MDSG in the media, and meet other needs.

Annual membership is \$35 for individuals, \$50 for families. Your membership card is a free ticket to support groups and most lectures. Contributions are tax deductible.

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