



# The Outlook

Summer Edition, 2006

[www.depression.mb.ca](http://www.depression.mb.ca)

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(204) 786-0987 or 1-800-2631460

## Bev's Bit

FACES is the name of our new office at 4 Fort Street. On May 1<sup>st</sup>, at our grand opening, Theresa Oswald, Minister of Healthy Living, assisted the executive directors in unveiling the new name.

FACES is an exciting opportunity for the mental health self-help agencies. We are able to provide a "one-stop shop" for consumers, families and community members to receive the various peer-support services offered by each agency.

If you have not been here, please stop in when you are in the area and see what FACES has to offer you!

Bev Trachuk,  
Executive Director

### Mood Disorders Association of Manitoba's Mission is to:

We are a self-help organization whose purpose is helping others to help themselves through peer support, education and advocacy.

We will increase public awareness about mood disorders and empower people to develop and manage mental wellness.

We will provide a welcoming atmosphere to those dealing with co-occurring disorders.

## Annual General Meeting

Friday, September 15th, 2006  
at 7:00 pm

In the Multi-Purpose Room at  
FACES  
4 Fort Street, Suite 100

Everyone is welcome but *only* members in good standing are allowed to vote.

Come out and show your support!

# ASIST

Applied Suicide  
Intervention  
Skills  
Training

September 11th & 12th, 2006  
9:00am—4:00pm

Multi-Purpose Room  
at **FACES**  
4 Fort Street

Cost is \$100.00  
Please call 786-0987 or  
1-800-263-1460 for information.

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# Support Groups

## Winnipeg Region

### Monday afternoon (weekly)

1:00 - 3:00 pm  
4 Fort Street  
Mixed Group

### Thursday afternoon (weekly)

1:00 - 3:00 pm  
4 Fort Street  
Mixed Group

### Sunday afternoon (weekly)

1:00 - 3:00 pm  
4 Fort Street  
Mixed Group

(Doors open at 12:30pm and lock at  
1:00pm sharp)

### Wednesday evening (weekly)

7:00 - 9:00 pm  
4 Fort Street

(Doors open at 6:30pm and lock at  
7:00pm sharp)

### Diagnosis Specific Groups:

Depression  
Bipolar Disorder  
Family/Friends/Caregivers

### 1st & 3rd Thursday afternoons

1:00 - 3:00 pm  
1st Thursday of the month - Rm. PZ-406  
3rd Thursday of the month -  
Rm. PX-235  
PsychHealth Centre, 771 Bannatyne Ave.  
Mixed Group

### Tuesday afternoon (weekly)

1:00 - 3:00 pm  
Bethesda Church, 1350 Grant Ave.  
Mixed Group Open to all.

## Burntwood Region

Support groups  
to be announced.

Call CMHA Thompson region  
(204) 677-6050 for information.

## Eastman Region

### St. Pierre-Jolys

Desalbury Hospital, Health Corner  
3rd Thursday of each month, 7:00 pm

### Steinbach

Jake Epp Library  
Last Tuesday of each month, 7:00 pm

### Whitemouth

Redeemer Lutheran Church, 7:30 pm  
4th Thursday of each month.

### Pinawa

Pinawa Hospital, Board Room  
3rd Monday of each month, 1:00 pm

### Pinefalls/Powerview/Fort Alexander

Pine Falls Primary Health Care Centre  
3rd Monday of each month, 7:00 pm

### Beausejour

Positive Connections Group  
(for anyone living with mental illness or  
stress issues)

Beausejour Health Centre  
Thursday 7:00 - 9:00 pm

## Central Region

### Winkler

Groups will resume in September.

### Portage La Prairie

No groups currently available.

### Pilot Mound

Please contact Irene Olnick at 825-2608.

### Winkler EA

Evergreen Place  
Thursdays  
7:30-9:00pm

## Interlake Region

### Gimli

Bi-weekly Wednesdays  
Beginning September 7, 2005  
1:00 p.m.  
Gimli Hospital

### Stonewall

1<sup>st</sup> Tues. of the month at 7:00 p.m.  
Stonewall District Health Centre

### Riverton

1<sup>st</sup> Tuesday of the month

1:00 p.m.

Riverton Community Health Office

### Lundar

3<sup>rd</sup> Mon. of the month at 7:00 p.m.  
L. Merritt Support Centre

### Teulon

2<sup>nd</sup> Thursday of the Month  
1:00 p.m.  
Teulon Hunter Memorial Hospital

### Selkirk

1<sup>st</sup> Monday of the month 4:00 p.m.  
Selkirk Support Centre

### Ashern

4<sup>th</sup> Wednesday of the month  
Ashern Provincial Office  
1:00 p.m.

### Family Support Group Meeting

3<sup>rd</sup> Wednesday of the month at 7:00 p.m.  
Gimli Hospital

(Facilitated by: The Mood Disorders  
Association of Manitoba, Anxiety Disor-  
ders Association of Manitoba and The  
Manitoba Schizophrenia Society)

### For more information on Community Support Group Meetings please

#### contact:

Heather McNeill  
Phone: 642-7886

## Westman Region

### Brandon

M-435 Rosser Ave. (east entrance-  
upstairs):

Every 2nd Tuesday of the month  
7:00-9:00 pm

Family Support Group-- every 3rd Tues-  
day of the month

7:00-9:00 pm

Every Wednesday afternoon 2-4 pm

### Minnedosa

Minnedosa Regional Library, 54 - 1st  
Ave. SE

3rd Thursday of each month,  
7:00-9:00 pm

### Virden

Virden Health Centre  
Conference Room  
1st Thursday of each month  
10:30 am-12:00 pm

### Neepawa

Neepawa United Church  
475 Mountain Ave.  
4th Thursday of the month  
8:00pm

### Parkland Region

#### **Swan River**

CMHA Office, Swan River  
Depression support group  
Every Friday, 10:30 am

#### **Dauphin**

Dauphin General Hospital  
psychiatric ward, 4th floor  
every Tuesday, 1:30 pm

Trinity Lutheran Church  
2nd Thursday of the month  
7:00 pm

#### **Ste. Rose**

Ste. Rose Hospital  
1st Wednesday of each month, 2:00 pm

The MDAM Parkland Region will be  
hosting a fund raiser golf tournament on  
July 29th, 2006 at the Dauphin Lake  
Golf Club. Please call numbers below  
for further details.

**Call (204) 622-4104 or (204) 638-4496  
for more information on groups.**

### Norman Region

Groups to resume in the fall..

MDAM is pleased to offer:

## **Ten Days To Self Esteem**

A 10 week program,  
Tuesdays from  
1:00 to 3:00 pm  
beginning September 12th

Intake Required.  
For details, please call  
Fiona at 786-0987.

### **RURAL CRISIS PHONE LIST**

All Rural Farm and Rural Stress Line	.....1-866-367-3276
Interlake.....	1-866-427-8628
North Eastman.....	1-866-427-8628
South Eastman .....	1-888-379-7699
Brandon and Assiniboine.....	1-888-379-7699
Burntwood.....	677-2381
Flin Flon.....	689-9611
The Pas.....	627-8224
Portage La Prairie.....	857-6369
Winkler.....	325-9700

### **CRISIS PHONE LIST**

Crisis Stabilization Unit, 180 Henry Ave.....	940-3633
Crisis Stabilization Unit, Sara Riel.....	233-2756
Klinik 24 Hour Suicide Crisis Line.....	786-8686
Klinik Sexual Assault Line.....	786-8631
Main Street Project.....	982-8245
Mobile Crisis Unit (WRHA).....	946-9109
Osborne House Crisis Line.....	942-3052
Seneca Help Line (7pm - 11pm).....	942-9276
Teen Touch.....	783-1116
Youth Emergency Crisis Stabilization System.....	949-4777
Addictions Foundation of Manitoba.....	944-6200
Anxiety Disorders Association of Manitoba.....	925-0600
Clubhouse.....	783-9400
Canadian Mental Health Association.....	982-6100
Manitoba Schizophrenia Society.....	786-1616
Men's Resource Centre.....	956-6562
Mood Disorders Association of Manitoba.....	786-0987
Obsessive Compulsive Support Centre.....	942-3331
SPEAK.....	831-3610
YMCA - YWCA Mental Health Services.....	989-4194



### **Omega-3 Foods May Help Mental Outlook**

Whether you're seriously depressed or simply in a bad mood, eating salmon and other foods high in omega-3 fatty acids just might help you feel better.

Earlier studies appear to link low blood levels of omega-3s to a host of serious psychological conditions, including major depression, bipolar disorder, attention deficit disorder, and even schizophrenia.

Now new research suggests that omega-3s can have a significant impact on everyone's mental health.

"People in our study who had low blood levels of omega-3 fatty acids were more likely to report mild to moderate symptoms of depression, more moodiness, and more impulsivity," says researcher Sarah Conkin, PhD, of the University of Pittsburgh School of Medicine.

Conversely, people with higher blood levels of omega-3s were found to be more agreeable, based on the results of standardized tests.

Conkin presented the findings at the 46th Annual Scientific Meeting of the American Psychosomatic Society in Denver.

#### **Fish and Flaxseed**

The American Heart Association recommends eating at least two servings of fatty fish each week, based on strong evidence that the omega-3 fats found in the fish help protect against cardiovascular disease.

The evidence that omega-3 levels also have an impact on mood disorders is less conclusive but growing, says a researcher who conducted some of the first psychological studies examining the fats.

"It is quite clear that omega-3 fatty acids are good for your heart," says psychiatrist Joseph Hibbeln, MD, of the National Institute on Alcohol Abuse and Alcoholism. "But it remains to be seen how good they are for your mind. It is an emerging public health question, but we don't yet know the answer."

Two types of omega-3 fatty acids are found in fatty fish like salmon, sardines, and mackerel -- eicosapentaenoic acid, or EPA, and docosahexaenoic acid, or DHA. A third omega-3, alpha-linolenic acid, or ALA, is found in plant foods such as flaxseed, soybean oil, walnuts, and canola oil.

"It is just hard to get enough omega-3s in this country," he says. "In Japan it is just part of the culture to eat omega-3-rich foods, but that isn't the case here."

## Advice For A Healthy Lifestyle Part Three: Healthy Eating

### Healthy Eating: Advice for a Healthy Lifestyle

#### Eat a variety of foods from the 4 major food groups

Grain products (eg. Bread, pasta), vegetables and fruits, milk products (eg. Milk, yogurt, cheese) and meat. Choose lower fat alternatives whenever possible. The fat content of food is usually included on its packaging.

#### Cook healthy

Instead of frying, try a lower-fat cooking method, such as broiling, baking, or grilling.

#### Portion control

Choose moderate-size portions as opposed to large-portion sizes. For example, the recommended size of a serving of meat is the size of a deck of playing cards. Refer to Canada's Food Guide for information on recommended serving sizes.

#### Enjoy satisfying eating without empty calories

Do you like to dip potato chips and taco chips that are high in fat? Instead try dipping raw vegetables for a change, they're tasty and easy to prepare.

#### Enjoy plenty of whole grains (breads, pastas), fruits and vegetables

Choose whole grain and enriched grain products more often (eg. Whole wheat bread) and choose from a variety of orange and green fruits and vegetables.

#### Don't deprive yourself

Have the occasional treat in controlled amounts. It can help prevent overeating later.

#### Note:

The amount of food needed for each individual varies with age, body size, activity level, gender, and if breast-feeding. These tips will help you maintain a healthy weight!

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## Dance Movement Therapy: A Healthy Way To Express Yourself

Dance is an ancient form of physical expression that has used movement for many purposes, including celebration, storytelling, and beseeching the gods to send rain. Many reasons have motivated dance throughout history.

Dance or movement as a form of therapy, however, was not used in the United States until the 1940's when psychiatrists noted positive changes in some of their patients who attended a dance class instructed by dance therapy pioneer Marian Chace. Today, dance/movement therapy, also known as "creative therapy" or "expressive or activity therapy" continues to evolve as new uses are discovered for this powerful and intimate medium of self and group expression.

The American Dance Therapy Association (ADTA) defines dance/movement therapy as "the psychotherapeutic use of movement as a process (that) furthers the emotional, cognitive, and physical integration of the individual."

The National Multiple Sclerosis Society

(NMSS) also recognizes the psychological, cognitive and physical benefits of dance/movement therapy. MS chapters across the United States offer events as brief as weekend MS dance movement therapy workshop to longer four-week dance/movement therapy workshops. One four-week program promotes dance/movement therapy as affecting changes in "feelings, cognition, physical functioning and behavior," all areas of potential concern for people diagnosed with MS.

And you don't have to know even one step, let alone the two-step, to participate or receive the potential benefits of dance/movement therapy. Dance/movement therapy allows you to express your emotions physically, and often nonverbally, in a safe environment.

Movements may be as simple or as elaborate as you wish to make them or feel comfortable doing, from moving from one space to another to performing dance creations of your own.

Most movement therapies are based in part upon the foundation that both body and mind are interrelated; that each may have both positive and negative health effects on the other. Asian practices such as tai chi and yoga are considered types of movement therapies. Physical therapists, occupational therapists and recreational therapists all use some form of movement to help increase mobility, flexibility and strength, or offer cognitive or psychological benefits.

Dance movement therapists, however, specialize in using movement as a form of social, emotional, cognitive, and physical therapy. They may work with individuals of all ages or groups, in both inpatient and outpatient health care settings or in private practice. These therapists use movement to observe, assess and design intervention or treatment plans for patients. The ADTA maintains a registry of dance/movement therapists who must meet specific educational and clinical practice standards.

The benefits of dance/movement therapy, according to both the ADTA and the NMSS, may help in the following ways:

- improve self-esteem
- improve body image and awareness
- develop communication skills and strengthen relationships

- provide new ways of coping
- provide a healthy social outlet
- serve as a means of therapeutic play
- offer fun and relaxation
- function as a form of exercise
- reduce stress and anxiety
- alleviate depression
- lessen or deal with chronic pain
- strengthen cognitive function
- increase mobility, flexibility and strength

Dance may remain a private form of self-expression or become a public one. For example, some cities have dance troupes comprised of physically disabled performers, including some who use wheelchairs. These dance performances help raise public awareness about disability as well as help redefine our notions of dance.

For more information about dance/movement therapy, visit the ADTA at [www.adta.org](http://www.adta.org).

## How To talk To Your Doctor

### Doctor's office do's

You may only have a short time with your doctor, but employing the right strategies can help you make the most out of every minute.

**Arrive on time.** Sure, it may be frustrating if you have to wait (and doctors' offices don't have waiting rooms for nothing), but remember that if your doctor is running behind, it's likely because they are spending more time helping someone else. But if you arrive late for your appointment, it could reduce the amount of face time you get with your doctor, making you feel rushed and cutting down on the time you have to discuss your concerns.

**Come prepared.** Write down any questions or concerns you have ahead of time, and bring your list with you. If you feel rushed or flustered during your appointment, it could cause you to forget the things you wanted to ask.

**Check your shyness at the door.** When it comes to discussing sensitive topics,

don't be too embarrassed to speak up. Chances are, your doctor has seen the problem before and is there to help you, not to judge.

**Ask away.** Don't be afraid to ask your doctor about particular treatments you may have read about or heard about from friends, but be prepared to listen to what the doctor has to say - whether good or bad. Doctors appreciate an informed patient, but if you come in and try to diagnose yourself or tell them how to treat your condition, it can be frustrating for both of you. Remember that you came to them for professional advice - so be prepared to listen to their professional opinion. Rather than telling your doctor what you have how to treat it, ask open-ended questions such as "What can you tell me about this treatment?"

**Be specific.** When it comes to listing your symptoms, be as specific as possible. Note the duration, frequency, timing, severity, and whether there seem to be any associated triggers or patterns. The clearer idea your doctor has of what is bothering you, the better they may be able to zero in on the problem.

**Be honest.** Your doctor can only help you if he or she has an accurate understanding of what is going on. So from questions about your symptoms to your lifestyle to other medications you may be using, make sure to answer your doctor's queries as accurately and honestly as you can.

**Make sure you understand what your doctor is saying.** You should leave your doctor's office with a clear understanding of your condition, your treatment, and any follow-up appointments, tests, or other care you may require. If you aren't sure what your doctor is saying, don't be afraid to ask them to explain it again or to write it down for you. You may also want to bring along a trusted family member or friend to help ensure you leave with a clear understanding



## Families Suffer Too!

One out of five Canadians will experience a mental disorder during their lifetime. Mental illness, including Obsessive Compulsive Disorder (OCD), has traditionally been surrounded by misunderstanding, fear, and stigma. Stigma towards people with a mental illness has a detrimental effect on their ability to obtain services, their recovery, the type of treatment and support they receive, and their acceptance in the community. The stigma associated with all forms of mental illness is strong but generally increases the more an individual's behavior differs from that of the 'norm'. It is not only people with a mental illness who experience discrimination and stigma. Rejection of people with mental illness inevitably spills over to family members.

Individuals with mental illness and their families may try to hide the illness. They make excuses for Aunt Sally or a grandson. They fear, for good reason, that they will be ridiculed, whispered about, even shunned if they seek help. They believe- and sadly too often they are correct in their belief-that spouses, friends, children, or employers may abandon them, or that there will be no opportunities for future marriage or employment.

The distress associated with having a family member with a mental illness may lead to feelings of guilt, anger or shame. Acknowledging these feelings is the first step towards resolving them. It is important to understand that neither you nor the person with the mental illness are to blame for it.

There are so many irrational fears and wrong and hurtful ideas about mental illness.

### **Disclosing a Mental Illness to Your Employer**

Disclose or Not Disclose?

Whether or not to disclose a disability to an employer is a very personal decision. Reasons for disclosing vary.

Some people disclose because they need accommodations, others because they

want to educate people about their condition, and still others disclose because they do not want to feel like they are hiding something. Whatever the reason, disclosure can be a big step emotionally and should be thought through carefully. It will be helpful if, before disclosure, an employee understands the demands of the job, determines what he needs in terms of accommodations, and knows his own limitations.

There are certainly risks associated with telling an employer about one's disability. An employee may suffer some stigma and discrimination either from supervisors or co-workers although it is not legal. One way to minimize risk is to assess the track record of the company and its management. Know what an employer's history is with other employees who have disabilities in terms of accommodating their needs, respecting their privacy, handling discrimination and measuring attitudes towards employees after disclosure. Disclosure can be made at any time, so the decision to do so can wait until an employee feels comfortable in the workplace or until a reasonable accommodation becomes necessary. It is advisable, however, to alert supervisors to problems before they get out of hand. If you decide to disclose you should determine how specific you want to be about your illness and provide additional information accordingly:

- very general: refer to a medical condition or an illness.
- a little more specific: say that you have a chemical imbalance, a neurological problem, a brain disorder, or difficulty with stress.
- mention mental illness specifically: mental illness, a psychiatric disorder, or a mental disability.
- give your exact diagnosis: clinical depression, panic disorder, obsessive-compulsive disorder, etc.

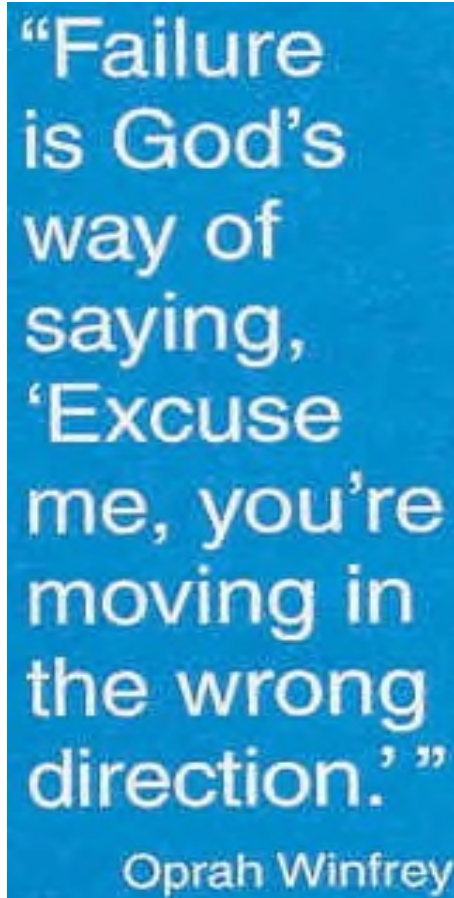
### **Stigma**

Disclosing a psychiatric disorder is such a difficult decision because of the stigma associated with mental illness. Defined as a mark of shame, disgrace or disapproval, stigma inflames misconceptions about people with anxiety disorders and other mental conditions.

They can be viewed as weak-willed, having a character flaw, or worse-being "crazy," incompetent, or even violent.

The key weapons to combat stigma in the workplace are education and understanding what your rights are under the law.

They often seem unable to see mental illness for what it is, the mental expression of physical illness. Myths and misconceptions about the causation, course, and treatment of mental illness unfortunately are found everywhere.



### **The effects of mental illness on brothers and sisters:**

Mental illness can lead to a variety of emotional effects for brothers and sisters of the affected person. For example, they may feel:

- confusion about their sibling's changed behavior
- embarrassment about being in the affected person's company
- jealous of their parent's attention
- resentment about not being like their peers
- fear of developing the mental illness

### **Effects of mental illness on spouses and parents:**

-Rejection by family, friends, and employers leading to isolation and depres-

sion

- misunderstanding of mental illness leading to misconceptions and negative stereotypes
- loss of employment due to care-giving duties of a family member with a mental illness.
- Feeling overwhelmed in trying to understand the nature of the illness and treatment considerations.
- Giving up personal interests and pleasurable activities to care for the family member with a mental illness.
- Discord within the family unit when all do not accept the diagnosis and treatment
- Feelings of guilt and shame as they may have caused the mental illness.
- Feeling of loss about future dreams and ambitions.

Effects of mental illness on persons suffering from OCD and other mental illness:

- Often rejected by friends, relatives, neighbors and employers leading to aggravated feelings of rejection, loneliness and depression;
- Often denied equal participation in family life, normal social networks, and productive employment;
- Stigma has a detrimental effect on a mentally ill person's recovery, ability to find access to services, the type of treatment and level of support received and acceptance in the community;
- Rejection of people with mental illness also affects the family and caretakers of the mentally ill person and leads to isolation and humiliation;
- major causes of stigma associated with mental illness are the myths, misconceptions surrounding mental illness held by many people in the community

### **The stigma of mental illness can be reduced by:**

- Openly talking about mental illness in the community
- Providing accurate information on the causes, prevalence, course and effects of mental illness;
- Countering the negative stereotypes and misconceptions surrounding mental illness
- Providing support and treatment services that enable persons suffering from a mental illness to participate in community life;
- Enforcing legislation whose purpose is

to reduce discrimination in the workplace, in access to health and social community services

-Joining a support group to help deal with issues relating to the mental illness



## Volunteer In Focus

**Dave S.**

Dave came to us in December of 2005, he offered his time and knowledge to help our association in anyway that he could, since then Dave has been an extremely large asset to us here. He is here five days a week and is very kind, compassionate, and knowledgeable towards our clients and always gives a hundred and ten percent. Dave has a gift to see the best in everyone and always tries to make a positive out of a negative. Dave has the ability to cover any task that comes before him, he is great on the phones doing peer support. Dave is so dedicated to the people we help that he NEVER lets us close the office early even on a Friday! Thank you for all that you do and continue to do for MDAM you are invaluable.

Erin Gierek  
Coordinator of Volunteers/Outreach Worker

Hope is a state of mind, not of the world. Hope, in this deep and powerful sense, is not the same as joy that things are going well, or willingness to invest in enterprises that are obviously heading for success, but rather an ability to work for something because it is good.

- Vaclav Havel

## How Food Effects Mood

Everyone can benefit from understanding how food affects our mood .

"Let food be thy medicine and medicine be thy food," wrote the eminent Greek physician Hippocrates during the dawn of western medicine. We took his advice. Thousands of years later we use chicken soup to nourish our bodies, yet we question whether the right food choices can heal our mind. Some people are sure.

Inspired by personal experience, Amanda Geary founded the UK's Food and Mood Project in 1998. "I started the Food and Mood Project following from my own experience of recovery from depression where I noticed that what I was eating was having an effect on my emotional and mental health," says Geary. "In 1998 I won an award from Mind, the UK's leading mental health charity, to start the Project and help others to explore the links between what we eat and how we feel."

The Food and Mood Project is extensive. Geary's fascination with the relationship between nutrition and mind has prompted a website, [www.foodandmood.org](http://www.foodandmood.org), online support group, handbook, posters and large-scale survey. This recruited 200 individuals between the ages of 26 and 55 who lived in London or SE England. The results were substantial. Says Geary: "From the Food and Mood Survey results, those using this form of self-help found that cutting down or avoiding potential food stressors like sugar (80%), caffeine (79%), alcohol (55%) and chocolate (53%) and having more food supporters like water (80%), vegetables (78%), fruit (72%) and oil rich fish (52%) had the most beneficial effects on mental health."

### Moderating Stress Foods

For many the knowledge of food and mood is restricted to word of mouth and stigma. Consider turkey's apparent sleep inducing power. Many Thanksgiving dinners end with a nap or at the very least, droopy eyelids. Though the tryptophan in turkey seems to be the culprit, our sluggishness is really due to overeat-

ing. Though tryptophan does elevate the brain's sleep-inducing serotonin, it does so in very small amounts. The true cause? An overflow of mashed potatoes, stuffing, pie and alcohol which shifts blood away from the brain and down to the digestive tract.

The connection between food and mood is not black and white. Some foods are both healing and stressful. Caffeine and chocolate provide initial exhilaration. Caffeine improves focus and stimulates motivation. Pleasant, until the crash that follows. Chocolate also gives us mixed results. It is laden with sugar and fat, yet full of cell protecting, disease killing antioxidants. These are called flavanols. Two studies published in the Lancet suggest that these flavanols decrease LDL cholesterol, the "bad" type of cholesterol responsible for clogging arteries. Pure cocoa has the highest levels of flavanols while milk chocolate has the lowest.

The chemical responsible for chocolate's uplifting effect is called phenylethylamine (phenyl-ethyl-amine). This is an essential amino acid, which is a component of protein. So though phenylethylamine is scary to pronounce it's nothing to be afraid of, especially for expectant mothers.

An April 2004 article in New Scientist reports that stressed mothers who ate chocolate regularly throughout their pregnancy had happier babies. Two groups of women were studied before and after delivery, one group ate chocolate and the other abstained. Six months after delivery both groups were asked to rate their infant's behavior. The chocolate-crunching mothers reported having babies that smiled and laughed more. But before you stock up on Cadbury's bars, remember that tomatoes and fruit have as much or more of this happy chemical, and are far healthier. The key to gobbling benefits and not havoc is moderation. Most experts recommend 3-4 servings a week, ideally as a substitute for your regular dessert.

### Jolts and Jitters

For many of us a jolt of java provides a more upbeat morning. This is an illusion. All our morning brew really does is stop the withdrawal symptoms that started in our sleep. Even one cup a day drinkers will experience these as headache, irritability, lack of focus and fatigue. For heavier users caffeine withdrawal can be crazy making, according

to the October 2004 issue of Psychopharmacology. After review of 66 studies spanning over 170 years, it was concluded that the more severe forms of caffeine withdrawal merit classification as a psychiatric disorder. So should we stay on the brew for life to avoid this? Not so. This only happens to one in eight people, with the disorder peaking between days two and nine. Even for these unfortunate folks this short-term madness is worth it. The benefits of being caffeine free include improved sleep and increased energy.

Caffeine is sneaky. It worms its way into painkillers, colas, tea and chocolate. The healthiest source of caffeine is tea, which has half that of brewed coffee. BBC Health estimates that the average UK resident will consume 80,000 cups of tea during their life. Despite its caffeine this is a boon rather than a bother. Though much research focuses on the health benefits of green tea, in many ways black tea is comparable. English Breakfast and Earl Grey are examples of black tea. Both types are filled with antioxidants. These protect our cells and have been studied for their cancer preventing effects.

A 1998 study at the Chinese Academy of Preventative Medicine in Beijing found that people at risk for mouth cancer who were given black tea for six months were slower to actually develop the disease than those who abstained. More recently the United States Department of Agriculture tested the effect of black tea on cholesterol. The six-week study tested healthy individuals who drank five cups of black tea daily and an equal amount that unknowingly drank fake tea. The results, published in the 2003 issue of The Journal of Nutrition, showed that the tea drinker's LDL cholesterol dropped between 7 and 11 percent.

### Carb Highs and Lows

We can't avoid sugar. Even without a drop of honey, molasses, syrup and sugar cubes, this sweet delight finds us. Fruit sugar, or fructose, affects our bodies in a similar way as table sugar. So do carbohydrates. Diabetics and those familiar with Atkins are aware of the glycaemic index or GI. Put simply, this measures how quickly a food can raise our blood sugar. Since blood sugar triggers the release of insulin diabetics are constantly watching their carbs. Yet we without this or other insulin-disorders still endure carbohydrate confusion. Since insulin

drives blood sugar into the cells and prevents fat breakdown in the body, high carbohydrate, or high GI foods are considered fattening. Yet carbohydrates are the brain's main source of energy. What do we do?

The trick to managing carbohydrates is planning. Eating a variety of low GI foods through the day improves mood, heightens energy and reduces weight. The latter is a result of helping us feel fuller for longer. Foods scoring below 50 on the glycaemic index release their sugars slowly, giving us vigor instead fatigue. Alternately, we can reduce the impact of a high GI food by eating it in combination with healthy low GI foods and protein. We can also eat more wholegrain breads. These slow down carbohydrate digestion. Preliminary studies show that the Omega-3 fatty acids from fish have the same effect. Slower digestion has many benefits.

Stable blood sugar helps us avoid those not-so-sweet lows after a sugar high. Though carbohydrates initially boost our mood by activating the feel-good brain chemical serotonin, they produce a quick and shocking crash. The dramatic lowering of serotonin can cause sleepiness, hostility and depression. The latter is most extreme. For proof of the relationship between depression and blood sugar, we need only to ask Diabetes UK. "Research indicates a direct link between people with mental health problems and diabetes. People with diabetes are twice as likely to become depressed," states Penny Williams, care advisor for Diabetes UK. This depression often results in changing behavior including alterations in diet. With less attention to sugar levels the depression worsens. It's a sad spiral. Says Williams: "We encourage people with diabetes to manage their condition with a healthy diet and life-

## How much should you eat?

Your hands can be very useful in estimating appropriate portions. They're always with you, and they're always the same size!

When planning a meal, the Canadian Diabetes Association suggests using these portion sizes as a guide:

**Fruits, Grains & Starches:** Choose an amount up to the size of your fist.



**Meat & Alternatives:** Choose an amount the size of the palm of your hand and the thickness of your little finger.



**Vegetables:** Choose as much as you can hold in both hands. Choose low-carbohydrate vegetables (e.g. green or yellow beans, broccoli, lettuce).



**Fat:** Limit fat to an amount the size of the tip of your thumb.



**Milk & Alternatives:** Drink up to 250ml (8 oz) of low-fat milk with a meal.

Adapted from the Canadian Diabetes Association's *Just the Basics: Tips for Healthy Eating, Diabetes Prevention and Management Guide*, August 2005

style. For people with mental illness, making the necessary lifestyle changes can be hard."

### Protein Perky

Protein is far less controversial than carbs. The right amount of protein at the right time is the way to stay upbeat and active. Protein is composed of many amino acids. Though ideally we should fill our brain with all of them, the one crucial one for energy is called tyrosine. Tyrosine is needed for the production of dopamine and norepinephrine. These help us keep focused, energized and motivated. Tyrosine effects our mood in multiple ways. By keeping our thyroid gland and its hormones active it helps regulate metabolism. Through this our stamina and mental clarity improve. Tyrosine is found in most proteins, but the best sources are sunflower seeds, beans, bananas, almonds, fish, eggs, soy products and dairy. If you "focus" you'll find that the effects of eating protein peak 2-3 hours after eating and are strongest when eaten alone.

Before concerns about contamination, fish was regarded as one of the healthiest sources of protein. Why? Herring, mackerel, sardines, tuna and salmon are rich in omega-3s. These are essential fatty acids (EFA's). Though we call these acids "fatty" they do not increase how many stone we are. However, EFA's will elevate our mood and increase emotional stability. 22 percent of the people surveyed by The Food and Mood Project reported that an EFA supplement "definitely helped" emotional or mental health. This is more than hearsay. Researchers began investigating the ability of omega-3's to effect mood after they noticed that depression is common in people with heart disease, and that low levels of omega 3's are found in both groups.

More support for fish emerged at the 2004 meeting of the International Society for the Study of Fatty Acids and Lipids congress in Brighton. Omega 3's are called such because there are three different varieties. BBC News, who covered the gathering, reports member Dr. Ray Rice as saying: "People who eat a lot of fish are generally healthier, mentally and physically, than non-fish eaters." How much is enough? According to the Food Standards Agency, on average, people in the UK eat a third of a portion (about 47g) of oily fish a week. They recommend two servings of fish a

week, with one being oily.

Vegetarians will cheer to know that fish isn't the only good source of omega 3's. Dark leafy green vegetables, flaxseed, walnuts and seaweed all contain linolenic acid that the body converts to the same type of omega-3 found in fish.

### Making Changes Last

It can feel difficult to turn from comfort foods to controlled eating. Plus if we eliminate too much to fast we risk losing crucial nutrition. So what do we do?

"The approach I describe in The Food and Mood Handbook is about making step-by-step changes to what you eat, observing and assessing the effects, and then deciding for yourself what changes are appropriate to implement for the longer term," reveals Geary. "Although respondents views were mixed on whether these changes were easy or difficult to make, for many the tangible benefits made the effort worthwhile." Although changing our dietary habits can be tough it can be done. Ironically, having more food available may help.

Geary reports that "it is found that eating regular meals and snacks, not missing breakfast and being prepared by carrying snacks with you, were the best strategies for mentally health eating."

## Future Forms of Treatment: Mini Meditation

Whenever you find yourself under pressure during the day, take a couple of minutes to do the following abbreviated, three-step Mindfulness-Based Cognitive Therapy meditation, created by Zindel V. Segal, Ph.D.

### Step #1 Awareness

Bring yourself into the present moment by deliberately adopting an erect and dignified posture. If possible, close your eyes. Then ask, "What is my experience right now in thoughts, feelings, and bodily sensations?" Acknowledge and register your experience, even if it is unwanted.

### Step #2 Gathering

Gently redirect full attention to breathing, to each breath in, and to each breath out, as they follow, one after the other

### Step #3 Expanding

Expand the field of your awareness around your breathing, so that it includes a sense of the body as a whole, your posture, and your facial expression.

Open your eyes and bring yourself back into the room. You'll feel more grounded as you go about your day. Repeat anytime you need to.

## 5th Annual Comedy Night

Saturday, October 28th

Burton Cummings

Theatre

364 Smith Street

Doors open at 6:30 pm,

show begins at 7:30 pm.

Tickets:

\$15 from MDAM

\$20 through Ticket Master

Support MDAM and have a hilarious time doing it!

For more information call

786-0987

### Worries

by: Winston Churchill

"When I look back on all these worries I remember the story of the old man who said on his deathbed that he had had a lot of trouble in his life, most of which never happened."

## Alternative Or Complimentary Therapies

### Integrative Medicine: Sorting Out The Terminology

Conventional medicine, alternative medicine, complementary medicine, integrative medicine... can you keep all the terms straight in your mind? Canadians today enjoy many choices in seeking health care treatment, but it's not easy to stay informed about all the options.

**Conventional medicine** (often also referred to as Western medicine) is the approach to health care that Canadians tend to be most familiar with. It is the type of medicine that medical doctors practice, and is well supported by the Canadian health care system.

**Alternative medicine** is the use of health care approaches to replace conventional medicine. These types of approaches include chiropractic, naturopathy, and homeopathy, among others. For example, this could mean using herbal products instead of prescription drugs, or visiting a homeopath instead of your family MD.

**Complementary medicine** is the use of non-conventional therapies (such as acupuncture, tai chi, yoga, or aromatherapy) in addition to conventional medicine. An example could be an acupuncture treatment used in addition to taking a pain reliever, or meditation or yoga techniques used in conjunction with anti-anxiety medications.

**Integrative medicine** is the integrated use of conventional and complementary practices. It makes use of the best available evidence of both approaches to healing. One of its important characteristics is that it considers the mind-body-spirit connection within the patient and regards the patient as a whole.

#### Mind-body techniques

The connection between the mind and the body is not fully understood, but several techniques that harness the power of the mind over the body have

been shown to help people ease their symptoms and rely less on medications. These techniques include:

- **biofeedback** - a therapy that involves learning to control involuntary body responses such as heart rate, brain activity, or blood pressure
- **yoga** - not just a set of exercises but an entire philosophy of being with the goal of achieving peace of mind and of body (although many people today turn it to for the improved flexibility and reduction of stress it offers)
- **meditation** - another spiritual practice that many are discovering for the stress reduction its deep focus and breathing offers
- **hypnosis** - an altered state of consciousness brought about by a trained specialist to help change or differently control behavior, emotions, or the state of one's physical well-being.

## Resource Report

### On The Web

Here are some more web sites that may be of interest to those of us that suffer from a mood disorder or know someone with a mood disorder. Of particular interest to me, was the site: [www.mentalhealthworks.ca](http://www.mentalhealthworks.ca).

It's a Canadian site that has really good information on mental illness in the work place. It has two sections; one for employees and one for employers. I suggest checking out both.

[www.mentalhealthworks.ca](http://www.mentalhealthworks.ca)  
[www.depressioncentre.net](http://www.depressioncentre.net)  
[www.canmat.org](http://www.canmat.org)  
[www.mentalhealth.com](http://www.mentalhealth.com)  
[www.bipolarworld.net](http://www.bipolarworld.net)  
[www.obad.ca](http://www.obad.ca)  
[www.heretohelp.bc.ca](http://www.heretohelp.bc.ca)

[www.foodandmood.org](http://www.foodandmood.org)  
[www.mherc.mb.ca](http://www.mherc.mb.ca)

[www.psychdirect.com](http://www.psychdirect.com)  
[www.medbroadcast.com](http://www.medbroadcast.com)  
[www.medicinenet.com](http://www.medicinenet.com)  
[www.kidshavestresstoo.org](http://www.kidshavestresstoo.org)  
[www.camh.net](http://www.camh.net)  
[www.cpa.ca](http://www.cpa.ca)  
[www.hc-sc.gc.ca](http://www.hc-sc.gc.ca)  
[www.ccacc.ca](http://www.ccacc.ca)  
[www.canacad.org](http://www.canacad.org)  
[www.cahperd.ca](http://www.cahperd.ca)  
[www.ccsa.ca](http://www.ccsa.ca)  
[www.canadian-health-network.ca](http://www.canadian-health-network.ca)  
[www.depnet.ca](http://www.depnet.ca)

(MDAM does not endorse any of the above web sites; they are simply presented as a suggestion of the many web sites available).

Compiled by Darryl R.

## Bipolar

### Ten Mistakes People Who Have Bipolar Disorder Make

by David Oliver

Since I started working on bipolar education, I've had thousands of people subscribe to my mailing list, I've received at least 1000 questions and comments about the disorder, I've spoken to hundreds of people over the phone, and I've attended dozens of meetings about bipolar. As a result of all that communication, I've been able to come up with a list of the ten biggest mistakes that people with bipolar disorder make. Keep in mind that the following list is not in any particular order.

#### 1. They don't realize the importance of money.

Money makes the world go around, especially if you have bipolar disorder. The less money you have, the more limited your options are when it comes to doctors, treatments, hospitals, etc. Unfortunately, most people with bipolar disorder don't realize that they need to watch their money carefully and plan for the future. They have to take steps to protect their finances during an episode and to not get cheated by erroneous medical bills.

**2. They don't take their medicine properly.** Some people with bipolar disorder don't take their medications regularly, so they are usually in and out of episodes. Other people actually go off their medicine to make sure it was working or to determine if they are really bipolar. Both of these are huge mistakes. You should always take your medicine as the doctor directs. If there are problems with the medicine or you're having side effects, then talk to your doctor.

**3. They don't use the free resources available.** There are tons of FREE resources available that will help you manage your illness and become more stable, but very few people with bipolar disorder actually use them. You can contact mental health organizations in your area to find out what's available, then make use of them.

**4. They don't accept help.** Individuals with bipolar disorder are often very stubborn when it comes to accepting help, even from their friends and loved ones. Unfortunately, the disorder simply can't be managed without outside assistance. Every bipolar person needs at least one individual they can trust to protect their interests and look out for them during an episode.

**5. They don't plan for future episodes.** When I started planning for my mom's future episodes, people in my family said I was being too pessimistic. They're wrong. I was being realistic. Bipolar disorder doesn't go away, so you need to have a plan in place that will make those future episodes easier for you and your loved ones to deal with.

**6. They don't have a support team.** If you have bipolar disorder, you can't do everything on your own. You need the help of friends and family members and that's why it's critical that you put together a support team of people you trust the most.

**7. They don't take care of their physical health.** When someone suffers from a mental illness, it can become that person's primary focus and he or she often loses sight of other health issues. Eating healthy and exercising will not only keep you in better shape but may also prevent some of the triggers that led to bipolar episodes.

**8. They don't apologize after an episode.** During episodes, you may say or do hurtful things to the people you care about. If you don't apologize after an episode, you may lose that person from your life forever. Don't let the disorder rob you of your closest relationships.

**9. They don't listen to others about episodes.** In most cases, your friends and loved ones will be able to see the signs of an upcoming episode while it's still in its initial stages. They may ask you about them or suggest that you contact your doctor. If they do, you should listen to them. Bipolar disorder clouds reality, so you can't always see how things really are.

**10. They don't realize there's nothing to be ashamed of with the disorder.** You have nothing to be ashamed of when it comes to bipolar disorder. It's also not all in your head. Research has shown that bipolar disorder is a real condition that is caused by an imbalance of brain chemicals. Instead of feeling bad about what you can't change, you should be working to educate the rest of the world so that they'll change their perception of the disorder.

Life can only be understood backwards; but it must be lived forwards.  
- Soren Kierkegaard



Hope is like a bird that senses the dawn and carefully starts to sing while it is still dark.

## Notes From The Editor

Many thanks to those who have renewed their memberships and welcome to our new members! If you find errors on your mailing label, please contact the office at

We are grateful for the donations received in memory of:

Emma Spitznagel  
Norman S. Martin  
Gary White  
Buster Hunter



## Volunteer Reception Position

MDAM is looking for friendly, dependable individuals for our front reception area.

Duties will include directing clients to appropriate organizations and assisting with some office duties, if desired.

The positions are part-time.

Please contact Erin at 786-0987 for an application form, if you have any questions, or if additional information is required.

We look forward to hearing from you!

The grand essentials of happiness are: something to do, something to love, and something to hope for.  
- Allan K. Chalmers

**Provincial Office**

4 Fort Street, Suite 100  
Winnipeg MB  
R3C 1C4

Phone: (204) 786-0987  
Toll-Free:  
1-800-263-1460

**Westman Outreach Office**

M-435 Rosser Ave.  
Brandon MB  
R7A 6S2

Phone/Fax:  
(204) 725-8555

**Central Outreach Office**

Eden Mental Health  
Centre  
Box 296, 309 Main St.  
Winkler MB  
R6W 4A8

Phone: (204) 325-8206

**Eastman Outreach Office**

#3 – 227 Main St.  
Steinbach MB  
R5G 1Y7

Phone: (204) 326-3623  
Fax: (204) 346-0423

**Selkirk Mental Health Centre**

Box 9600  
825 Manitoba Ave.  
Selkirk MB  
R1A 2B5

Phone: (204) 482-3810

# MDAM

Helping Others Help  
Themselves!

**PsychHealth Outreach Office**

PZ-395 PsychHealth Centre  
771 Bannatyne Ave.  
Winnipeg MB  
R3E 3N4

Phone: (204) 787-3220

**Norman Outreach Office**

Box 3754  
The Pas MB  
R9A 1S4

Phone: (204) 623-7346  
Fax: (204) 623-5528

**Burntwood Outreach Office**

43 Fox Bay  
Thompson MB  
R8N 1N2

Phone: (204) 677-6050

**Interlake Outreach Office**

Box 1004  
Gimli MB  
R0C 1B0

Phone: (204) 642-7886  
Fax: (204) 642-7877

**Parkland Outreach Office**

Dauphin Regional  
Health Centre  
Room 446-448  
625 3<sup>rd</sup> St. S.W.  
Dauphin MB  
R7N 1R7

Phone: (204) 622-4104

## Membership Renewal / Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

New: \_\_\_\_\_ Renewal: \_\_\_\_\_

(Circle One) Adult / Family / Student / Senior

**I agree to abide by the bylaws of the association and to maintain confidentiality in respect to all personal information of any member of the association.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return to:**  
100– 4 Fort Street. Winnipeg, MB R3C 1C4

**Membership Fees:**

Student \$15.00 / year  
Senior \$20.00 / year  
Adult \$25.00 / year  
Family \$35.00 / year

**Why become a member of the Mood Disorders Association of Manitoba?**

If you want to be part of an organization that is consumer-driven and believes that everyone can help themselves in their own recovery, you should belong!

If you believe in the work MDAM is doing, please show your support through membership.