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Exercise & Your Mental Health

“Exercise ... the super drug!”



By: [John Braucher, MSW](#)

Exercise is the super drug! Well, okay, it is not a drug, and that means no bothersome negative side effects. Scientists have been studying the effects of exercise on mental health for more than 100 years. Due to new technology in the last 15 years more exciting research has been done to identify the impact of exercise on the brain, general health and more specifically on mental illnesses, ranging from depression, anxiety, schizophrenia and dementias such as Alzheimer’s Disease.

Dr. James Blumenthal PH.D. from Duke University surprised many people when he and his colleagues demonstrated that regular exercise is as effective as anti-depressant medications for patients with major depression. Exercise was shown to be more effective in reducing depression when the exercise training program was longer than nine weeks, and when the exercise was of longer duration, higher intensity, and performed a greater number of days per week.

Exercise also has been shown to be effective at reducing anxiety symptoms for four to six hours following exercise. It is effective across all types of anxiety as well. Exercise is most effective in treating anxiety when it is “aerobic” in type, and when the length of the aerobic training program is at least nine weeks long, preferably longer than 15 weeks, and when patients initially had lower levels of fitness or higher levels of anxiety.

Exercise has also been studied in the treatment and prevention of dementia. One recent study shows exercise increases the growth of brain cells in the hippocampus. The hippocampus plays an important role in memory and learning. Exercising has also been shown to reduce the production of beta-amyloid, a protein that creates plaque in the brain associated with developing Alzheimer’s Disease.

HOW DOES IT WORK?

Bio-chemical Mechanisms—Exercise appears to stimulate new brain cell growth; particularly of interest are parts of the brain associated with learning and memory. Studies show this helps older individuals slow and even reverse damaging effects of dementia.

Psycho-social Mechanisms ----Self-worth and self esteem appear to be crucial in the effectiveness of exercise, as well as the self-efficacy effect. The idea that we can control how we feel through our life style choices and, in fact, experience that success seems to add to the bio-chemical effect. Similarly, the ability to change body appearance and improve body image has been cited as another likely way that exercise improves how we feel. Finally, social interaction that accompanies activities that involve exercise may also be helpful in this process.

HEALTH BENEFITS

Exercise is particularly important for individuals with schizophrenia and other mental illnesses that include the use of atypical anti-psychotics making them vulnerable to obesity and metabolic syndrome. This is often associated with the onset of diabetes and heart disease. Even 30 minutes of moderate intensity exercise such as a brisk walk three times a week, can be effective improving health status. Health benefits include:

1-Improved sleep

2-Increased interest in sex

3-Better endurance

4-Stress relief



WOMEN

Mental Health Concerns

By: [Robin S. Voigt PhD, RN, FNP-C, APRN, BC](#)

Just as hormones vary between sexes, it appears, based on statistics, there are some mental health illnesses are more specific to women than men.

Depression is a lay diagnosis applied to many. Depression is more than just being down in the dumps. It is an ongoing illness that interferes with a person's everyday routine and functioning. Depression is in the top five "Health" concerns overall. Approximately 12 million women per year are affected by depression versus 6 million men.

Bipolar Disorder in men versus women is not as clear cut statistically as other diseases. There are about equal numbers of men and women with bipolar disorder, however, bipolar disorder II and rapid cycling symptoms are more prevalent in women than men. Because of celebrities like Britney Spears, this disorder has become the cool mental health disorder to have.

Anxiety Disorders as a whole occur more frequently in women than in men (aside from obsessive-compulsive disorder which is equally distributed between men and women). This includes social phobias, panic disorder, generalized anxiety, and posttraumatic stress disorder). Anxiety is the most common mental illness in the United States. One-third of the country's mental health bill is on anxiety disorders.

Suicide is a mental health concern for both men and women. Statistically, men are four times more likely to die than women from suicide, however, three times more women attempt suicide than men. While firearms are the most common method of suicide, poisoning is the most common method for women. Missouri is ranked 22nd nationally in the number of suicides by state.

Eating Disorders have complex underlying psychological and biological causes. These are real, treatable disorders. Eating disorders frequently co-exist with other psychiatric disorders. Nearly ten million women and girls suffer from some type of eating disorder compared to one million men and boys. Eighty-six percent have an onset of symptoms by the time they are 20. Eighty-one percent of ten-year-olds are afraid of being fat.

Regardless of what disease or disorder you or a loved one might experience, medical information that can help is available. While the internet offers a wealth of resources, be sure to access sites that are reliable versus someone's opinion or experience as the basis of fact.

Did You Know?

- Mental illnesses are serious medical illnesses. They cannot be overcome through "will power" and are not related to a person's "character" or intelligence. Mental illness falls along a continuum of severity. Even though mental illness is widespread in the population, the main burden of illness is concentrated in a much smaller proportion—about six percent, or one in 17 Americans—who live with a serious mental illness. The National Institute of Mental Health reports that one in four adults—approximately 57.7 million Americans—experience a mental health disorder in a given year.
- Mental illness usually strike individuals in the prime of their lives, often during adolescence and young adulthood. All ages are susceptible, but the young and the old are especially vulnerable.
- Without treatment the consequences of mental illness for the individual and society are staggering: unnecessary disability, unemployment, substance abuse, homelessness, inappropriate incarceration, suicide and wasted lives; **The economic cost of untreated mental illness is more than 100 billion dollars each year in the United States.**
- The best treatments for serious mental illnesses today are highly effective; between 70 and 90 percent of individuals have significant reduction of symptoms and improved quality of life with a combination of pharmacological and psychosocial treatments and supports.

Information from the National Alliance on Mental Illness—www.nami.org

Learn about mental illness.

Mental health problems can affect anyone at any time. That's why everybody needs to understand how mental illnesses can affect individuals, families, and communities. It's also why we all need to learn how we can support our friends who are living with a mental illness. Caring friends can make a real difference. Are you ready to be a real friend?

www.whatadifference.samhsa.gov

Reflections . . . On A Thanksgiving Feast

By: Dee Kempker, B.A., CASAC

Autumn is my favorite time of year, and Thanksgiving is my favorite day. It's different than other holidays. Thanksgiving is more relaxed and peaceful. Usually the only activity required of anyone on Thanksgiving is to sit around and eat. Now what could be wrong with that?

My childhood memories of Thanksgiving are some of the fondest moments I have experienced in my life. Our house was Thanksgiving Central, with people traveling to Kansas City from Raytown, Lee's Summit, Pleasant Hill and a little town Southwest of Jefferson City called Mary's Home. My stay-at-home Mom, a rarity today, but quite common back then, would spend days in preparation, cleaning the house, washing the lace curtains and tablecloth, getting out the good dishes and silver ware, and making lists of groceries for my dad to purchase at the store. Dad got into the excitement too, by selecting the "Thanksgiving Turkey." He went to a

farm near his boyhood home in Raytown and selected a 40 or 50 lb. big, strapping tom that looked like the picture on your turkey platter – all red and brown and black feathers, with a huge red turkey wattle hanging down his neck. He would bring the bird home alive and clucking, in a gunny sack in the trunk of his car. Then he would pen the bird up in our back yard for a few days, feeding it shucked corn. This was a happy old tom who went willingly to his end one evening after work, when Dad would string him up to the clothesline and slit his neck. The plucking, butchering, and cleaning completed, Dad would deliver the Thanksgiving bird to Mom, who was waiting patiently in the kitchen. Then she took over from there.

Mom had already been baking pies, and cakes, and bread the day before. By 6:00 AM Thanksgiving morning, she would have Mr. Tom stuffed with home-made bread dressing – no Stove Top – no store bought croutons – real honest to goodness homemade bread, celery, onion, sage, and home-made broth.

Thanksgiving was an all day affair, with the guests arriving early so the women could help Mom in the kitchen, while the men sat around in the living room talking about their deer hunting adventures. The dishes and casseroles began to pile up as the relatives brought in their specialty dishes – Aunt Skinny's Waldorf Salad, for instance. While Dad had provided his contributions for the day with the turkey and some pheasants that he had killed during hunting season, my Aunt Katie was in charge of the pheasant. Instead of stuffed bird, she made stuffed stuffing, tucking the pre-cooked rich pieces of pheasant down into the baking pan full of sweet bread dressing with raisins.

Finally, everyone was there, the food was ready to eat, and dinner was served. Things were more genteel back then. There was no rushing to get in line, grab a paper plate, and dig in. We had a sit down dinner for 35 people, one shift at a time. The women kept the food coming, hot and hot (an old English expression), washing the plates and resetting the table between shifts. After everyone else had been fed, adults at the dining table, little kids at the kitchen table, the women would eat last. They would eat slow and long, resting after their hard work and not in any hurry to move until they were good and ready.

The day would end with leftovers and dessert, the men seated at the table again and the rest of us finding seats around the house, wherever we could. Speaking of desserts, everything was homemade and wonderful: home canned mince meat and pumpkin pies with flakey crust that melted in your mouth; Aunt Lena's angel food cake, so light and feathery it's a wonder that it didn't float off the plate; Aunt Lizzie's poor man's cake with the richest caramel icing, almost like fudge, that would break into chunks when you cut it. My cousins, her daughters, and I have talked about this icing, but alas, none of them know how to make it. The secret is gone with her.



Thanksgiving is meant to be a day to remember our blessings and in my case, it certainly fulfills its purpose.

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Those Thanksgivings are over, and others have taken their place. The faces at the gatherings have changed as kids grew up and started their own families. My Dad died. Mom could no longer handle a big Thanksgiving Dinner, so my sisters and I took over. I got divorced and my children spent holidays with their dad. It was too painful at first to spend Thanksgiving without them, so I looked for other ways to spend the day. The first year I went to my boss's house and ate dinner with him and his two daughters. Three years in a row I flew to California for a week at an Overeater's Anonymous Retreat. Boy, what a contrast to the Thanksgiving dinners that I was used to! Finally, I was able to go alone to be with my Mom and sisters and their families. But then Mom died, and it didn't seem worth it to cook for two days for a handful of people. My oldest sister and her husband and I started going out to eat on Thanksgiving – to a restaurant in Bonnet's Mill, to St. Andrews Catholic Church in Tipton which serves Thanksgiving Dinner every year. Finally, a mutual friend in Jefferson City invited us over to his house. He and his wife had no family in Missouri, and he wanted to establish a traditional Thanksgiving for his children, so we served as the token grandparents. This friend is a wonderful cook, and over the years, the menu has remained the same. Besides the usual turkey and fixings, his specialties include homemade sweet potato croissants, corn casserole, escalloped apples, and strawberry pretzel salad, plus at least two kinds of pie with real whipped cream, no white stuff in a plastic carton. However, sad to say, the guest list is changing. My sister died, my brother-in-law was invited elsewhere and he went – perhaps he, too, is finding it difficult to go to places that remind him of absences that cannot be filled. So, in spite of enjoying a truly, delicious Thanksgiving Dinner, something is missing. I show up in time to eat, bringing my store-bought cake, visit a few hours and go home. There is no excitement of the approaching day, no planning, no preparation, no wonderful smells in the kitchen for two days, and no leftovers for four days. I miss these things and yearn to get back to the 1940's Thanksgivings of my youth.

I haven't spent Thanksgiving Day with my children for over 25 years. Even though I don't spend the day alone, I miss their presence. Sure we get together on many other occasions throughout the year, my birthday, always during the Christmas holidays, or for no reason at all – just because I like to cook for my family. But on Thanksgiving? No. There are too many other places for them to go, now that they are married and have in-laws to visit. So, I don't want to be selfish and demand my piece of the "Thanksgiving Pie." I spend the day where I can, thankful for friends who will accept me into their family because I can't be with mine, and knowing that my children are with me in spirit no matter where they are. Thanksgiving is meant to be a day to remember our blessings and in my case, it certainly fulfills its purpose.

Mental Illness: Myths and Facts

Mental illnesses are very common. They are also widely misunderstood. People with mental illnesses are frequently stigmatized by others who think it's an uncommon condition. The truth is, mental illness can happen to anybody.

Arm yourself with the facts, then use your knowledge to educate others and reach out to those around you with mental illness. Understanding and support are powerful, and they can make a real difference in the life of a person who needs them.

Myth: There's no hope for people with mental illnesses.

Fact: There are more treatments, services, and community support systems than ever before, and more are in the works. People with mental illnesses lead active, productive lives.

www.whatadifference.samhsa.gov

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