Thank you to all who attended our latest support group on Wednesday August 29, 2012 on **Depression in Chronic Illness** with Dr. Carole Bishop, our clinic psychologist.

**What do psychologists do?**

Psychologists have the professional training and clinical skills to help people learn to cope more effectively with life issues and mental health problems. Some people may talk to a psychologist because they have felt depressed, angry or anxious for a long time. Or, they want help for a chronic condition that is interfering with their lives or physical health. Others may have short-term problems they want help navigating, such as feeling overwhelmed by a new job or grieving the death of a family member. Psychologists can help people learn to cope with stressful situations, overcome addictions, manage their chronic illnesses and break past the barriers that keep them from reaching their goals. Psychologists hear what people are saying and then help to give a different point of view and a fresh perspective.

Carole began the session by asking the group what questions and comments they had about anxiety and depression in chronic illness:

- How is anxiety treated?
- Is it normal to have on and off problems with anxiety and depression?
- How do I cope with the symptoms of anxiety like heart palpitations and nausea that happen for no reason?
- My hands cramp when I have anxiety attacks. Being on Paxil really helps me.
• Is there a pattern to depression? Are there triggers I’m not recognizing that set it off?
• What is the impact of anxiety and depression on relationships?
• What is depression about? Where does it come from?

Here is a summary of the presentation that followed:

Sometimes the ‘old standbys’ like exercise, eating well and getting a good night’s sleep just don’t cut it to help with depression and anxiety.

As far as mood, some people always have a great mood (e.g. Robin Williams!) and some people are severely down in the dumps, but most people fluctuate somewhere in the middle:

Situational depression is when an event (ie situation) happens such as a death of a loved one, a diagnosis, a break in a relationship, that causes a person to plummet down out of the in between zone of an up and down mood.

The normal course of depression is about six months. Fatigue and chronic illness however, can make depression worse and last longer. Depression changes the chemistry in the brain. People with metabolic disease have a predisposition to depression and anxiety.

Anti-depressants are not for everyone but can help to put you back in the zone where you can cope better. Anti-depressants can also help with anxiety symptoms.

What do you think are the most difficult symptoms of depression?

Group members answered:

• Fatigue
• Feeling overwhelmed
• Frustration
• Impatience
• Anger
• Anxiety
• Hopelessness
• Low self-esteem

What is the hallmark of depression?
Low mood: crying, unhappy, super negative or critical, feeling worthless, feeling hopeless, “life’s not worth living”, wonder what the use is of going on

Anxiety and depression are really common in mitochondrial disease:
- life is harder for those with mito
- brain chemistry of people with mito causes a predisposition for depression

Mito makes the above diagram "go to the hotter burner" on the stove. So how do you move it to the back burner of the stove?

What to do when you feel depressed or anxious...

- **Visit your family doctor**
  - consider medication to get you back in the zone of a healthy mood
  - if you choose to take medications, be a good consumer:
    - decide whether or not the medication works for you based on side effects and effectiveness. Note that many medications take up to a month to be of benefit.

- **Increase your activity level**
-going back to the circle diagram, activity increases your mood by decreasing anxiety, pain and making you sleep better

**Group member ideas on activities:**

- Walking helps
- Yoga for beginners, not power or hot yoga (one person has a yoga instructor come to her home to avoid the energy expenditure of going out to a class)
- Wii games distract from pain and fatigue and keeps me moving
- Sewing/crafts
- Pacing activities throughout the day to save energy
- Working
- Computer games
- Reading
- Pet play
- Community activities
- Church activities
- Family relationships
- Visits with friends
- Being OK with saying no to activities or overdoing it
- Using a walker/scooter/wheelchair to save energy

**Cognitive Behavioral Therapy (CBT)**

A type of therapy that focuses on how you *think your thoughts* (the cognitive side) and on *what you do* (the behavioral side) and has the goal of improving *how you feel*.

**Feelings expressed by group members**

- I wish I could leave my body
- I want to escape
- I want to pray
- I feel jealous
- I'm frustrated with my body
- I was so active when I was young and now I can't jog with my family.
Thoughts expressed by group members

- I wish I could
- It’s not fair
- I’ll never be able to do things
- Why me
- I’m scared
- What if

We all tend to think in black and white terms and have all or nothing thinking. “This is always going to be bad!” “I’m never going to feel better”. One thing that CBT endorses is to give yourself a positive alternative thought such as, “Yes, I’m having a bad day, but tomorrow will be better”. It’s a way of retraining your mind.

Make a distraction list of things to do when you’re thinking these thoughts, like watch TV, play a computer game, or read.

CBT also endorses practicing mindfulness. Here is an excellent video to teach you about the practice of sensory mindfulness, something that is easy to learn and do:

http://www.youtube.com/watch?v=w4nM_XAEjJg

If you are interested in learning more about CBT, we can help you find a psychologist in your area. You may also want to check out this website: http://www.thehappinesstrap.com/ about the book The Happiness Trap: Stop Struggling Start Living, by Dr. Russ Harris. You can download the first chapter of the book to see if it is of interest to you.

We cannot control the direction of the wind, but we can adjust our sails—Jimmy Dean

At the end of the session, we asked group members about ideas for future sessions and got the answers of update on the vitamin cocktail and another
session on the Wii….does that mean a cocktail party with Wii games? Sounds fun! One idea we had was a session on future planning, including estate, end of life planning and planning for adult dependent children. Please let us know if this topic would be of interest to you.

Please feel free to send us your ideas. We are also looking into ways of bringing the support groups to you if you’re not able to join us in person.

At our next support group, we are hoping to have a certified yoga instructor come to lead us through some adapted poses. Wear comfortable, loose fitting clothing and come prepared to learn a great way to relax and re-energize! Since this will be our last meeting of 2012, we will have some holiday goodies as well!

When: Thursday November 29 2012 from 11 am-1 pm

Where: Room 4115, Diamond Health Care Centre

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