MOODS

Serving people with depression and manic depression, their families and friends since 1981.

Do a Few Drinks Really Matter? The Impact of Drugs and Alcohol in Bipolar Disorder

Michael Ostacher, M.D., M.P.H Bipolar Clinic and Research Program, Massachusetts General Hospital; Assistant Professor of Psychiatry, Harvard Medical School

Lecture: March 3, 2009



Does being on medication mean you can't be part of the party? Are some meds (or drinks) more dangerous than others? How slippery is the slope of substance use? What should you do if you feel yourself sliding

down it?

Bipolar disorder has the dubious honor of being complicated by substance and alcohol abuse more often than any other psychiatric illness. Dr. Michael Ostacher of Harvard Medical School is one of a small group of researchers in the world devoted to the study of why this is so.

Dr. Ostacher's research builds off of his clinical work with addiction treatment in bipolar patients. A recipient of a five-year NIH Career Development Award, he's particularly interested in finding out which interventions work in helping bipolar patients with alcohol dependence. He's also collaborated with specialists in the fields of anxiety disorders, cognition, neuropsychology, and neuroimaging. Dr. Ostacher's depth, expertise, compassion, and insight are sure to make this lecture both informative, practical, and a must-see!

Ask the Doctor... Anything!

Ivan Goldberg, M.D.

Psychopharmacologist and Medical Advisor to MDSG

Lecture: April 7, 2009



His column in MOODS is one of our most popular features, his web site is always current. He stays abreast of the latest research and he is one of the most prominent psychopharmacologists in the country.

His knowledge is vast (and growing daily). Our renowned medical advisor, Ivan Goldberg, M.D., loves answering questions. Bring yours, ask for a friend, or just listen in.

Practical Tips for Living with a Mood Disorder

Panel of MDSG Facilitators Panel: May 5, 2009

There's no one like the seasoned facilitators who lead our MDSG groups for sensible, workable suggestions on how to make life with a mood disorder a little bit easier. How much should you disclose, and to whom? How can you get yourself going, when you can barely get up? On the other hand, how can you trick yourself into going to sleep? Straight from the heart of our groups, this panel has years of experience to share. Be prepared to come away from this talk with new courage and plenty of great ideas.

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Archived Lectures Available

Recordings of past lectures are available on CD through the mail. Our most recent lectures are listed below. Please see our website, **mdsg.org**, for a listing of earlier lectures.

CD#

79 James C.-Y. Chou, M.D.

Redefining "Mood Stabilizer"

78 Richard O'Connor, PhD

What Do Happiness Research and Positive Psy chology Have to Say About Depression?

77 David Hellerstein, MD

Help! My Medication's Not Working

76 Katherine Burdick, PhD

Cognitive Problems in Bipolar Disorder: Are They Real? Can They Be Treated?

73 Richard A. Friedman, M.D.

Personalized Psychopharmacology

72 Igor Galynker, MD, PhD.

Care for the Patient, Care for the Family: Family Inclusive Treatment for Mood Disorders

Lectures are \$13 each, \$25 for two, or \$35 for three (includes postage and handling). To order, send your requested lecture numbers and a check payable to MDSG Inc. to:

Lecture Recordings, c/o MDSG P.O. Box 30377 NY, NY 10011

Have a question for one of our lecturers? Email it in advance.

Our lecturers have always fielded questions from the audience, but now you can e-mail your questions in advance. Send questions (50 words or less) to:

lecture_questions@mdsg.org.

Please indicate at which lecture you would like your question asked. Speakers will answer as many questions as possible, pending time restrictions.

Mood Disorders Support Group New York MOODS

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All information in this newsletter is intended for general knowledge only and is not a substitute for medical or legal advice or treatment for a specific medical condition.

The 24-hour **suicide hot line** is (212) 673-3000. The American Federation for Suicide Prevention hotline is (800) SUICIDE.

Answers to Quiz on page 5:

Vivian Leigh
 Dick Cavett
 Jean-Claude Van Damme
 Carrie Fisher, Star Wars
 Robert Boorstin
 Robert Lowell
 Ted Turner
 Burgess Meredith
 Bobby Brown
 Phil Spector

Ask the Doctor Ivan K. Goldberg, M.D., Psychopharmacologist



What is the role of pramipexol (Mirapex) in treating mood disorders?

Pramiprexole was originally prescribed for the treatment of Parkinson's disease. It started being used off-label as a treatment for depression when it was noticed that people using it appeared less depressed.

Uncontrolled studies show it to be effective in reducing depression for 40% to 70% of patients. It is used primarily as a potentiating agent, rather than as a stand-alone treatment. The most common side effects are nausea, tremor, sedation, and irritability.

The people in my local health food store tell me inositol is useful in treating depression. Is this true?

The usefulness of inositol as an antidepressant is far from established. In one study, it was added to conventional medications being used to treat bipolar patients, and results suggested about 50% of patients improved significantly. But a double-blind study in which inositol or placebo were added to

SSRIs found no difference in outcomes.

Is there any role for melatonin in the treatment of acute manic episodes or depression?

Melatonin in nightly doses of 6 mg has been shown to be useful in treating manic episodes associated with east-west travel and jet lag. This dosage improved both the insomnia preceding the manic episodes and the episodes themselves. Melatonin may reduce the severity of depression in some people with Seasonal Affective Disorder (SAD). It can be useful in treating manic episodes triggered by significant insomnia. It has also been successfully used to treat insomnia related to depression or medical illness.

I have rapid-cycling Bipolar Disorder that hasn't responded to many combinations of mood stabilizers. My doctor wants me to take high doses of thyroid hormones to slow down my cycling. Is this effective?

Studies show that high doses of thyroid hormones can be effective at controlling rapid cycling. The treatment is effective and tolerable over both the short and long term.

What is Transcranial Magnetic Stimulation (TMS), and is it effective for treatment-resistant depression?

TMS is a technique that uses inductance to generate a magnetic current that activates cerebral neurons. Some uncontrolled studies show that its effectiveness as an antidepressant is about the same, and lasts as long, as ECT. Other double-blind studies show TMS to be less effective than ECT and find that the results are less long acting.

What are the major advantages of TMS over ECT?

TMS is followed by fewer and less severe memory disturbances. It is relatively free of side effects; usual ones include discomfort where the stimulation is administered, some muscle twitched during the stimulation, and headache. As with all other successful treatments for depression, TMS occasionally induces hypomania or mania. Seizures are another rare side effect.

The Reader's Corner with Betsy Naylor

HAPPY at Last: The Thinking Person's Guide to Finding Joy by Dr. Richard O'Connor, M.S.W., PhD. 308pp., St. Martin's Press, 2008, \$24.95



Author Dr. Richard O'Connor, our December 4th lecturer, assured us that happiness is attainable, even if we're depressed. Is it, really? And if it is, how do we get there? Happy at Last details the steps to take to turn this would-be dream into reality.

One of the biggest obstacles to happiness is that we frequently misunderstand how to find it.

At one time or another (maybe always) many Americans seek happiness by buying lots of things. We attribute our unhappiness to the fact that our desires exceed our resources, falling into the trap of believing we'll be happy if only we get what we want.

Happy at Last helps people modify their concept of happiness. In an early section, Dr. O'Connor shows how to start a habit of mindfulness meditation. Mindfulness asks the participant to give up judgment, sit quietly, and meditate on his thoughts, always trying to pay attention and be fully aware of whatever comes up. With practice, mindfulness meditation can change the neural pathways in the brain.

In the past few years, cognitive therapists have found mindfulness meditation to be more effective than cognitive behavioral therapy (CBT). Mindfulness helps patients gain awareness of the subjectivity and distortions that make them unhappy. It teaches them to notice beliefs like 'I have to keep up with the Jones's', 'I can't live without my boyfriend', 'I am stupid' or 'I have no value to anyone else'.

After that, patients can begin to question these beliefs. With diligent practice, distorted ideas are slowly replaced with more peaceful truths. Worthwhile benefits include compassion for yourself, less need for rigidity, and more meaning and happiness in your life. Happy at Last tells us why and how these changes are possible.

Practical ideas are what make the book most useful. One simple exercise O'Connor recommends is to spend a few moments each night to write down three positive events of your day. These don't have to be profound things, merely events to be glad about. Examples: I found a delicious peach in January. I read Newsweek cover to cover. I happened to be outside during the one half hour of sun today.

O'Connor writes, "There's incredible beauty all around you. I'm absorbed in writing this book but I managed to look closely at a tiger swallowtail butterfly in the garden yesterday... If I can see that, with less than two weeks to go before my deadline, you can discover something beautiful today too. Open up to your senses. Become a connoisseur of small pleasures."

Dr. O'Connor is probably our most popular lecturer at MDSG. We can understand what he tells us because he makes so much sense. We of MDSG talk frequently about his ideas and we try his methods. We thank him for helping us on our speedwalk toward happiness.

Happy at Last is for sale on the book table at MDSG. Look for the cover with 3 lemon cookies, their smiley faces progressing toward happiness.



Prominent People Quiz

Each of the following people has publicly acknowledged having bipolar disorder. How many do you know? Answers are on page two.

- 1. The star of Gone With the Wind, she was diagnosed with bipolar disorder in 1944.
- 2. A talk show host and actor, he had his first periods of debilitating depression at the age of 22.
- 3. This actor in *Sudden Death* and *Knockoff* kicked his cocaine habit and now takes sodium valproate for rapid cycling bipolar disorder.
- 4. This successful 'script doctor' is perhaps best known for her unusual hair style when she played the female lead in a blockbuster movie. She was first diagnosed as bipolar at age 12.
- 5. President Clinton's national security speechwriter, he served on four U.S. presidential campaigns despite being bipolar.
- 6. A Pulitzer Prize winner, this bipolar poet was once married to Jean Stafford.
- 7. One of the richest men in the country, he won the America's Cup, launched CNN, and was diagnosed as bipolar in 1985.
- 8. He played Penguin in *Batman*, and Sylvester Stallone's coach in the *Rocky* movies, despite suffering from cyclothymia.
- 9. This R&B singer was once married to Whitney Houston. His name hit the tabloids for alcohol and substance abuse, but he wasn't diagnosed with bipolar disorder until 2000.
- 10. A distinguished composer and producer, this Rock and Roll Hall of Famer and Grammy award winner told the Observer, "I've been punished with insomnia and manic depression. I've fought the devil for 20 years".

PAID ADVERTISEMENT

ARE YOU TAKING AN ANTIDEPRESSANT BUT STILL FEEL DEPRESSED?

Have you lost interest or pleasure in activities you once enjoyed? Have you been feeling consistently sad, hopeless, guilty, or worthless? Have past medications failed to improve your symptoms?

If so and you are medically healthy, you may be eligible to participate in a research study of an FDA approved medication as an add-on to your CURRENT antidepressant treatment. This research study will last at most six months. If eligible, you may receive psychiatric evaluation, study related medical care, and medication at no cost.

If you have a current diagnosis of Bipolar Disorder, you will not be eligible for this study. Also, if you are actively abusing alcohol or drugs you will not be eligible to participate.

For more information, please contact the Mood and Anxiety Disorders Program at Mount Sinai at **212-241-9193** or email the clinical research coordinator at chris.kelly@mssm.edu

GCO# 08-0736, IRB approved through 7/28/09

Disentangling the Web

By now we all know that the web can be a terrific resource. Most of us have also become savvy enough to know not to believe everything we read there, so we're careful. But it can be confusing (and time consuming) to tease out what's useful and what's bunk. MDSG maintains a long list of useful links on MDSG.org. Here are some we know are worth exploring.

Unless specifically indicated below, MDSG has no relationship with any of the web sites listed, nor does it endorse any services provided.

Rules of thumb for using the web:

- be wary of anyone offering cures or medical advice
- · rely on sites run by reputable organizations
- always exercise caution and wisdom in sharing personal information

General Information

The National Institute for Mental Health site has been ranked as the best for its coverage and accuracy of its information. **Nimh.nih.gov**

Depression Central is run by Ivan Goldberg, M.D., the medical advisor of MDSG. His site ihas plenty of links to explore. psycom.net/depression.central.html

The Depression and Bipolar Support Alliance has a huge collection of links. **DbsAlliance.org**

Medical Practice

Expert Consensus Guidelines allow you to see how your doctor's recommendations compare to a broad survey of 'best opinion' practices from experts. Try **PsychGuides.com** or **Guidelines.gov** to start.

Medication

Detailed drug information sites let you find out more than the generic pharmacy printout will tell you. **RxList.com** lets you see if what was ordered was what the pharmacist gave you. **WebMD.com** has similar features.

Possible drug interactions are often worth checking at **DrugDigest.org** or **Drugstore.com**

Comparison shopping lets you know if prices at your local pharmacy are reasonable. **DrX.com** has a limited comparison of web-based drugstores.

Dosage tracking can be tricky if you have multiple prescriptions. **Safedose.com** is a fee-based service that can help.

For Family and Friends

Families and friends often want to be supportive, but need help figuring out what's really helpful. Several sites provide valuable insight and information, including **Bpso.org** (Bipolar Significant Others) and **DepressionFallout.org**, which is run by Anne Sheffield, an MDSG lecturer and author of three books on depression.

Bipolar Children and Adolescents

BPKids.org is run by the Child and Adolescent Bipolar Foundation, and contains information, support, and links

Online Discussion Forums

Discussion groups and chats fall into two basic categories. Moderated groups have some supervision, though that doesn't always mean each message is reviewed before it gets posted. Groups in this category include:

WebMD.com – forums moderated by doctors **WingofMadness.com** – chats for sharing experiences **Pendulum.org** – discussion boards, including one for friends and family

Unmoderated groups have little or no supervision. **RxList.com** has useful discussion groups on each prescription drug. There are discussion groups on bipolar issues at **HealthCentral.com/bipolar**; click on 'message boards' to find out what's available.



Don't see what you need? Check MDSG.org for many more useful web sites.

Mood Disorders Support Groups and Lectures Winter 2008

Support Groups

Manhattan – West Side Every Wednesday Manhattan – East Side/Downtown Every Friday

depression and bipolar disorder.

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.

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

March 3 Tuesday 7:30 p.m.	Michael Ostacher, M.D., M.P.H. Psychiatrist, Massachusetts General Hospital; Harvard Medical School	Do a Few Drinks Really Matter? The Impact of Drugs and Alcohol in Bipolar Disorder How bad is it really to use alcohol or illicit substances when you are bipolar? Dr. Ostacher fills us in on the research and the facts.		
April 7 Tuesday 7:30 p.m.	Ivan Goldberg, M.D. Psychopharmacologist and Medical Advisor to MDSG	Ask the Doctor Got questions about meds? Dr. Goldberg's gold mine of knowledge will be at our disposal for the evening. Here's your chance to pose that question you never knew who to ask!		
May 5 Tuesday 7:30 p.m.	Panel of MDSG Facilitators Trained volunteers with a wealth of knowledge	Practical Tips and Coping Strategies, The dedicated volunteers who lead our groups each week have a wealth of knowledge about coping with		

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.

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

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

The \$5 contribution for meetings doesn't cover all these expenses. Our annual membership is \$45 for individuals and \$65 for families. Your membership card is a free ticket to support groups and gives you a discount on lectures. Your contributions are tax-deductible. Thanks for your support.

Annual Membership Provides you with free admission to support groups and discounted admission to lectures		Additional Contributions to Support MDSG		
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