



The Thermometer Times

Published by The Depression and Bipolar Support Alliance of Riverside, California

VOL. 20 NO. 4 *Out of darkness . . . April, 2008*

Dates to Remember

CARE & SHARE GROUPS

Clients and their guests are invited to come and participate.

Professional care providers very welcome.
Riverside County Mental Health Administration Building
(see page 13 for address & map)

Saturday 10:00 am - 12 noon
April 1, 5, 12, 19 & 26

TO FIND US ONLINE

Web Site: [DBSA.Riverside:](http://DBSA.Riverside.org)

<http://californiadbsa.org/dbsariv.html>

E-mail: [DBSA.Riverside:](mailto:DBSA.Riverside@dbsaofriv1@aol.com)

[dbsaofriv1@aol.com.](mailto:dbsaofriv1@aol.com)

[DBSA.California:](mailto:DBSA.California@dbsaofca1@aol.com) dbsaofca1@aol.com



Meetings start promptly at 10 am. Do yourself a good turn: Be on time to visit with friends before the meeting starts. If you come late,

please enter quietly. Announcements will be made at the close of the meeting.

Directions to

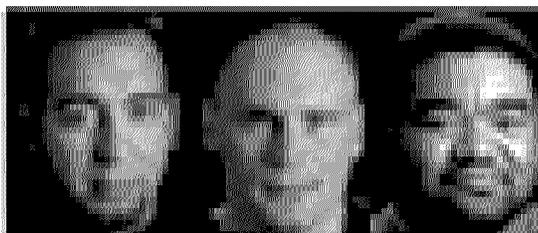
Jo Ann Martin's Home

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

2nd driveway on the right



16280 Whispering Spur
Riverside, CA 92504
951 / 780-3366



Men with Depression

Depression is an illness that affects both men and women. But people working in mental health services see far fewer men with depression than women with depression. It seems likely that men suffer from depression just as often as women, but that they are less likely to ask for help. Depression is most often easily treatable and best treated as early as possible. Men need to know what it is and how to get effective help.

It's Different for Men

The way that men think about themselves can be quite unhelpful. Compared with women, they tend to be far more concerned with being competitive, powerful and successful. Most men don't like to admit that they feel fragile or vulnerable, and so are less likely to talk about their feelings with their friends, loved ones or their doctors. This may be the reason that they often don't ask for help when they become depressed. Men tend to feel that they should rely only on themselves and that it is somehow weak to have to depend on someone else, even for a short time.

This traditional view of how men should be — always tough and self-reliant is also held by some women. Some men find that owning up to their depression actually results in their partner rejecting them because of this. Even professionals sometimes share this view, and may not diagnose depression in men when they should.

How Do Men Cope

Instead of talking about how they feel, men may try to make themselves feel better by using alcohol or drugs. This will usually make things worse in the long run. Their work will suffer and substance use often leads to irresponsible, unpleasant or dangerous behavior. Men also tend to give their work a higher priority than their home life, which produces conflicts with their wives or partners. All of these things have been shown to make depression more likely.

Relationships

For married men, research has shown that trouble in a marriage is the most common single problem connected with depression. Men can't cope with disagreements as well as women. Arguments actually make men feel very physically

Continued on page 3 (Men with Depression)

a note from the Editor

We invite you to submit material for review and possible publication in the newsletter. Your articles allow us to get to know one another in greater depth and to learn of the many talents, interests and assets of our members.

Articles, poetry and/or drawings can be on anything pertaining to experiences you have to share regarding depression and/or Bipolar Disorder; what it is to live and cope with the disorder; how you learned of it, what helps, what doesn't. You may write on any other mental health issue or problem that you are passionate about. You can tell us about yourself and how you spend your time and what's important to you. You may want to write a report on a mental health event you attended or a mental health book you have read. We would appreciate that, too.

Drawings should be black and white, line or half-tone.

Your work may be submitted to JoAnn, Leroy or Lynne at DBSA Riverside meetings.

It may be mailed to: *The Thermometer Times*
% Jo Ann Martin
16280 Whispering Spur
Riverside, CA 92504

E-mail it to: JoAnnMartin1@aol.com

FAX to: 951/780-5758

Materials submitted may or may not be published, at the discretion of the editors, and may be edited for length.

Get your creative juices flowing and share your knowledge and experience with your DBSA friends through *The Thermometer Times*.

Thank you. Lynne Stewart

MOVIE NIGHT AT JO ANNS*

2nd and 4th Tuesday of April
6:30 PM

Tuesday, April 8
The Bridge

An honest film about suicide

Tuesday, April 22

The Depression Advantage

Tom Wootton's dynamic speech at NAMI,
Sacramento

Enjoy pizza and an additional movie of your choice!

*Directions to Jo Ann's home on page 1, bottom of column 1 of this Newsletter.

The Thermometer Times 16280 Whispering Spur Riverside, CA 92504 (951) 780-3366

Publisher & Editor in Chief

Jo Ann Martin

Senior Editor
Lynne Stewart

Proof Reading
Leroy Merrill
Karen Cameron

Associate Editors
Nelma Fennimore
Karen Cameron

Staff Writer
Judy Kaplan

Medical Advisor
Andrew J. Rooks, M.D.
Child, Adolescent & Adult Psychiatry
American Board of Psychiatry
and Neurology

Please feel free to reprint any of our articles. However, please acknowledge our publication, date, and author or source. It will please the authors and recognize their efforts.

Riverside Suicide Crisis Help Line

Call (951) 686-HELP [686-4357] if you need to talk to someone. It is available 24 hours - 7 days a week.

National Suicide Prevention Hotline

Call 1-800-273-TALK (8255) if you need to talk to someone in any of 109 crisis centers in 42 states. The National Suicide Prevention Lifeline has just been launched by SAMHSA (Substance Abuse and Mental Health Services Administration) as part of the National Suicide Prevention Initiative (NSPI). In addition, a new Web-site has been established at

www.suicidepreventionlifeline.org

MEN WITH DEPRESSION (*Continued from Page 1*)

uncomfortable, so they try to avoid arguments or difficult discussions. This often leads to the situation where a man's partner will want to talk about a problem, but he will not and will do his best to avoid talking about it. The partner feels that they are being ignored and tries to talk about it more, which makes his partner feel even more that they are being ignored.. and so on. This vicious circle can quite easily destroy a relationship.

Separation and Divorce

Men have traditionally seen themselves as being the leaders in their family lives. However, the process of separation and divorce is most often started by women. Of all men, those who are divorced are most likely to kill themselves, probably because depression is more common and more severe in this group. This may be because, as well as losing their main relationship, they often lose touch with their children and/or pets, may have to move to live in a different place, and often find themselves hard-up for money. These are stressful events in themselves, quite apart from the stress of the break-up, and are likely to bring on depression.

Unemployment and Retirement

Leaving work, for any reason, can be stressful. Recent studies have shown that up to 1 in 7 men who become unemployed will develop a depressive illness within the next 6 months. This is much more than would be expected in employed men. In fact, after relationship difficulties, unemployment is the most likely thing to push a man into a bad depression. This isn't surprising, as work is often the main thing that gives a man his sense of worth and self-esteem. He may lose symbols of his success, such as the company car, a computer or cell phone.

He may have to adjust to looking after the home and children, while his wife or partner becomes the breadwinner. From a position of being in control, he may face a future over which he has little control, especially if it takes a long time to find another job. It is more likely to happen if he is shy, if he doesn't have a close relationship or if he doesn't manage to find another job soon. Of course, if he gets depressed, he may find it harder to get another job, which may make the depression worse. Retiring from paid employment can be difficult for many men, especially if their partner continues to work. It may take some time to get used to losing the structure of the day and contact with workmates.

Gay Men and Depression

On the whole, gay men do not suffer from depression any more than straight men. However, it seems that gay teenagers and young adults are more likely to become depressed, possibly due to the stresses associated with coming out.

Suicide

Men are around 3 times more likely to kill themselves

than women. Suicide is most common among men who are separated, widowed or divorced, and is more likely if they are a heavy drinker. Over the last few years, men have become more likely to kill themselves, particularly those aged between 16 and 24 years and those between 39 and 54 years. Professionals don't yet know why this should be so, but it is very worrisome.

It is known that 2 out of 3 people who kill themselves have seen their family doctor in the previous 4 weeks and nearly 1 in every 2 will have done so in the week before they kill themselves. Approximately 2 out of 3 people who kill themselves will have talked about it to friends or family beforehand.

Asking if someone is feeling suicidal will not put the idea into his head or make it more likely that he will kill himself. Although some men may not be very good at talking about how they are feeling, it is important to ask if you have any suspicion—and to take such ideas seriously. For a man who feels suicidal, there is nothing more demoralizing than to feel that others do not take him seriously. He will often have taken some time to get up the courage to tell anybody about it. If you do find yourself feeling so bad that you have thought about suicide, it can be a great relief to tell someone.

Violence

Some studies have shown that men who commit violent crimes are more likely to get depressed than men who don't. However, it is not clear whether the depression makes their violence more likely, or if it's just the way they lead their lives.

Helping Men

Many men find it difficult to ask for help when they are depressed --it can feel unmanly and weak. It may be easier for men to ask for help if those who give that help take into account men's special needs. Men who are depressed are more likely to talk about the physical symptoms of their depression rather than the emotional and psychological ones. This may be one reason why doctors sometimes don't diagnose it. If you are feeling wretched, don't hold back — tell your doctor. It can help to be reminded that depression is a result of chemical changes in the brain. It has nothing to do with being weak or unmanly, and it can easily be helped. Antidepressant medications are often an important part of getting better — and it's important to remember that these medications are not addictive. If a depressed man is married, or in a steady relationship, his partner should be involved so they can understand what is happening. This will make it less likely for the depression to cause permanent problems in their relationship. Some men don't feel comfortable talking about themselves and may be reluctant to consider psychotherapy. However, it is a very powerful way of relieving depression and works well for many men. One of the best places to start is your general practitioner/family doctor. He or she will be able to evaluate you and to discuss the options for treatment

Continued on page 4 (Men with Depression)

MEN WITH DEPRESSION *(Continued from Page 3)*

with you. It is true that many men are concerned that the information held by their family doctors may need to be written in medical reports, and so may damage their chances in work. In spite of this, your doctor is the best person to start with. All medical information is confidential and protected by privacy laws. Depression may be due to a physical illness, so it is important that you have a proper physical check-up. Men may feel that they can't talk about their feelings with anyone they know. They can be directed to the phone book for a 24 hour crisis line (also listed on page 2 of this newsletter) which can give them the opportunity to discuss things anonymously. Depression can be as much of an illness as pneumonia or breaking your leg. No one should feel embarrassed or ashamed about it. The most important thing to remember is to ask for the help you need, when you need it.

*Source: Life in Balance
February 2008
Edited from HealthyPlace.com
Depression Community*

Relaxation Techniques: Suggestions to help you take it easy

Relaxation techniques are a great way to help you beat **stress** and sustain good health.

Try these suggestions to help you unwind, courtesy of AARP:

- Invigorate muscles with a visit to a massage therapist
- Meditate. Sit quietly or listen to soft music.
- Practice deep breathing.
- Imagine yourself in a relaxing place, such as the mountains or the beach.
- Stop stressful thoughts before they spin out of control.
- When you feel stress, your muscles tense up. Learn to relax your muscles to release stress.
- Practice yoga or tai chi.

*Source: THE ROLLERCOASTER TIMES
Spring 2008
Health Day News (www.healthday.com),
Diane Kohnle. November 19, 2007*

Mental Health Linked to Life Span

BY CAROLYN SUSMAN

COX NEWS SERVICE

Anyone concerned about the state of the nation's severely mentally ill will be alarmed at the findings of a paper co-authored by Dr. Charles Hennekens and Dr. John W. Newcomer.

They have put together in writing what separate studies have shown: That patients with severe mental illnesses such as schizophrenia, bipolar disorder and depression lose an average of 25 years or more of life expectancy -- not to suicide -- but to cardiovascular disease (heart attack) that isn't diagnosed or treated or even given the degree of preventive care that the average patient receives.

This isn't a question of prejudicial treatment, Hennekens says, but of doctors who are missing signs of disease, patients who are noncompliant when placed on medications, poor access to medical care for these patients, and even the antipsychotic drugs used to treat their illnesses.

"I don't think it's fair to blame it on drugs, doctors, or patients," says Hennekens, a professor at Florida Atlantic University.

"It has to be a shared responsibility. It's a big mistake to place blame. This is a multifaceted problem"

Among the findings published:

Patients with severe mental illness have almost twice the incidence of diabetes, high cholesterol, high blood pressure and obesity as the general population.

Patients with diabetes and severe mental illness are less likely than patients with diabetes and no mental illness to receive the acceptable standard of care.

There is a crucial need for new approaches for prevention and treatment of cardiovascular disease in patients with severe mental illnesses.

Research should be directed at finding antipsychotic medications with less adverse cardiovascular impact.

If nothing changes, "avoidable premature mortality" from heart disease among the severely mentally ill "is likely to continue and increase in severity."

*Source: The Press-Enterprise
November 6, 2007*



Poet's Page

Birthday Party at Agnew State

by Steve Bell

he was now an old man
of seven years
clutching a stuffed possum, clumsily exiting
the station wagon toward the benches, under the trees
in front of the hospital where the mad,
the crazy ones
are supposed to get
help.

This was his birthday and he would celebrate it with
father, sister, younger brother, and that special guest,
his mother
a woman locked away of her own choosing
to escape the voices,
the never ending vomiting
of an upset psyche
and the spiders that were always
crawling along
the grimy painted walls inside
her duplex
of a skull.

She was pale, thin and nervous. Happy to see her babies,
smiling at them through puff of cigarette smoke
she is the mother of all psychosomatics
and schizophrenics
but to the skinny child she was
oh so pretty.
On this day she was
his center of sanity.

He knew nothing of electro.shock or Thorazine
in front of him was cake and ice cream.
he knew nothing of padded coils or nonstop screams or sobs
this was his party in the park and he was giggling out loud
he knew nothing of the hospital and doctor bills that would
bankrupt them all
for in his small hands he held a card
with birthday wishes and ten shiny dimes
enough money to put this moment in a straight-jacket
and keep it buckled, laced-up, strapped tight.



Poem

By Susie Phillips

My heart sings and sighs and cries
With the beauty all around me...
The glowing golds,
The deep reds,
Lush greens,
Soft (always most gorgeous) powder blue sky,
The deep black of the night,
The deep greens and blues of the seas and lakes...
Its fresh spray,
The dark scent of the forest,
Shimmering and brilliant sunstruck flowers in the meadow,
The rugged awesome mountain peaks...
I get so filled with the earth's beauty,
That again I say
That my heart sings, and sighs, and cries with its wonder.



Martha Decker 1996

What are the Causes of Clinical Depression?

Many things can contribute to clinical depression. For some people, a number of factors seem to be involved, while for others a single factor can cause the illness. Often times people become depressed for no apparent reason.

- **Situational** — Difficult life events, including divorce, financial problems, moving to a new place, the death of a loved one, or any significant loss can contribute to depression.
- **Biological** — People with depression typically have too little or too much of certain brain chemicals, called “neurotransmitters.” Changes in these brain chemicals may cause, or contribute to clinical depression.
- **Genetic**—A family history of clinical depression increases the risk for developing the illness. However, depression can occur in people who have had no family history of the illness.
- **Cognitive** — People with negative thinking patterns — those who are pessimistic, have low self-esteem, who worry too much, or feel they have little control over life events — are more likely to develop clinical depression.
- **Co-Occurrence**—(1) Depression may occur with certain illnesses such as cancer, heart disease, diabetes, or stroke. The depression must be treated in addition to the physical illness; (2) Depression may “co-occur” in people who suffer other mental illnesses such as eating disorders or anxiety disorders, including panic disorder, obsessive-compulsive disorder and post-traumatic stress disorder; (3) Some people try to “self-medicate” their emotional pain through the abuse of alcohol or drugs. Therefore, depression can “co-occur” with alcohol and substance abuse.
- **Gender**—Women are twice as likely as men to experience depression. Reasons for this are thought to include hormonal changes, care-giver stress, multiple roles, poverty, low self-esteem, and, in some cases, being a victim of abuse.
- **Medications** — Some over-the-counter drugs and other medications can have depression as a side effect. A doctor should be consulted before trying any new medication.

Source: DBSA Greater Houston
MoodPoints
Fall, 2007

Adapted from:
National Mental Health Association.
(March, 2000).
Overcoming Depression in Later Life.

WAKING TO THE LIGHT

Noted French psychiatrist David Servan-Schreiber, author of *The Instinct to Heal*, says that waking to natural morning light is a healthy habit naturally designed to help alleviate stress, anxiety and depression. In other words, it’s good to leave the curtains open. Light is an important component of what this doctor terms “emotional medicine,” which he likes to prescribe. “The rise of dawn is the natural wakeup signal with which the brain has been programmed to transition from sleep to arousal over millions of years,” explains Servan-Schreiber. “It turns out to be a remarkably effective treatment for seasonal depression and for the energy loss that many experience between the months of October and March in the northern hemisphere.”

Source: *Life in Balance*
January, 2008

-Edited from natural awakenings

® HEALTHY LIVING,

October 2007 issue

for Ann Arbor & Surrounding Communities

GET A GRIP ON STRESS RELIEF

Dealing with the constant irritations life
throws at you can wear you out.

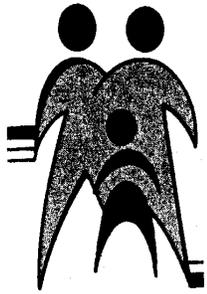
Among the tactics recommended by experts:

- Take the three-breaths intervention. Stop what you’re doing and take three full breaths in a row. Even better, take 10 minutes to sit quietly or lie down, keeping your mind blank and breathing slowly and deeply.
- Focus on your body and see where you’re holding stress, then do a conscious tension release. Unclench your jaw or your fists. Don’t hunch over. Relax your muscles.
- Sit down and list everything in your life, that causes even a little stress. Once you list them, you can identify what’s most stressful and think about ways to change them.
- Take a time out from technology. Walk outside away from all information sources and give yourself a respite from your e .
- Get the giggles. It’s a cliché for a reason: Laughter really is the best medicine. Finding humor in a situation is the quickest way to feel better.

Source: *Life in Balance*, November 2007
as seen in *Detroit Free Press*, May 8, 2007

2-1-1

Need help? Don't know who to call?
Get answers. Always toll-free.



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
951 / 358-4987 or 800 / 330-4522

Join friends of DBSA-Riverside

*At Jo Ann Martin's**

for the

Holidays

Picnics or dinners
at noon

~
Swimming, badminton, spa, food and more...
during summer months.

Friendly sharing during the winter.

~
Bring a salad, main dish,
or dessert.

If you can't bring a dish, come anyway.

Meat & beverage will be furnished.

~
Holidays include: Memorial Day,
4th of July, Labor Day,
Thanksgiving, and Christmas.

*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 the right

16280 Whispering Spur
Riverside, CA 92504

951 / 780-3366



The Starting Point SUPPORT GROUP FOR DEPRESSIVES AND BIPOLARS

Mesa Clinic, 850 Foothill Blvd., Rialto

Mondays from 10:30 to 12:10

For more info: *82 (909) 864-4404

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

DBSA P.O. Box 51597 Riverside, CA 92517-2597

FAX 951/780-5758

Do you have a Medic Alert Bracelet?

Do you wear it? All the time?

In an emergency, would others know what medication you are taking and why?

Always wear your
Medic Alert bracelet.

It could save your life.

If you don't have one,

ORDER ONE TODAY!

(Available through most pharmacies)



**Are you interested in
art or writing sessions?**

**Rhue Pritchard
held our first session.**

**We made Collages. It was great fun
and a good number of people showed
up.**

**We plan to hold two sessions at
Jo Ann's after lunch on the 2nd and 4th
Saturdays of each month.**

**The next one will be a poetry session. For
more details or to let us know of your interest,
call us at: 951 / 780 - 3366**