



# TAMPA BAY DEPRESSIVE AND MANIC DEPRESSIVE ASSOCIATION NEWSLETTER

February-March

Providing Education, Support and Hope

2001

## Challenges for Self-Responsibility

William Bonney, Ph.D. spoke to the Tampa Bay DMDA on October 10, 2000. Dr. Bonney asked: "Who will make things work for you", and "do you know anyone who knows you better than you do?"

Everyone has problems. It is part of the human condition. We can give up and stop trying, or we can stand up with skinned knees and keep going. We can decide to actively approach problems or we can be-

*"Finding help is an active role and an approach toward wellness."*

come passive and "just let things happen," as if we have no control over our lives. There are times when we are not able to be as active as other times. However, Dr. Bonney pointed out, a diagnosis does not mean that a person cannot function.

Each person is ultimately the expert on solving his own problems, achieving the "ability to respond" effectively. Each person draws from his own unique experience. Being answerable for oneself can be hard work and painful and it may seem easier to give responsibility away. "It's the doctor's fault," or "My sister made me do that." However, to optimize our mental

health and to live our lives fully, problem-solving is essential to self-responsibility.

Self-responsibility is self-sustaining. The more we are accountable for ourselves, the greater our sense of self-worth. Making a contribution makes us feel better. Confidence and trust in the world are enhanced. It is not what happens to us, but how we handle and respond to what happens to us, that gives us a sense of self-respect and self-worth. With practice, problem-solving becomes easier and less stressful, inherent in our approach to life.

How do people problem-solve effectively? By creating as many resources as they can in order to become active participants in their self-responsibility. People need to know when to seek help. No one is an island and everyone needs other people to do some things for them. Asking for help

*"You are very powerful in what you do by the things that you think about."*

is not a sign of weakness or a flawed character. It is an acknowledgement that we do not have all the answers. It is okay for a person to say "I don't know how to do this." Finding help is an active role and a step toward wellness. People in the passive lane do not feel good about themselves and are less likely to receive help.

Another important factor in self-responsibility is a positive attitude and a willingness to learn. People can choose to learn from experience, reading, and support groups, to see new possibilities, and even to find humor in their circumstances. Adversity may even be seen as a challenge.

**Challenges** continued on page 3

## Advanced Medical Hypnosis

How can hypnosis reduce stress, manage pain, cause weight loss, improve concentration, lead to confident living, and help people stop smoking? Is it magic? Is it clap-trap?

Dr. John Gullo, Ed.D., P.A., DABP, DFPPA, board Certified/Diplomate Licensed Mental Health/Clinical Psychology, and president of Advanced Medical Hypnosis, explained how hypnosis works and dispelled some mythology.

He emphasized that hypnosis is safe and widely used. It's safe because nobody will accept the hypnotist's suggestions unless the suggestions are acceptable to the client and do not violate the client's values.

When asked how to determine whether a practitioner is effective, he advised the audience to ask the hypnotist for their definition of hypnosis. It should be similar to this: Hypnosis is a state of awareness dominated by the subconscious mind (that part of the thought process that controls all bodily processes).

Dr. Gullo stressed that the subconscious mind dominates in many normal daily situations. For example, it is the subconscious rather than the conscious mind that allows you to drive the car while conducting a conversation and planning your work day or listing items to pick up from the supermarket. The subconscious mind retrieves such information as what you ate for dinner two nights ago. The subconscious mind, more than the conscious mind, propels most behavior. In addition, the subconscious mind takes over in situations of great stress or danger. The subconscious mind can produce healing when it believes so strongly in the doctor that there is a placebo effect, but it can also override the con-

**Hypnosis** continued on page 3

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THIS ISSUE OF THE TAMPA BAY DMDA NEWSLETTER IS PAID FOR BY MEMBERS OF THE TAMPA BAY DEPRESSIVE AND MANIC DEPRESSIVE ASSOCIATION

## From the President's Desk

It's February and love is in the air. The psychiatrists of our Tampa Bay community have demonstrated that by their generous support of our 2001 Professional Membership Fundraiser. Their names are listed on our internet site and will be printed on our 2001 Professional Scroll of Honor in our next newsletter.

Thanks to the inexhaustible efforts of our newsletter editor, Jane Trilling, we can produce this educational resource, issue after issue. Thanks to a solid board of directors, dedicated support group facilitators, and supportive membership, Tampa Bay Depressive and Manic Depressive Association exists. It is inspiring to see, feel, and read notes from our membership and people from as far away as Australia thanking us for the volunteer work we do. Scores of people, including those who support and those who are diagnosed, attend our support groups each week, demonstrating that self-help is beneficial to their mental health. Our web site provides us with the ability to help people beyond Tampa Bay and hearing from them is very exciting. You may enjoy reading some of their comments in our guestbook.

Celebrate Tampa Bay Depressive and Manic Depressive by renewing your memberships or becoming members. Volunteer to help us help others help themselves and you, too, will reap self satisfaction, become more knowledgeable about depressive disorders, foster self-help, advocate research, and eliminate stigma.

Sincerely,  
*Susan Shaw*

*Tampa Bay DMDA President*

**Tampa Bay DMDA is an  
all volunteer  
non-profit organization.**

**TAMPA BAY DEPRESSIVE AND  
MANIC DEPRESSIVE ASSOC.**

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You can e-mail us at:  
**TBDMDA@Yahoo.com**

## LECTURE SERIES 2001

Our lectures are held on the 2<sup>nd</sup> Tuesday of the month at 7:00 PM at  
**St. Joseph's Hospital, Medical Arts Bldg., Auditorium 3.**  
Lectures are free and open to the public. Free Parking north of the building.

February 13	Michael Sheehan, M.D. "Biology of Addiction"
March 13	Annual Meeting
April 10	Carol Westmorland, R.N., M.S.N. "Demystifying Complementary Therapies"

Topic, speaker and room may change due to circumstances beyond our control. Any room reassignments will be posted near the original room assignment or check with reception.

## ANNUAL MEETING 2001

The ANNUAL MEETING of the Tampa Bay Depressive and Manic Depressive Association Annual Meeting will be held on Tuesday, March 13, 2001 at 7:00 P.M. at St. Joseph's Hospital, Medical Arts Building, Auditorium 1

If you are interested in serving on the Board of Directors please leave a message at 813-878-2906.

Any person nominated for a seat on the Board of Directors must agree to have their name on the ballot before the vote is taken. The new Board will then elect officers.

Current dues-paying members are encouraged to vote in these elections.

## The Stigma of Depression

Excerpts from a letter to the editor by Piper Hoffman,  
*Brown Alumni Magazine*, July/August 2000

The misconception that many people with depression are self-indulgent or emotionally lazy is only one of many reasons that even the desperate may not seek help. Another is apprehension that their disease will become a matter of public record, jeopardizing not only their health insurance,... but also their livelihoods. For example, many states ask applicants to the bar to describe psychological problems or treatments they have had, and even to supply their psychologist's or psychiatrist's records. Applicants who refuse to answer are not admitted to the bar and cannot practice law... it is certain that as long as depression continues to be stigmatized and its treatment continues to carry significant

social, financial, and professional risks, that number (of suicides) will not decrease. As one step in reducing these risks, we should call on bar review boards and any other professional organizations that engage in similar practices not to require information about applicants' psychiatric histories. Psychiatric treatment is medical treatment and is no more appropriate for professional organizations to investigate than is an applicant's history of cancer or any other medical condition.

## SPONSORSHIP

We are looking for sponsorship  
of our bimonthly  
TBDMDA Newsletter.  
Any person, business, or  
organization that would like to  
help, please call 813-878-2906  
and leave a message.

*Thank You*

**NEVER ADJUST OR  
STOP TAKING YOUR  
MEDICATIONS WITHOUT  
CONSULTING YOUR DOCTOR.  
TAKE YOUR MEDICATIONS  
AS PRESCRIBED.**

## Challenges for Self-Responsibility

Continued from page 1

On the other hand, people can choose to complain, take offense, blame others, and stagnate. A negative approach to problems becomes self-defeating as well as a method to sabotage self-responsibility. Dr. Bonney states: "You are very powerful in what you do by the things that you think about."

Self-nurturing is another important factor in self-responsibility. Knowing how to care for ourselves enhances further development and increases a sense of accomplishment. Ideas for self-nurturing include crafts, music, exercise, reading, nature, reflecting on our positive traits, journaling, and even savoring a cup of coffee.

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***"People need to know when to seek help."***

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The main idea is to find something that you enjoy doing and that nurtures you. Everyone is creative in some way and everyone has unique traits and inner resources to draw upon.

Dr. Bonney described a useful tool called Quantum Problem Solving (QPS).

The basis of QPS is CYA, that is, Check Your Assumptions. Many times we have assumptions that are false - they are not based on accurate data. For example, if a person believes that the world is cruel because of past experience, he may decide to stay home. Missing information results in

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***"Missing information results in assumptions..."***

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assumptions, which lead to inaccurate conclusions, and impaired decisions. Virtually every decision will have its own problems and we can never solve them all. However, we can find the solutions that work best for us. In looking for the problem in a solution, we take the emotionality out of the process. We are moving from passive to active. We are taking control.

Self-responsibility is difficult. It causes us pain and suffering and we have to work at it. But as we take an active approach to our lives, the process becomes easier and self-fulfilling. Only you know what works best for you.

~Jane Trilling

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## Personal Transformation: Cause and Effect

An excerpt from "A Letter from the President" (Chuck Weinstein) *Polar's Express*, MDDA Boston, Summer 2000 as seen in *The Initiative*

When I first started attending MDDA-Boston support groups in 1990, it was a bittersweet experience. Being told that I had a mental illness opened a major rift in my life. But MDDA wove many unbreakable threads of hope, friendship, and love into the fabric of my being. In that wonderful community, I made friends, shared stories, cried and laughed. Talking openly with other people allowed me to be honest with myself. I knew I'd found a refuge.

Chief facilitator Alta List invited me to facilitate after I'd attended groups for only a short time. I seized upon this opportunity, not knowing where it would lead me or how it would affect my life. A position

of responsibility was just what the doctor ordered. It helped transform my deep sense of uselessness and filled the hole of emptiness inside. It was like a strong multi-vitamin given to someone malnourished. I looked forward to the magical Wednesday nights when I wasn't a patient but a peer group leader, "a facilitator." I felt a sense of dignity. I felt that my time and efforts, comments and caring were appreciated, and I still do to this day.

Helping to develop our facilitator training program has brought me much joy and satisfaction. When I conduct a training, our trainees' excitement and energy remind me how often this job generates positive changes in our lives. Being a facilitator turns a recipient of care into a care giver, as you learn to maintain safety and put your needs second to those in the group. It offers a profound sense of self-worth and accomplishment."

***Visit Our Web Site at this Address:  
www.tbdmda.org***

## Advanced Medical Hypnosis

Continued from page 1

conscious mind with self-destructive habits. Because the conscious mind cannot reprogram itself to change behavior, the subconscious mind has to be the force for change. The few lucky ones who appear to simply decide to stop smoking, overeating, etc. are more likely practicing self-hypnosis. They have the necessary commitment and belief to accompany the self-suggestions.

The therapist deliberately interferes with the conscious mind to allow the subconscious mind to become dominant in a positive way. The conscious mind has failed to solve the problem for so long that even the subconscious mind believes it's insolvable and beyond remediation. Hypnototherapy changes this belief system with suggestions from the therapist made to the client when the client is relaxed. The goal is to teach the client to hypnotize himself or herself with a new set of self-fulfilling prophecies to replace the ones that haven't been working. He has found that a maximum of ten sessions usually is sufficient.

~Marge Zabor

***"Sooner or later we all quote our mothers."***

Bern Williams

## The Art of Therapy

*Health*, Nov./Dec. 1998

Children often have difficulty discussing their feelings after a fight with a sibling or a scolding from Mom. To see if artistic expression helps, researchers at the University of Otago in Dunedin, New Zealand, gave kids paper and markers to play with as they recounted a traumatic event. The kids who were between three and six, revealed twice as much about their feelings as did those who had talk therapy. The investigators speculate that sketching may facilitate memory, help children organize their thoughts, or simply put them more at ease.

# Transforming Madness: New Lives for People Living with Mental Illness

by Jay Neugeboren

Quotes excerpted from an interview in  
National DMDA *Outreach*, Summer 2000

In his book *Transforming Madness*, Jay Neugeboren, of the University of Massachusetts at Amherst states: "We now have ways of controlling and treating many (mental) illnesses, allowing consumers to 'transform' their lives - not just survive an illness." The best way to start the process of transforming, states Neugeboren, is "with one good relationship. Just one. One person - often a mental health professional - who has compassion for the person with the illness and is able to say, 'You're doing well. I believe in you and think you can do even better.' Having one person to trust and lean on helps the 'transformation' or emotional/physical improvement begin. That's why support groups are so important. If people are unable to find support from family or friends, the groups are there for them.

People should use them, because isolation is the enemy. If you have a mental illness, breaking the cycle of being alone is critical."

"I try to never underestimate just how terribly hard it often is for some people with severe mental illnesses to recover, but it is possible. I've seen it. So if someone tells you you're treatment resistant, it's not true. If a doctor tells you that, switch doctors. There is hope."

"Having others believe in you, while you're trying to make sense of your illness, is what I mean by hope. Again, the peer groups are so important. Sometimes it is the first place where people with mental illness feel understood and for the first time in their lives."

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## Disorders Common Among Victims of Childhood Abuse

Early childhood abuse, whether physical, sexual, or emotional, negatively affects brain development, according to Dr. Martin Teicher of McLean Hospital in Massachusetts. Such changes have been documented in electroencephalography and MRI studies. Doctors found "clinically significant brain-wave abnormalities" in 72% of patients with serious early childhood trauma. EEG studies of the brains of traumatized victims showed left-sided abnormalities and diminished development, most prominently in the temporal regions. In addition, studies showed the left hippocampus\* to be smaller among abused victims than among control subjects. Dr. Teicher theorizes that these changes in the left hippocampus caused by child abuse elicit "deficits in verbal memory and dissociative symptoms\*\*." Also, neglect and sexual abuse have been noted to reduce both the size and activity of some structures in the middle portion. Dr. Teicher believes that these changes increase the risks of psychi-

atric illnesses and memory disorders. He states that, "Early abuse molds the brain to be more irritable, impulsive, suspicious, and prone to fight-or-flight reactions that the rational mind may be unable to control... To a brain so tuned, Eden itself would seem to hold its share of dangers."

Adapted from *Cerebrum* 2000; 2:50-67.

\* The hippocampus is important in long-term memory.

\*\* Dissociative symptoms involve thoughts, memories, emotions that are cut off from consciousness due to the anxiety they cause. An extreme example is multiple-personality disorder.

***"You might have to fight  
the battle more than once  
to win it."***

Margaret Thatcher

## Test for Detecting Heavy Drinkers

The FDA has approved a new test used to detect people who are heavy drinkers and at risk for alcohol-related disease.

Sustained heavy daily intake of alcohol results in elevated levels of carbohydrate-deficient transferrin (CDT), which can be used to determine whether a person is drinking more alcohol than their body can tolerate. The CDT test will initially be used in alcohol-treatment facilities to measure health and compliance.

Summary of "Test for Detecting Heavy Drinkers Wins FDA Approval," 1 Dec, 2000. [Medscape](#) Online. Reuters, Ltd.

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## More Quotes About Science

by 5<sup>th</sup> and 6<sup>th</sup> Graders:

1. To most people solutions mean finding the answers. But to chemists solutions are things that are still all mixed up.
2. Most books say our sun is a star. But it still knows how to change back into a sun in the daytime.
3. Water freezes at 32 degrees and boils at 212 degrees. There are 180 degrees between freezing and boiling because there are 180 degrees between north and south.
4. Vacuums are nothings. We only mention them to let them know we know they're there.
5. The wind is like the air, only pushier.
6. Some oxygen molecules help fires burn while others help make water, so sometimes it's brother against brother.
7. In looking at a drop of water under the microscope, we find there are twice as many H's as O's.

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## DON'T FORGET TO RENEW

Please remember to renew your membership in order to continue receiving the TBDMDA newsletter and to vote in the March elections. Some of our reminder cards are a little late. Try not to let your membership lapse.

THANK YOU.

# Brain Cells and Depression

Recent studies suggest that depression may arise as a result of the body's failure to grow neurons in particular areas of the brain. Scientists now know that adult brains do indeed generate new neurons (neurogenesis). Theorizing that "controlling neurogenesis in the adult brain--might have a significant impact on the treatment of mental illness," doctors hope to influence the production of neurons both environmentally and biochemically.

Stem cells, our primitive, original cells, can divide indefinitely, creating differentiated (specialized) as well as "progenitor" cells. While our existing neurons in the brain cannot divide, progenitor cells in the central nervous system can produce new neurons, glial cells (supporting cells), and new progenitor cells. Researchers theorize that disinhibiting these progenitor cells could allow them to create new neurons in a diseased or traumatized brain.

By investigating the DNA of progenitor cells in laboratory animals, researchers are studying the processes of cell division as well as the processes by which these cells become integrated into the circuitry of the brain. While primate studies have not yet been done, studies in rats and mice demonstrate neuron production of 1000-3000 neurons per day in a brain area next to the hippocampus\* called the dentate gyrus.

Some scientists believe that "stress is the most significant causal agent-with the possible exception of genetic predisposition - in the etiology of depression." Our nerve cells in the hippocampus are very "sensitive to the deleterious effects of stress." Consequently, scientists believe that "a stress-induced decrease in neurogenesis in the hippocampus might be an important factor in precipitating episodes of depression." Researchers have discovered that exposing rats to stressful situations reduces their cell proliferation in the dentate gyrus, probably through increases in brain glucocorticoids. Robert Sapolsky of Stanford U and Bruce McEwen of Rockefeller U have shown that "stress and glucocorticoids (stress hormones from adrenal cortex such as cortisol) cause widespread morphological changes and even cell death in parts of the hippocampus."

While other areas of the brain may also underlie changes associated with depres-

sion, the hippocampus has been shown to be smaller in elderly women with recurrent major depression than in women without depression (Yvette Sheline at Washington U). This particular study also showed that "the decrease in hippocampal volume correlated with the total lifetime duration of depression and not with age." Studies of temporal-lobe epilepsy also show the correlation between hippocampal damage and depression.

Increasing serotonin in the brain, the most common and effective treatment for depression, works by increasing neurogenesis in the hippocampus, stimulating cell growth in various peripheral tissues of the central nervous system, and facilitating "neuronal and synaptic plasticity." In the laboratory, rats given fluoxetine (Prozac) for 3 weeks were found to have a "70% increase in the number of cells produced in the dentate gyrus" (Jacobs). Ronald Duman also found that fluoxetine, antidepressants acting on norepinephrine, and ECT all increased cell growth in the brains of rats. These studies show that "serotonin can dramatically augment cell proliferation and that it does so, at least in part, by action on the 5-HT1A receptor," of which the hippocampus has an abundance. Researchers theorize that the usual delay in effectiveness in antidepressant therapies of 3-6 weeks might occur as a result of the time it takes for these new neurons to "fully mature, extend their neurites and integrate with the existing brain circuitry."

Other alterations in the brain might also affect depression. Chemical problems in the cerebral cortex, the amygdala\*\*, and the brain stem, may play a part. The interconnections between the hippocampus and other areas of the brain help to explain the cognitive and emotional problems seen in depression. In addition to serotonin, the authors reveal other means of increasing neurogenesis in the brain, such as norepinephrine, glucocorticoid regulation, and running.

"Advances in controlling neurogenesis might also be used to treat many other diseases where brain cells have died," say the authors. Harvesting, expanding, and transplanting stem cells might "replace or augment endogenous cells" in the brain. Stimulating endogenous cells might induce them

to "proliferate and migrate to a damaged or diseased brain region." Progress is being made in these areas, but much more work needs to be done before these strategies become routine.

\* hippocampus - a brain area important in long-term memory

\*\*amygdala - a brain area important in emotion, behavior, and memory

Jacobs, Barry L, Henriette von Praag and Fred H. Gage. "Depression and the Birth and Death of Brain Cells." *American Scientist* 88.4 (2000): 340-45.

Summary by Paulette Lane.

***"Suicide today is seen  
as the end point of a  
medical illness."***

Peter Kramer, M.D.

## Educational Resources

American Psychiatric Association  
202-682-6220 • [www.psych.org](http://www.psych.org)

American Psychological Association  
800-374-2721 • [www.apa.org](http://www.apa.org)

Advocacy Center  
800-342-0823  
[www.advocacycenter.com](http://www.advocacycenter.com)

Child & Adolescent Bipolar Foundation  
847-256-8525 • [www.bpkids.org](http://www.bpkids.org)

National Alliance for the Mentally Ill  
800-950-6264 • [www.nami.org](http://www.nami.org)

National Association for the Dually Diagnosed  
800-331-5362

National DMDA  
800-826-3632 • [www.ndmda.org](http://www.ndmda.org)

National Family Caregivers Association  
301-942-6430

National Foundation for Depressive Illnesses  
800-248-4344

National Institute of Mental Health  
800-421-4211 • [www.nimh.nih.gov](http://www.nimh.nih.gov)

Panic Disorder Line:  
800-64PANIC(7-2642)

Anxiety Disorder Line:  
800-888-8-ANXIETY(26-9438)

National Mental Health Association  
800-969-6442 • [www.nmha.org](http://www.nmha.org)

Confidential  
depression screening:  
[www.depression-screening.org](http://www.depression-screening.org)

## Scroll of HONOR

This year we have initiated a 2001 Scroll of Honor for professional members. We honor professional support of TBDMDA and we extend a very sincere thank you to the current 2001 Professional Honor Roll members.

We are proud to list your names in the next issue and we encourage additional professionals to join.

*Thank You!*

## Sleep and the Vicious Stress Cycle

Elaine Glusac,  
*Shape Magazine, July 1999*

Not getting enough sleep itself is a stressor. Cortisol, the body's stress hormone, rises on demand to empower the body to defend itself. Responsible for the "fight or flight syndrome," cortisol surges in response to stressful events, giving you the ability to quickly jump out of the way of a speeding bus, for example. Cortisol levels are normally low at night, enabling the body to rest, and then rise in the morning to awaken you. But after a night of curtailed shut-eye, it could be the stress resulting from fatigue that interferes with your sleep the next night. "It's a vicious cycle," says sleep expert Martin Moore-Ede, M.D., Ph.D. "It's the effect of the stress actually keeping you awake, and as a result you get less sleep, which causes more stress, and so on."

"Without trust, influence is almost impossible. We are most influenced by those we trust. We feel positive about them and tend to be more open to learning from them. We enjoy being with them and do whatever we can to assist them. When you have confidence in and respect for another, you tend to give strong consideration to their views and advice."

Denise Thornby, RN, MS,  
*Nursing Spectrum, July 10, 2000.*

## When Not to Use Your Head Intuition vs. Reason

Summary of an article in *Health*, June 2000

Jonathan Schooler, Professor of Psychology at the University of Pittsburgh, has been studying how intuition works and why we sometimes fail to heed it. By using index cards with two groups of three words, and having a participant choose which group has a connecting word, he demonstrates that people are often aware of things that they do not realize on a conscious level. Another experiment uses words flashed quickly on a screen and asks the participant to say the word. The majority of the words are named very quickly. Using reason to name the word is not nearly as successful. In a third experiment, participants are shown a face that they will pick out of a line-up. The group who wrote a description of the face were less likely to recognize the face than those who did not write about the face. Schooler states that these experiments are: "an elegant demonstration of the idea that you can know without

knowing how you know - or even that you know."

When asked why people do better when they go with their hunch, Schooler states: "Because humans appear to use two disparate modes of thinking, and one often hampers the other. Reason tramples intuition. If you try to think in words when what's really needed is a nonverbal, intuitive approach, you are doing yourself a disservice. It's called 'verbal overshadowing.'"

Professor Schooler does make a distinction between cultivating your intuition versus unfortunate snap decisions, or decisions influenced by fear and anxiety. Gut feelings need to be monitored by our reason when the consequences could be dire, such as buying an expensive sports car on a whim. And, decisions made out of fear are not necessarily intuitive decisions, as intuition and anxiety are not the same.

## Caught in the Web Study on Internet Addicts

Adapted from an article in *Vital Signs*, 11/21/00

Internet use constitutes an addiction in a growing number of web users. The American Psychological Association estimates that there are 200,000 cyberspace addicts in the U.S.

In a study by the University of Florida and the University of Cincinnati (UF/Cincinnati) published in the *Journal of Affective Disorders*, researchers describe the destructiveness of this addiction, which is no less debilitating than other forms of substance abuse. Some of the interviewed addicts reported failing out of school, losing jobs, divorcing, and being isolated from friends and family, as a consequences. On average, the subjects spent 30 hours/week online, and one spent 3 days in a row online. The favorite sites were chat rooms, e-mail, and multi-user domains. It is theorized television is not addictive like Internet use, because of the latter's interactive nature.

One of the unexpected findings: "Every study participant's Internet use met es-

tablished diagnostic criteria for the family of psychiatric illnesses known as impulse control disorders, which include kleptomania, a recurrent failure to resist impulses to shoplift, and trichotillomania, a recurrent pulling of one's hair."

The study participants also displayed a "significant amount of treatable psychiatric illness..." Mood stabilizers were most effective as treatment, and antidepressants helped some.

It is not known whether subjects had a pre-existing psychiatric illness or whether Internet use precipitated an illness.

*"For peace of mind,  
resign as general manager  
of the universe."*

Larry Eisenberg

## Depression in Medical Illness: The Role of the Immune System

Summary of an article by Kenneth V. Iserson,  
*Western Journal of Medicine* 173(5),2000, Medscape.com

Immunity and resistance to disease are affected by stress and emotions. Pathways between the brain and nervous system and the immune system, in turn, result in behavioral and mood changes when the immune system is activated.

When pathogens (germs) invade the body, the immune system alerts the brain of the infection-induced immune activation. Cytokines such as interleukins and interferons, are peptides (chains of amino acids) that are produced in the brain and elsewhere to orchestrate the body's immune response. Cytokines mediate not only the disease-fighting function of the immune system, but also changes in the brain, ner-

vous system, and endocrine system. Ultimately, chemical changes result in behavioral changes, collectively known as "sickness behavior," such as depressed mood, anorexia, altered sleep, and reduced interest in interacting with others.

Disease-related depression causes distress to the patient and can decrease the body's ability to fight the illness, as well as compromise the treatment plan.

## Breakthrough: Albert Ellis

*Psychology Today*, December 1999

Ellis developed rational-emotive therapy (RET) – which helps clients identify irrational beliefs\* and replace them with rational ones.

"RET therapists will listen as you whine about your mother, but in the final analysis, they will put you at the center of the universe, responsible for your own actions and feelings." July 1973

\* Refer to the list in the Dec./Jan. issue.

## For Those of You Taking Lithium

Replacing fluids and obtaining enough dietary salt are essential for anyone taking lithium, particularly in hot weather. Heavy sweating may raise lithium levels, as may low-sodium diets. If you are on a low-sodium diet, check with your doctor regarding toxicity. Symptoms of toxicity start with increased shaking, nausea, and diarrhea. The kidneys handle lithium and sodium the same way, and losing fluids and sodium results in the kidneys retaining sodium and increased lithium levels.

Taking over-the-counter medications concurrently with lithium can be dangerous. In particular, medications such as ibuprofen (Advil, Motrin, Nuprin, etc.) and other nonsteroidal anti-inflammatory drugs (NSAIDs) may increase blood lithium levels. Always check with your doctor or pharmacist before taking any medications while on lithium. Having regular blood lithium levels checked is important to avoid toxicity.

### ***Thank You!***

To all of you who have paid your dues, subscribed to our newsletter, or made donations, we truly thank you. Without this monetary support, we would not be able to provide educational materials, literature and newsletters to the people that need our help.

## What is Tampa Bay Depressive and Manic Depressive Association?

Tampa Bay DMDA is a self-help support group for persons diagnosed with Affective Disorders. We are affiliated with the National DMDA. TBDMDA is a non-profit, 501(c)(3) organization operated by it members.

The Association's mission is: to provide education, self-help, fellowship and other direct services to people with Affective Disorders and to their relatives and friends (support people).

All our activities are conducted so as to facilitate the sharing of experiences, possible solutions, and emotional support through the atmosphere of good fellowship and outreach while encouraging proper medical and therapeutic treatment.

## 2001 MEMBERSHIP APPLICATION

Please check the appropriate boxes

New  Renewal  Change of address

\$20.00 Individual or Support Person

\$10.00 Newsletter only (per year)

\$30.00 Family/Household

\$150.00 Professional Honor Roll for 2001

\$100.00 Lifetime

\$ \_\_\_\_\_ Donation

Enclosed is \$ \_\_\_\_\_ for membership and/or donation. The Tampa Bay DMDA is a non-profit 501(c)(3) corporation. Contributions are tax deductible as provided by law.

Name \_\_\_\_\_

Family Members \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

How did you hear about our organization? \_\_\_\_\_

Confidentiality is very important to us. Our membership list stays within TBDMDA only and will not be sent to any other organizations.

Please print clearly and mail to TBDMDA, PO Box 340572, Tampa, FL 33694

# Tampa Bay Depressive and Manic Depressive Association SUPPORT GROUPS

PLEASE BE ON TIME

If unable to, please find a place to sit and join in. Everyone appreciates your cooperation. Thank you.  
Times and locations may change due to circumstances beyond our control.

## Carrollwood/Northdale:

Monday 7:00 PM  
Northwest Regional Library, 15610  
Premier Dr. N.; 813-264-3831

**St. Joseph Hospital:** Wednesday  
7:30 PM: 3001 W. Dr. Martin L. King  
Blvd, Tampa in Conference Room C.  
Check at reception for changes.

**St. Petersburg:** Monday 7:00 PM  
Lutheran Church of the Cross,  
4545 Chancelor St., NE.  
Contact: Connie 727-525-8364

**James A. Haley V.A. Hospital:**  
Saturday 7:00 PM  
13000 Bruce B. Downs., 1C West

**Town & Country Hospital:**  
Sunday 7:00 PM,  
6001 Webb Road - in cafeteria  
Contact: Linda 813-887-3127

**Port Richey:** Monday 7:30 PM  
1<sup>st</sup> Presbyterian Church,  
7540 Ridge Road  
Contact: Linda 727-845-7780

**Largo:** Tuesday 7:30 PM  
1<sup>st</sup> Christian Church of Largo  
1645 Seminole Blvd. Room 406  
(2 blocks N. of Ulmerton)  
Contact: Gary 727-584-8693

**FMHI:** Wednesday 7:30 PM  
MHC Room 1329. Maps available at  
main USF entrance on Fowler Ave.

**Zephyrhills:** Monday 7:00 PM  
E. Pasco Med. Center,  
7050 Gall Blvd. (Us Hwy 301),  
Wellness Center Rm. B.

**Brandon:** Wednesday 7:00 PM at  
Brandon Library, 2nd Floor,  
619 Vonderberg Road.  
Contact: Paul 813-651-1520;  
Jennifer 813-654-3717

## Support Group Guidelines:

- We are here to support mental health and your prescribed treatment.
- We maintain confidentiality: What is said in a group stays here.
- As volunteer facilitators, we help guide your discussions. We share experiences, wisdom, successes, and common problems. We limit discussions to depressive disorders and medically accepted treatments.
- We are not mental health professionals. We do not diagnose, advise, or recommend specific treatments or doctors.
- Our participants respond with compassion, not judgement. We may remain silent.
- Intimate personal relationships are discouraged. We are here to give and receive support.

## You Can Call Us At 813-878-2906

Please leave a message and one of our volunteers will call you back. We cannot return long distance calls unless you give us permission to call collect.

## TBDMDA Newsletter

Circulation: Worldwide

Feel free to reprint our articles or our entire newsletter. However, please acknowledge our publication, date, author, and source.

## Multiple Copies?

Anyone who would like to receive multiple copies of our newsletter, please send \$4/issue or \$24/year to our PO Box and indicate what the funds are for. We can send about 30 newsletters in a Priority Mail packet.

## TBDMDA

P.O. Box 340572  
Tampa, FL 33694

## Professional Advisor:

Michael F. Sheehan, M.D.

## Executive Board:

President: Susan Shaw  
1st Vice President: Michael Sheehan  
2nd Vice President: Randy Hillhouse  
Treasurer: Joseph Baruta  
Scribe: Jane Trilling

**Editor:** Jane Trilling  
**Assistant Editor:** Paulette Lane

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