

Friends For Mental Health

FRIENDLY LINK

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**BILINGUAL ASSOCIATION OF FAMILIES AND FRIENDS OF
PEOPLE WITH A MENTAL ILLNESS (WEST ISLAND)**



Interactions Between Medications, Watch Out! By Brigitte Boulard, Summer student

Many people suffering from a mental illness have to take psychiatric medication to reduce their symptoms. When this happens, the psychiatrist works in collaboration with the patient to find the point of equilibrium between the therapeutic benefits of the medication, i.e. symptom reduction, and its secondary effects. When this equilibrium is reached, the person will be able to tolerate the medication and be on their way towards recovery.

Most of you know that this equilibrium can take time and many tries before it is reached. However, did you know that every addition of a new medication, psychiatric or

other, as well as other substances such as drugs, alcohol and tobacco can disturb the equilibrium? Do you also know that 92% of the people taking atypical antipsychotic drugs (AAD) also take at least one more medication and that 67% take at least three more? Most of the time, these additional medications are antidepressants, cardiovascular medication, antiepileptic drugs, painkillers, antiolytics and medications controlling stomach acidity.

Indeed, many psychiatric medications such as AAD's can in-

teract with other medications and substances. The risk of interaction is very high with AAD's because it is metabolized in the liver like many other medications. Most of the time, it is the other substances that will affect the AAD's, and not the other way around. These interactions will cause a change in the amount of AAD's in the bloodstream, which will in turn cause either an increase in the secondary effects of the AAD or a decrease of its therapeutic effects. It is important to know that these interactions have the potential to be very dangerous since the result can be an uncontrolled increase of the strength of the medication despite the fact that the adminis-

Continued on page 2

What Happens After the Request for Psychiatric Evaluation (Court Order)? By Sheryl Bruce, Counselor

Many of our families at Friends for Mental Health have been referred by other organizations to fill a request for a psychiatric evaluation. They arrive at our office in distress

as the situation for their loved one has gone beyond safe, either for themselves, or their loved one. This is a desperate measure that has to be done

with urgency. Often times there is only enough time in that meeting to help the person deal with the emotions of filling out the form. We are also here to help with the emotions *after the request*. We are here to help you

Continued on page 5

Inside this issue:

Interactions Between Medications	1 & 2
What Happens After the Request for Psychiatric Evaluation (Court Order)?	1 & 5
Schedule of events	3
FMH News	4
The Psychology of Happiness	6
Registered Disability Savings Plan	7
Varia	8

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Interactions Between Medications (*Continued from front page*)

tered dose has not changed.

A good example of a dangerous interaction is that of erythromycin, an antibiotic and certain antipsychotics. When both are taken at the same time, the erythromycin will cause the concentration of the antipsychotic in the bloodstream to increase up to 70%. The result of this can be agitation, palpitations, and even an overdose.

The opposite effect, where the levels in the blood are decreased, can also happen. One common example of this is the interaction between AAD's such as olanzapine and tobacco. This interaction happens because some of the chemicals absorbed while smoking cigarettes will affect one of the natural enzymes of the liver. This will result in a reduction of up to 30% of the AAD in the bloodstream, so the medication will not be as effective as it could be. Another problem with this interaction arises when the smoker taking AAD's decides to quit smoking. Of course, this is a normal and healthy choice, however this change will cause an increase of up to 30% of the AAD in the bloodstream in a similar fashion as with erythromycin. If the dose is not adjusted throughout the quitting process, the effects of the interaction will possibly include dizziness and constipation. This could discourage the person from following their treatment and increase their risk of relapse.

If you or someone you love is taking different kinds of medication at the same time, we suggest that you;

- tell your doctor or psychiatrist if you smoke, how much, and keep him informed of any changes, especially if you want to stop smoking

- always ask your doctor or psychiatrist about possible interactions
- never add new medications or "natural" medicines without talking to your doctor or psychiatrist first
- make a list of all of the medications you are taking and their doses and show it to all of your doctors, psychiatrists or pharmacists
- get all of your prescriptions from the same pharmacy

Sources;

Comorbidité et polypharmacie. (2007). *Défi Schizophrénie*, 12, 6.

Lin, P.,J. Les interactions médicamenteuses : Quels sont les dangers réels?

Why can't you drink grapefruit juice if you take certain medications?

Did you know that grapefruit juice can interact with certain medications such as Valium, BusPar and Zoloft, as well as medications to reduce cholesterol and high blood pressure? This interaction happens in the intestines which is where many enzymes such as CYP3A do their work in the body. The role of CYP3A is to regulate the absorption of food and other substances in the blood, but it also prevents a portion of certain medications from being absorbed by partially destroying them. This is a normal event in the digestive system and is taken into account in the dosages of medication.

Grapefruit juice contains natural chemicals such as furanocoumarines that inhibit the action of CYP3A which will increase the concentration of certain medications in the bloodstream. It may seem as though this would be a great way to make our

medication work better, however the reality is that an uncontrolled increase of the medication in the blood can increase its secondary effects and actually become very dangerous!

Thus, if you like to drink grapefruit juice in the morning and are also taking a medication that may interact with it, talk about it to

Did you know that grapefruit juice can interact with certain medications such as Valium, BusPar and Zoloft, as well as medications to reduce cholesterol and high blood pressure?

your doctor! You can also change your habits by switching to orange juice or by asking your doctor if there is an equivalent medication that does not interact with grapefruit juice. For those of you who think you could not live without grapefruit juice, just be patient because many researchers are working on commercialising grapefruit juices without furanocoumarines!

Sources;

Grapefruit and medication, A cautionary note,. (November 2005) *Harvard Men's Health Watch*.

McCloskey, William W. PharmD, RPh; Zaiken, Kathy PharmD, RPh; Couris, R. Rebecca PhD, RPh. Clinically Significant Grapefruit Juice-Drug Interactions, (2008). *Nutrition Today*, 34,1.

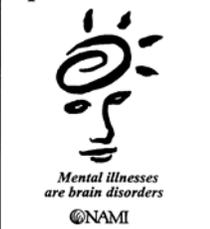
SCHEDULE OF EVENTS

At 750 Dawson Ave.

EVENTS FOR CAREGIVERS

NAMI COURSE FOR CAREGIVERS

Open Your Mind



The National Alliance for the Mentally Ill (NAMI) educational course entitled Family-to-Family will be given, in English, at Friends for Mental Health, West Island. The sessions will begin Monday, September 22nd, 2008, and will be held from 7:00-9:30 p.m. This **twelve** week course deals with mental illness and is geared towards family members whose relative suffers from a mental illness. This course is taught by specially trained family members and tackles such subjects as: critical periods of schizophrenia and bipolar disease, panic and obsessive-compulsive disorder, personality disorders, the biology of the brain, how to communicate with the ill person, recovery and the fight against stigmatization, etc. This workshop is designed for caregivers to help them share their family experiences and derive new ways of solving problems.

The number of participants is limited, so register quickly by calling us at (514) 636-6885.

BORDERLINE PERSONALITY DISORDER TRAINING (Free, In English)

For families who have a loved one with a borderline personality disorder. This psycho-educational program aims at informing families on the disorder, how it presents itself and its challenges and encourages families to put in place changes that will improve their quality of life as well as that of the ill person. Starting September.

Must register - Info and dates: (514) 636-6885

ART THERAPY WITH KARIN DEROUAUX

Mondays from 3:00pm to 5:00pm and 7:00-9:00 p.m.
Starts September 22nd please call for registration
before September 15th (514) 636-6885

MUSEUM OF FINE ARTS OUTING (free)

10:00-12:00 a.m.-1 hour visit and 1 hour workshop

Thursday, October 16: *Art and Music* -guided tour followed by a drawing workshop

- ◆ We will meet at 9:45 am at the corner of Crescent and Sherbrooke (in front of the new building)



EVENTS FOR CLIENTS

COMMUNITY SUPPERS -Fridays at 5:00 p.m. (\$3)

September 12: Bar-B-Q
October 10: Thanksgiving Turkey
November 14: Lasagna

R.S.V.P. Mary (514) 694-8344

Conference

LA MALADIE MENTALE: QUELS SONT VOS RECOURS LÉGAUX?

(Free & french with bilingual questions)

Wednesday, October 15th 2008 at 7:00 p.m. (buffet 6:30)

Speaker: Dr. Gilles Chamberland, psychiatrist, Sacré Coeur Hospital

At the Dorval Community Center Sarto Desnoyers

1335 Lakeshore Road, Dorval

Information (514) 636-6885

This conference is sponsored by



Friends Has a New Counselor

Friends has hired a new counselor, **Lucy Lu**, in the Family Support Program to replace Audrey Coulobme who left in May to pursue other career opportunities. We all wish her the best of success and would like to extend a heartfelt welcome to Lucy Lu.

Gen Steventon Award

It is with great pleasure that *Friends for Mental Health* presents the winner of the 2008 Gen Steventon Award to William Prickett, a volunteer who has made a significant contribution to *Friend's* mandate.

William has been a member of our association since 2002 and has been serving on our Board of Directors since 2006. He is a dynamic man full of ideas in regards to fundraising and volunteer participation in pursuit of advancing families' cause.

William has also been extremely implicated with the NAMI Family-to-Family educational program, teaching the 12 week course a total of 5 sessions!

He is very generous with his time, exceptionally dedicated and always available!

On behalf of everyone, especially our families, we would like to thank you from the bottom of our hearts.

Lucie Dicepola, (on the left) Executive Director, presents **William Prickett** with the Gen Steventon award.



New Board of Directors for 2008-2009



From left to right; Danielle Brisebois (Vice-President), Ginette Laurin, Maurice Morin (President), Doris Morgan (Treasurer), Sandra Markland (Secretary), William Prickett and Judy Grefard. Missing are Paule Bachand, Nadia Bretous, Ursula Kurz and Terry Webster.

Condolences

On behalf of everyone at Friends, we would like to extend our deepest sympathies to the family of **Robert Gentes** who passed away suddenly on August 7th, 2008.

In Memoriam

"Friends" offers sincere and heartfelt condolences to families who have lost a loved one.



One way of celebrating their memory is to make a donation to "Friends". Carol McCormick made a donation in memory of Sean Kennedy. "Friends" deeply thanks her for sup-

What Happens After the Request for Psychiatric Evaluation? *(Continued from front page)*

through the whole process.

Preparing the request for psychiatric evaluation can be stressful: Family members who take part in the court order can feel immensely guilty (or relieved). Let me assure you, if there had been an easier way you would have found it earlier. Most of our parents or loved ones spent much time pleading with their person to go to the doctor and/or to take their medications. There are even some parents or spouses not taking action soon enough because they misjudge the level of danger that they are in. In these cases there is some denial: They believe that their person would not hurt themselves or their children. The point is that when a person becomes unstable, or psychotic, things can happen that they would not have wanted: accidents happen after agitation, during stress or in moments of unreality. If your person has trouble controlling their emotions you and/or your family can be at risk.

Some spouses or parents, even if they know there is a possibility of danger, decide not to act because they are afraid of their person's anger or afraid for their person. In this case it is important to decide who gets priority. Some people would allow themselves to be hurt rather than let their person suffer in the short term or let them go through a difficult time at the hospital. In cases like this one must allow short term pains and suffering to gain long term benefits of safety and treatment. We know for certain that the longer a person with schizophrenia is left untreated their chances for regaining lost abilities is greatly reduced. One must also consider that the longer they are ill and unable to manage their life the more they start to develop secondary problems that will affect their self confidence and self worth and then they will become less productive.

So what happens after the request for psychiatric evaluation?

I have noted that family members have many reactions. Some family members are getting the needed break from the crisis of the illness. They try to take an emotional break. They are not interested in the extra effort of more appointments. Other families are so stressed out from the days and weeks before and the event of the pick up by the police that they can-

not process anymore new information. In all situations the family members need to deal with their loved one and the emotions surrounding the pickup. The experience with police or at the hospital may cause unpleasant emotions later. At the pick up, the police will discuss with your person the ways in which they can be taken to the hospital. Force is not their preferred option. Their job is to bring in the person to be evaluated. If your person resists the officers or the hospital staff they can be taken or held by force. Police and hospital staff do have the right to protect themselves from harm also. Some people are handcuffed or tied to gurneys and others have sat talking in the back of a cruiser for over 2 hours until they are helped to understand some element of the process.

In regards to the ill person, it can be traumatizing but it is not always. If it is traumatizing it is because of what they think is happening to them and it is based on their behaviours in response to the police or the nurses and doctors. The person with the illness needs to learn to accept that this was necessary to their health. Going to the Hospital can be a good thing a necessary thing. The most important message to give is that *you are sorry that it had to happen that way, but you could not live with the possible consequences if something had happened (to either of you or others).*

This is all well and good to say, however I realize we must back up a step and look at the process. When you go to the hospital to visit your person he or she may not have consented to medication or treatment. They may be detained and waiting for the next psychiatrist to evaluate them (after a maximum of 72 hours, a second psychiatrist evaluates them for dangerousity). At that point their state of mind might be angrier than you hoped. If this is

so, just visit briefly, try to say these few words above and leave telling them that you will be back. Perhaps you can find out if the person needs any clothing or toiletries. If they stay beyond 72 hours the doctors and nurses can persuade your person to take medication or they go to court and get a court order to keep them in hospital. In either case after the medication starts to take effect you can try to have a conversation about both your feelings of having to do a court order. Listening to their story first and their anger is important if it does not get drawn out. However it is important that you do not apologize for doing the request, **only apologize for the feelings that it caused.** You both can be sorry for how it happened- that is usually beyond your control. But you know that something had to happen and you were the only one left to do it. It might be easier to live with someone's anger than the guilt that is generated if you did not prevent a dangerous situation from happening. If you feel guilty please come to Friends and talk about it that is why we are here, to help you over the rough times.

If your person won't talk about it you can write it in a letter. Dr. Xavier Amador in "I'm not sick, I don't need help!!!" has two chapters devoted to these issues. He had to put his brother in the hospital several times; he learned the following: **Do-** acknowledge their feelings of betrayal, **Do-** ask for forgiveness, **Do -**explain why you felt you had to do what you did: and **Do -**be honest that you would do it again. Things he says you should not do: **Do not** deny his/her feelings of betrayal. **Do not** expect to be forgiven. **Do not** blame your loved one for what you felt you had to do. **Do not** be misleading about what you would do in the future.

I am not recommending that you apologize for what you did, but rather for how it made your loved one feel.

Some words of solace, most of our family members who filled a request for psychiatric evaluation have had their person thanking them in the end for helping them to regain control of their lives. It is seen as an important positive step to recovery.

THE PSYCHOLOGY OF HAPPINESS

Is it possible to measure happiness? Traditionally, psychology has focused on mental illness and people's problems. Positive psychology's interest lies in happy people. Does a recipe for happiness really exist?

The origins of positive psychology

Positive psychology is a branch of cognitive psychology based on the humanist ideology. It was developed in the late 1990's by Martin Seligman, psychologist and professor who started the Positive Psychology Center at the University of Pennsylvania.

Ten years ago 90% of scientific articles related to psychology focused on people's problems with the main goal of helping them go from -5 to 0 on a satisfaction scale of well-being. The arrival of positive psychology enabled individuals to surpass that scale from 0 to +5, not by focusing on the negatives of their lives, but rather on the positives and on by focusing on their strengths rather than on their weaknesses.

The six positive traits of human beings

The Character Strengths and Virtues. A Handbook and Classification, by Peterson and Seligman (2004) addresses a list of six positive traits (or characteristics) of human beings. These traits encourage happiness and well-being. What are these traits?

- Wisdom and knowledge: includes curiosity, creativity and open-mindedness.
- Courage: includes bravery, persistence, integrity and vitality.
- Humanity: includes love, kindness and social intelligence.
- Justice: which consists of citizenship, fairness and leadership.
- Temperance: these are strengths that protect against excess and includes forgiveness and mercy, humility, prudence and self control.
- Transcendence: includes appreciation of beauty and excellence, gratitude, hope, humour and spirituality.

The happiness formula

Optimistic psychologists have established a list of factors that are necessary to optimal

human functioning.

Above all, a good social network seems essential to happiness. The happiest people are most often in the company of other people. A professor at the University Warwick, in Great Britain, has even calculated the psychological impact of not having friends and has likened it to a loss of earnings of \$100 000.

Martin Seligman, father of positive psychology explains that simply pursuing happiness does not lead to lasting happiness. What creates happiness is being engaged in life whether it be in love, work or other. People need to feel that their actions have purpose and that they contribute to the well-being of others.

People that believe in a higher power also seem happier, as do individuals who have the habit of being kind and appreciating whatever their life may bring them.

Lastly, for those that get the chance to recognize and explore their strengths through their work, passions and in their daily lives draw great satisfaction.

And where does money fit in all of this? It seems that once a person reaches middle class status, a rise of income does not play a factor in their level of happiness. Intelligence and levels of education also don't influence the happiness equation. Even the weather doesn't have an effect! Beautiful people aren't happier either though married people are.

We also know that happiness is 50% genetic, which is to say that if your parents were happy you have a higher chance of being happy too. On the same note, the biggest predictor of future happiness is you present happiness. Research indicates that one year after having won the lottery, the winners had the same level of happiness as they had before having won. The same is true for individuals having suffered injuries after an accident.

Can we recondition ourselves to be happy?

Is it possible to improve our level of happiness? Yes it is! However in order to do so we need to recondition our brain. For ex-

ample we need to stop comparing ourselves and begin to focus on what is going well. Here are a few ways to improve your level of happiness:

- Be kind.
- Appreciate life's little pleasures.
- Have a mentor.
- Learn to forgive.
- Invest time and energy in families and friends.
- Take care of your body and health.
- Develop strategies to cope with stress and difficulties.

Simple exercises

Martin Seligman developed simple and effective exercises to improve well-being. The first consists of keeping a written journal in which each night you write three positive things that happened to you during your day and in which way you contributed to them.

The gratitude exercise is also very effective. You need to think of a person that you appreciate, write them a letter and send it to them. Studies have shown that that the satisfaction level in our lives improves thereafter and can have a lasting effect of up to one month.

Lastly, doing acts of altruism or kindness lends to happiness. Why? Because the act of giving makes us feel better about ourselves.

*Taken from
www.servicevie.com
Par Katia Mayrand*

www.servicevie.com/02sante/Dossier/La_psychologie/La_psychologie_du_bonheur_d.html

Registered Disability Savings Plan

What is the Registered Disability Savings Plan (RDSP)?

The Registered Disability Savings Plan is a new plan that will allow funds to be invested tax-free until withdrawal. It is intended to help parents and others to save for the long-term financial security of a child with a disability. The plan structure is similar to a Registered Education Savings Plan.

Contributions to an RDSP will be eligible for the new Canada Disability Savings Grant. There is also a new Canada Disability Savings Bond for individuals with lower family net incomes.

Who will be eligible for the Registered Disability Savings Plan (RDSP)?

Any person who is:

- Eligible for the Disability Tax Credit and is a Canadian resident; or
- A parent or legal representative of a person who is resident in Canada and is eligible for the Disability Tax Credit.

Who can contribute to a RDSP and how much?

Anyone can contribute to an RDSP; however, contributions are limited to a lifetime maximum of \$200,000 for one child, with no annual limit. Contributions will be permitted until the end of the year in which the child attains 59 years of age.

When will the Registered Disability Savings Plan (RDSP) come into effect?

Check Canadian Revenue Agency's Website often - all new forms, policies and guidelines will be posted as they become available.

What are the Canada Disability Savings Grant and the Canada Disability Savings Bond?

These are two programs designed to augment funds in the RDSP. The government will contribute, in the form of Canada Disability Savings Grants, funds equivalent to 100% to 300% of RDSP contributions, up to a maximum of \$3,500 depending on the net income of the beneficiary's family. The government will also contribute up to \$1,000 annually in Canada Disability Savings Bonds depending on the net income of the beneficiary's family.

Where can I get more information about the Registered Disability Savings Plan (RDSP)?

More information about this plan will be available shortly on the Canadian Revenue Agency's Web site at

www.cra-arc.gc.ca/agency/budget/2007/rdsp-e.html. In the meantime, please consult the Department of Finance's Budget 2007 documents for details.

Membership & Donation Form

Friends for Mental Health

750, Dawson Ave., Dorval, Quebec H9S 1X1
 Telephone: (514) 636-6885 Fax: (514) 636-2862
 E-Mail: asmfmh@qc.aira.com. Website - www.asmfmh.org

Membership entitles you to all our services: counseling, respite, conferences, meetings, workshops, support groups, the newsletter, etc. Your membership also entitles you to borrow books and videos. Your support gives you the family and us, the association, a voice to champion, promote and lobby on behalf of families facing mental health problems of a loved one and promote public awareness.

Date: _____
 Renewal New Member
 Name _____
 Address _____
 City _____
 Postal Code _____
 Telephone (home) _____ (work) _____
 E-mail _____

* Complimentary membership is available for those on a limited income.

MEMBERSHIP \$20

- MEMBER**
 I have a loved one with a mental illness
- AFFILIATED MEMBER**
 I have a mental illness
 Mental health worker or organization

DONATION

- I wish to support your work with a donation
 \$25 \$100
 \$50 \$500 Other _____
 In honour of In memory of

NAME AND ADDRESS

Membership (\$20 annual): \$ _____
 Donation: \$ _____
 Total amount enclosed: \$ _____

Would you like your name to be published on the "thank you" donor list yes no

* income tax receipts are only given for donations of \$20 or more

CORRESPONDENCE PREFERENCE

- English French

VOLUNTEER OPPORTUNITY

We're presently looking for volunteers to distribute informational material to clinics, CLSCs, police stations, etc., in the West Island. If interested, please call us at (514) 636-6885.

Please advise us of your e-mail address (if you already haven't) so that we can keep you informed of the latest news and events

THANK YOU!

We'd like to thank these organizations and Foundations for their support:

BMO Employee Charitable Foundation

City of Kirkland

CLD West Island

Dorval Oldtimers Hockey League



Friends would also like to thank Élisabeth Farkas for organizing a moving sale fundraiser as well as volunteers Nicole Farkas, Ann Howard, Leili Tahtolkasaei, Terry Webster and Diane Webster. Their fundraising efforts raised \$500 for Friends. Thank you!!!

Globe and Mail series "Breakdown: Canada's mental health crisis"

The Globe and Mail featured an in-depth series called "Breakdown: Canada's mental health crisis" last June 20-28, 2008 examining the devastating toll that mental illness has on people's lives, the workplace and Canada's economy.

This extensive series covered many different angles from the family perspective to the ill person's experience to possible solutions.

You can visit globeandmail.com/breakdown for a complete look at the articles.

Bravo to Canada Post!

Canada Post issued fundraiser stamp for mental health and launched the Canada Post Foundation for Mental Health

Ottawa June 18, 2008- Moya Greene, President of Canada Post, today announced the formation of the Canada Post Foundation for Mental Health. The Foundation, which will be administered by an independent board of experts in the area of mental health, will receive funds raised by Canada Post and its employees, as well as by others, and direct the money to where it will do the most good for those directly affected by mental illness. The Foundation's aim is to raise awareness of the effect mental illness has on the lives of Canadians and work to eliminate the stigma that surrounds it, while supporting patients and their families dealing with mental illness.

As a first step in its fundraising efforts, Canada Post also announced a new commemorative PERMANENT™ stamp supporting Mental Health. The stamp will carry a 10-cent donation, with that entire amount being directed to the Canada Post Foundation for Mental Health. The stamp will be issued on October 6, 2008 to coincide with Mental Illness Awareness Week (MIAW), sponsored by Canada Post.

