

Events at the Center

Grand Rounds at Lindner Center of HOPE are open to physicians, psychologists, social workers, nurses and mental health professionals. 1 CME and/or CEU offered free of charge.

July 5, 2011 Noon - 1:00 pm
Lindner Center of HOPE gymnasium
Grand Rounds: Food and the Family: First Line Evidence Based Treatment for Treating Anorexia Nervosa
Presenter: Scott Bullock, MSW, LISW-S, Lindner Center of HOPE Family Eating Disorders Therapist and Intake Eating Disorders Coordinator
 Email Angela Dukate, Clinical Educator at angela.dukate@lindnercenter.org or call 513-536-0830 for more information.

We Care About What Matters To You

We'd like to hear from you so we can better deliver the kind of information that benefits you in your profession. Take a moment and tell us what CE opportunities would be of value to you and help us better understand the topics you want to hear about. Email Terri Ann Fredette at terriann.fredette@lindnercenter.org.

More on the Web

Library of Resources

This library offers resources that will enhance the understanding of mental illness, specific diagnoses, and treatment options.

Treatment Teams

Lindner Center of HOPE has a diverse team offering patients and families expertise in diagnosis and treatment.

How to Make a Referral

Gain access to intake specialists during the hours of 7 a.m. - 11 p.m. 24-hour admission is available for emergencies

Support Groups

Review the list of support groups available at the Center.

Tell Us What Interests You

Do you have an idea for future articles? Share your ideas with us, email us at terriann.fredette@lindnercenter.org.

Visit www.lindnercenterofhope.org to learn more.

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A Debate Amongst Experts To Expand the Bipolar Spectrum



At the Annual American Psychiatric Association (APA) meeting held May 14-18, Dr. Susan McElroy, Chief Research Officer at Lindner Center of HOPE presented research evidence supporting the broadening of the concept of Bipolar Disorder.

Colleagues Dr. Mari Maj, from Italy and Dr. Stephen Strakowski, Professor and Chair at University of Cincinnati Department of Psychiatry & Behavioral Health argued that the diagnostic criteria should not be broadened. Dr. McElroy argued that Bipolar Disorder diagnostic criteria needs to be broadened to account for the

broad range of mixed states - for instance when manic and depressive symptoms co-occur and for subthreshold hypomania - hypomanic symptoms that are shorter than 4 days.

Over the last decade a number of experts in the field have encouraged expanding the diagnosis to include mood changes that are much different than the traditional classic definition - which includes episodes of major depression that last at least two weeks and periods of mania or hypomania that last at least seven or four days respectively. At the APA Conference, Ellen Frank, PhD from Pittsburgh, Pa reviewed the risks and benefits of expanding the diagnostic criteria including misdiagnosis, exposure to inappropriate medications and their side effects. On the plus side, expanding the spectrum could mean an increase in diagnosis which could potentially mean that more people who need help will receive it.

On the other side of the debate are questions concerning emergency rooms and clinics seeing many patients who say they have bipolar disorder and who are then being prescribed a large number of psychiatric drugs for vague and unclear indications.

In our next issue of The Source, Dr. McElroy will provide a definition of bipolar spectrum and will explain one of the major differences of opinion around the diagnosis. Her perspective is that widening the Bipolar Spectrum will offer more accurate diagnosis and more appropriate treatment of those with true bipolar disease.

What do you think? Join us on LinkedIn to share your thoughts and hear from your colleagues and patient advocates on this APA topic. Will the broadening of Bipolar Spectrum lead to the over diagnosis of bipolar disorder or to more accurate diagnosis and more effective treatments? How will this affect individuals with milder symptoms and those without the illness to ineffective medications with harmful side effects? Has research helped delineate the importance of DSM IV expansion? We hope to hear from you.

<http://www.linkedin.com/company/230151>

Celebrating A Shared Vision

It is through our collaborative efforts with each of you that we can deliver the best care to patients and families. This shared vision to strengthen our communities is vital to each of our mutual successes. For close to three years, Lindner Center of HOPE, with your help, has worked to better improve the lives of those affected by mental illness.

Please join us for our 3rd year anniversary celebration on August 14 from 5:00 pm-9:00 pm. This year's 40s themed event will take place at Embers Restaurant in Kenwood. Live music and dinner, \$50.00 per person. Mark your calendars to join your colleagues, our Board of Directors and supporters. For more information, visit <http://www.lindnercenterofhope.org/anniversary.aspx>



Are Some Of Us Wired to Take Risks?

Now that summer is here, kids - both high school and college aged young adults are home from school. It's a time when parents may witness behaviors in their family member that they themselves question or deem risky. Although teens don't always weigh the good and bad of risks when making decisions, parents recognize that some of these behaviors can have serious consequences.

"Young adults can be vulnerable to impulsivity, feelings of immortality or "living in the moment." These actions and feelings can lead to significant problems at home, with friends in social situations or on the job," said Dr. Casuto. "And if not addressed, they can also lead to future problems.

In the 2009 Youth Risk Behavior Surveillance, six categories of priority health-risk behaviors among youth and young adults were monitored. The data is used to measure progress toward achieving national health objectives and indicators and to assess trends in priority health-risk behaviors.

In the nationwide survey, during the 12 months before the survey, 13.8% of students

had seriously considered attempting suicide and 6.3% said they had attempted suicide. And during the 30 days prior to the survey, 41.8% had drunk alcohol and 20.8% had used marijuana one or more times.

By guiding children at an earlier age, parents can help encourage them to avoid unhealthy risks which can affect them as they become young adults. Researchers and doctors who study the brain know that the brain changes with age. According to a study by the National Institutes of Health, in early adolescence, the cognitive functioning of the brain undergoes change and doesn't fully mature until individuals reach their mid-twenties. This is the final stage of brain development. "Although the brain reaches its final stage around this age, individuals continue to learn throughout their lifespan," said **Dr. Leah Casuto**, a psychiatrist and researcher at Lindner Center of HOPE. "The brain is a very complicated and dynamic organ which, through research we are still shedding light on its complexities." Dr. Casuto said.

Risk taking can also extend into adulthood in the form of substance abuse, habitual



gambling, sexual initiation and physical fights. Adults driven to danger by impulsivity or hyperactivity may be suffering with ADD or ADHD, according to best-selling authors Edward Hallowell and John Ratey who co-wrote *Delivered From Distraction*. They explain that there are some types of ADD that create an "itch" deep inside an individual. The problem occurs when an individual attempts to relieve the itch by engaging in reckless, negative behaviors.

"Bipolar Disorder, in particular mania, can also cause impulsivity," said Dr. Casuto. "It is certainly in our differential diagnosis when an individual presents with new onset impulsive behaviors that are uncharacteristic of him or her," Casuto added. Researchers believe that by intervening at an earlier age and making accurate diagnosis when mental health concerns arise, risky behaviors adults engage in may be reduced.

Can Harry Potter Cure OCD?



The 18th Annual OCD Conference has been the only national meeting focused solely on Obsessive Compulsive Disorder (OCD) and OC related disorders. The event allows people with OCD and their loved

ones to experience the latest OCD information alongside the mental health professionals who care for them. **Jennifer Wells, MSW, LISW** at Lindner Center of HOPE will present a fun, hands-on approach to treating OCD. "It can be difficult and challenging for children and adolescents to face the distress associated with Exposure and Response Prevention (ERP), and I have found in my clinical practice that making ERP fun can lead to stronger participation," said Wells.

Exposure and Response Prevention has a strong evidence base and it is generally considered the most effective treatment for OCD.

Over 1,000 attendees are expected to participate in this year's conference held July 29 - 31 in San Diego, CA. It will feature more than 100 presentations, workshops, and seminars as well as nearly two dozen support groups. Presenters include some of the most experienced and knowledgeable clinicians and researchers in the field, as well as people with OCD and family members who are willing to share their story.

Recruiting Research Study Participants

The Research Institute at Lindner Center of HOPE is recruiting individuals for participation in a medical research study to evaluate an investigational medication called Ondansetron. This is the first new medication looked at for OCD in 20 years.

For more information call 513-536-0710 or visit www.lindnercenterofhope.org/PatientsFamilies/Research/ClinicalTrials/OCDResearchStudy.aspx.

Severe Mood or Psychotic Presentations Often Have Religious Themes

At the May 26th Lessons for Faith Leaders Conference, held at Lindner Center of HOPE, individuals who work with faith communities heard how 50-75% of severe mood or psychotic episodes have religious themes and often range from punitive unworthiness to commands from their higher power to actual God-like representations.



Dr. Quinton Moss

For individuals who work with the faith communities, it can be difficult to differentiate the spectrum of psychiatric presentations. "This is where a medical evaluation with a primary care provider is important," said **Dr. Quinton Moss**. "Primary care providers have the ability to rule out a medical illness and they are better equipped to begin an evaluation to determine the current physical health of the patient," Dr. Moss added. They can collaborate with a mental health provider and better help reduce the barrier of access to mental health treatment, he said.



Heather Turner, Brian Owens, Rhonda Benson, Amy Foley, Sally Fieher, Rachel Light and Kathleen Stevens

Brian Owens, Chief Operating Officer for Lindner Center of HOPE participated on a panel and discussed the HOPE provided to patients and families at the Center.

"The principles and philosophy we share as a group will undoubtedly help those in need of mental healthcare," Owens said. Affiliate members from the National Alliance on Mental Illness (NAMI) were also represented on the panel. NAMI's from Warren, Hamilton, Clermont, Butler and Montgomery counties shared their resources to help individuals and families. "Mental illness is not just an individual problem or a character flaw or parenting problem - it's a family and community problem," said Rhonda Benson from NAMI Butler County.

"Mood disorders should be a medical consideration in individual consultations and spiritual interventions," Moss stated. Because clergy are often the first responders in acute mental health crisis it is important to understand the levels of severity and possible interventions for those in need.