

2021 SPRING/SUMMER NEWSLETTER

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DR. CHRISTINE PADESKY, AUTHOR AND CO-FOUNDER, CENTER FOR COGNITIVE THERAPY, WILL BE GUEST SPEAKER AT DEPRESSION CENTER BENEFIT EVENT, APRIL 8, 2021

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The University of Louisville Depression Center will host its 2021 annual benefit event on Thursday, April 8, 2021 from 6-7 p.m., via Zoom link.

Our guest speaker will be Christine Padesky, Ph.D., a renowned psychologist, author, and lecturer.



Dr. Padesky is an exciting speaker who is lauded for her uplifting and affirming presentations. As one of the world's leading experts on cognitive-behavior therapy, she gives practical, yet inspirational advice on how to live a life that is full of positivity and well-being.

Her presentation, "We are ALL stronger than we think!", will be especially welcome during these difficult times.

Growing up in the Midwest, Dr. Padesky was raised with dual values of self-help and the importance of contributing to the community. These values led her to becoming a cognitive behavior therapist because CBT is dedicated to helping people learn skills that they can practice independently to "be their own therapist" and live happier, more fulfilled lives. Her quest to help more people learn these valuable skills led her to write, along with Dennis Greenberger, the best-selling self-help book, *Mind Over Mood: Change How You Feel by Changing the Way You Think*, a top-of-the-charts best-seller that has won numerous national and international awards and sold more than 1.2 million copies in 23 languages.

Dr. Padesky will join UofL Depression Center Director, Dr. Jesse Wright, for a virtual interview-type presentation followed by a 15 minute Q&A session.

Thanks to our generous sponsors, there will be no charge to attend the event.

Sponsors

Bright Future

R. Keith Cullinan Family Foundation

Better Treatments

Jesse H. and Susanne Wright

Building Hope

Greg and Marilyn Bayer Charitable Trust.
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David and Valerie Casey.
Julie Baquie' Morton.
Susan Stokes.

We are ALL stronger than we think!

Presented by
Christine Padesky, Ph.D.,
Co-author,
Mind Over Mood,
International mental health expert

April 8, 2021, 6-7 p.m.
Via Zoom

UofL Depression Center

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Click on this link to register, <https://uoflhealth.zoom.us/j/99457104397>

Note: You will receive a confirmation with details.

EATING DISORDERS AND MOOD DISORDERS—THE CONNECTION....

SARAH SCHIRMER, DNP, ASSISTANT PROFESSOR, UOFL SCHOOL OF NURSING

“No one is going to love me if I look like this. I must be thinner to be successful. I cannot control my eating—I am so disgusting.” People diagnosed with eating disorders have intrusive thoughts like these that reflect their negative and critical self-appraisal, perfectionistic tendencies, and preoccupation with food, body image, and weight. Negative thinking patterns dominate the symptoms of eating disorders and represent a major reason why mood disorders are so common in persons with eating disorders. In one study of 2,400 individuals hospitalized for an eating disorder, 94% also had a diagnosis of a mood disorder. Although rates vary across studies, major depressive disorders frequently coexist with eating disorders.



Fears of being “fat,” negative self-appraisal of appearance, food restriction, and sometimes other compensatory behaviors—such as over-exercising, self-induced vomiting, and laxative abuse—characterize anorexia nervosa. These behaviors left untreated can lead to dangerous weight loss patterns, nutritional deficiencies, starvation, and significant alterations in multiple body systems. This can lead not only to depressive symptoms, but also potentially life-threatening cardiovascular, gastrointestinal, neurological, orthopedic, endocrine, and/or hematologic problems. In fact, anorexia nervosa has a mortality rate second only to opioid use disorder among all psychiatric illnesses. Bulimia nervosa and binge

eating disorder carry their own set of health risks related to this cycle of disordered thoughts, emotions, and eating behaviors.

Though teenage girls and young women who struggle with perfectionism and preoccupation with weight and body image concerns carry the highest risk for developing an eating disorder, people across all racial and ethnic groups, socioeconomic statuses, personality styles, developmental periods, and genders can be at risk. Additional risk factors include psychological disturbances like depression, anxiety, and OCD; involvement in activities and sports that encourage participants to be thin and fit; genetic

factors; family turmoil; and history of trauma. Knowing the risk factors and having an awareness of the early signs of eating disorders play important roles in early detection of disordered eating patterns and connection to care. Even though most people with eating disorders receive care for other emotional or medical problems, their disordered eating often

goes undetected due to stereotypic beliefs.

A report released in 2020 by the Strategic Training Initiative for the Prevention of Eating Disorders, the Academy for Eating Disorders, and Deloitte Access Economics estimates that 9% of the US population, or 28.8 million Americans, will have an eating disorder in their lifetime. The results of the 2013 Youth Risk Behavior Survey given to Kentucky high school students ages 14-18 indicated that 47.1% had previously tried to lose weight, 13.4% had fasted to lose weight, and 5.6%

vomited or took laxatives to lose weight. In that same study—students reporting disordered eating were five times more likely to make a suicide attempt and five times more likely to be depressed.

Despite these staggering findings, eating disorders can be managed effectively when multidisciplinary, evidence-based treatment is provided at the right level of care. Treatment plans should be based on factors such as the patient’s nutritional status, risk of harm, motivation for treatment and ability to engage with and adhere to a nutritionist-derived meal plan. While there are outpatient health care professionals in Kentucky who are treating eating disorders, there currently is only one program in the state providing intensive outpatient treatment. Persons with eating disorders requiring specialized hospitalization and/or residential treatment must leave the state.

To improve prevention, detection, and access to treatment of eating disorders throughout Kentucky, Governor Andy Beshear signed Senate Bill 82 into law on March 27, 2020, establishing the Kentucky Eating Disorder Council. This council will work to increase education and training opportunities for health care professionals and school personnel to improve access to quality care for people with eating disorders, and promote awareness, prevention, and education across the Commonwealth. To learn more about eating disorders, plan to attend UofL Depression Center’s Annual Conference on November 5th to hear keynote speaker Dr. Cheri Levinson, clinician-researcher, and clinical director of the Louisville Center for Eating Disorders, talk about eating disorders and her work at UofL’s Eating Anxiety Treatment Laboratory and Clinic.

National Eating Disorders Association (NEDA) helpline

1-800-931-2237



NEDA

DEPRESSION AND ANXIETY ARE SURGING DURING THE PANDEMIC

JESSE H. WRIGHT, MD, PHD, KOLB ENDOWED CHAIR FOR OUTPATIENT PSYCHIATRY

If you have felt more stressed, anxious, or depressed during the pandemic, you aren't alone. A



nificant problems with loneliness—a condition that is associated with elevated risk for depression and many physical health problems. Researchers have also discovered that the mental health burden is worse in racial and ethnic minorities, young adults, essential workers, and those with pre-existing psychiatric illnesses.

recent study from the Columbia University School of Public Health of the global mental health burden from the Covid-19 pandemic reported on 226,638 people who had taken surveys on symptoms of depression and anxiety. The findings were startling. Compared to pre-pandemic surveys, the prevalence of depression had quadrupled. The rate of depression across all countries was 24%, while the rate was even higher (39%) in non-Asian countries. Another large study found similar results and also documented a large increase in suicidal thinking and substance abuse. Twice as many people were considering suicide than before the pandemic started.

Although the reasons for the dramatic surge in mental health problems aren't fully known, researchers have identified several causes including social distancing, loneliness, increased work burden, job loss, financial strain, and grief at the loss of loved ones. One study in the United Kingdom found that more than a quarter of people described sig-

Other investigators have suggested that being infected with Covid-19 can set off a chain of inflammatory reactions that leave people depressed after the infection passes. Prior to the pandemic there had been growing evidence that inflammation from many sources could increase the risk for depression. Studies since the onset of the pandemic have found that one third to one half of people hospitalized with Covid-19 infections have neurological problems or cerebrovascular changes. Also inflammatory markers, such as interleukins, are drastically elevated in many hospitalized patients. Case re-



ports have been published of persons with severe Covid-19 manifestations and inflammatory "cytokine storms" who later



have depression without other known causes. We have seen such cases at the University of Louisville Depression Center.

The increased availability of vaccines for Covid-19 and falling rates of infection and death are very hopeful signs. Yet, we are still confronted with a huge pandemic of mental health problems that is unlikely to go away soon. At the University of Louisville Depression Center, we are seeing an increased demand for services and are working intensively to meet this need. Telemedicine is being used effectively to reach large numbers of people with mood disorders, anxiety, and other mental health conditions. And our educational programs are continuing to prepare clinicians who can serve persons who have suffered from the pandemic. Inquiries on clinical services can be directed to the Depression Center intake coordinator at 502-588-4450.

National Suicide Prevention Lifeline, 800-273-8255



UNIVERSITY OF LOUISVILLE[®]

DEPRESSION CENTER

401 East Chestnut Street
Suite 610
Louisville, KY 40202

Phone: (502) 588-4450
Fax: (502) 588-9539

E-mail:
depressioncenter@louisville.edu

Visit us at

<http://louisville.edu/depression>



The University of Louisville Depression Center provides an interdisciplinary, multi-faceted approach to depression treatment through clinical services, research, and community and professional education. And through its involvement with the National Network of Depression Centers, the UofL Depression Center is part of a comprehensive and far-reaching effort to develop newer and more effective therapies. Together we are building the knowledge to improve the treatment of depression, bipolar illness, and related problems.



For more information about NNDC, visit <https://nndc.org>

2021 ANNUAL CONFERENCE,

FRIDAY, NOVEMBER 5, 2021

*“Progress in the Treatment of Mental Disorders:
Practical Skills for Clinicians”*

The Fifteenth Annual Conference of the University of Louisville Depression Center, November 5, 2021, will feature leading experts on the practical application of scientific findings in solving difficult clinical problems.

Keynote presentations and interactive workshops will be given by three guest speakers:

- **Maurizio Fava, M.D.**, Psychiatrist-in-Chief, Massachusetts General Hospital, Director, Division of Clinical Research of the MGH Research Institute, Harvard Medical School;
- **Cheri Levinson, Ph.D.**, Associate Professor, Director, Eating Anxiety Treatment Anxiety Lab, UofL Department of Psychological and Brain Sciences;
- **Barbara Rothbaum, Ph.D.**, Professor and Associate Vice-Chair of Clinical Research, Executive Director, Trauma & Anxiety Recovery Program.

We also have several UofL faculty that will present afternoon workshops.

Mark your calendars! We are planning for an in-person conference at the Muhammad Ali Center!

CONGRATULATIONS AND WELCOME TO DEPARTMENT OF PSYCHIATRY AND BEHAVIORAL SCIENCES INCOMING 2021 RESIDENTS!

Sara Abell

University of Louisville School of Medicine

Sabina Bashir

Wright State University Boonshoft School of Medicine

Nicholas “Nick” Bonomo

University of Louisville School of Medicine

Nathaniel “Nate” Julien

University of California, Davis School of Medicine

Nishant Patel

William Carey University College of Osteopathic Medicine

Megan Pennell

University of Louisville School of Medicine

Tyler Ruch

University of Louisville School of Medicine

Bhumika Shah

Dr. D.Y. Patil Medical College

Ahmad Sleem

Zagazig University Faculty of Medicine

We have an accomplished group of interns joining the Department of Psychiatry and Behavioral Sciences. Thank you to the Residency Training Program faculty, staff and current residents for their hard work and success in this year’s match. We welcome these new interns into the UofL Department of Psychiatry and Behavioral Sciences and look forward to working with them through their residency training.