



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

Weekly Support Groups

Doors open at 7:00 p.m.; groups begin at 7:30 p.m.

Manhattan West Side on Wednesdays

St. Luke's Roosevelt Adult Outpatient Psychiatric Clinic

411 West 114th St (bet. Amsterdam and Morningside Aves.)

Manhattan East Side on Fridays

Beth Israel Medical Center, Bernstein Pavilion, 2nd floor,

Nathan Perlman Place (bet. 15th & 16th Streets, First & Second Aves)

Support groups allow participants to share their thoughts, feelings and personal experiences in small, confidential gatherings. Separate groups are available for:

- newcomers
- unipolar (depressive)
- bipolar (manic depressive)
- Under-30s
- family members
- friends.

Groups meet simultaneously. Support groups are free for members, and \$5 for nonmembers.

Upcoming Lectures of Note

Winter 2010-11

Side Effects vs. Mental Health: Do We Really Have to Choose?

Joseph F. Goldberg, M.D.

Associate Clinical Professor, Mt. Sinai School of Medicine; Director, Affective Disorders Program, Silver Hill Hospital, New Canaan, CT.

Tuesday, December 7



Weight gain, sexual dysfunction, tremors, memory and concentration problems — is being able to function worth it? Can the side effects be

minimized? How much control do we really have?

Our very own Dr. Joseph Goldberg is going to answer those questions and many more, as he gives us a sneak preview of his upcoming book, *Managing Side Effects of Psychiatric Drugs* (American Psychiatric Press, spring 2011).

Dr. Goldberg has distinguished himself in the field of psychiatry, psychopharmacology, and the treatment of mood disorders. On December 7 he'll educate us on creative options to manage and even overcome side many nasty effects. You'll leave knowing how to cope, and when it's time to switch medications.

Sorting Through the Confusion about Best Treatment Practices

Frederick K. Goodwin, M.D.

Clinical Professor of Psychiatry, George Washington University; Director, the University's Center on Neuroscience, Medical Progress, and Society.

Tuesday, January 11

His name is synonymous with the last word in mental health. Dr. Frederick K. Goodwin's (yes, the host of 'The Infinite Mind' public radio show, and the former director of the National Institute of Mental Health) is the go-to expert for the most relevant information about Bipolar Disorder, major depression and suicide prevention. And this go-to guy is coming to us on January 11, 2011 to talk about the most effective treatment options for Bipolar Disorder. He'll clear up confusion over best practices, and provide us with a look into the future.

Dr. Goodwin's dedication and brilliance in all things related to mood disorders are amply illustrated by his more than 460 publications and countless distinctions. He's amassed honors such as the Psychiatrist of the Year award, and he's one of the five most frequently-cited scientists in the world. Come bask in his brilliance and benefit from his passionate quest to find new ways to mitigate the suffering caused by mood disorders.

This lecture is being brought to MDSG through the generous support of Jay Herman.

See page 5 for details on our fabulous February lecture with bestselling author David J. Miklowitz, PhD : **Kicking the Mental Habits That Keep Us From Recovery**

Ask the Lawyer Marc A. Strauss, Esq

I know that if I've gotten Social Security Disability benefits in the past, that I can have a trial work period on nine months before your benefits stop. But what if I work for a couple of years and have a relapse? Do I have to start the process all over again?

If you have had Social Security Disability benefits in the past and have started working again, you have up to five years from the time you start working before you have to re-apply. If you become ill while working during that five year period and become disabled, your

benefits can be reinstated immediately.

How frequent must my medical care be under Social Security Disability?

There's no set rule for frequency under Social Security Disability, other than that you "must be under the care of a doctor". Generally speaking, that means you should be seeing someone more than once every six months!

While the regulations do not specify what kind of doctors you must see, for disability due to Bipolar

Disorder the care of some professionals carries more weight than the care of others. You are unlikely to meet the criteria if, for example, your sole medical care comes from a chiropractor and a nutritionist. A psychiatrist carries the most weight, followed by a psychologist. As always, if you're receiving disability benefits (or hope to receive them) you should keep records of your medical care visits, including the doctor's name and the date you saw him or her.

Self-Care Pointers for Friends & Family

In our last issue we addressed ways in which family members can help their loved ones with mood disorders. Here are some pointers to support the well-being of families and friends, contributed by MDSG staff and members.

- Pay close attention to your own mood, sleep patterns and weight fluctuations. Family members may have a history of mood disorders as well.
- Make time to do one good thing for yourself each day – even if it's only for 10 minutes – and even when your friend or relative with a mood disorder is symptomatic.
- Be sure to schedule regular health and dental check-ups even when

home life is stressful.

- Schedule one positive event with your relative with a mood disorder. Go to a movie, order Chinese food, go apple-picking.
- Get support for yourself from family, friends, or a professional.
- Make time to get in touch with your own thoughts, inner voice and needs.
- Learn how and when to disengage. Say the serenity prayer. Don't take things personally.
- Pick an activity that will transport you to an "island in the mind". Meditate, try yoga, listen to music, write or paint.

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New York
MOODS
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The Reader's Corner Betsy Naylor

The Unwell Brain: Understanding the Psychobiology of Mental Health

by F. Scott Kraly PhD
W.W.Norton, New York,
210 pages.

The Unwell Brain sets an ambitious goal for itself: to explain neurobiology in a way that we non-professionals can understand, and to explore what we know about what happens in the brain of someone with a psychological disorder.

Scott Kraly writes about the workings of the brain, with the caveat that "a reasonable estimate is that less than 25% of the neurochemistry of the brain has been identified." We know neurons are communicators and release neurotransmitters, like serotonin, and receptors interact with neurotransmitters – but it's not that simple. There are so many variables that the study of one-on-one neurochemical interactions is not possible. The concept of brain centers (for speech, appetite, etc.) has been losing popularity as research shows that processes take place all over the brain. And that makes the brain a difficult organ to study.

Nonetheless, the quest

for knowledge and the search for more effective drugs to relieve depression and other psychiatric symptoms is ongoing. There's a certain amount of serendipity at work here: sometimes experimenters do not know much about the interaction between the neurochemicals and the drug being introduced – and it turns out that the drug being tested works. This was the case when Australian physician John Cady injected his agitated guinea pigs with a compound that had lithium in it, and found that the guinea pigs calmed down.

But the *why* of certain drugs and their effects sometimes remain a mystery. Lamictal, a well known mood stabilizer, is such a drug. It genuinely helps people with their symptoms, but what it does in the brain has not been discovered yet. The huge unknowns are part of the reason that, although enormous resources are given over to research, the process is very slow-going.

I was interested to learn that men and women have somewhat differing brain functioning – but again, these differences have not been explained much. And in the "Why me?" arena, one good

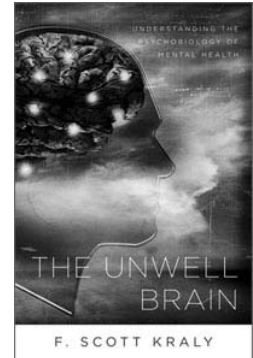
concept that is borne out in research is that we inherited a genetic vulnerability which sets off a mood disorder by the assault of stress, trauma and other life circumstances.

The Unwell Brain is a good read, and I am more patient and hopeful as a result of reading it. Part of the reason is that there are so many more tools now for researchers to use. Less-invasive tools are available now to 'see' a brain, and to learn how brain cells and medication do their job:

- An injured brain
- Stimulation (think white mice)
- EEG - electroencephalogram
- PET Scan - positron emission tomography
- MRI - magnetic resonance imaging
- SPECT - single photon emission computed tomography

Finally, *The Unwell Brain* affirms a gratifying number of truisms that we know and love at MDSG:

- Everyone is different;
- Pills don't do it all;
- Medication combined with therapy (CBT preferred) is more effective than either one by itself; and perhaps most important of all: We have many reasons to hope.



Going to buy the book? Go to MDSG.org and click on the enormous Amazon logo on the home page. A portion of the purchase price will go directly to MSDAG.

The Mood Disorders Support Group

Upcoming Lectures – Winter 2010-11

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
 Doors open at 7:00 p.m., lectures begin at 7:30 p.m. \$4 for members, \$8 for non-members.

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| <p>Dec 7
 Tuesday
 7:30 p.m.</p> | <p>Joseph F. Goldberg, M.D.
 <i>Associate Clinical Professor, Mt. Sinai School of Medicine; Director, Affective Disorders Program, Silver Hill Hospital, New Canaan, CT.</i></p> | <p>Side Effects vs. Mental Health: Do We Really Have to Choose?
 Tips and insights into how to manage side effects so they don't dominate your life.</p> |
| <p>Jan 11
 Tuesday
 7:30 p.m.</p> | <p>Frederick K. Goodwin, M.D.
 <i>Clinical Professor of Psychiatry, George Washington Univ.; Director, GWU Center on Neuroscience, Medical Progress, and Society.</i></p> | <p>Sorting Through the Confusion about Best Treatment Practices
 The eminent mood disorders specialist sheds light on the most effective treatments for alleviating suffering.</p> |
| <p>Nov 9
 Tuesday
 7:30 p.m.</p> | <p>David J. Miklowitz, PhD
 <i>Professor of Psychiatry, Division of Child and Adolescent Psychiatry, UCLA. Author Bipolar Survival Guide</i></p> | <p>Coping as and Individual and as a Family Bestselling author brings expertise, hope and real strategies to help you live life more fully.</p> |

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Manhattan East Side/Downtown Fridays

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MDSG Membership

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_____ \$45 Individual Annual Membership _____ \$65 Family Annual Membership
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Your contributions are tax-deductible. Thanks for your support.

Membership in MDSG gives you FREE admission to support groups and a discount on all lectures

Our February Lecture: Bestselling Author David J. Miklowitz,

Bipolar Disorder: Coping as an Individual and as a Family

David J. Miklowitz, PhD

Professor of Psychiatry, Division of Child and Adolescent Psychiatry, UCLA Semel Institute; Senior Clinical Research Fellow, Department of Psychiatry, Oxford University

The Bipolar Survival Guide is considered by many at MDSG to be the bible on coping with Bipo-

lar Disorder. The book is, as author David Miklowitz says in the introduction to the soon-to-be-published second edition, “above all... about hope.”

This February Dr. Miklowitz is flying all the way from California to talk to us about two approaches that can give us that hope: family-focused treatment, and self-management of our moods. Dr. Mikowitz brings insight, knowledge and warmth even to the

gray days of mid-winter. He writes, “A diagnosis doesn’t have to mean giving up your hopes and aspirations. You can come to terms with the disorder, and develop skills for coping with it and still experience life to its fullest.” His optimism is contagious, his practical focus will help you exhale, and his expertise is unquestioned. Come experience it for yourself.

Great Resources From a Great Lecture

On September 14 our guest lecturer was Dwayne Mayes, who fought his way out of unemployment, homelessness, substance abuse and severe depression to advocate for the rest of us,. He captivated a large MDSG audience with his “defying the odds” story.

Mr. Mayes, who is now the Director of the Howie T. Harp Advocacy/Peer Specialist Training Center, also shared with us his belief that we, too can reach our goals and realize some of our dreams by putting one foot in front of the other – and by knowing which resources to tap into. In case you missed this terrific talk, here are a few of the resources he gave us to get us started:

[The WORKbook: A Guide To NYC’s Mental Health Employment Programs.](#) This book is offered by The Coalition of Behavioral Health Agencies Inc. and includes 115 programs that assist people in attaining their career goals: [CoalitionNY.org/the_center/workbook](#)

[The John F. Kennedy Jr. Institute in NYC:](#) Supports workforce development initiatives and provides worker education, career mentoring, scholarships and advocacy. [JFKInstitute.cuny.edu/programs/DS.html](#)

[Community Access:](#) offers comprehensive support services for housing, job training, counsel-

ing, education and advocacy programs. Howie T. Harp is an affiliate.

[CommunityAccess.org](#)

[Job Openings for Peer Specialists](#)

A link that has lists of job openings for mental health Peer Specialists. Howie T. Harp advertises on this site when they have jobs available.

[Indeed.com/q-peer-specialist-jobs.html](#)

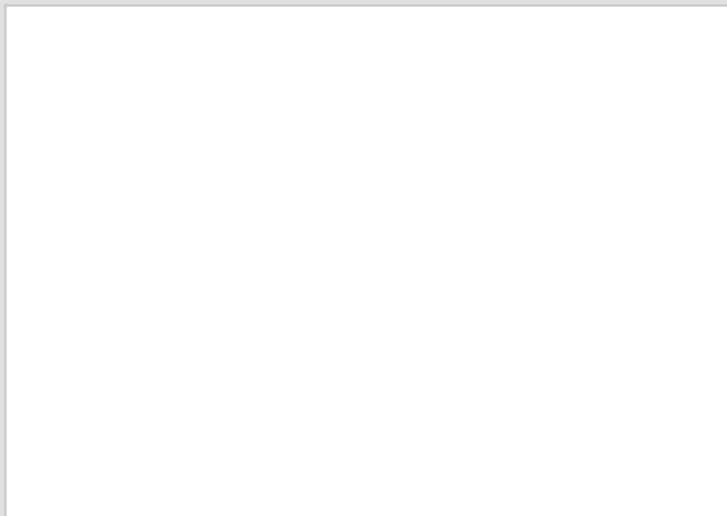
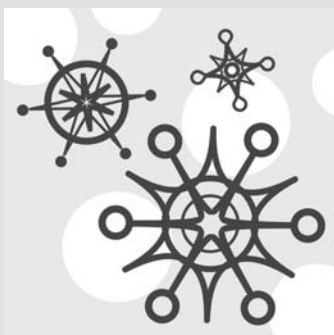
[The Corporation for Supportive Housing:](#) helps communities provide permanent housing with services to prevent homelessness. **[CSH.org](#)**

[Federal Benefits and Work Incentives:](#) **[SocialSecurity.gov/redbook](#)**



MDSG offers weekly support groups for friends and family of people with mood disorders.

MDSG, Inc.
PO Box 30377
NEW YORK, NY 10011



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

One kind word

can warm

three winter

months.

~Japanese

Proverb