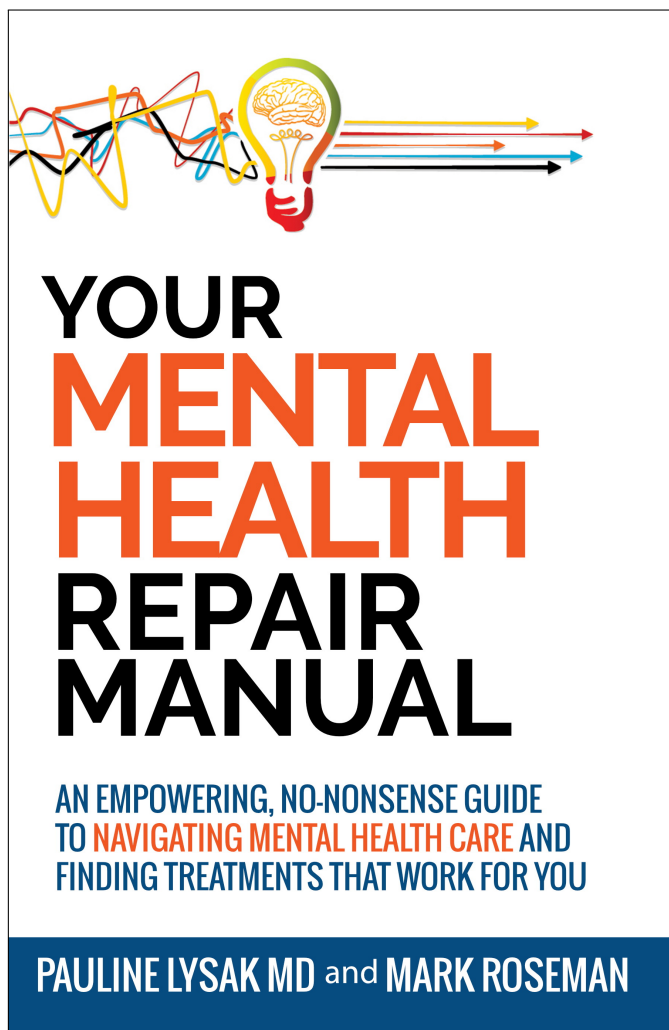


Book Excerpt



Thank you for downloading this *pre-release* excerpt of *Your Mental Health Repair Manual*.

The book will be available in November 2019.

This excerpt contains the preface and introduction chapters. A detailed table of contents follows to provide an overview of the topics covered in the book.

For further information, please visit mhnav.com.

Your Mental Health Repair Manual:
*An Empowering, No-Nonsense Guide to Navigating Mental Health Care and
Finding Treatments That Work for You*

Copyright © 2019 by Pauline Lysak and Mark Roseman

All rights reserved. This book or any portion thereof may not be reproduced or used in any manner whatsoever without the express written permission of the publisher except for the use of brief quotations in a book review.

First edition: November 2019

ISBN: 978-1-9991495-4-3 (paperback)

ISBN: 978-1-9991495-5-0 (ebook)

Late Afternoon Press
Victoria, BC, Canada
lateaft.com

Edited by Peggy Herring
Cover design by Hina Shakti

To contact the authors
visit mhnav.com

The information in this book is not intended as a substitute for the medical advice of physicians. It is general and intended to better inform readers of their health care. Consult a physician for matters relating to your health and any symptoms that may require diagnosis or medical attention.

Contents

Contents	vii
Preface	ix
1. Introduction	1
Part I: A Primer on Mental Illness	
2. What Is Mental Illness?	9
3. Diagnosing Mental Illness	15
4. The Mental Health System	21
Part II: Navigating Your Care	
5. Taking an Active Role	29
6. Get Prepared	35
7. Family and Friends	39
8. Working With Your Family Doctor	43
9. Describing Your Symptoms	55
10. Working the Waiting List	61
11. Mental Health Interviews	67
12. Difficult Encounters	75

13. Paging Dr. Google	81
14. Your Living Treatment Plan	89
15. Using Your Plan	99

Part III: Treatments

16. So Many Choices!	111
17. Just Enough Neuroscience	115
18. Physical Illness	121
19. Lab Investigations	127
20. Lifestyle Factors	133
21. Vitamins and Supplements	143
22. Talk Therapy	151
23. Finding a Therapist	159
24. The Role of Medications	167
25. Antidepressants	177
26. Other Medications	191
27. Medication Side Effects	201
28. Evolving Your Medication Regime	211
29. Looking Ahead	221

Appendices

A. Internet Resources	227
B. Talk Therapies	231
C. Medications	239
Notes	259
Index	273
Acknowledgements	281
About the Authors	283

Preface

You know the mental health system is screwed up when you need a book to help you find decent care.

Awareness campaigns make it seem so easy. All will be better if you talk to someone about your mental health concerns. Doesn't that imply that if you do ask for help, you do talk, that you'll actually get some help? Just take that first step, and the mental health system will take care of you.

If you're reading this, chances are you haven't found the help you've been searching for. You may be looking for your own care or you may be supporting a family member or friend. You may even be a healthcare worker trying to help your patient or client. You've talked. You've asked. Still no help. All is definitely not better.

Your expectation of finding compassionate or humane care has faded. And confidence that someone will be there to take charge of your care? Please. At this point, you may be even more dejected, hopeless, lost, frustrated, and confused than when you started.

You're not alone in feeling this way. The lofty assurances that you just need to ask for help don't match the reality of mental health care.

Too Many Questions, Not Enough Answers

Most people find mental illness and its treatment mysterious. Few know what good care even looks like. That's where this book comes in. We'll pull back the curtain, put an end to the mystery, and explain what good mental health care is all about. With this insight, you'll be able to find better care.

Here's a typical path through the system. Your mental health is impacting your education, work, self-care, or family relationships. Like many peo-

ple, you go to your family doctor for help. (If you're helping someone else, encouraging them to talk to their family doctor is also common.)

Your life, which seems to be falling apart, can't be fixed in the average 5- to 15-minute family doctor's appointment. Instead, your doctor prescribes an antidepressant and suggests some lifestyle changes, maybe provides a list of counsellors, the names of a few books or websites, and the local crisis line number. They might promise a referral to a psychiatrist. But don't get your hopes up, because the waiting list is six months long.

You leave your doctor's office and try to process what happened. If you're struggling to function, how are you supposed to wait around for half a year? And hope that the person you see can fix everything? You're confused and skeptical that a pill will help and overwhelmed just thinking about counselling. What do you do now?

Instead of a family doctor, you might start with a counsellor, psychologist, or another mental health professional. They might give you different options, but the gist of their response is pretty much the same.

If you had questions before, you still need answers to most of them:

- What's wrong with you?
- How are you supposed to know what kind of help you need?
- What are the treatment options? Why so many?
- How do you choose? What if you choose wrong?
- Why can't someone just tell you what to do?
- Where should you go? Who can help you?
- Why so many different opinions about what you should do?
- Will you end up stuck, going in circles, and not improving?

And that's if things go well. Some people who seek help are cut off and can't even share their concerns. Patients have told us that professionals answered their questions with, "there's nothing wrong with you," or "suck it up," or "I gave you a pill, what else do you want from me?"

You Can Do Better!

No large piles of money or quick fixes will address the structural flaws in the mental health system. When patients, their supports, and their healthcare providers don't know where to turn, it's a problem. When some family doctors recommend you Google local psychiatrists and cold call their offices to find one taking new patients, it's a problem. While stigma around mental

illness is also a problem, for millions whose mental illness dramatically affects their life, being aware of their illness is not their problem. Finding help is their problem.

As a result, making the most of the help you do receive is critical. You're certainly willing to put the effort in. You want to be informed and involved. But it's hard when you receive partial and conflicting information. You're trying to get a sense of what's going on and how to move forward. You need a foundation to make sense of your options, and it's not there.

We can't magically change the system to deliver instant, top-notch care to everyone for every ailment. We can show you how to make the best use of the system we do have. And in mental health, there are many things you can do to dramatically improve care. These aren't big secrets. But a fragmented mental health system makes them very hard to find. We'll help you bring it all together to produce these results:

- You'll better understand your illness and its treatments.
- You'll help your health providers deliver better care.
- You'll proactively contribute to your treatment plan and care.
- You'll avoid unnecessary delays and wasting time.
- You'll stop feeling so confused and hopeless.
- Ultimately, you'll have a better chance at becoming well more quickly.

And in the immortal words of author Douglas Adams, *don't panic!* You won't need to read this entire book cover-to-cover. We've made it easy to find what you need and skip parts you may not need now. You can learn the essentials or go deeper on some topics. We'll explain more in the first chapter.

Empowerment Is Key

One of us (Pauline) is a psychiatrist who has been practicing for about fifteen years, spanning three Canadian provinces (Ontario, Alberta, and British Columbia) and various practice settings (public and private hospitals, outpatient mental health clinics, working directly with family doctors, and private practice). The other (Mark) has run Pauline's front office for several years. Besides (or despite) working together every day, we're also married.

Firsthand we've seen countless patients who had to wait months or years to receive care. All the while, their quality of life deteriorated. We've seen waiting lists grow, options for care disappear, and fewer psychiatrists available to help more patients. We've had to tell people who could no longer hold a job or keep their family together that we couldn't help them. We've

seen newly pregnant women, worried about antidepressants in pregnancy, told to wait six months or longer for an appointment.

We've also heard from many people who waited a year or more to see a specialist. They were seen only once, too briefly to even tell their story, then given the wrong diagnosis or treatment. They were sometimes told what medication to take, unaware of the benefits, risks, or the existence of alternatives. Recommendations didn't help? Get back in line.

We've seen strain on the system, not only from a lack of resources. Sometimes resources were used inappropriately or unwisely. People who shouldn't have been sent to a psychiatrist were. People who should have weren't. Either someone thought it wasn't needed or nobody was available. We've seen many gaps in the system where people get stuck.

We've also seen countless missed opportunities. Simple actions not taken early on. Mistakes that could have been avoided. Well-meaning health professionals who could have done a few things differently but didn't have the time, expertise, or resources to provide better care.

We've also seen so many intelligent, capable, and resourceful people—who also happen to have a mental illness—unable to help themselves. Not because there's nothing they could have done, but because they couldn't easily find the information they needed. Most people, along with family and friends, are more than willing to put in some work if it helps and they have the skills. A modest investment in education is all it takes.

Who This Book Is For

Mental health uniquely affects each person. You may have the same mental health diagnosis as someone else, but your experience might be very different. Couple that with the fact that there are hundreds of mental health diagnoses. This makes it difficult to provide advice for everyone.

Illness-Inclusive

This book doesn't focus on a specific mental illness or diagnosis. While various forms of depression and anxiety are more common, the main issue—why you're not finding the care you need and not feeling better—is the same regardless of the diagnosis. So are the solutions to the problem. In terms of age, while some of what we discuss may benefit mature teens or parents of children with mental illness, this book deals with adult mental illness.

Moderate Severity

This book is geared toward people whose mental illness significantly interferes with one or more areas of their life but isn't completely debilitating. In severe illness, treatment options may be more limited, and people may not have the skills or motivation needed to help. They may not appreciate the impact of their illness, or even that they have an illness.

Instead, this book is for people who have an illness of mild to moderate severity. Hopefully, this includes you. If so, you appreciate the impact your illness is having on yourself and those around you. Though you may need help, you're able to continue in some capacity with several or even most basic activities, e.g., hygiene, getting out of the home, taking care of kids, shopping for groceries, and possibly working or going to school. You can have sensible interactions and conversations with others, though these may be limited. Most people seeking mental health care fit this profile.

High Functioning

You might worry that some days you're not as sharp as before. You can finish basic tasks, but they may be more difficult. You may have less energy or motivation, forget things more often if you don't write them down, or need to read things a few times before they stick. You may have more difficulty concentrating, trouble finding the right words to use, or you may become quickly frustrated.

Can you still take an active role in your treatment? Yes. Many people with mental illness experience similar cognitive difficulties. These aren't the same as you'd see in dementia. These challenges won't keep you from taking the meaningful steps to improve your mental health care that we'll cover in this book. You'll also find these symptoms usually improve as your underlying illness improves.

Friends and Family

Many people with mental illness are fortunate to have people in their life who support them. If you're one of those supporters, this book is for you, too. You will better appreciate what those close to you are experiencing. You'll learn how to work the system to better advocate for them. You'll also be better able to help them as they go to appointments, work with treatment providers, or experience setbacks. *Mental health is truly a team sport.*

In return, we beg your indulgence on one matter. We've chosen to write as if we're directly addressing people who require help with their mental health. We do not want to exclude you, given the invaluable help you pro-

vide, but wanted to save you (and everyone else) from some horribly convoluted writing.

Healthcare Professionals

Many healthcare professionals will also benefit from this book. If you work in healthcare, you've seen how mental illness affects all areas of your patients' lives. You've advocated on their behalf, trying to find help for their mental illness, only to face bureaucratic roadblocks and frustration. You may have even borne the brunt of their confusion or suffering, spending more time with them than the mental health specialist they see.

This book will help you better support your patients. If you're a family doctor, psychiatric nurse, psychologist, social worker or other mental health provider, you'll find it a good review of many topics and an introduction to areas you're less familiar with. You may even find some new and updated information. You'll also gain a fresh appreciation for the decision-making processes of other mental health professionals you work with each day.

As noted above, for clarity, this book speaks directly to those experiencing mental health challenges. We're not ignoring you!

Location, Location, Location

Finally, a quick note about where you live. While our direct experience is in Canada, we're mindful of the very significant differences between health systems in various jurisdictions. We draw examples from Canada, the USA, the UK, and elsewhere. The bulk of the book applies equally to people from any location, even if some fine details vary.

(Speaking of location, American readers should note that spelling follows the Canadian variant, e.g., "behaviour" versus "behavior.")

Except for the minority with an excess of money or influence, most people run into difficulties obtaining the mental health care they need. The reasons may vary based on how health systems are organized, funded, or accessed. Problems include long waiting lists due to a shortage of specialists, inability to pay, or restrictions on what insurance companies will cover. You've still got to make the most of what you've got.

Besides, while health systems vary, mental illness and how it's treated is pretty much the same wherever you go.

Let's get started.

Introduction

You've been distressed for months. You're frequently missing work and have lost touch with friends. You're becoming more withdrawn and skeptical about the future.

You've finally worked up the nerve to talk to a professional. You hope they might have a solution. Whether right after the first appointment or months down the road, you've realized you're not only still unwell, but more confused, desperate, and angry. You've lost hope that there is a solution and don't know where to turn.

Far too many people have this experience, particularly those seeking help for mental health problems for the first time. The mental health system makes it difficult for people to get the help they need. It's hard enough finding the right person willing to spend the time to listen to your problems, let alone someone who is able to help you fix them. You may waste time trying treatments that make you worse instead of better and miss those solutions likely to help.

It doesn't have to be that way. Part of the problem is that nobody tells you what the process of getting better looks like when you have a mental illness. How long should it take? What do the treatments do? The information that's out there is often piecemeal and scattered. It rarely reflects the practical realities of finding care. How then can you even tell the difference between good care and bad care?

All you know is you're not getting better. And you don't know how to fix it.

Take Control

You may be on a lengthy waiting list to see a professional. You may be going in circles with one or more treatment providers who seem to be fresh out of new ideas. You may feel abandoned and not sure where to turn next. Being on a waiting list isn't care. Neither is hoping for inspiration to strike. You have an important choice to make.

You can continue passively doing things as you have been. You can periodically raise your mental health concerns with your family doctor or other professional, hoping for a different response. If you've been referred to a psychiatrist or mental health clinic, you can sit back and wait until you're seen there. Your doctors are the experts. If there was something else you should be doing, they would have told you to do it.

Or you can learn and empower yourself. Get the best possible care you can within the system. You can work with your family doctor or another provider to move forward instead of waiting. Sometimes, a gentle nudge in the right direction is all it takes. You can learn to play a more active and productive role in your own care.

In other words, you can help bridge the gap between the sad reality of the mental health system and the comprehensive care you need.

The Sad Reality of Mental Health Care

To improve your care, you need to first understand what isn't working. People talk about a *mental health system*. In reality, it's less a system and more an uncoordinated patchwork of independent entities.

A true system would behave like an organization, with clear roles, responsibilities, processes, and procedures assigned to each part. Most importantly, there would be a map that ties each piece into an integrated whole. Despite the size and bureaucracy of many organizations that provide mental health care, groups inside and outside organizations rarely coordinate smoothly. Patients don't interact with a unified, coherent system.

Instead, providers move in different directions. Each sees itself in isolation, doing what they think they should be doing. There's no clear global accountability for results.

How can this affect you? After only a short time, if you're like most people, you'll find

- multiple, confusing entry points to access care;
- care not provided by the most appropriate providers;
- treatments often unhelpful or worse;

- standard of care for treatments often not met;
- poor communication between providers; and
- no progress tracking, resulting in being lost or stuck

To put it more simply, no one person is responsible for ensuring you get the care you actually need.

Comprehensive Care

If you want to do things differently, it helps to know what you're trying to accomplish. Even if you're taking on some of the work yourself, try to picture what a sensible patient-centred mental health care system would look like:

1. You'd know where to go to ask for help, and if that wasn't the right place, you'd quickly find your way to the right place.
2. You'd be properly diagnosed by a trained professional within a reasonable timeframe (i.e., days or weeks).
3. You'd know the plan to treat your illness, and you'd regularly check to make sure the plan is working. If not, the plan changes.
4. You'd involve the right professionals or resources as needed. All members of your care team would communicate with you and one another. Everyone shares the same view of your overall treatment plan, even if each person is responsible for only a particular part.
5. Nothing would be missed. If you became stuck or lost, you'd get back on track. All treatment would be appropriate to your needs.

We refer to this as *comprehensive care*, where all the necessary pieces are accounted for as part of a unified whole.

The Plan

What does taking a more active role in your treatment look like? It doesn't mean you're going to replace your doctors or other treatment providers—far from it. You're going to learn to work with them, even to do some things they can't. Together, as a team, you can get closer to achieving comprehensive mental health care.

To accomplish this, we'll help you do several things:

1. *Demystify mental illness.* A basic understanding of mental illness is the starting point. We'll try to clear up some common misconceptions and bring to light the most salient aspects of mental illness.

2. *Understand the mental health system.* Understanding some of the key pieces, the priorities, and the failures in the system will help you make the most of it and avoid frustration.
3. *Communicate.* You'll learn how to benefit from interviews with mental health providers, ensuring treatment decisions are based on the most accurate, important, and relevant information.
4. *Engage with professionals.* You'll learn how to access and productively work with a variety of treatment providers, not only counsellors, psychologists, and psychiatrists, but especially family doctors.
5. *Understand treatment options.* Knowing what different options are available and how they work allows you to suggest alternatives and maximize the effect of recommended treatments.
6. *Manage treatment.* Instructions, ideas, and opinions may come at you from many directions. Capturing them, organizing them, and sharing them with everyone involved can help increase collaboration, avoid missing essential steps, track progress, and speed up the entire process. We'll describe a tool called a *living treatment plan* that can help you with exactly that.

We didn't say this would be easy. You will have to learn a few things, but in a very focused and directed way. On the plus side, while mental health professionals have to learn a lot of things to help a lot of people, you will only need to learn enough to help you. And while all this research, communicating, and managing will take a bit of time, you're only doing it for one person.

Using This Book

This book is divided into three parts:

1. *A Primer on Mental Illness.* The first part will quickly run through the basics of mental illness. What is a mental illness? What causes it? How is one person's mental illness different from someone else's? How is a mental illness diagnosed? You'll also get a very high-level picture of the mental health system, the people in it, and some of its challenges. Depending on what you know to start with, you may want to quickly skim through this part.
2. *Navigating Your Care.* The second part will help you take a more active role in your own treatment. This is the core of the book. You'll learn what to expect, the questions to ask, and the many things you can do to make the whole process work to your advantage. You'll learn to

work and communicate effectively with doctors and others, helping them, and helping you. We'll touch on waiting lists, interviews, finding reliable health information, and keeping track of the big picture in a living treatment plan. This part will teach you what you need to become a full partner in your own treatment.

3. *Treatments*. Finally, the last part will introduce you to the wide range of treatments that can help with your mental illness. Yes, we'll talk about medications and therapy. You'll learn what antidepressants do and what makes one different from another. You'll learn about different psychotherapies, what they're used for, and how to find the right provider. You'll also learn about many other things that can improve or worsen your mental health: vitamins, supplements, exercise, caffeine, cannabis, and diet, to name just a few. There's a lot here, so you'll probably focus on only one or two parts at a time. It's the place to go when looking for ideas to bring forward or learning about treatments others suggest.

Each chapter is broken up into small sections, which should make it easier to skim over some parts and spend more time on other portions that you feel better suit your needs. To the extent possible, we've tried to minimize situations where you need to have a good understanding of the material in an earlier chapter to make sense of later material.



Throughout the book, you'll find pockets of extra information that go into a bit more detail or help provide a deeper understanding of a topic. You'll be able to spot them because they're set off a bit from the rest of the book. This paragraph is an example of how they are formatted. These are optional. You can skip them entirely and you won't be missing anything critical that you'll need later.



You'll also find footnoted material collected at the end of the book. It will often point you to various articles, books, or websites that delve much further into a very specific topic. These include research on the effectiveness of different treatments.

Crucial Warning

We cannot emphasize enough how important it is for you to make changes to your medical or mental health treatment only in conjunction with your family doctor or other mental health professional.

We firmly believe in taking an interest in and accepting responsibility for your own healthcare. But you also should respect that you don't have the years of education and experience, or the perspective of trained professionals who have devoted their careers to this.

Mental illness can sometimes look simple, but it's not. For example, there's a big difference between feeling down and having clinical depression. Your brain is a complicated organ, intimately tied in with other body systems in a complex feedback loop. Making treatment decisions has consequences for your mental and physical health. Your doctor, in particular, has the background and training to anticipate and recognize those consequences.

While you will learn a lot about some of the causes and treatments of mental illness in this book, it only just scratches the surface. It's not a substitute for the expertise and judgment of professionals. Remember that mental illness can sometimes impair your judgment or cognition. Discuss, debate, challenge, agree, or disagree, but *never make actual changes on your own*.

The Payoff

All the effort you put into this will pay off. You'll be able to collaboratively come up with an effective treatment plan for your mental health concerns. You'll feel better faster. You'll get your life back more quickly. If you're on a waiting list to see a psychiatrist, your family doctor would like nothing more than to cancel the referral because it's no longer needed. The psychiatrist and the other people on their waiting list probably wouldn't mind either.

Even if you don't find a perfect solution, you'll certainly be further ahead than when you started. And knowing what hasn't worked will be valuable information to help the next professional you see find the right treatment for you. You'll also be a lot better informed and able to actively collaborate with your treatment providers.

Contents

Contents	v
Preface	xvii
Too Many Questions, Not Enough Answers	xvii
You Can Do Better!	xviii
Empowerment Is Key	xix
Who This Book Is For	xx
Illness-Inclusive	xx
Moderate Severity	xxi
High Functioning	xxi
Friends and Family	xxi
Healthcare Professionals	xxii
Location, Location, Location	xxii
1. Introduction	1
Take Control	2
The Sad Reality of Mental Health Care	2
Comprehensive Care	3
The Plan	3
Using This Book	4
Crucial Warning	6
The Payoff	6
Part I: A Primer on Mental Illness	
2. What Is Mental Illness?	9

A Working Definition	9
What Are the Different Types of Mental Illnesses?	10
What Factors Lead to Mental Illness?	10
Episodic Versus Chronic Illness	11
Severity Matters	12
Severe Mental Illness	13
One Size Does Not Fit All	13
3. Diagnosing Mental Illness	15
What Defines a Specific Illness?	15
Who Defines Illnesses?	16
Mental Illness Categories	17
Can Anyone Diagnose a Mental Illness?	18
How Important Is a Specific Diagnosis?	19
4. The Mental Health System	21
Crisis? What Crisis?	21
Squeezed in the Middle	22
Where Are Mental Illnesses Treated?	22
Can You Afford It?	23
The Critical Role of Medical Doctors	23
Psychiatrists	24
Family Doctors	24
Hurry Up and Wait	24
System Failures	25
Consequences	26

Part II: Navigating Your Care

5. Taking an Active Role	29
Managing the Big Picture	29
Patient Navigators	30
Changing Attitudes and Opportunities	31
Active Collaboration	32
6. Get Prepared	35
Basic Tools of the Trade	35
Reset Your Expectations	36
Policies and Benefits	37
Safety Plan	37
Crisis Resources	38
7. Family and Friends	39

Education	39
Support	40
Appointments	41
8. Working With Your Family Doctor	43
Roles and Responsibilities	44
Broad Perspective	44
Mental Health Knowledge	44
Advocate	44
Gatekeeper	45
Prioritization	45
Coordinating Care	45
Challenges	46
Time	46
Information Overload	46
How Their Challenges Affect You	47
How You Can Help Them Help You	49
Respect Their Expertise	49
Respect Their Limitations	50
Keep Your Own Notes	50
Communicate Openly and Honestly	51
If You Don't Have a Good Family Doctor	51
No Family Doctor?	51
Family Doctor Not Up to Date on Psychiatry?	52
Family Doctor Has a Bad Attitude About Anything Mental Health?	52
9. Describing Your Symptoms	55
Organize Your Thoughts	55
Terminology	56
Measuring Severity	57
Self-Rating Scales	57
10. Working the Waiting List	61
The Consultation Process	61
Choosing the Psychiatrist	62
Services and Clinics	62
The Buddy System	62
Your Suggestions	63
The Referral Letter	63
Communication Breakdown	64
Priorities	65

Appointment Booking	66
11. Mental Health Interviews	67
What to Expect	68
Typical Questions	69
Basics	69
Current Illness	70
Mental Health History	70
Physical Health	71
Medications and More	71
Family History	72
Social History	73
Typical Day	73
Symptom Screen	73
Follow-Up	74
12. Difficult Encounters	75
The Nasty Sourpuss	76
The Slow Starter	76
The Sprinter	76
The One-Track Mind	77
The Very Specialized Specialist	77
The Really Alternative Practitioner	77
The Not Really a Psychiatrist	78
The Diagnostic Nerd	78
The Psychic	78
The Expert Know-It-All	79
The God Complex	79
The Complete Jerk	79
Our Advice to You	80
13. Paging Dr. Google	81
Credibility	82
Independent Validation	83
Lies, Damn Lies, and Evidence	84
Applicability	85
Shiny and New	85
Confirmation Bias	87
Google Scholar	87
Sharing What You've Learned	88
14. Your Living Treatment Plan	89
Plan, Meet Reality	89

Creating the Plan	90
Components	92
Symptoms	93
Diagnoses	93
Goals	93
Interventions	94
Other Features	95
Ruled-Out Items	95
Priority	96
Relationships	97
Time	97
15. Using Your Plan	99
The Basics	99
Communication Tool	99
Caretaker	100
Who Decides?	100
Activities	101
Sharing Your Plan	101
Goals, Symptoms, Diagnoses, and Interventions	101
Deciding What's Next	102
Starting a New Treatment	103
Changing a Treatment	103
Evaluating a Treatment	104
Appointments	104
Before	104
During	105
After	106
Between	106
Before and After	107
Identifying Alternatives	107
Sharing Expectations	107
Closing Gaps	108
Stay Moving	108

Part III: Treatments

16. So Many Choices!	111
No Silver Bullet	113
Getting Started	113

17. Just Enough Neuroscience	115
The Big Picture	115
Neurons and Signals	116
Decision Time	116
Connecting Neurons	117
More on Neurotransmitters	119
More on Receptors	119
Cleanup	119
Effects of Treatments	120
18. Physical Illness	121
Physical Illness Impacts Mental Health	121
Illnesses With Mental Health Symptoms	122
Treatments	122
Increased Risk	123
Impact on Treatment	124
Mental Illness Impacts Physical Health	124
Symptoms	124
Treatments	124
Increased Risk	125
Your Role	125
19. Lab Investigations	127
Iron	127
Vitamin B12	128
Other Vitamins and Minerals	129
Hormones	130
Other Blood Tests	130
Other Types of Tests	131
20. Lifestyle Factors	133
Diet	133
Exercise	135
Sleep	136
Caffeine	137
Tobacco	138
Alcohol	138
Cannabis	139
Potential Risks	140
Potential Benefits	141
Illicit Drugs	142
21. Vitamins and Supplements	143

Nutritional Deficiencies	144
Neurotransmitters and Hormones	144
Tryptophan and 5-HTP	145
S-adenosylmethionine (SAME)	145
GABA	145
Omega-3 Fatty Acids	146
Melatonin	146
L-Theanine	146
Inositol	146
Choline	146
Phenylalanine and Tyrosine	147
Herbals	147
St. John’s Wort	147
Kava	148
Other	148
General Cautions	148
Limited Studies	148
Standards	149
Natural Medicine is Medicine	150
22. Talk Therapy	151
What Does Therapy Look Like?	152
The Right Therapy For You	152
Practical Advice	153
Skills and Techniques	154
Depth	155
Eclectic	156
Matching Therapies to Illness	156
Managing Therapy	157
23. Finding a Therapist	159
Types of Therapists	159
Specific Training	160
Regulated Professionals	161
Worldview	161
Who to Pick	162
Costs and Other Realities	163
General Search Tips	163
Health Benefits	164
Employee Assistance Plans	164
Long-Term Disability Insurance	164
Sliding Fee Scales	165

Community Clinics	165
Doctors?	165
Alternatives to Therapists	166
24. The Role of Medications	167
Medications 101	168
Types of Medications	168
How They Work	168
Medication Selection	168
Expectations	169
How Can Medications Help?	170
Severe Illness	170
Improve Short-Term Functioning	170
Emotional Resilience	171
Long-Term Symptom Management	171
Why Medications Are Used	172
Effectiveness	172
Accessibility and Affordability	173
Your Time and Effort	174
Controversies, Conspiracies, and Concerns	174
Should You Consider Medications?	175
25. Antidepressants	177
Uses	177
Bipolar Disorder	178
How They Work	179
What to Expect	180
Start-Up and Dosing	180
Effectiveness	181
Side Effects	183
Stopping	183
Selecting a Medication	184
Personal and Family Successes	184
Symptom Mapping	185
Secondary Actions	186
Metabolism and Interactions	187
Other Considerations	188
Suicide Risk	188
Poop-Out Effect	188
Stopping and Restarting	189
Serotonin Syndrome	189
Alcohol	190

26. Other Medications	191
Sedatives and Hypnotics	191
Uses	192
How They Work	192
What to Expect	192
Selecting a Medication	193
Other Considerations	194
Mood Stabilizers	194
Uses	195
How They Work	195
What to Expect	195
Monitoring	196
Selecting a Medication	196
Antipsychotics	197
Uses	197
How They Work	198
Best Practices	198
Stimulants and Related Medications	199
How They Work	199
Other Considerations	199
Other	200
27. Medication Side Effects	201
General Strategies	201
Get Help or Wait?	203
Sexual Dysfunction	204
Weight Gain	205
Sleep Problems	206
Anticholinergic Symptoms	207
Cognitive Problems	208
Twitching and Restlessness	208
Others	209
28. Evolving Your Medication Regime	211
Why So Difficult?	211
Document the Process	212
Expectations and Evaluation	213
Adjustments	213
Change Dosage	214
Add Another Medication	215
Discontinue	216
Special Situations	216

Pregnancy	216
Hormonal Changes	217
Overseas Travel	218
Hospitalization or Surgery	219
29. Looking Ahead	221
Started Yet?	221
Trends to Watch	222
New Tests and Treatments	222
Patient-Generated Data	222
Standardized Care	223
Reduced Care	223
More Options	223
Online Tools	224
A Lifelong Journey	224
Connect With Us	224

Appendices

A. Internet Resources	227
Book Companion Website	227
Bonus Materials	227
Resources	227
Connect	228
Other Sites	228
Research	228
Medications	229
Treatment Guidelines	229
General Information	229
Consumer Sites	230
B. Talk Therapies	231
Cognitive Behavioural Therapy (CBT)	231
Cognitive Restructuring	232
Exposure	232
Behavioural Activation (BA)	233
Other Skills and Techniques	234
Mindfulness	234
Psychoeducation and Bibliotherapy	234
Relaxation	235
Other Therapies	235

Problem-Solving Therapy (PST)	235
Interpersonal Psychotherapy (IPT)	235
Acceptance and Commitment Therapy (ACT)	236
Dialectical Behaviour Therapy (DBT)	236
Psychodynamic Therapies	237
Supportive Psychotherapy	237
Humanistic	238
Eye Movement Desensitization and Reprocessing (EMDR)	238
C. Medications	239
Antidepressants	240
Fluoxetine (Prozac)	240
Paroxetine (Paxil)	241
Citalopram (Celexa)	241
Escitalopram (Cipralext, Lexapro)	242
Sertraline (Zoloft)	242
Fluvoxamine (Luvox)	242
Venlafaxine (Effexor)	243
Desvenlafaxine (Pristiq)	243
Duloxetine (Cymbalta)	244
Mirtazapine (Remeron)	244
Bupropion (Wellbutrin)	245
Amitriptyline (Elavil)	246
Nortriptyline (Aventyl, Pamelor)	246
Clomipramine (Anafranil)	246
Other Antidepressants	247
Sedatives and Hypnotics	247
Alprazolam (Xanax)	248
Lorazepam (Ativan)	248
Clonazepam (Klonopin, Rivotril)	249
Diazepam (Valium)	249
Zolpidem (Ambien, Sublinox)	249
Zopiclone (Imovane)	250
Eszopiclone (Lunesta)	250
Trazodone (Desyrel)	250
Buspirone (Buspar)	251
Pregabalin (Lyrica)	251
Propranolol (Inderal)	251
Prazosin (Minipress)	252
Mood Stabilizers	252

Lithium	252
Valproic Acid (Depakote, Epival)	253
Carbamazepine (Tegretol)	253
Lamotrigine (Lamictal)	253
Antipsychotics	254
Quetiapine (Seroquel)	254
Risperidone (Risperdal)	255
Olanzapine (Zyprexa)	255
Lurasidone (Latuda)	256
Aripiprazole (Abilify)	256
Stimulants and Related	256
Amphetamine (Dexedrine, Adderall, Vyvanse)	257
Methylphenidate (Ritalin, Concerta, Aptensio)	257
Atomoxetine (Strattera)	258
Other Stimulants and Related	258
Notes	259
Index	273
Acknowledgements	281
About the Authors	283