

The Thermometer Times

Published by The Manic Depressive and Depressive Association of Riverside, California

VOL. II NO. 11

Out of darkness . . .

November 2001

Dates to Remember

CARE & SHARE GROUPS

Clients and their guests are invited to come and participate. Professional care providers are always welcome.

Saturdays, November 3, 10, 17, & 24
10am-12 noon

at Riverside County Mental Health Administration Building
(see page 9 for address)

**Thanksgiving dinner at:
JoAnn Martin's home
1 PM
directions below**



IT IS ESSENTIAL TO BE ON TIME in consideration for others in the group.

In fact, please come early to socialize, sign in, or help set up the room.

Directions to Jo Ann Martin's Home

Exit 91 Frwy at Van Buren. Go south 4.2 miles on Van Buren to Whispering Spur. Turn left.



2nd driveway on right

16280 Whispering Spur,
Riverside, CA 909/780-3366

Panic Attacks and Anxiety

Dr. Kent Layton speaks to MDDA-Riverside group

An eager crowd awaited our guest speaker on October 20th to hear Dr. Kent Layton, from Aurora Behavioral Systems in San Diego, share his wisdom and give some practical advice on how to deal with panic attacks and anxiety. This timely presentation was most welcome, considering the recent events in New York and Washington.

Anxiety reminds us of recent events. We all have a baseline and we will return to this baseline level, given time. Anxiety has stages: Shock, denial, bargaining, anger, quiet guilt, and depression. If your friends are sick and tired of hearing about your anxiety, you know it has reached the point to need help. We must make adjustments and plans. We need to grow new memories. Dr. Layton suggests "Go somewhere else" and don't hang around "can't do" people.

Levels you might observe are:

0 = no anxiety, feel like jello, relaxed, but wakeful

7 = on alert; "what if" syndrome has set in, the jaw is tight as well as the shoulders, and you are taking short breathes a lot.

10 = Panic attack, fear of fear itself, perfectionism sets in, unhealthy state.

It takes 45 minutes for your brain to make an adjustment to an anxiety attack. You can put yourself on hold for 72 hrs, 14 days, or a month before re-acting or acting upon the anxiety. In suicidal mode, put yourself on a one month hold.

Be less perfectionistic, and a "can do" person. There are 4 traits a person can turn on and turn off:

1. A people pleaser...constantly asking what if?
2. A negated detail focus person. This person always looks at the negative side of things.
3. A must change things person...straighten the picture or put things in order.
4. An anxiety radar person...feels everything in the room, very sensitive. This

Continued on page 2 (Panic)

Panic (continued from page 1)

person will give up his/her chair, even when the other person can get a chair him or her self.

You need to relax. At first, relaxation makes you feel vulnerable. Tension makes you feel safe. However, being tense all the time is not healthy. Sometimes it takes 3 months of relaxing, deep breathing, and altered thinking to change the baseline to a healthy one.

The right brain is preoccupied with what has happened before. It involves feelings, intuition, and prediction. Use experts and more than one credible source to help regain the baseline. Boundaries are a great help.

The left brain looks at what is happening now. It uses logic, reason, deduction, and is concerned with the new. For every negative thought, you must replace it with a positive one. Write down all feelings and repeat them out loud. Gradually repeat the positives over and over again. Switch right brain thoughts to the left brain. Deal with the bad things to enjoy the good things. To retrain the brain, it may take 2 weeks to 2 years. Keep working on returning the baseline to your normal level by relaxing and finding positive things to think about.

Bring your memories into the now and the future and develop more coping skills. A good book to help is "Anxiety, Phobias, and Panic" by Renaeu Z. Peurifouy. Yoga, ThiChi, and Biofeedback also help.

Flooding can be extremely helpful. Say a person is afraid of flying. The person must fly, fly, fly,. We don't mean without a plane... manic behavior. Just like the old phrase, get back up on the horse which threw you and try again.

One of the most important points Dr. Layton made was that human beings are the most adaptable creatures. With practice, one can overcome anxiety and panic attacks. He stressed that you must go through the stages mentioned at the beginning, recognized them, expose yourself to the "problem" and stick it out.

Continued on page 3 (Panic)

We are now officially on the web.

Check it out at:

<http://www.geocities.com/mddariv/>

The Thermometer Times **16280 Whispering Spur** **Riverside, CA 92504** **(909) 780-3366**

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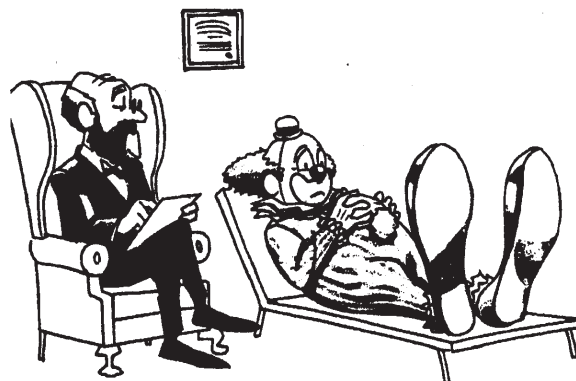
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You may now contact us via e-mail at:
MDDAOFRIV@AOL.COM



"When did you first suspect they weren't laughing with you?"

Panic (continued from page 2)

The level of anxiety will go down and your baseline level will return. The more you do this, the sooner your brain will realize that there is relief and that relief will come quicker and quicker.

Many questions were asked and the session ended with much hope for those who suffer from these potential disabling conditions.

Jo Ann Martin

When Someone Talks Too Much...

When someone dominates a discussion, the other participants hold back their ideas and members get bored or annoyed. Here are some suggestions for dealing with participants who talk too much:

- Avoid discouraging the excessive talker.
- Instead, encourage the others to participate more.
- Go around the group, giving each participant a turn to talk for a stated amount of time.
- Divide the group into pairs for preliminary sharing of ideas. Then ask each pair to give a summary report of their discussion.
- Politely, but firmly, interrupt the person with a question directed to someone else.
- Before the meeting or during a break, enlist the help of the excessive talker in encouraging the silent participants to open up.
- At the start of the meeting, establish equal participation by all members as a team goal. Encourage the participants to help monitor and manage personal participation.

—DMDA Chapter
Relations Staff

Source: *the Roller Coaster Times, Orange County DMDA
Newsletter, Autumn, 2001*

The best years of your life are the ones in which you decide your problems are your own. You don't blame them on your mother, the ecology, or the President. You realize you control your own destiny.

Belief in recovery is essential.
If you believe, it works.

Psychiatrist Albert Ellis

Quoted in The Pendulum, Chicago, Ill., Feb-Mar. '92

Seasonal Affective Disorder “The Winter Blues”

Dr. Norman Rosenthal estimates that 10 to 25 million Americans experience depression that recurs in seasons with less daylight. Most affected people are women, although SAD may occur in men and children.

Signs and Symptoms

“Affective means “emotional,” and some of the primary effects of SAD relate to feelings. Yet SAD affects behavior as well.

Signs and symptoms of SAD include:

- Depression.
- Loss of energy.
- Anxiety.
- Irritability.
- Increased sleep.
- Loss of interest in sex.
- Overeating, especially foods high in carbohydrates.
- Weight gain.
- Difficulty concentrating and processing information.

A diagnosis of SAD requires that a person has experienced depression and other symptoms in at least two consecutive winters, followed by nondepressed periods in the spring and summer. Also, there must be no other explanation for the changes in mood and behavior. It's often difficult to diagnose SAD because other disorders may mimic SAD.

How is SAD best treated?

Light therapy is currently the treatment of choice. This involves exposing people to special lamps that are 10 to 20 times brighter than ordinary indoor lights. Three studies published in the October 1998 issue of *Archives of General Psychiatry* concluded that such light therapy is most effective when administered as the first thing upon waking up in the morning.

Even so, the mechanism by which light therapy works is not fully explained, and it's also clear that light therapy doesn't work for everyone.

continued on page 4 (SAD)

SAD continued from page 3

There are other treatment options, including antidepressant medications and counseling. You should discuss treatment options with your physician or mental health professional.

If you're diagnosed with SAD, you can also make lifestyle changes. For example, Dr. Rosenthal suggests:

- Increase the amount of light in your home. Add lamps or skylights. Trim tree branches that block sunlight.
- Walk outdoors on sunny days, even during winter.
- If possible, take winter vacations in a sunny, warm location.
- Exercise regularly.
- Experiment with sleeping less and eating fewer carbohydrates.
- Learn ways to manage stress.

-Edited from DMDA-Dallas Newsletter, January 2001

Source: the Roller Coaster Times, Orange County DMDA Newsletter, Autumn, 2001

Many thanks to all who helped at the 10th Annual CDMDA Conference. It was a great success! More in our next issue about this unforgettable event.



Gretick: National DMDA meeting

Editor's Note: Caroline Gretick attended the 14th annual DMDA conference in Cleveland in August with several others from northwest Ohio. The following is her report on the conference.

The conference started with leadership meetings targeted to chapter and support group facilitators. The first day included a session led by a gentleman who essentially conducted a large support group meeting.

He led from his own experiences and presented situations common to groups everywhere: frequency and structure of meetings, phone lines, the attendee with problems, using speakers and so forth.

The remainder of the time was spent in small groups that dealt with topics pertinent to the persons in the groups.

The first actual day of the conference featured a talk by Andrew Solomon, an author whose book "Noonday Demon" is on the New York Times Best Seller list. (*Incidentally, it is now in the ADAMhs Board Resource Room.*)

We were then presented with a panel representing various pharmaceutical firms whose topic was "Understanding the process from research to market." What with the recent press and media coverage on the expense of medications, you can bet they really wanted to plead their case and make a good impression on all of us consumers.

The rest of Friday consisted of my attendance at an "Update on Bipolar Disorder" session that was led by three nationally known psychiatrists who presented the absolute latest information on research and hints of new meds to come.

DMDA conferences are well known for the "Ask the doctor" sessions, and that is how Saturday began. It remains a very popular part of the conference judging from the attendance and the numbers and variety of questions asked.

Following an awards luncheon, I attended a presentation entitled "What is wellness?" After that I limped through the rest of the conference with a painful, old foot injury.

All in all, it was an excellent conference and close to home. I was pleased by what I was able to see, hear, learn and do.

Source: ADAMhs ADVANTAGE. Oct/Nov, 2001

From Thanksgiving 2000

I am Thankful for:

A wonderful Day
The man in my life
My family
Good Friends
A cozy home
Being an American
Feeling Emotionally stable

Thanksgiving
Dinner!

Positive ways to cope with stress and anxiety

Constant worry over new terrorist attacks, anthrax-tainted mail and other bioagent threats is exacting a huge emotional toll on Americans. But mental health professionals say there are ways to cope effectively with this new daily reality.

- Get accurate information and conduct a reality check. What are the odds your community or you personally will be affected by a terrorist attack?
- Give yourself some “thought-stop” time. Put your mind on other things besides the news, especially before bedtime.
- Do something relaxing before turning in. Soft music, deep breathing exercises or reading a novel can help you unwind and get drowsy. Find out what works best for you.
- Watch comedies. Nothing helps you cope with tensions like humor and laughter. Go to the movies or the theater. Try sticking with upbeat shows.
- Immerse yourself in household chores and yardwork. These can help take your mind off of world events.
- Get enough exercise.
- Stabilize your eating patterns.

Eating too much or too little can be harmful.

- See your physician if you’re having serious problems getting enough sleep. Make sure there isn’t an underlying medical condition.
- Get out and socialize more. Do the things you want to do.
- Get involved in a support system. This can be your family, church, community group or a mental health support group.
- Let go of petty differences at home or work. This takes enhancing your communications skills. One way is by using “I” statements (“I think,” “I feel...”) rather than the more provocative “You.”

Sources: The Mental Health Professionals William Shearer; Phillip Laney; Christy Rodgers; Doreen Van Leeuwen and The Press Enterprise, October 29, 2001



Helping children cope

As hard as parents try, they can’t completely shield children from exposure to horrific images and grim news reports about war and bioterrorism attacks. Yet a parent’s honesty, openness, reassurance and emotional self-control will help keep a youngster’s fears in check.

- Remain calm around children, who quickly pick up on adult anxieties.
- Be alert for signs of fear such as intensified thumb-sucking, bedwetting, baby talk or fears of sleeping alone in younger children, or reappearance of infantile behaviors in older kids. Other symptoms include headaches, stomach cramps and reluctance to go to school.
- Give them frequent reassurance that they’re safe. Remind school-age children that disasters are very rare and that adults are doing everything possible to protect them.
- Monitor media viewing and Internet access. Limit the amount of media coverage children see. Try to schedule regular activities such as reading stories, watching movies, drawing or letter writing during news broadcasts.
- Provide extra comfort and physical contact. Allow a child to cling to you more than usual. Telephone kids during the day and lavish bedside attention on them before they fall asleep.
- Be honest and open about the disaster. Answer all their questions in terms they can understand. Don’t be afraid to admit you don’t know an answer. And don’t overwhelm children with information. Less detail is better.
- Encourage children to express their feelings through talking, drawing or playing. Find out each child’s particular fears or concerns.
- Encourage adolescents to work out their anxieties rather than downplay them. Communicate with them and share information on how national events may impact the family.
- Schedule get-togethers for your children, their friends and their parents

continued on page 7 (Coping)

Who Are You?

Sandy would like to interview members for a brief personality profile that we can publish in *The Thermometer Times*.

If you would enjoy participating in this, please call her at 909/688-0368.

Alliance
Library

1215 N. Buena Vista
Suite K
San Jacinto, CA

Open 1 p.m. to 3 p.m.
Tuesday, Wednesday,
Thursday, and Friday.

654-7569
927-2546
658-5335
927-5642

The public is invited to check out books, videos, audio tapes and materials on emotional disorders, their causes and treatments. Education and knowledge are powerful tools to develop understanding and compassion.

From Florida Ave., go north on San Jacinto Ave. to Esplanade. Turn left. Turn right at Buena Vista. Continue to the end of the street, and turn into the driveway. Suite K.

**Riverside Suicide
Crisis Helpline**
at
(909) 686-HEIP
[(909) 686-4357]
24hr. Helpline
7 Days a Week

GOT E-Mail?

If so, join **NAMI Stigma Busters** E-mail network. Help flood stigma-builders when they do or say offensive things that create stigma. Go to NAMI website: <http://www.nami.org> click on **Campaign Page** then **Stigma**. Leave your name and address. Done!

Don't forget
Thanksgiving Dinner

at my home.
It will be here before you know it.
Dinner promptly at 1:00 P.M.
Bring a friend and or family member.

Don't stay home alone.
Directions to my house are on the front left lower corner of this newsletter.
Any questions, call 909/780-3366

**Emotional Health Anonymous
Saturday Riverside Meeting**

Emotional Problems?

Do you suffer from DEPRESSION, ANXIETY, or other EMOTIONAL PROBLEMS not related to substance abuse?

We are not professionals, we are a group of men and women who share their experience, strength, & hope with each other that they may recover from their emotional illness and help others who still suffer from emotional problems to find a new way of life.

When: **EVERY SATURDAY**

Time: 4:00pm - 5:00pm

Where: **KNOLLWOOD**

**PSYCHIATRIC CENTER
at 5900 Brockton Ave.,**

Meetings are held in Room 2

For more info: 626/287-6260, San Gabriel Valley Intergroup of Emotional Health Anonymous, P.O. Box 2081, San Gabriel, CA 91778 www.flash.net/sgveha



**Phone
Phriends**

If you need someone to talk with, you may call one of the following members at the corresponding times.

Leroy

**6 a.m. to 9 p.m.
(909) 686-5047**

Sandy

**3 p.m. to 9 p.m.
(909) 688-0368**

Arnold Oberg

(909) 685-1663

Georgia Ann

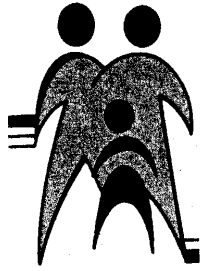
**6 a.m. to 9 p.m.
(909) 352-1634**

Georgia Peterson

**12 noon to 6 p.m.
(909) 354-8727**

Marlene and George

**Before 9:30 a.m.
and from 8 p.m. to
12 midnight
(909) 685-6241**



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

Columbia Presbyterian Medical Center

is conducting Bipolar Genetic Studies. These are for families with at least two living members who have had a manic or schizo-affective episode. You may learn more by logging on to their website: (<http://bipolar.hs.columbia.edu>) or by calling the toll free number 888-219-2140. Some handouts will be available for you to pick up at our weekly meetings.

These are important studies...join in to make a difference!

Columbia Presbyterian Medical Center,
Department of Medical Genetics & Department of Research Assessment and Training. 1501 Riverside Drive, Unit 123
New York, NY 10032-2695

Coping (continued from Page 5)

where kids and adults can talk about the disaster and support each other as a group.

Sources: National Mental Health Association, American Psychological Association, American Psychiatric Association, Baylor College of Medicine, Houston Federal Emergency Management Agency. Also *The Press Enterprise*, October 29, 2001

Know the Signs of Low Thyroid Levels

Adapted from *WebMD Medical News* (Janis Kelly)

Low levels of thyroid hormones can affect nearly all parts of the body, including regulation of fat, menstrual periods, and body temperature. Such symptoms as fatigue, forgetfulness, dry skin and hair, water retention, weight gain, constipation, and hoarseness in otherwise healthy adults can signal the presence of hypothyroidism. Other symptoms include lethargy, mood swings, depression, decreased appetite, slow wound healing, cold intolerance, menstrual irregularities, and joint pain. Even mild hypothyroidism can cause higher cholesterol and low-density lipoproteins, putting patients at risk for developing heart disease.

A recent study (*Archives of Internal Medicine*) discovered that almost 10% of healthy people tested at health fairs in Colorado were low in thyroid levels. "The symptoms of mild hypothyroidism are non-specific, change gradually, and are easy for a person to write off as the effects of stress or overwork, says study author Gay J. Canaris, MD, MSPH, assistant professor of internal medicine at the University of Nebraska Medical Center in Omaha. Thomas C. Rosenthal, MD, chair of the department of family medicine at the State University of NY at Buffalo, found that when using TSH as part of his routine screening panel, 'many patients had unsuspected hypothyroidism.'" Typically, these patients presented with depression, aches and pains, or memory problems.

Researchers recommend more frequent screenings for

continued on page 8 (Thyroid)

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

MDDA P.O. Box 51597 Riverside, CA 92517-2597
FAX 909/780-5758

Thyroid (continued from page 7)

hypothyroidism - and better education about its symptoms. The screening test for thyroid dysfunction measures the thyroid-stimulating hormone (TSH) in the blood. A high TSH level indicates dysfunction. Dr. Canaris recommends that older patients (especially women), those with a family history of hypothyroidism, - those with high cholesterol levels and high blood pressure, and those who have experienced recent changes in symptoms (such as constipation or intolerance to cold) get regular TSH screening tests. Also, the American Thyroid Assn., the American College of Pathology, and the American College of Physicians all recommend regular TSH tests for women over 50.

*As seen in Tampa Bay DMDA Newsletter,
December 2000/January 2001 and
The Initiative, DMDA of Colorado Springs,
Fall 2001*

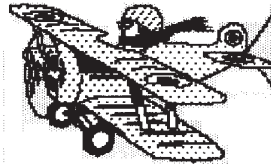
Famous People with Mood Disorders.

Queen Victoria

Victoria suffered a devastating depression that lasted many years, following the death of her beloved husband Prince Albert. During that time the British Royal Family experienced a decades' long period of extended mourning for the Prince Consort.

This depressive period had a marked effect on government and social activities of the British Empire, and cast a cloud of gloom over what was otherwise the most successful period of growth in the nation's history.

Source: Flames of Hope, Winter 1999 as seen in Tampa Bay DMDA Newsletter, April-May 2000 and Mood Challenge, DMDA of Peoria, Illinois, July, 2001



ANNOUNCEMENTS

THE UPLIFTERS

(Christian emphasis) meets at
Victoria Community Church
Contact Arlie (909) 780-0379

UPLAND DMDA FONTANA DMDA

Meet Thursday evenings
Call David or Samantha Johns
(909) 947-1307 OR
e-Mail dmjbf@aol.com

HEMET SUPPORT GROUP

"Foundations" meets every
Tuesday 7-9 pm.
Trinity Lutheran Church
Please call (909) 658-5013

TEMECULA DMDA

Meets every Tuesday 11 am-1 pm.
41002 County Center Dr.
Contact Mark at: (909) 507-1365

UPS & DOWNS - Riverside

Call Family Services at
(909) 686-3706

For Support People: AMI - Riverside Mental Health Administration
Building, 4095 County Circle Dr. (off Hole Ave. near Magnolia) 7:30 pm,
1st & 3rd Monday each month (909) 737-5747 (call FIRST)

Calling all interested consumers.

We are looking for consumers who are interested in sharing their personal recovery story.

Living With Schizophrenia and Other Mental Illnesses (*LWSIOMI*) is a recovery-education program given by trained consumer presenters for other consumers, family members, friends, professional, and lay audiences.

Individuals need not be active in mental health advocacy at this time, but they:

- "have been there"
- are in recovery
- believe in treatment, with medication as the cornerstone for recovery
- must be able to present professionally
- have the time to be trained, and periodically present 1 1/2 to 2 hour workshops, often during working hours.

Stipends will be paid for presentations.

*NAMI - - Living With Schizophrenia
and Other Mental Illnesses*

Please call for more information:



Lisa Partaker, Program Coordinator (909) 686-5484 or email: lpartaker@excite.com

A collaborative effort brought to you by:

Riv. County MH Dept. — NAMI, Western Riverside County —
Jefferson Transitional Programs



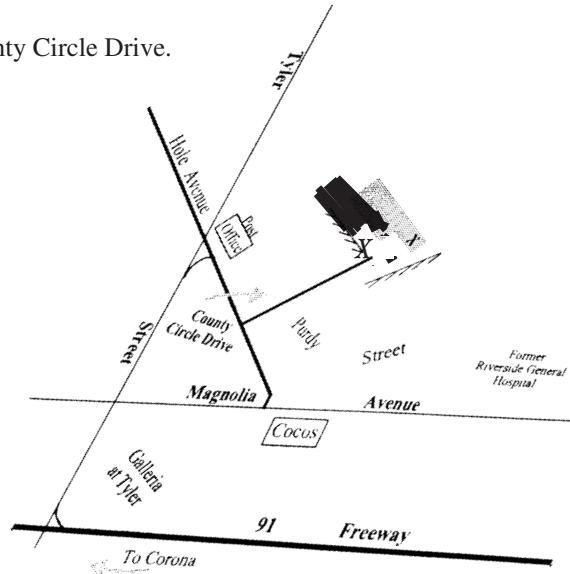
MDDA of Riverside
Map Legend

-  = Meeting Location
-  = Parking

ABOUT MDDA

MDDA Of Riverside is a support group for manic-depressives and depressives who have sought or are seeking treatment for their illness. MDDA 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 Jo Ann Martin on the Saturday afternoon following the last Rap Group 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 Jo Ann or Leroy at (909) 780-3366. Our Rap Group Meetings are on the second, third and fourth Saturdays of the month 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.

Buses 1 and 13 stop on Hole near County Circle Drive.
Bus 12 stops at Tyler and Hole



MEMBERSHIP INFORMATION

Individual membership for the Manic-Depressive and Depressive Association of Riverside is \$15.00 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 \$8.00 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, indicate below.

✂
Mail to MDDA of Riverside, 16280 Whispering Spur, Riverside, CA 92504

DATE _____  Please Print New Renewal

NAME _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

Please check one of the following:

I have: Manic-Depression Depression I am a: Family Member Professional

None of the above Birth Date (Optional): Month _____ Day _____ Year _____

Enclosed is my payment for MDDA Membership _____ \$15.00 (includes newsletter).

Enclosed is my donation of \$ _____ to help others receive the newsletter.

I would like a subscription to the newsletter only. \$8.00 (12 issues per year).

I would like to volunteer my time and talent to help.