

THE MAZE OF MENTAL DIAGNOSES AND TREATMENTS

There are many possible causes for brain disorders:

1. symptom, syndrome, sign of medical illness, a mental illness (e.g., a mood disorder, involuntary, kindled or learned illogic, anxiety or helplessness)
2. physical, medical, neurological, psychological, biological, metabolic, inherited condition, environmental, individual overload, unresolved transition, loss or grief *(continued on page 25)*

There are many possible treatments:

Conventional – medicate symptoms and talk i.e. counsel

General practitioner or family doctor	Psychiatrist	Psychologist, therapist social worker, counsellor
test for, treat related medical conditions e.g., hypothyroid	test for underlying medical conditions	refer to physician for medical testing
<p style="text-align: center;">counselling</p> <p style="text-align: center;">antidepressants</p> <p>**watch for 'side' effects</p>	<p style="text-align: center;">talk therapy</p> <p style="text-align: center;">antidepressants</p> <p>**watch for 'side' effects</p>	<p style="text-align: center;">talk therapy</p>
<ul style="list-style-type: none"> • refer to specialists for in-depth diagnosis-treatment 	<p>choices include:</p> <ul style="list-style-type: none"> • SSRI, TCA, MAOI • antiseizure / sleeping • antianxiety (alone or combinations) • lithium (mega dose of a trace mineral that affects brain function) <ul style="list-style-type: none"> • severe cases may mean <ul style="list-style-type: none"> • antipsychotic drugs • ECT • hospitalization 	<p>Focus of therapy</p> <ul style="list-style-type: none"> • self, others and the world • shift from negative to positive • unrealistic expectations • contexts of therapy include: <ul style="list-style-type: none"> • overloads, depletions • self esteem, assertiveness • grief – unresolved • relationships, abuse • metaphors, issues • learned helplessness • cognitive restructuring • transitions <ul style="list-style-type: none"> • may recommend seeing physician for diagnosis of medical illness(es) and / or prescribing antidepressants

** Note – synthetic antidepressant medications are known to cause negative side effects in some people.

Reprinted with permission of SEAR Publications from the Depression Survivor's Kit.

THE MAZE OF MENTAL DIAGNOSES AND TREATMENTS

3. neurotransmitters: genetic imbalance, depletion, interference with synthesis; metabolism; cellular energy; biological systems responding to ongoing distress
4. diet may lack nutrients; missing enzyme cofactors may imbalance or interfere with normal brain function, promote yeast; environment may be a factor (e.g., toxic metals / enzymes)

Restorative		
European practitioners, naturopaths	Orthomolecular medical professionals physicians / psychiatrists / other	Other approaches
<p>test for, treat related physical illness e.g., hypothyroid</p> <p>talk therapy</p> <p>antidepressants</p> <p>**watch for 'side' effects</p> <ul style="list-style-type: none"> • may treat using natural medications i.e., phytopharmaceuticals which are often less toxic than synthetics, possibly milder acting • refer to specialist for in-depth diagnosis and treatment 	<p>test for, treat related physical illness e.g., hypothyroid</p> <p>talk therapy, counselling</p> <p>antidepressants (nontoxic)</p> <p>**watch for 'side' effects</p> <p>Extensive biological testing looking for root cause(s)</p> <ul style="list-style-type: none"> • may treat with natural supplements to restore normal brain function: <ul style="list-style-type: none"> • vitamins e.g., B-6 • trace minerals, e.g., Zn, Mn • amino acids e.g., l-tyrosine • precursors, cofactors • may consider: metabolism interference e.g., yeast imbalance e.g., toxic metals 	<ul style="list-style-type: none"> • exercise • light • rest, relaxation • art, beauty • nature walks • distractions, hobbies, pastimes • meditation <p>Other professionals</p> <ul style="list-style-type: none"> • homeopath • herbalist • acupuncturist • chiropractor <ul style="list-style-type: none"> • may consider noninvasive nonsynthetic • CES, EEG
	<ul style="list-style-type: none"> • may consider cellular energy enzyme cofactors e.g., Coenzyme Q10 • may consider stress hormone precursors e.g., DHEA • may consider diet: <ul style="list-style-type: none"> • add nutrients • avoid allergies • food allergies • balance 	

90 DAY PLAN FOR FINDING QUALITY CARE

INDEX – How to use

The patient, doctor, family, and caregivers can ask for quality care at the start of the 90 day period. Discuss possible diagnoses and proven treatments. Document patient’s progress for three months.

Outline past health problems – patient and family	27
Rate the health professional	28
1st Month of _____ Year _____	
Patient’s progress report for month one	30
2nd Month of _____ Year _____	
Patient’s progress report for month two	38
3rd Month of _____ Year _____	
Patient’s progress report for month three	46

After 90 days of diagnosis and treatments:

If there are problems with diagnosis and / or treatments, the patient or family members can ask their health professionals to –

1. Discuss the medical file.
2. Review the practice guidelines.
3. Revisit the diagnosis.
4. Ask for a second opinion.
5. Consult with a specialist.
6. Recommend different treatments.

If there is progress and the patient is recovering, the patient or family members can ask their health professionals to –

1. Discuss the prognosis for a full recovery.
2. Consider the list of medication side effects.
3. Assess the benefits of therapy and counselling.
4. Confirm the importance of continuing treatments.

HEALTH PROFESSIONAL RATING

My health professional...

Respects	R	<input type="checkbox"/>	1
Approves	A	<input type="checkbox"/>	1
Includes	I	<input type="checkbox"/>	1
Supports	S	<input type="checkbox"/>	1
Encourages	E	<input type="checkbox"/>	1
Total		<input type="checkbox"/>	

Profile of a R.A.I.S.E. Practitioner (Scores between 3 and 5)

- focuses on guideline quality of care, sincere communication, cooperation and competence
- follows professional practice guidelines for accurate diagnosis and effective treatment
- cooperates to help the patient restore mental health and maintain high functioning
- encourages recovered patient to live well

How to use the form

The patient or family members can rate their mental health professionals, discuss problems and cooperate to improve the quality of care.

My health professional...

Disrespects	D	<input type="checkbox"/>	-1
Disapproves	D	<input type="checkbox"/>	-1
Excludes	E	<input type="checkbox"/>	-1
Discounts	D	<input type="checkbox"/>	-1
Discourages	D	<input type="checkbox"/>	-1
Total		<input type="checkbox"/>	

Profile of a D.D.E.D.D. Practitioner (Scores between -3 and -5)

- seems sincere but there are problems with the quality of care, shortcuts, non-communication and concerns about competence
- fails to diagnose accurately or treat effectively
- watches sick patient get worse
- if patient is not diagnosed or treated, the practitioner does not seem concerned, even when the patient deteriorates
- knows worsening illness increases risk of suicide

How to cope with a D.D.E.D.D practitioner

If the practitioner does not make a differential diagnosis or offer effective care, the patient or family members can consult with a specialist or ask for a case review by a supervisor.

PATIENT'S PROGRESS REPORT

5 Steps For Month One _____ (Date)

1. Healthcare Reality Check – at the start of the month 31

- Based on your condition, assess your care.

2. Mental Healthcare Compass – choose a direction 32

- Consider your options; circle your preferences.

Patient

FF & DN	MD & MT	QL & ET	AD & RT
---------	---------	---------	---------

3. Visits with health professionals – note who helps 33

On balance, do your advisors –

R.A.I.S.E.?	D.D.E.D.D.?
-------------	-------------

Do you ask for quality care?

Yes	No
-----	----

Do your professionals follow practice guidelines?

Yes	No
-----	----

4. ASTER details – outline the care 34

- Indicate

Assessments

Treatments

Effects

Results

PROGRESS	PROBLEMS

5. TAYO healthcare planner – show who cooperates. 36

- Note the preferences of patient and caregivers; discuss differences.

Patient

Health professionals

Family

Caregivers

FF & DN	MD & MT	QL & ET	AD & RT
FF & DN	MD & MT	QL & ET	AD & RT
FF & DN	MD & MT	QL & ET	AD & RT
FF & DN	MD & MT	QL & ET	AD & RT

Questions:

HEALTHCARE REALITY CHECK

Trusting my life to minimal care –

- When I get sick, symptoms trouble me. My doctor, family and friends know.
 - No one seems to listen to my problems; no one helps; nothing changes.
 - I feel helpless and hopeless, sick and tired, rejected and excluded.
 - Minimal care does not help me to... _____
-

Sick, then sicker, feeling like a victim –

- I don't know what is wrong; my treatments seem to make me worse.
- My pills have negative, adverse and other uncomfortable side effects.
- My concerns are not resolved; week after week I get worse.
- My treatments do not relieve my symptoms. They hurt me.
- I would like my doctor to find the root cause(s) of my problems.
- I want my doctor to recommend helpful treatments.

Coping with conservative care –

- Soon after a quick chat, I got a label, pills and then a few therapy sessions.
 - Some days I feel a bit better; most days I still have symptoms.
 - Side effects bother me at times; after taking my medications, I notice that... _____
 - With a stigmatized mental illness, people seem to exclude me.
 - Cautiously optimistic, on my good days, I make some progress.
 - I also notice... _____
-

Restored after effective care –

- After mental status exams, patient & family medical & mental histories, medical tests and psychological assessments, my diagnosis was... _____
 - My doctor explained pros and cons of treatments, then noted my consent.
 - The care helped; I got better; most days I feel well.
 - With a stable brain, I can understand counselling and accept therapy.
 - I am rebuilding my life, renewing my relationships and enjoying my life.
 - I am working (or updating my education); and getting on with my career.
 - I am pleased with my progress... _____
-

1st Month _____ Year _____

VISITS WITH HEALTH PROFESSIONALS

Date: _____

Name of professional: _____

Discussion: _____

Recommendations: _____

Results: _____

Date: _____

Name of professional: _____

Discussion: _____

Recommendations: _____

Results: _____

Date: _____

Name of professional: _____

Discussion: _____

Recommendations: _____

Results: _____

How to use the form

The patient or family members can make brief notes to document their visits with mental health professionals.

TAYO – THINK ABOUT YOUR OPTIONS HEALTHCARE PLANNER

Patients, Professionals, Family and Caregivers
Can note their preferences for diagnosis and treatment.

The Planners and their squares

P = patient (uses P1 to P8)
D = doctor, health professional
(uses D1 to D8)
F = family (uses F1 to F8)
C = caregiver (uses C1 to C8)

The Options

Four Options for Diagnosis

FF = find fault
MD = mistaken diagnosis
QL = chat and a quick label
AD = tests and an accurate
diagnosis

- to find the root causes

Four Options for Treatment

DN = do nothing
MT = mistaken treatment
ET = easy treatment
eg. pills and more pills and
/ or talks and more talks
RT = restorative treatments

- To resolve underlying
medical, mental, metabolic,
biochemical, psychological
or social problems.
- To restore normal brain
function without causing
negative effects, (to the
extent possible in each case).

A Riddle

Which of the 64 outcomes is
best?

4 planners x 4 diagnoses x 4
treatments = 64 possibilities.

Find Fault		Do Nothing	
P1	D1	P2	D2
F1	C1	F2	C2
FF Find Fault Discount Discourage Disapprove		DN Do Nothing No treatment No therapy No care	

Minimalist

Negligent

Misdiagnosis		Mistreatment	
P5	D5	P6	D6
F5	C5	F6	C6
MD Misdiagnosis No history No testing, prior files No mental status exams		MT Mistreatment Sick person gets worse Negative or toxic effects Incompetence, negligence	

How to use TAYO

1. Think about the options for diagnosis and treatment.
2. Circle your preferences.
3. Discuss the quality of care.

Quick Label		Easy Treatment	
P3	D3	P4	D4
F3	C3	F4	C4
QL Quick Label A short chat A DSM label A disorder		ET Easy Treatment Medications Talk therapy Shock therapy	

The TAYO Planning Guide

1. The patient uses the 'P' squares to consider the options and plan for diagnosis and treatment.
2. The doctor uses the 'D' squares to consider the options and plan for diagnosis and treatment.
3. Family members use the 'F' squares.
4. Caregivers use the 'C' squares.
5. Planners can compare and discuss.
6. All planners win if the patient gets well!

Conservative

Restorative

Accurate Diagnosis		Restorative Treatment	
P7	D7	P8	D8
F7	C7	F8	C8
AD Accurate Diagnosis Mental status exams Take histories Diagnostic tests		RT Restorative treatment Effective care Treats root causes Helps patient recover	

Hints for a successful outcome

1. Restoring mental health is more likely after an accurate diagnosis and effective treatments.
2. People can discuss, compare and cooperate.
3. Planners can agree to explore the same directions and coordinate their plans for positive progress.
4. Health professionals can plan to follow professional practice guidelines for accurate diagnosis and use standard of care procedures.
5. Health professionals can plan to use proven, safe, effective and restorative treatments.

PATIENT'S PROGRESS REPORT

5 Steps For Month Two _____ (Date)

1. Healthcare Reality Check – at the start of the month 39
 • Based on your condition, assess your care.

2. Mental Healthcare Compass – choose a direction 40
 • Consider your options; circle your preferences.

Patient

FF & DN	MD & MT	QL & ET	AD & RT
---------	---------	---------	---------

3. Visits with health professionals – note who helps 41

On balance, do your advisors –

R.A.I.S.E.?	D.D.E.D.D.?
Yes	No
Yes	No

Do you ask for quality care?

Do your professionals follow practice guidelines?

4. ASTER details – outline the care 42

• Indicate

- Assessments
- Treatments
- Effects
- Results

PROGRESS	PROBLEMS

5. TAYO healthcare planner – show who cooperates. 44

• Note the preferences of patient and caregivers; discuss differences.

Patient

Health professionals

Family

Caregivers

FF & DN	MD & MT	QL & ET	AD & RT
FF & DN	MD & MT	QL & ET	AD & RT
FF & DN	MD & MT	QL & ET	AD & RT
FF & DN	MD & MT	QL & ET	AD & RT

Questions:

HEALTHCARE REALITY CHECK

Trusting my life to minimal care –

- When I get sick, symptoms trouble me. My doctor, family and friends know.
 - No one seems to listen to my problems; no one helps; nothing changes.
 - I feel helpless and hopeless, sick and tired, rejected and excluded.
 - Minimal care does not help me to... _____
-

Sick, then sicker, feeling like a victim –

- I don't know what is wrong; my treatments seem to make me worse.
- My pills have negative, adverse and other uncomfortable side effects.
- My concerns are not resolved; week after week I get worse.
- My treatments do not relieve my symptoms. They hurt me.
- I would like my doctor to find the root cause(s) of my problems.
- I want my doctor to recommend helpful treatments.

Coping with conservative care –

- Soon after a quick chat, I got a label, pills and then a few therapy sessions.
 - Some days I feel a bit better; most days I still have symptoms.
 - Side effects bother me at times; after taking my medications, I notice that... _____
 - With a stigmatized mental illness, people seem to exclude me.
 - Cautiously optimistic, on my good days, I make some progress.
 - I also notice... _____
-

Restored after effective care –

- After mental status exams, patient & family medical & mental histories, medical tests and psychological assessments, my diagnosis was... _____
 - My doctor explained pros and cons of treatments, then noted my consent.
 - The care helped; I got better; most days I feel well.
 - With a stable brain, I can understand counselling and accept therapy.
 - I am rebuilding my life, renewing my relationships and enjoying my life.
 - I am working (or updating my education); and getting on with my career.
 - I am pleased with my progress... _____
-

