

The Thermometer Times

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

VOL. 14 NO. 8

Out of darkness . . .

August 2002

Dates to Remember

CARE & SHARE GROUPS

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

Saturdays, 3,

10, 17, & 24 & 31

10am-12 noon

at

Riverside County Mental Health Administration Building

(see page 9 for address)



Meetings will start promptly at 10A.M.. Do yourself a good turn.

Be on time for announcements and other news that may be important to you.

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

Severely Mentally Ill Rarely Get Enough Treatment

By Melissa Schorr (Reuters, Jan. 4, 2002/American Journal of Public Health, 2002;92:92-98)

NEW YORK (Reuters Health)— Each year, as many as 8 million Americans with serious mental illness fail to receive adequate treatment, a team of Harvard researchers reports.

“Only 15% (of mentally ill patients) appear to be getting minimally adequate treatment, which is unfortunate — but not unexpected,” lead author Dr. Philip S. Wang, an instructor in medicine at Brigham and Women’s Hospital in Boston, Massachusetts, and in healthcare policy at Harvard Medical - School, told Reuters Health. “This is a major public health problem, and something needs to be done.”

The investigators reviewed data taken in the early 1990s from adults who participated in the National Co-morbidity Survey, a nationally representative survey of American adults. The researchers examined the prevalence of mental illness and the quality of treatment mentally ill patients said they had received in the past year. The findings are published in the January issue of the American Journal of Public Health, journal of the American Public Health Association.

Previous research had found only about half of patients with serious mental illness receive any treatment within a given year. In this study, researchers reported that 40% of seriously mentally ill patients had received treatment in the past year, and only 39% of these patients had received adequate treatment.

Treatment was considered adequate if patients received a prescription for an appropriate medication for their illness and had four or more visits with a psychiatrist or doctor, or if they had eight or more visits with any kind of mental health specialist.

“Our sense of what’s adequate is arbitrary,” Wang conceded, “but we used evidence-based guidelines and set the bar so low, here, that we basically required a few follow-up visits and the right medication.”

The researchers also found that certain characteristics were associated with being less likely to receive any form of treatment, such as living in the South and being unemployed.

Teenagers and young adults were also less likely than older patients to receive adequate mental healthcare, Wang noted. “They rely more on other people to get them into care, that’s one possibility, Wang said. “There could be other barriers.”

The report also indicates that black patients were just as likely to seek and receive treatment, but were five times more likely to receive inadequate treatment than white patients. “That raises a whole host of provocative questions,” Wang added “Is this

continued on page 2 (Treatment)

Treatment continued from page 1

a treatment bias? Or do African Americans find treatment less tolerable, which causes them to drop out more?"

Those who suffered from psychotic mental illnesses such as schizophrenia were less likely to have received adequate treatment in the past year than those with less severe mental illnesses, such as anxiety disorders.

"These are extremely vulnerable people," Wang said. "Only 1 in 20 people with psychosis had received adequate treatment." One possible reason, he said, was that many patients find the medications for psychosis intolerable and may elect to drop out of treatment.

Finally, the authors note that patients were less likely to receive adequate care from a primary care facility than one specializing in mental illness.

"It could be a training issue — maybe primary care doctors aren't trained well enough to recognize serious disorders," Wang suggested. Another possibility, he said, is that with managed care, primary care doctors are too diligent in their role as gatekeepers. "They are charged with making sure people don't use too much specialty care, so maybe people don't get the mental care they need."

However, he noted that even these patients who are seeing specialized psychiatric clinicians were not immune to receiving sub-par treatment.

"Clearly, we need interventions that allow people to access treatment, and then once people are in the door, we need to increase the quality of the treatments that are being delivered," Wang concluded.

*Source: The Initiative,
DMDA of Colorado Springs, Summer 2002*

Do you have a Medic Alert Bracelet? Do you wear it? Do you wear it all the time?

Let them know what medication you are prescribed at all times.

Wear your Medic Alert Bracelet, or if you don't - have one, get one today!



Mood Challenge, June 2002

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

Publisher & Editor in Chief
Jo Ann Martin

Senior Editor
Yen Cress

Copy Editor
Karen Cameron

Associate Editors
Nelma Fennimore
Karen Cameron
Georgia Peterson
Chris Majalca

Staff Writer
Judy Kaplan

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Child, Adolescent & Adult Psychiatry
American Board of Psychiatry
and Neurology

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



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"Dad, if you don't feel any better, d'you want me to try acupuncture?"

Highlight On Drugs: New FDA Labeling Standards Should Help The Consumer

May 16, 2002

By Harold J. DeMonaco, MS.

Massachusetts General Hospital

Over the next few weeks, you should begin to notice an important change in the way over-the-counter drugs are labeled. Until recently the U.S. Food and Drug Administration made manufacturers put certain information in the label of the drugs they produce. But the FDA didn't have a standard way for manufacturers to do that. Without standards, manufacturers were free to put the information on their drug labels in just about any way they wanted. What we consumers ended up with were labels that confused us almost as often as they provided needed information, that is~ if you could actually read the label. Many companies used print so small that few people over the age of 25 years could read it without a magnifying glass.

As of today, over-the-counter drugs rolling off the assembly line will have labeling in line with the new FDA standards. As the products get to the store shelves, you should see a dramatic improvement in the readability of the information. You can see what the new labels will look like by clicking [here.](http://www.fda.gov/oc/ohrt/8124289957/345337.html?d=dmContent)

Some of the important changes:

One of the first things you will notice is that the label print is large. The print size is important because the elderly use more drugs than younger people, and our eyesight tends to get worse as we age.

The generic name of drug, which is the name of its active ingredient is listed first along with what the drug does. Now you won't have to read an entire paragraph to figure out what the ingredients are. This is important for people with drug allergies or who are taking prescription drugs that may interact with over-the-counter drugs. Many over-the-counter drug preparations contain a number of different drugs, so it is hard to tell what is in them just by the name or by the use.

The new label has a list of the drug's uses. With so many sound-alike drug names, it is sometimes hard to tell if you have the right drug. Now, you can look not only at the name, but also at its use, so you can make certain you have picked the right drug.

The "Warnings" section of the label tells you what to watch out for. Depending on the drug, the warnings may tell you not to take the drug if you have certain medical conditions or are taking other kinds of drugs. The warnings will also tell you about things to watch for while you are taking the drug, such as a new rash or pain.

The "Directions" section will tell you how to take the drug. In some cases, it will also tell you how much to give to children. Unless you have been told to take the drug differently by your physician, dentist, podiatrist or other health-care provider, you should only take the drug according to these directions. If your doctor asks you to take an over-the-counter drug, make sure you get the instructions in writing. If they are different from what the label says, contact your doctor to make sure he or she still wants you to take it differently. You shouldn't necessarily be worried if you are asked to take it in a different way by your doctor. But you should make sure that that's indeed what your doctor wants.

The new labels have a section for other kinds of information, such as how to store the drug and other kinds of warnings. Make sure you store the drugs according to the instructions. And the bathroom medicine closet is the last place you should think about storing drugs, because the humidity in a typical bathroom can affect the drug's effectiveness. The label will also tell you about inactive ingredients. These are the ingredients that have no medicinal purpose but were necessary to make the tablet or capsules. These can include added dyes and flavorings. Some people have allergies to some of the dyes or flavorings, so this information will be very useful to them.

The last section gives you a telephone number to call if you have questions of complaints about the product. The new label standard should make it easier for consumers to choose products that meet their individual needs. But the label should not be a replacement for asking questions of your pharmacist, physician or nurse practitioner. Becoming an educated consumer is the best way to get the most from any product. That is especially true for over-the-counter drugs. The new labels should help you to become a better-educated consumer.

Harold J. DeMonaco, MS., is the director of Drug Therapy Management and the chair of the Human Research Committee at Massachusetts General Hospital. He is an author of over 20 publications in the pharmacy and medical literature and routinely reviews manuscript submissions for eight medical journals.

Source: Mood Challenge, DMDA of Peoria, 11 June 2002

Pharmaceutical Company Patient Assistance Programs

Many pharmaceutical companies offer patient assistance programs to provide prescription medicines free of charge to physicians whose patients might not otherwise have access to necessary medicines. Each company determines the eligibility criteria for its program. Eligibility criteria and application processes vary.

For information on available medications or the criteria or application process, your physician should contact the pharmaceutical company(ies). Following is a partial list of companies who are members of the Pharmaceutical Research and Manufacturers of America (PhRMA) who offer patient assistance programs, along with the telephone numbers for these programs.

If you are unsure which pharmaceutical company makes the drug you are looking for, please contact your local pharmacy.

Bristol-Meyers Squibb Company	(800) 332-2056
Janssen Pharmaceutica	(800) 544-2987
Eli Lilly and Company	(800) 545-6962
Parke-Davis	(908) 725-1247
Pfizer Inc.	(800) 646-4455
Pharmacia & Upjohn, Inc	(800) 242-7014
GlaxoSmithKline	(800) 546-0420
Solvay Pharmaceuticals, Inc	(800) 788-9277
Zeneca Pharmaceuticals	800)424-3727

(Source of data: *PhRMA 1998 Directory of Prescription Drug Patient Assistance Programs*)

For information on companies not listed above see PhRMA's website or call (800) 762- 4636.

Other Assistance Programs

<u>The Medicine Program</u>	(573) 996-7300
<u>Pfizer for Living Sharecard</u>	(800) 717-6005

Assists people in applying to multiple patient assistance programs.

Provides flat-fee prescriptions to people with Medicare.

Please be aware that other, non-member pharmaceutical companies may also sponsor similar programs. To contact other companies, consult a Physician's Desk Reference (PDR), available at your physician's office and at many public libraries.

DMDA of the Quad Cities and MDDA of Riverside do not endorse or recommend the use of any specific treatment or medication. For advice about specific treatment or medication, patients should consult their physicians and/or mental health professionals.

*Source: Sad and Glad Times,
DMDA of the Quad Cities, Summer 2002*

National Conference Opens Window to Wellness

National DMDA's 15th Annual Conference will be held in Orlando, Florida on August 9-11. This year's conference will explore many aspects of wellness. Increasingly, people with mood disorders and other mental illnesses speak of becoming well, rather than being cured. Whatever wellness means to you, defining your level of wellness and setting wellness goals are important parts of your treatment plan.

The conference program includes: clinical updates on depression and bipolar disorder, men's and women's health issues, employment and legal issues, nutrition, stress management, other lifestyle topics and several sessions exploring creativity, including journaling and art therapy. The program will again include the popular "Ask the Doctors" panel discussion as well as many opportunities to socialize with others.

You may still register on National DMDA's website, www.ndmda.org, for further information or call 800/826- 3632.

You may call National DMDA at 800/826-3632 to join this fine organization, receive their monthly newsletter, Outreach, and much more plus discounts for the conference in Orlando.

Myths add to stigma

“Misconceptions about mental illness contribute to the stigma, which leads many people to be ashamed and prevents them from seeking help,” said NARSAD President Constance Lieber. “Dispelling these myths is a powerful step toward eradicating the stigma and allaying the fears surrounding brain disorders.” Following are some of the myths uncovered in a recent NARSAD survey.

Myth: Psychiatric disorders are not true medical illnesses like heart disease and diabetes. People who have a mental illness are just “crazy.”

Fact: Brain disorders, like heart disease and diabetes, are legitimate medical illnesses. Research shows there are genetic and biological causes for psychiatric disorders, and they can be treated effectively.

Myth: People with a severe mental illness, such as schizophrenia, are usually dangerous and violent.

Fact: Statistics show that the incidence of violence in people who have a brain disorder is not much higher than it is in the general population. Those suffering from a psychosis such as schizophrenia are more often frightened and confused than violent.

Myth: Mental illness is the result of bad parenting.

Fact: Most experts agree that a genetic susceptibility, combined with other risk factors, leads to a psychiatric disorder.

Myth: Depression results from a personality weakness or character flaw, and people who are depressed could just snap out of it if they tried hard enough.

Fact: Depression results from changes in brain chemistry or brain function, and medication and/or psychotherapy often help people to recover.

Myth: Depression and other illnesses do not affect children or adolescents.

Fact: Children and adolescents can develop severe mental illnesses. In the United States, one in ten children and adolescents has a mental disorder severe enough to cause impairment.

*Source: Life in Balance,
MDDA of Metro Detroit, July 2002*

CDMDA Conference for 2002

Bridges to Wellness, CDMDA's 11th Annual State wide Conference will be held at The Cathedral Hill Hotel in downtown San Francisco on October 18 & 19, 2002.

Rooms will be reasonable for the bay area (\$99 a night for up to four persons to a room.) Great speakers and workshops are being planned and there will be plenty of touristy places and inexpensive establishments to eat at nearby.

The talent show and art and literary displays are always wonderful. If you have something to bring to the conference for display, you may call CDMDA at: 909/780-3366. More information will be available soon with brochures as well.

Start saving for this important event. People from all over the state will attend and there will be much sharing, caring, and learning.

DO YOU HAVE BIPOLAR DISORDER?

Have you gained weight taking
medication to treat bipolar disorder?

Bipolar Disorder Research Study

Being conducted at UCLA

If you are 18 to 65 and have gained weight taking medications to treat bipolar disorder, you may be eligible to participate in a yearlong research study. Please call 310/794-9913 for more information. You will receive free medication as part of this study.

UCLA MOOD DISORDERS RESEARCH PROGRAM

Mark Frye, M.D. ■ Lori Altshuler, M.D. ■ Natalie Rasgon, M.D. P.h.D.

MEMBERSHIP CARDS

Our new membership cards are here. Join us with your support for MDDA and you will receive your own card to carry in your wallet. The information on it may help you when you are unable to communicate to someone trying to help you. If you are a member and we missed you, please let us know. 909/780-3366

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~~
~~Crisis~~
~~Line~~
@
(909) 686-HEP
[(909) 686-4357]
24hr. Hotline
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!

Summer Alert

The hottest part of the summer is here. Please remember that some at the medications prescribed for depression and manic-depression can impact our bodies' ability to react to heat and humidity. Ask your doctor and/or pharmacist for details about possible side effects.

Good summer health includes drinking lots of water (if you are not going to the bathroom, you're not drinking enough water!), reducing the amount of caffeine and sugar in beverages, avoiding alcohol, using sunscreen regularly, and exercising in the morning or evening instead of the hottest part of the day.

*Source: Support,
DMDA /Lincoln, Nebraska, July 2002*

**Emotional Problems?
Emotional Health Anonymous
Saturday Riverside Meeting**

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.

EVERY SATURDAY: 4:00pm - 5:00pm
AT KNOLLWOOD PSYCHIATRIC CENTER
at 5900 Brockton Ave., 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

Arnold

(909) 685-1663

Georgia Ann

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

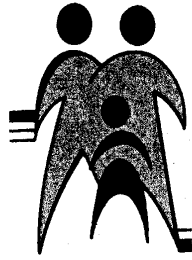
Marlene and George

Before 9:30 a.m.
and from 8 p.m.

to
12 midnight
(909) 685-6241

Dawn

12 noon to 9 p.m.
909/688-1803



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

Donations Needed

Please Help!!

Dear MDDA readers, friends, fellow depressives, and manic depressives. In late March Larry Fox fell from a second story balcony. He had 54 staples in his head, he broke his back in numerous places, and completely severed his spinal cord, plus broke his neck and punctured a lung. He is now paralyzed from the waist down permanently. He has been in the hospital for months. It has been very difficult I have gone through so many emotions. He spent about ten days in Intensive Care, and it was touch and go. I am also a manic depressive, so it has been especially hard on me. We live in a small apartment that is in no way handicapped accessible. There are stairs everywhere. He can't fit his wheelchair into the bedrooms, or the bathrooms. There is no way that he can live here. We need to get into a handicapped accessible apartment very soon. We have no money for moving, and the special bed that we will need. We need help desperately!! We also have non-covered medical expenses. But mainly we need donations to move. It is not going to be cheap. But no matter how small a donation is, it all helps. Any amount that you can send will be so gratefully appreciated.

We have no one else to turn to.

Please send donations to 3250 Panorama Rd. #43 Riverside, Ca. 92506, and make checks or money orders payable to Deadra Fox. We are very grateful for any and all the help that you can give.

All I can say now is please help.

We will keep you updated, God Bless You One and All.

Thank You, Humbly Yours,

Deadra Fox

THAT'S LIFE By Mike Twohy



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

KAREN'S CORNER PRAISE YOURSELF

It takes courage to accept that you might have a depressive illness.

It's courageous to make a medical appointment for a diagnostic evaluation.

It's courageous to enter onto a course of treatment that is frightening to some and ridiculed by others.

It takes wisdom and courage to work with your doctor to find the right medication and with your therapist on deeply personal and challenging issues.

Praise yourself for all of this. Praise yourself for every little victory, every step taken on the path to healing—including those that don't work. It's all part of the journey.

Keep reminding yourself that who you really are is much more than your depression.

Praise yourself for your courage to learn, risk and grow. Well Done!

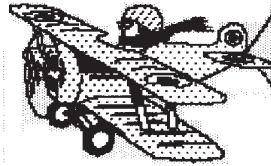
Source: Mood Challenge,

DMDA of Peoria, IL Sept-Oct. 2001 and

DMDA newsletter for Fox Valley, July-August, 2002

FEMALE ROOMMATE WANTED

Private bedroom., bath pool, jacuzzi, tennis court, gated community, evening security patrol. \$400 per month, utilities negotiable. Jennifer, 909/637-2800



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.
Please call (909) 658-5013

TEMECULA DMDA

Mark Monroe
909/507-1365
909/926-8393

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 (*LWSOMI*) 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 at 1 1/2 to 2 hour workshops, often during working hrs.

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


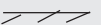
A collaborative effort brought to you by:

Riv. County MH Dept. — NAMI, Western Riverside County —

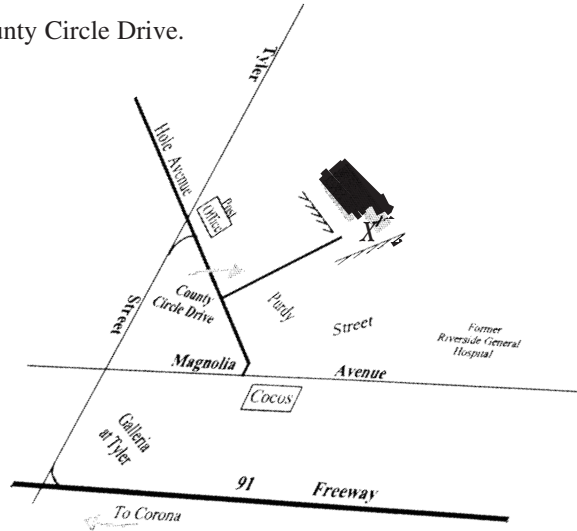
Jefferson Transitional Programs



MDDA of Riverside
Map Legend

-  = Meeting Location
-  = Parking

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



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 first, 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.


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.