

The Compass

A Publication of New Directions Delaware, Inc.

A support group for PEOPLE with DEPRESSION or BIPOLAR DISORDER...and for THEIR FAMILIES AND FRIENDS

Volume 6 Number 1

Spring 2006

Andy Behrman, aka *Electroboy*, to Keynote April 24th Drew Sopirak Memorial Program

New Directions Delaware is very pleased to announce that it has retained Andy Behrman, aka Electroboy, to speak on the topic of **Dump the Stigma and Focus on Recovery** at its Drew Sopirak Memorial Program scheduled for April 24 to be held at Brandywine High School. Andy Behrman's story of sex, drugs, art forgery and mania is the stuff of Hollywood. In fact, his high-octane book *Electroboy: A Memoir of Mania* has been optioned by Tobey Maguire for a major motion picture to begin production this summer. But Andy's story is much more than the details of his bipolar mania. It is a story of recovery and a fight against stigma.

Andy was misdiagnosed by more than eight doctors and even when he was finally diagnosed with this chronic illness, he was treated unsuccessfully with many regimens of medication. Ingesting handfuls of antidepressants and tranquilizers, he felt his mind lose traction. With no hope of his condition stabilizing, he turned to the last resort: electroshock therapy, also known as electroconvulsive therapy or ECT. Andy underwent

19 electroshock treatments over the course of about a year and a half. Now Andy is a mental health writer and speaker who has traveled to more than 50 cities across the United States and Canada, speaking to more than 200 mental



health organizations and support groups, psychiatrists, psychiatric nurses, college audiences and book clubs. *Electroboy: A Memoir of Mania* has been translated into six foreign languages and is distributed worldwide in places as far away as Australia and New

Zealand, Hong Kong, and South Africa. His articles have been featured in The New York Times Magazine, on the BBC, and in various mental health publications and Web sites.

Prior to Mr. Behrman's talk, there will be a Mental Health Fair, featuring over 20 local organizations involved in the treatment or support of persons with mental illness. This is the largest Mental Health Fair in the State of Delaware.

In addition, Mr. Behrman will be signing copies of his book before and after his talk. The program is dedicated to the memory of Drew A. Sopirak, a Brandywine High School and Air Force Academy graduate who took his own life after an 18-month struggle with bipolar disorder.

Doors open to the public at 6 p.m. for the Mental Health Fair, Mr. Behrman will speak at 8:00 p.m., and the event will conclude by 9:30 p.m. Admission is \$5; tickets are available at the door or in advance by sending a check payable to New Directions and a self-addressed stamped envelope (SASE) to New Directions Delaware, PO Box 768, Claymont, DE 19703.

Tips for Patients Using Lithium

1. Take the exact dose ordered by your doctor. If you take more than the prescribed amount, you may develop an overdose. If you take less, you may relapse into depression or mania.
2. Sustained-release tablets like Eskalith or Lithobid should be swallowed whole. If you chew or break them, they will lose their ability to be absorbed slowly into your system.
3. Ask your doctor about generic lithium if the brand name form costs more than you can afford.
4. Remind your doctor to have your blood tested to keep watch on your thyroid and kidneys and to ensure that you are receiving the proper dose of lithium.
5. Go for your morning blood test 10 to 12 hours after taking your nightly dose. The test shows how much lithium is left in your body from the previous night's dose. Carry your morning dose with you to the lab so that you can take it immediately after your blood is drawn.
6. To reduce the risk of nausea and diarrhea, take your lithium immedi-

- ately after eating.
7. Lithium can cause weight gain. Exercise and watch your caloric intake in order to minimize this problem.
8. If your hands shake or if you have balance problems, talk to your doctor to see if you are developing an overdose. If your hands have a

- or if you lose hair or gain weight, tell your doctor. He or she can test you for a sluggish thyroid gland.
11. If another doctor is planning to prescribe diuretics ("water pills") for you, tell your psychiatrist immediately in order to avoid changes in your lithium blood level.
12. A baby born of a mother who is taking lithium may have birth defects. If you are of childbearing age, consider contraception. If you are planning to have a baby, talk to your doctor.
13. Lithium in breast milk may hurt your child, so avoid breastfeeding your baby.
14. If your mind feels dull, talk to your doctor about decreasing your lithium blood levels slightly. This may clear your thinking.
15. Drink eight 8-oz glasses of water a day to flush out extra lithium.

I like living. I have sometimes been wildly, despairingly, acutely miserable, racked with sorrow, but through it all, I still know quite certainly that just to be alive is a grand thing.

—WRITER AGATHA CHRISTIE

- tremor even when your lithium blood levels are normal, you may be helped by a beta-blocker, such as Inderal.
9. If you experience a flare-up of acne or psoriasis after taking lithium, see a dermatologist.
10. If you feel cold, weak, or tired,

16. If you cannot tolerate lithium at all, discuss newer mood stabilizers with your doctor.
17. To prevent negative interactions with other drugs, inform all medical professionals who treat you that you are taking lithium.

The Compass

The Newsletter of NEW DIRECTIONS DELAWARE, INC.,
(an affiliated chapter of DBSA).

Editor: Email: compass@newdirectionsdelaware.org

Contributors:

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If you wish to be removed from our mailing list, or if you received this newsletter from someone else and would like to be added, please call (302) 286-1161 and leave your name and address and indicate whether you want to be removed or added, or send an e-mail to:

publicity@newdirectionsdelaware.org

New Directions Celebrates 15 years

New Directions Delaware celebrates a milestone this year -- its 15th anniversary. It all started when three persons suffering from bipolar disorder founded New Directions Delaware in April 1991. The founders' purpose was to provide a support group for themselves and for others with mood disorders. Initially, one support group was offered each month, but the demand from the community for mental health support and education led to the rapid growth of New Directions. In 1996, New Directions incorporated; in 2000 it received a 501(c)3 nonprofit letter from the Internal Revenue; in 2003 New Directions affiliated with the national Depression and Bipolar Support Alliance (DBSA) and in 2005 won their Chapter Service Award. Today, New Directions offers twice-monthly free support groups: a group for those with depression; a group for those with bipolar disorder; a group for family and friends; and an orientation group for newcomers. In 2005, over 600 persons attended these support meetings. In addition to support, New Directions offers education in a variety of ways:

- Monthly educational lectures by local professionals are held on the 4th Monday of most months for participants and for the public. Attendance varies from 40 to 100 per month. Since 1996, most of these lectures have been videotaped, and tapes are available for sale at \$6 each, the duplication cost.
- Every April since 1997, a nationally recognized speaker is invited to speak on a mental health topic at our Drew Sopirak Memorial Program. Past speakers have included Dr. Kay Redfield Jamison, Art Buchwald, Dr. David D. Burns, Andrew Solomon, Dr. Martha Manning and Dr. David Satcher. From 300 to 800 people have attended the program each year. In April 2006 we will be bringing the dynamic Andy Behrman, author of *Electroboy: A Memoir of Mania* to

Delaware to speak on the topic: Dump the Stigma and Focus on Recovery.

- A free Mental Health Fair is provided for the public each year in conjunction with the above Memorial Program. In 2005, 26 exhibitors were present to speak with attendees and to distribute free informational materials.
- A 12-week "Depression and Bipolar Seminar" is offered twice annually. The seminar is based on Mary Ellen Copeland's *Depression Workbook*. Each week, a group of up to 24 participants discusses a topic from the workbook, and a professional from the community gives an interactive lecture on the topic of the week. We are currently about to complete our 27th seminar.
- The Michael Matsumoto Memorial Library was created in 2003. This free lending library contains current and classic books and videos on mental health topics.
- A collection of 23 information guides – compendiums of information on specific topics such as "Catching a Manic Episode," "Families under Stress" and "Biology of Mental Disorders" are offered for sale at a nominal copying cost.
- Our newsletter, "The Compass," with original articles and information on mental health, is issued three times a year to over 3,000 participants, professionals and other interested parties.
- Special "Wellness" programs – 6 to 8 weekly meetings twice a year on topics such as "Assertiveness", "Meditation" and "Tai Chi".
- Our Website www.newdirectionsdelaware.org
- Informational interviews on local radio stations (WJBR, WVUD, WDEL) to reach out to the broadest audience with a message of hope.

It has been quite a ride, and through it all, New Directions has remained 100% volunteer -- with no paid executive or administrative staff. We look forward to the next 15 years with plans to expand our support meetings to other parts of the state and to extend our educational offerings. This is all possible only with the support of you, our constituents, our many volunteer speakers and workers. New Directions Delaware is YOUR organization.

Dover Area Support Group

New Directions is judging interest in support groups in the Dover Area. In order to do this, we will need LEADERS and FACILITATORS. If you live or work in the Dover area and would be willing to help with the organization of support groups, call 302-286-1161 and leave a message or email support@newdirectionsdelaware.org

You're Invited to the
"May Is Mental Health Month" Luncheon
on Wednesday, May 10, 2006
at the DuPont Country Club
Registration: 11:30 a.m.
Luncheon: 12:00 noon

Featuring Guest Speaker: Daniel B. Fisher, MD, PhD

Dr. Fisher is the Executive Director of the National Empowerment Center and a practicing psychiatrist. Dr. Fisher is also a person who recovered from schizophrenia prior to becoming a psychiatrist. He is one of the few psychiatrists in the country who publicly discusses his recovery from mental illness. Due to his personal story, Dr. Fisher is a role model for individuals struggling to recover and his own experiences dispel the myth that people do not recover from mental illness.

Dr. Fisher travels the county to share his story and to conduct workshops to promote recovery for people labeled with mental illness by incorporating the principles of empowerment. He has written several book chapters and a number of articles in professional journals as well as developing a video about the important aspects of recovery. Dr. Fisher received his AB from Princeton University, his PhD in biochemistry from the University of Wisconsin and his MD from George Washington University. He is a board certified psychiatrist who completed his residency at Harvard Medical School. His recovery and professional work were recognized by his selection as a member of the White House Commission on Mental Health.

Cost for the luncheon: \$25.00. Scholarships are available.

For more information or to request a scholarship, call Roberta Fishgold at MHA (302-654-6833; Kent/Sussex 1-800-287-6423).

RSVP by Monday, May 1, 2006

To attend the luncheon, send your check made payable to MHA to:

"May Is Mental Health Month" Luncheon
Mental Health Association in Delaware
100 W. 10th Street, Suite 600
Wilmington, Delaware 19801

"May Is Mental Health Month" activities are made possible through funding received from the Department of Health and Social Services, Division of Substance Abuse and Mental Health.

Book Review:

Darkness Visible: A Memoir of Madness by William Styron

By

The next time you meet someone who is under the impression that depression is an excuse for quitters, cowards and the weak, or some similar variety, you might offer them, instead of an argument, this antidote. It's called *Darkness Visible: A Memoir of Madness* by William Styron. Written by the Pulitzer Prize-winning author of *Sophie's Choice*, *Darkness* is a beautifully written, 1990 #1 national bestseller now enjoying its 16th year of popularity.

Styron's book tells of his personal de-

scent from moderate depression towards his near-suicide at the age of 60. He does this in 85 slim pages, and yet his powerful storytelling is unmatched.

It begins with a glamorous and difficult trip Styron made to Paris in 1985 to claim a literature award despite what he knew was a rapidly worsening depression -- one that he had been able to stave off for years, until then, with cocktails. His fatigue, restlessness and guilt spiraled into "the more famous and sinister hallmarks" of depression: self-loathing, the loss of memory and of mental focus, then confusion. At the dinner in his honor, he realizes he has lost his prize check for \$25,000.

"Whatever reason for its disappearance, (it) was gone, and its loss dovetailed

well with the other failures of the dinner: my failure to have an appetite for the grand [seafood platter] placed before me, failure of even forced laughter and at last, virtually total failure of speech. The ferocious inwardness of the pain produced a distraction that prevented my articulating words beyond a hoarse murmur; I sensed myself turning monosyllabic, and I also sensed my French friends' becoming uneasily aware of my predicament."

Styron's lofty language may put off some readers, with words like "augury," "equipoise," and "phantasmagoria," but they don't stand in the way of his humble and universal story.

(Continued on page 9)



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A Letter to My Child

At the doctor's today, I talked with a receptionist who told me of the death of her cousin. He was 35 years old. His sister found him. He left no note; no one knows why he took his own life. Those close to him are tormented with the questions, "Why did he do it? What could we have done to prevent it?"

I have heard so many stories lately of teens and young adults committing suicide. When I hear these stories, I am both saddened and frightened, and I think of you. "Oh, Mother," I can hear you say. I'm sure you think I worry too much about you, but I worry because I know suicides are on the rise.

My experience with suicide is a personal one. My brother, your uncle, had suffered with schizophrenia for some years when he died by suicide—also at the age of 35. My cousin was out of work, depressed, and battling alcohol and drug addiction when he too committed suicide—leaving behind a young wife and baby.

People who suffer from depression are at high risk for suicide. Depression is an illness that is very common. The good news is that it is a treatable illness. The bad news is only one-fifth of those who have it get adequate treatment. I have that common illness myself. I've been treated with both medication and therapy for 30 years. When I first began treatment as a young woman in my 20s, there were times when the pain and the despair inside me were so unbearable that I too just wanted to die. Death seemed my only option for escape. But few of us really want to die. We only want an end to the pain.

I had a psychiatrist who was there for me whenever I needed him, and who helped me find a medication that took away the awful emotional pain and anxiety. There were also people close to me who loved and supported me until I was once again able to love and believe in myself. I am so thankful to be alive, so thankful that I did not give in to my desire to escape the pain. I am so grateful to God for carrying me through the days I felt I couldn't get through; for the people he put in my life to help me; for the courage to continue to hold onto life. If it weren't for holding on, I never would have experienced the greatest gift of my life — my child. I waited a long time for you. I waited until I felt well enough, strong enough, stable enough to be a good mother to a baby, and you've brought me more love and joy and strength than I could ever describe. That is why I write to you today.

Depression and other mental illnesses are a part of our family. To ignore that is dangerous and stigmatizing. I don't remind you of these things to scare you. I remind you because we can only overcome what we acknowledge, and knowledge is power.

You are at a vulnerable age for the onset of these illnesses. College and young adulthood often bring more stress and more exposure to the things—like lack of sleep, or use of drugs or alcohol—that can set off or worsen a mood or other mental disorder. Please keep that in mind as you make choices about how to live your life in the coming years.

If you ever become so sad or so full of emotional pain that you want to die, I ask you to promise me—yes, promise me—that you will remember that I have *been* there, and that I *do* understand. Promise me that you will not give in to that desire to escape the pain. Promise me that you will come to me, or go to a doctor or to an adult you can trust to get you the help you need. Promise me that you will remember that I love you with all my heart and soul. You are part of me—part of the best of me. I am *always* here for you whenever you need me.

With love,
Mom

New Directions earns when you buy from Amazon.com

New Directions has joined the Associates Program of Amazon.com, which pays commissions when customers buy items through the New Directions website: www.newdirectionsdelaware.org When you go to our website and link to Amazon.com, a special code identifies your purchase as a referral, and Amazon pays New Directions a commission of between 2% and 7.5% of your purchase. This commission does not add to your cost.

When you want to purchase an item from Amazon, start by going to the New Directions website. On the bottom of the Home page there is a link to Amazon. Click on that link, and it will take you to the Amazon website. Then just make your purchase as usual, clicking on the icon of any item sold by Amazon or their partners.

The Amazon Associates Program is a painless way for you to support New Directions Delaware and those with mood disorders at no cost to you. Why not try it, and tell your friends and relatives about it.

ASK THE DOCTOR:

DANIEL B. BLOCK, MD, specializes in Adult Psychiatry and is adviser to New Directions Delaware.

Q. Can you clarify in simple terms the difference between bipolar one and two?

A. The main difference between these two illnesses on the bipolar spectrum is the presence of manic episodes in bipolar one and hypomanic episodes in bipolar two. Hypomania is characterized by elevated mood and other symptoms found in mania, but they are less severe than in mania and usually, though not always, devoid of psychotic symptoms. By definition as found in the DSM IV, mixed states are found solely in the domain on bipolar one, though in clinical practice I have certainly seen mixed states in bipolar type two.

Q. What are the pros and cons for taking lithium?

A. Lithium is the oldest of the mood stabilizers and therefore has the greatest body of supporting research and literature documenting its effectiveness as a broad-spectrum mood

stabilizer. It is highly effective in the maintenance phase of treatment, is highly ant-manic, and also possesses some antidepressant properties. It has a strong anti-suicidal effect as well.

Additionally, it is used to treat cluster headaches, a condition similar to migraines and more often found in men. As with all mood stabilizers, the main down side will be side effects. Lithium can cause sluggishness and emotional flattening as well as increased thirst, frequent urination, acne eruptions, weight gain and sexual side effects. It can also impair thyroid, cardiac and renal functioning and thus requires regular medical monitoring, including blood work, an EKG and 24-hour urine studies when indicated. When it is frequently stopped and restarted, it may lose its effectiveness. It is extremely toxic in high levels and has a narrow therapeutic window, so it would be very dangerous in overdose. About 40% of bipolar patients can develop lithium resistance and it may not be as effective in mixed states or rapid cycling, though those notions have been more recently called into question.

Q. How could someone on mood stabilizers and anti-psychotics cope with the challenge of a very bad cold?

A. First, understand that all colds are caused by viruses and cannot be treated with antibiotics. Decongestants would pose several dangers, including the risk for mania, exacerbation of psychosis, insomnia and cardiovascular side effects, including arrhythmias, elevated blood pressure and stroke. Antihistamines can aggravate the antihistaminic effects of an existing psychotropic and can exacerbate psychosis. Treatment should be minimally symptomatic, including nasal sprays, vaporizers, rest and plenty of fluid. Ibuprofen is fine for headaches, but if you are taking lithium, you need to notify your doctor, as NSAID's like ibuprofen can elevate lithium levels. Tylenol is fine provided you dose it appropriately, as too much is toxic for the liver. Avoid herbal cold remedies, as they are often ineffective at best and possibly dangerous due to toxicity or interaction with existing medications.

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Q. I meet many bipolar people who also have diabetes. Diabetes now has national attention as a health problem in the US. Has there been a study done on how diabetes plays a role in mood swings or mental illness?

A. Diabetes has actually long had national attention as a health problem in this country and with the obesity epidemic, it has become an increasingly larger problem. To my knowledge, there are no recent studies that look at the direct role of diabetes as a causative factor in mental illness, but that does not mean it does not warrant attention. Many of the newer

anti-psychotics, olanzapine in particular, can elevate blood sugar and worsen pre-existing diabetes or cause diabetes. Drugs other than anti-psychotics that also cause weight gain can also intensify diabetes. Certainly, acute hypoglycemic episodes can present with psychiatric symptoms and one must always be aware of suicidal patients who are in possession of insulin or oral hypoglycemic drugs, both of which cause fatal hypoglycemia in overdose. Sleep apnea, often seen in psychiatric practice, can cause type 2 diabetes when left untreated. Finally, many of the medications used to treat diabetes can interact with those used to treat

mental illness. Some, such as fluoxetine, can mask the symptoms of hypoglycemia.

Do you have a question for Dr. Block?

**Send your question to
P.O. Box 768, Claymont,
DE 19703 or email
compass
@newdirectionsdelaware.org**

The State of Depression in America

The Depression and Bipolar Support Alliance (DBSA) has issued a landmark report that is a first-of-its-kind comprehensive analysis of depression that combines a thorough review of the literature with extensive interviews. The report reveals a “crisis-oriented and reactionary” mental health system “focusing on crises, such as suicide attempts, rather than on prevention, proactive treatment and long term wellness.”

“The state of depression in America is a national disgrace... By almost any measure, the U.S. is failing to provide adequate, coordinated and effective care....”

The State of Depression in America documents the pervasive impacts of depression. Among them:

- Depression is the leading cause of disability in the U.S.
- People with depression are at a greater risk of heart disease.
- The economic burden of depression in the U.S. is estimated at \$83.1 billion annually.
- Given the high prevalence of depression among older adults, as the baby-boomer generation ages, this illness will contribute to the continued financial strain on the Medicare program.
- Depression is the principal cause of suicide in the U.S. With 30,000 suicides and over 500,000 emergency room visits due to attempts

each year, suicide is the 11th leading cause of death overall and the 3rd leading cause of death among young people 15 to 24 years of age.

Despite the devastating impact of depression, only 57 percent of individuals with a major depressive disorder receive any treatment, and only 22 percent receive adequate treatment.

The report makes a number of recommendations to improve the mental health care system and access to care. DBSA is proposing immediate action on five key steps that it believes will go a long way toward providing hope and help to the millions of individuals coping with depression and their families.

1. Congress must equalize Medicare reimbursement coverage to patients for mental health care services.
2. Private insurers must provide greater incentives for primary care physicians to identify and treat depression.
3. The government and private sector must enact loan forgiveness programs to provide incentives for students to specialize in mental health care.
4. Academic and private researchers must expedite biologic and genetic research to develop better treatments.
5. The government and private sector must support and promote increased access to peer support services.

You may view the entire report by going to www.newdirectionsdelaware.org/links

(Continued from page 4)

With eloquence, he describes one of the most isolating and universal features of depression — the impossibility of communicating how much one is suffering to those who haven't felt it. In one part, he brilliantly argues that if patients were treated in hospitals according to the magnitude of their suffering, the severely depressed would have the strictest bed rest, life support, and that their invalidity and incapacitation would be honored and expected. Instead, he said, we are constantly thrust into daily situations of decision-making, companionship and activity, all of which become torment.

Styron was among those whose condition plummets, despite medication, toward catastrophe.

“... I had begun to discover... that, mysteriously and in ways that are totally remote from normal experience, the gray drizzle of horror induced by depression takes on the quality of physical pain. But it is not an immediately identifiable pain, like that of a broken limb. It may be more accurate to say that despair...comes to resemble the diabol-

ical discomfort of being imprisoned in a fiercely overheated room. And because no breeze stirs this cauldron, because there is no escape from this smothering confinement, it is entirely natural that the victim begins to think ceaselessly of oblivion.”

In some passages, his ordeal can be too much for even the reader to bear. Others have told me they had to put the book down for awhile. It is not an easy book to read.

Much later, the author is frank and reflective about his near suicide-attempt, his subsequent voluntary hospital stay with its 'stupefying dreariness' and its healing refuge. He talks about his work, medications, therapies, his doctor and his doctor's mistakes.

On salvation, he writes, *“Mysterious in its coming, mysterious in its going, the affliction runs its course, and one finds peace.”*

“If depression had no termination, then suicide would, indeed, be the only remedy... but ...men and women who have recovered from the disease—and they are countless—bear witness to what is probably its only

saving grace: it is conquerable.”

Its outstanding literary value and celebrity interest aside, ***Darkness Visible*** is still one of the best books you will find toward understanding depression. What other books *tell* you about depression, ***Darkness Visible*** can make you feel bone-deep, and *understand*.

Darkness, however well written, is definitely *not* a primer for educating “nonbelievers” of the “pull-yourself-together” crowd. Those who deny the existence of such a serious illness are not likely ready for florid writings exploring its depths. Save this book until they've done their homework and are interested in understanding more.

It is my hope that those who judge as cowards others for having depression will find this small book so unsettling and real that they'll be forced to reconsider. That could be a good thing. If more people understood the anguish of those around them in depression, surely fewer would die from it.

Growth and Change

Each turn in life is painful
Each change in life is strange,
Each journey that is journeyed
Can bring a life unchained

So continue on life's pathway
Turn not to what has been,
Smoothing life's rough edges
Is where the road begins

However difficult it may seem
Continue pressing on,
When stopping is the easy way
God gives to you a song.

2006 MEETING SCHEDULE

Dates are tentative and subject to change

All meetings are held at Aldersgate United Methodist Church, 2313 Concord Pike (Rt. 202) next to Fairfax Shopping Center *unless noted otherwise* (*). Registration at 6:45 p.m., meeting at 7:15 p.m. Donations are requested to defray expenses. For information, call 302-286-1161 or 610-265-1594.

Educational/Speaker Meetings for consumers, their families and friends, and the general public.

- April 24* ***Drew Sopirak Memorial Program – “Dump the Stigma and Focus on Recovery”***
Speaker: Andy Behrman, Author of *Electroboy: A Memoir of Mania*. Brandywine High School, 1400 Foulk Rd., Wilmington – Mental Health Fair/Book Fair 6 p.m.; Program 8 p.m.
- May 22 ***Diagnosis & Treatment of Adult Depression*** – Speaker: Michael Marcus, M.D., Medical Director of Outpatient Psychiatry, Department of Psychiatry, Wilmington Hospital, CCHS
- June 26 ***Psychotherapy for the Treatment of Depression & Bipolar Disorder*** – Speaker: Jonathan Lewis, Ph.D., private practice psychologist and Psychological Advisor to New Directions Delaware
- July 24* ***Annual Barbecue in Brandywine Springs State Park***
- August 28 ***Summer Break*** – No Educational Meeting
- Sept. 25* ***Managing Stress in an Environment of Depression & Mania*** – Speaker: Sharon Jacobs, Ph.D., licensed psychologist, private practice, Director, Associates in Health Psychology, LLC
- Oct. 23 ***Latest Advances in the Diagnosis & Treatment of Bipolar Disorder & Seasonal Affective Disorder (SADS)*** – Speaker: Daniel Block, M.D., private practice psychiatrist, Psychiatric Advisor to New Directions
- Nov. 27 ***New Directions Delaware Member Success Stories and 2006 Awards Program***
- Dec. 18 ***Catherine Adams Memorial Spirituality Program / Annual Holiday Gathering*** – Speaker: James Walsh, PA, Ph.D., LPCMH, Pastoral Counselor

Monday Night Support Meetings: 4/10 – 5/8 & 15 – 6/12 & 19 – 7/10 & 17 – 8/14 & 21 – 9/11 & 18 – 10/9 & 16 – 11/13 & 20 – 12/11

Friday Night Depression Seminars: Depression Seminar #28, beginning on September 1, 2006, will be held on 12 consecutive Friday evenings from 6:30 to 9:00 at Aldersgate United Methodist Church, Rm. 132. Cost is \$50; preregistration is required. Mail a \$50 check made out to New Directions and your name, address, and phone number to Carol Marceluk, Treasurer, New Directions, Box 768, Claymont, DE 19703. The course workbook, *The Depression Workbook – A Guide for Depressives & Manic Depressives*, by Mary Ellen Copeland and all materials are included in tuition. For info, call 302-286-1161.

Video Tapes: Video tapes are made of most educational meetings. Call Bob at 302-475-0110 or Geoffrey at 302-731-4953 for video tapes -\$6 each (plus \$3 shipping, or pick up at any meeting).

Visit our Web site for news and updates
www.newdirectionsdelaware.org

We thank our Annual Fund Contributors

Donor list goes here

I wish to contribute the following to help New Directions Delaware achieve its purpose to educate, inform, and support individuals, families and professionals about depression and bipolar disorder.

<i>Friend - \$15</i>	<i>Contributor - \$25</i>	<i>Sponsor - \$50</i>	<i>Patron - \$100 up</i>	<i>Other Amount</i>

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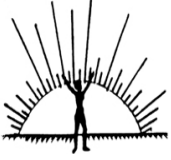
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The Compass Newsletter, Volume 6 Number 1

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1. Did you find the *Compass* informative? ___Yes ___No
2. Was the information presented clearly? ___Yes ___No
3. Was there an article you particularly liked? (Please indicate title) _____
4. What would you like to see in future issues? _____

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Mail form to New Directions at the
return address shown.

You may email your response to
compass@newdirectionsdelaware.org