



# The Thermometer Times

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

VOL. 26 NO. 6 Out of Darkness . . . June 2013

## Dates to Remember

\*\*\*\*\*  
Weekly Support Group Meetings  
No Cost

**Saturday 10:00 am - 12 noon**  
**June 1, 8, 15, 22, and 29**

Meetings start promptly at 10 am.  
Do yourself a good turn:  
Come EARLY. Snack and visit with  
friends BEFORE ten a.m.  
If you come late, please enter quietly.  
See Page 9 for location & map

### Guest Speaker

**Saturday, June 29th, 10 AM**

**Paul Velen**

**Topic: EMDR**



Eye Movement Desensitization Reprocessing  
**Scientific demonstration on changing  
our perception.**

**Web Site for DBSA, Riverside:**  
<http://DBSAtoday.com>

**E-mail for DBSA, Riverside:**  
[DBSAtoday@yahoo.com](mailto:DBSAtoday@yahoo.com)

**E-mail for DBSA, California:**  
[DBSAtoday@yahoo.com](mailto:DBSAtoday@yahoo.com)  
Please include your phone #

### Directions to

#### Jo Ann Martin's Home

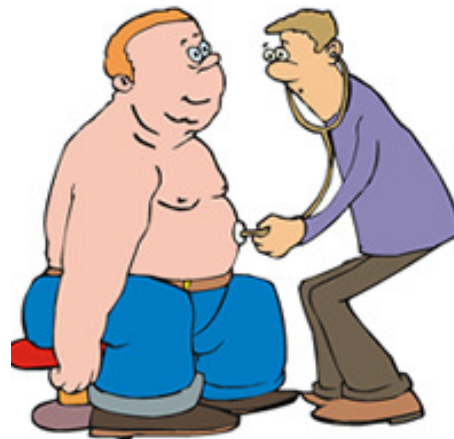
Exit 91 Frwy at Van Buren. Go south  
4.2 miles on Van Buren to  
Whispering Spur. Turn left.

2nd  
driveway  
on the right



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

## Bipolar and Obesity



Many patients present with both bipolar and obesity. When obesity occurs together with bipolar it can complicate the assessment and management of bipolar disorder. Bipolar is a disorder of behavioral extremes and during manic episodes excesses in many areas including calorie intake is not uncommon.

Medication involved in the long term management of the disorder can also be a significant contributory factor to the weight gain experienced by some. This undesirable

side effect may well self perpetuate the problem. The patient is less inclined to take the medication required to stabilize the mood swings and curb the compulsion to eat more than necessary.

It is natural for anyone to turn to food when under stress and since bipolar and stress do not mix well the potential to turn to food for comfort is more probable. A diagnosis of bipolar disorder generally occurs many years after the onset of the symptoms. Many in need of diagnosis do not realize or will not accept that their behavior is unusual so will not seek help. Of those who do seek help some initially will be misdiagnosed. There will always be a number of individuals in the pipeline whose destructive eating habits are developing with time. Therefore they are already well on the way to obesity before the diagnosis occurs.

With obesity comes the increased risk of type II diabetes which is also one of the more common general medical conditions that accompany excess weight with Bipolar disorder. Not surprisingly the food consumed is usually of the feel good variety. Such foods are generally laden with the carbohydrates causing overloading of the insulin production process leading to insulin resistance or type II diabetes. The good news is that this form of diabetes is a result of diet and corrected by diet changes.

Both bipolar and obesity can be medically controlled and with help available there is no reason not to seek all the help you can get.

*Continued on page 2 (Obese)*

## A Note From the Editor

As always I invite you to submit your stories, poetry and/or drawings for review and possible publication in the newsletter. Your articles allow us to get to know you in greater depth and to learn of your accomplishments and your many talents, interests and assets. They also contribute to our readers' well being and recovery.

Your work may be submitted to Jo Ann, 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

I look forward to your contribution. Share your wisdom and experience with your DBSA friends through *The Thermometer Times*.

Thank you.

Lynne Stewart, Sr. Ed.

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

## *The Thermometer Times* 16280 Whispering Spur Riverside, CA 92504

**(951) 780-3366**

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**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.**

### **Obese continued from page 1**

## **When are you considered obese?**

Obesity today is classified as a BMI of 30 kg/m<sup>2</sup> or greater. What's that in plain English? Well if you take your weight in kg and divide it by your height in meters squared and get an answer of 30 or more you are obese.

eg height 1.65m weight 100kg

BMI = 100 / (1.65\*1.65) = 100 / 2.72 = 36.76 = Obese.  
or height 52 43 (643) weight 120 pounds

BMI = [120/(64\*64)]\*703 = 20.59 = Healthy.

For adults a BMI between 18 and 25 is in the healthy range, 25 to 30 is the overweight range and 30 plus indicates obesity.

Source: <http://lifeloveandbipolar.com/bipolar-and-obesity>

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**Everyone and everything around you is your teacher.**

**Ken Keyes**

## **Awareness of feeling lonely due to depression is the first step.**



I have a best friend who also experiences depression. She always reaches out to me because she knows what depression is like and knows that a sometimes isolation isn't the best for me. But she also knows, from experience, that when I want to be alone, that's OK. Try to find someone who has walked in your shoes. They will listen, talk, and even push you when needed because they have been there!

W.P.H.

Source: *Esperanza Spring 2013 p23*

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# Does Exercise Really Make a Difference?

Written by Julie Fast

*For people with bipolar disorder and depression, exercise can help manage moods, possibly reduce the amount of medications you need and end social isolation.*



The most important fact to know about exercise and bipolar disorder is that regular exercise can change brain chemicals. This means that there is a direct correlation between how much exercise you get and how many mood swings you have.

Technically, even something as easy and inexpensive as walking can increase serotonin, the neurotransmitter that affects moods, release endorphins and improve your physical health so that your body is better able to deal with medications side-effects. For some people, regular exercise can significantly change the amount of medications needed to manage the illness by either reducing doses or eliminating the need for medications such as anti-anxiety medications. Because of all of this, it's important not to take exercise lightly. For example, you may think that walking twenty minutes a day could not possibly help with severe depression, but well-documented research shows that it can.

## What if I Feel Too Sick to Exercise?

As anyone with bipolar disorder knows, the illness can feel so debilitating that any extra effort feels impossible. The important thing to realize is that feeling that something is impossible is not the same thing as something being truly impossible. Just as mania makes you feel you can do anything (and that you may even hurt yourself trying), depression makes you feel you can't do anything. You will have to override these feelings to get started in order to reap the benefits of exercise. The first step is deciding you want to get better, even when depression is telling you that you can't.

## Exercise Can End Social Isolation

Many people with depression tend to isolate themselves from the world. This is a problem as isolation can dramatically increase depression symptoms. Exercising with a partner or group can positively impact your depression by getting you out in public where there is light, fresh air and positive com-

pany. It helps if you create a particular time to either walk with someone or attend a class. When someone else is depending on you to meet them, this increases your chances of making the appointment.

As with anything you do when you're depressed, it's important to remember that you probably may not want to see people when you're sick. If you wanted to get out and be with people and have fun, you wouldn't be depressed! The fact is that when isolation is caused by depression, it's up to you to break the cycle and force yourself to take action no matter how you feel. The only way to get better is to work at it and exercising with a partner or group is an excellent way to start. Remember, you don't have to want to do it. You just have to do it. You can then praise yourself and focus on the rewards the next time you have to go out.

*Source: <http://www.healthyplace.com/bipolar-disorder/bipolar-treatment/benefits-of-exercise-when-you-have-bipolar-disorder-gsd/>*

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## 10 Tips for Dealing with Depression Naturally:

### 10 Tips for Dealing with Depression Naturally:

Instead of pharmaceutical drug therapy, perhaps it would be beneficial to begin looking toward natural remedies for depression.

**Prevention is key.** If you know your depressive triggers, do all that you can to avoid them. Reduce anxiety, maintain a healthy diet, and participate in an exercise program, all easier said than done I know, yet they are the most effective preventative measures.

**Exercise.** If you aren't exercising on a regular basis I highly recommend it. There are so many different forms of exercise (i.e. yoga, aerobics, weight lifting, running, etc.) Begin slowly building up to at least ½ hour a day – it can be even more beneficial for treating/preventing depression if you can do it outside — this alone will help the blood start flowing to all parts of your body and you'll begin to feel better almost instantly. The most important element to any exercise program is to find one that is the most suitable for you.

**Diet.** Your diet should be high in calcium and B vitamins, cut out the refined carbs, and avoid sugar like the plague. Coincidence that the rate of refined carbohydrates and sugar in our American diet is increasing at an alarming rate and so is the rate of depression? I don't think so. Eat local, fresh, and sustainable, and use supplements when necessary.

**Herbal supplements.** Herbs contain many medicinal powers and can heal a variety of ailments. St. John's

*continued on page 4 (Ten Tips)*

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## Ten Tips Continued from page 3

wort is one of the most promising herbs for the treatment of depression. It has been used for centuries by people and cultures all over the world. A few of the other beneficial herbs include passion-flower, lavender, lemon balm, Valerian, oat leafy tops, and nettles. Begin researching the benefits of herbs on depression and anxiety while you seek out the council of a certified herbalist, naturopath, or other holistic health care practitioner.

**Get enough sleep.** Once in a depressed state, one of two things can happen...you sleep too much or you can't sleep at all. An excellent way to ward off sleep irregularities is to create a bedtime routine and stick to it every single day. Take a soothing bath (using Epsom salts), drink an herbal tea to help naturally induce restful sleep, reduce stimulants...do whatever works into your lifestyle, but guard your sleep!

**Pay nature a visit.** Prioritize your time in nature by spending at least 30 minutes a day outdoors. It is essential for us to connect with nature, especially during times of depression. Chop wood, mess around in the garden, walk the dog, take a hike, ride a bike, go canoeing, go skiing...whatever you choose to do, do it outside for at least ½ hour — longer if you can. The exposure to sunlight alone can do wonders.

**Use your hands to create something.** Revive your God-given gifts — 'cause we all got 'em — and use them to make something beautiful. I have discovered that the times in which I've been the most depressed I have not listened to a longing deep inside of myself...you know, the one that calls me to do something outside of myself. Whether it be making your home, cooking meals for your family, working on your car, learning to crochet, baking, writing, taking pictures, painting pictures...stop resisting, follow your heart, and do what you love.

**Do something for someone else.** When depressed, our thoughts tend to turn inward. We often begin re-living our hurts and sometimes helping other people who are hurting, helps us. It's therapeutic to be able to find meaning in doing good.

**Talk it out intellectually.** Depression is not the cause of hopelessness and extreme sadness — it is a symptom. If there is a specific problem you are having that is causing these feelings...hit it head on. Research solutions, meet with a therapist or counselor, set goals, and come up with a plan. Do not allow your problems to go unanswered. Hope can be found in moving, step by step toward addressing our issues.

**Call a friend.** It could be that we are afraid of becoming a burden to those that love us, but we must remember we are relational beings — specially designed to

live in community with others. Resist the temptation to isolate yourself and call a friend!

I hope that a few of these tips will help you just as they have helped me. Depression is not something to be ashamed over. No one's life is made of roses! Depression is a problem like any other — it's not a character flaw or moral deficiency — and there are natural methods that can help. In the end, you must take the time to get to know yourself and discover what works best for you. Unfortunately, there aren't any quick and easy fixes...but there is hope!

Source: <http://frugallysustainable.com/2012/02/10-tips-for-dealing-with-depression-naturally/>

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## Can a junk food diet increase your risk of depression?



With Mayo Clinic nutritionist

**Katherine Zeratsky, R.D., L.D.**

### Katherine Zeratsky, R.D., L.D.

Depression and diet may be related. Some preliminary research suggests that having a poor diet can make you more vulnerable to depression. Researchers in Britain looked at depression and diet in more than 3,000 middle-aged office workers over the course of five years. They found that people who ate a junk food diet — one that was high in processed meat, chocolates, sweet desserts, fried food, refined cereals and high-fat dairy products — were more likely to report symptoms of depression.

**The good news** is that the people who ate a diet rich in fruits, vegetables and fish were less likely to report being depressed. These results are in line with other research findings that healthy diets help protect against disease. For example, studies suggest that people who follow the Mediterranean diet — which emphasizes fruits, vegetables and fish, and limits meat and dairy products — have lower rates of Parkinson's and Alzheimer's diseases.

More research is needed on the connection between depression and diet. In the meantime, you might want to eat your veggies and cut back on the junk food.

Source: <http://www.mayoclinic.com/health/depression-and-diet/AN02057>

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# New drug for bipolar disorder may offer fewer side effects

**A drug for bipolar disorder that works like lithium, the most common and effective treatment for the condition, but without lithium's toxicity and problem side-effects has been identified by Oxford University researchers in a study in mice.**



**People with bipolar disorder can experience periods of depression and mania lasting for several weeks or longer.**

A drug that mimics the effect of lithium but without its side-effects would be a great improvement for patients, and has long been sought after.

While the study has been conducted in mice, the newly identified drug is an existing compound called ebselen. It is known to be safe in humans and so its use for bipolar disorder can begin to be tested in clinical trials straight away.

'Lithium has been used for over 60 years and remains the most effective treatment for bipolar disorder, but suffers from toxicity and has many side effects,' says co-principal investigator Dr. Grant Churchill of the Department of Pharmacology at Oxford University. 'In mice, ebselen works like lithium. Most importantly, ebselen is an experimental drug that has been tested in people for other conditions, and does not have problematic side effects like lithium does.'

He adds: 'We urgently need to test if ebselen works like lithium in people.'

The researchers report their findings in the journal *Nature Communications*. The work was funded by the UK Biotech-

nology and Biological Sciences Research Council.

Bipolar disorder is relatively common and can occur at any age. It is estimated to affect around one person in 100.

People with bipolar disorder can experience moods that swing from one extreme to another, having periods of depression and mania lasting for several weeks or longer. These phases of feeling high and low are often so extreme that they interfere with everyday life.

60 years after its discovery, lithium remains the most effective long-term therapy for bipolar disorder – it is a mood stabilizer that has been shown to protect against both depression and mania, and reduce the risk of suicide. But it is toxic at only twice the right dose and it has unpleasant side-effects, such as weight gain and thirst, and long-term use can lead to kidney damage.

A drug that worked like lithium without the toxicity or side-effects would be a great improvement for patients, but efforts so far to develop such a drug have proved unsuccessful.

A lithium mimic would also lessen the burden on healthcare systems. Lithium's toxicity means that getting the dose right is important, and several visits to the clinic may be required to get this right when the drug is initially prescribed.

Regular check-ups are required to monitor the treatment. The side-effects also mean many people stop taking the drug and can see a return of the episodes of mania and depression.

The Oxford researchers used a library of existing drugs that are considered safe but don't currently have a proven use. The US National Institutes of Health Clinical Collection includes compounds that may have been originally developed for various different diseases or conditions. These compounds have been tested in clinical trials, so their safety in humans is known.

They screened this library for any drugs that blocked an enzyme that is a prominent candidate for how lithium works in stabilizing mood in bipolar disorder. In this way, they identified ebselen as a possible lithium mimic.

Ebselen is an antioxidant originally developed up to phase III clinical trials by a Japanese drug company for use in the treatment of stroke, but which never reached market and is now out of patent.

The researchers showed that ebselen has the same or similar action as lithium in the brains of mice, blocking the same enzyme.

They have also shown ebselen has the same effects as lithium in mouse models of bipolar disorder, dampening down this

*continued on page 6 (Side Effects)*

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## Side Effects (Continued from page 5)

behavior in the same way.

The researchers say the next step is to test whether ebiselen has the same effects as lithium in people through appropriate clinical trials.

They are beginning a small study in healthy volunteers to look for effects on brain function. If that shows that ebiselen continues to have similar effects to lithium in humans, the plan would be to move to a small phase II trial in people with bipolar disorder.

Should these prove successful, ebiselen will be one of only a few examples of 'drug repurposing', where new uses are found for drug compounds originally developed for another condition but that may have failed for one reason or another.

Rather than these fully-developed compounds remaining unused on the shelf of a pharmaceutical company or academic laboratory, there have been recent moves to make such drug compounds more available for study by others to see if they might find other uses. So far, there have been only a few successes, but this work might add another.

'This is one of the first handful of examples of drug repurposing, where a new use has been found for an existing drug,' says the other lead author, Dr Sridhar Vasudevan of the Department of Pharmacology at Oxford University.

The Oxford researchers have obtained a patent for the use of ebiselen in bipolar disorder through Isis Innovation, the technology transfer company of Oxford University.

University of Oxford

Source: [http://www.ox.ac.uk/media/news\\_stories](http://www.ox.ac.uk/media/news_stories)

/2013/130108.html

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# Risk of Adult Obesity Increased By Maltreatment In Childhood

Children who have suffered maltreatment are 36% more likely to be obese in adulthood compared to non-maltreated children, according to a new study by King's College London. The authors estimate that the prevention or effective treatment of 7 cases of child maltreatment could avoid 1 case of adult obesity.

The findings come from the combined analysis of data from 190,285 individuals from 41 studies worldwide, published this week in *Molecular Psychiatry*.

Severe childhood maltreatment (physical, sexual or emotional abuse or neglect) affects approximately 1 in 5 children (under 18) in the UK. In addition to the long-term mental health consequences of maltreatment, there is increasing evidence that child maltreatment may affect physical health.

Dr. Andrea Danese, child and adolescent psychiatrist from King's College London's Institute of Psychiatry and lead author of the study says: "We found that being maltreated as a child significantly increased the risk of obesity in adult life. Prevention of child maltreatment remains paramount and our findings highlight the serious long-term health effects of these experiences."

Although experimental studies in animal models have previously suggested that early life stress is associated with an increased risk of obesity, evidence from population studies has been inconsistent. This new study comprehensively assessed the evidence from all existing population studies to explore the potential sources of inconsistency.

In their meta-analysis, the authors were able to rule out specific factors which might explain the link - they found that childhood maltreatment was associated with adult obesity independently of the measures or definitions used for maltreatment or obesity, childhood or adult socio-economic status, current smoking, alcohol intake, or physical activity. Additionally, childhood maltreatment was not linked to obesity in children and adolescents, making it unlikely that the link was explained by reverse causality (i.e. children are maltreated because they were obese).

However, the analysis showed that when current depression was taken into account, the link between childhood maltreatment and adult obesity was no longer significant, suggesting that depression might help explain why some maltreated individuals become obese.

Previous studies offer possible biological explanations for this link. Maltreated individuals may eat more because of the effects of early life stress on areas of the developing brain linked to inhibition of feeding, or on hormones regulating appetite. Alternatively, maltreated individuals may burn fewer calories because of the effects of early life stress on the immune system leading to fatigue and reduced activity. The authors add that these hypotheses will need to be directly tested in future studies.

Dr. Danese adds: "If the association is causal as suggested by animal studies, childhood maltreatment could be seen as a potentially modifiable risk factor for obesity - a health concern affecting one third of the population and often resistant to interventions.

He concludes: "Additional research is needed to clarify if and how the effects of child maltreatment on obesity could be alleviated through interventions after maltreatment has occurred. Our next step will be to explore the mechanisms behind this link."

Source: APA King's College London.  
(2013, May 23). "Risk Of Adult Obesity Increased  
By Maltreatment In Childhood." *Medical News Today*.

Retrieved from  
<http://www.medicalnewstoday.com/releases/260839.php>.

# Independence Day

**Come Join Your Friends**

At Jo Ann Martin's  
**Franklin Park**

Thursday,

# July 4th

**Tour the grounds!**



**Picnic at 12:00 Noon**

Bring a salad, main dish or dessert, if you can't bring a dish, come anyway.



**Make it a family day!**

**JULY 4th**

**Fun!**

Swimming, badminton, spa, food and more...

**\* Directions**

Jo Ann Martin's home

Exit 91 Freeway at Van Buren  
Go south 4.2 miles on Van Buren to  
Whispering Spur. Turn left  
2<sup>nd</sup> Driveway on the right

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

**Enjoy a day on the lawn**

**Or take a swim in the pool!**



**Have a hotdog or burger while hanging out with friends**

**See You There!**



## 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  
951 358-4987/1-800-330-4522

## Phone Phriends

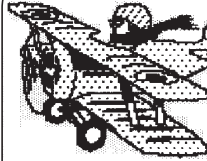
If you need someone to talk with:

### Leroy

951 / 686-5047  
6 a.m. to 9 p.m.

### Ms. Carly Jenkins

951 / 522 - 3500  
10 am to 8 pm



## ANNOUNCEMENTS

### **DBSA Temecula**

Mike Clark @ 951 / 551-1186

### **DBSA Hemet**

Trinity Lutheran Church  
Mondays, 5 to 7 pm.  
Lyla @ 951 / 658 - 0181

### **Rancho Cucamonga DBSA**

Meets Thursdays  
Contact: Gena Fulmer  
909 / 367 - 8944 OR  
e-mail: genafulmer@yahoo.com

### **DBSA Rialto**

Keith Vaughn  
909 / 820-4944

### **Stigma Reduction and Suicide Prevention**

AdEase/Riv.Cou.Mental Health:  
Julia Sullivan 619 / 243 - 2290  
www.adeaseonline.com

### **DBSA Riverside (Uplifters)**

Grove Community Church  
Mon 7:00 pm. Room B8  
951/571-9090

### **For Family Support People: NAMI**

Riverside County Mental Health Administration Building  
4095 County Circle Dr. (off Hole Ave. near Magnolia)  
7:00 pm, 1st Monday each month  
800 / 330 - 4522 (se habla espanol)  
951/369-2721

## RECOVERY INNOVATIONS

Invites you to

# AFTER WORKS!

**AFTER WORKS** is a FREE art social event that takes place at Art Works Gallery on Fridays from 5-7 PM. The goal of the program is to bring local professionals, artists, peers and families together in a relaxing environment to create and to learn a new arts skill. Past programming included artist and exhibition receptions, poetry readings, as well as workshops such as mixed media collage, zine-making, and drumming. No experience required!

For more information, visit  
[www.jtpfriends.org](http://www.jtpfriends.org) or call Art  
Works at (951) 683-1279.

Art Works Gallery  
3741 Sixth Street  
Riverside, CA 92501





## DBSA - Riverside

### Map Legend

- ★ Meeting Location
- TTTT = Parking

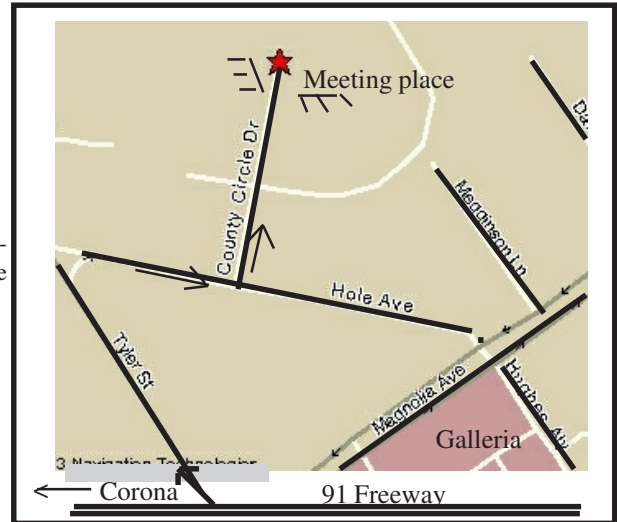
Due to route changes, no RTA regular bus crosses County Circle Drive anymore. However, several routes stop at the Galleria (Tyler Mall), which is only a three-block walk from where we meet. Those routes include Canyon Crest, Corona, Country Village, Hemet, La Sierra, Perris, Norco, and Sun City.\* For meeting-day

route times, please call RTA at 800/266-6883 toll free. If you qualify for Dial-a-Ride, a door-to-door service for the handicapped, info is available at the same phone number. \* as well as other parts of Riverside.


## About DBSA-Riverside

DBSA of Riverside is a support group for people who have depression or bipolar (manic-depressive) disorder and who have sought or are seeking treatment for their illness. DBSA 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 JoAnn Martin on the Saturday afternoon following the last sharing 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 JoAnn or Leroy at 951/780-3366. **Our sharing meetings are held every Saturday of each week 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.** We welcome professional care providers and adult family members and friends.



### MEMBERSHIP INFORMATION

Individual membership for the Depression and Bipolar Support Alliance of Riverside is \$20.00 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 \$10.00 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, please indicate below. 

Mail to DBSA of Riverside, 16280 Whispering Spur, Riverside, CA 92504

DATE \_\_\_\_\_ Please Print  New  Renewal

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

Please check one of the following:

I have:  Bipolar Disorder (Manic-Depression)  Depression

I am a  Family Member  Professional

None of the above

Birth Date (Optional) : Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Enclosed is my payment for DBSA Membership \_\_\_\_\_ \$20.00 (includes newsletter).

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

I would like a subscription to the newsletter only. \_\_\_\_\_ \$10.00 (12 issues per year).

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

DBSA OF RIVERSIDE  
16280 Whispering Spur  
Riverside, CA 92504

HELP US KEEP COSTS DOWN

We're using a computer mailing list

Please help us keep costs down by

making sure your name and address  
are correct. If there is an error or if

you are receiving more than one  
newsletter, please let us know.

Print legibly so that mistakes can be  
avoided.

Your help and patience are greatly  
appreciated.