
NAMI EAST BAY NEWSLETTER

A local affiliate of the National Alliance on Mental Illness (NAMI)

September-October 2017

A Clinical Psychologist from the Kaiser Organization

Wednesday, September 27

We are so pleased to have **Michelle Sallee, PhD**, join us to speak at the September 27 meeting. She is a Clinical Psychologist on the staff at Kaiser and runs groups on Cognitive Behavior Therapy for Psychosis. Dr. Sallee also has worked as a forensic correctional psychologist. She came to our attention last spring when her clinical colleagues at Kaiser nominated her for a Mental Health Achievement Award, given by the Mental Health Association of Alameda County. We eagerly anticipate what she can share with us.

Speaker Meeting starts at 7:30 pm

Albany United Methodist Church
980 Stannage Avenue, Albany
Corner of Stannage and Marin

Meeting is free and open to the public.

Support Meetings

NAMI East Bay offers the following monthly support meetings:

- **Support and Share Group for Families of Adults** is held on the 2nd Wednesday of each month. The next meetings are September 13, October 11, and November 8.
- **Support and Share Group for Families of Children, Adolescents, and Young Adults** is held on the 3rd Tuesday of the month: September 19, October 17, and November 21.
- **Hearing Voices Group for Family Members** is held the 3rd Thursday of each month at the office, 6:30-8 pm: September 21, October 19, and November 16.

Support Group Meetings are held at the Albany United Methodist Church, 7-9 pm. Enter through the gates to the right of the door on Stannage Avenue,

turn left through the large room, go down the hall, and come up the stairs. Signs will be posted.

All support meetings are free to NAMI members and non-members, offering a chance to talk with others who understand, give emotional support, and share ways they have found to cope.

Consumer Activities

Families frequently inquire about community services. Since many of our NAMI folks are not county case-managed, it's up to families to find out what's available. Accordingly, here's a brief note about two resources, and we'll get more comprehensive information to you as a regular feature of our bimonthly newsletter.

- PEERS (Peers Envisioning and Engaging in Recovery Services) is a large consumer-run agency located at 333 Hegenberger Road in Oakland. They offer WRAP (Wellness Action Recovery Plan) classes, Final Fridays Free Movies, discussion and Secret Messages groups. Their website is comprehensive: peersnet.org.
- BACS (Bay Area Community Services) offers free Wellness Centers across the county. These are drop-in social centers with planned activities. Website is www.bayareacs.org.

Short Takes

- Solano Stroll, Sunday, Sept 10. Come meet us, visit, and sit for a while at our NAMI East Bay booth in front of the CVS store between Ramona and Carmel Avenues.
- Transcranial Magnetic Stimulation (TMS). See the www.baytms.com website for more information about this FDA-approved, non-invasive, non-systemic, neuromodulation depression therapy. The local office is at 2020 Milvia Street in Berkeley.

(See page 5 for more Short Takes)

SPEAKER NOTES

A Holistic Approach to Health¹

Summarized by Thomas T. Thomas

Our speaker on July 26, [Marcey Shapiro, MD](#), is an integrative medicine family physician located in Albany. She has extensive training and experience in many areas of natural medicine, including Western and Chinese herbal medicine, acupuncture, mind-body techniques, flower essences, homeopathy, breathing techniques, nutritional therapies, Scenar[®], and hands on modalities including Ortho-bionomy[®] and Biodynamic Osteopathy. She uses integrative and complementary medicine as part of an overall approach to health, wellness, emotional well-being, relief of anxiety and depression, and stress reduction. She is the author of two books, *Transforming the Nature of Health*, 2012, and *Freedom from Anxiety: A Holistic Approach to Emotional Well-Being*, 2014.

Dr. Shapiro is a family practice doctor, not a psychiatrist, but she has had a lifelong problem with anxiety and had to learn to calm herself and remain self-aware. She has done this with natural methods, in the belief that if there's an imbalance, she should discover and correct it. She said that her parents were great believers in doctors and the power of traditional medicine. She herself studied in that tradition, but she also developed an interest in herbal medicine while in school and has since included it in her practice.

All of this led to the focus of Dr. Shapiro's talk: the training she has taken with the non-profit [Walsh Research Institute](#) on brain biochemistry and its imbalances in mental disorders. This training reflects the work of William J. Walsh, PhD, FACN, author of [Nutrient Power: Heal Your Biochemistry and Heal Your Brain](#). In his work, Walsh had performed nutritional studies of more than 30,000 cases, Dr. Shapiro said, including people with schizophrenia, depression, bipolar, ADHD, and other mental conditions. Patterns emerged from these cases showing

metabolic imbalances and what nutrient treatments were effective in treating them. Walsh started teaching his method to practitioners about five years ago. About 80% of his trainees, she noted, are psychiatrists and family physicians.

Dr. Shapiro made clear that the levels of imbalance are great enough that the nutrients must be taken in the form of dietary supplements. They cannot be corrected with simple changes in diet. She also noted that the sooner the imbalance is detected, the more likely you are to get a positive result.

The Walsh Method identifies five basic patterns of imbalance and their associated symptoms and prevalence in various brain disorders: over methylation, under methylation, copper overload, elevated kryptopyrrole, and heavy metal toxicity. In her practice, Dr. Shapiro bases about half of her analysis on lab work such as blood and urine tests and half on talking with patients and learning about their symptoms, age of onset, and other factors.

Under methylation represents an imbalance between methyl groups (CH₃) and folate in the body. Methyl takes part in many of the body's reactions, such as metabolism, DNA repair, epigenetics, immune response, and heart health. In Walsh's studies, 28% of schizophrenics had this pattern, and people with high folate and low methyl respond well to SSRIs (selective serotonin reuptake inhibitors). Schizophrenics with under methylation tend to shut down when they go into crisis.

Some of the characteristics of people with low methyl—but not all symptoms are present in everyone with the imbalance—are a low pain threshold; perfectionist tendencies and obsessive-compulsive nature; watery eyes, plentiful mucus, and tendency toward seasonal allergies; a competitive nature and a drive toward accomplishment; and inner tension. This pattern is also a factor in people on the autism spectrum and with antisocial personality disorder.

Over methylation, or an excess of folate in the body, is a pattern appearing in about 20% of people with depression and 40% with schizophrenia. These are people with high levels of serotonin and dopamine. People with this pattern tend to do well with benzodiazepines. Schizophrenics with over methylation also tend to be more physically active during a break and have delusions and hallucinations such as hearing voices.

¹ In line with our commitment to explore alternative perspectives on mental illness, NAMI East Bay shares this report on Dr. Shapiro's talk about treatment of brain biochemistry and the Walsh Method. We remind readers that the exact causes of mental illness are still under scientific investigation.

Some characteristics of the over methylation pattern include anxieties, which become worse if the person is taking SSRIs; dry eyes and mouth; a high pain threshold; and an active nature.

Copper overload results in elevated levels of norepinephrine, because copper drives the reaction that turns dopamine into norepinephrine. This pattern is found in 17% of people with depression but negligible in people with schizophrenia. Walsh found 28% of the general population also had this pattern.

Characteristics are extreme anxiety, bad temper, and postpartum depression. In general, people with this imbalance have a hormone intolerance and can experience mental health breaks at times of hormonal stress such as puberty and menopause.

Pyrrole disorder is caused by a deficiency of zinc and vitamin B6. Walsh found that 19% of people with depression and 20% with schizophrenia have this pattern, and that they can be helped by SSRIs. The condition is determined with a urine test.

The characteristics of kryptopyrroluria include temper, mood swings, and poor stress control; a sensitivity to bright lights, odors, fabric textures, and clothing labels; little or no dream retention; and pathological social interactions. When Walsh studied patients in prison, he found some sociopaths had 200 times the level of pyrroles detected in normal people.

Heavy metal toxicity is associated with 5% of people with depression. Heavy metals can interfere with microbes in the gut, which produce some of the body's neurotransmitters. Characteristics of heavy metal toxicity include bad breath and a metallic taste in the mouth.

“Our bodies are a cooperative venture,” Dr. Shapiro said. “Each one of us carries within us a ‘microbiome’ that can be as complex and have as many cells as those comprising what we think of as our own bodies. We need more research into this microbial population.”

She noted other imbalances can also be detected and corrected, such as gluten intolerance, thyroid deficiency, porphyria—related to the madness of King George III, and homocysteine levels.

Some of the blood and urine tests that she uses in diagnosing these imbalances are covered by insurance or Medicare, while others are not. Some of them can be very expensive. Tests she uses include SAME/SAH methylation profile, serum copper and serum zinc, urine kryptopyrrole, vitamin D, C-

reactive protein (for identifying inflammation), homocysteine, thyroid, and histamine levels. For each of these tests, there is a normal range and a functional level. She noted, for example, that a high histamine level was associated with under methylation.

Some imbalances, she said, can be corrected in a month or two, such as kryptopyrrole, while others may take longer. In any case, the patient is advised to stay on his or her nutrient supplements just as if they were a pharmaceutical prescription.

Q. What about Omega-3 fatty acids?

They can be helpful in brain development, reducing inflammation, and mild depression, but are high in pyrroles. Some products take out the pyrroles and preserve the essential oils, eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA).

Q. Have you treated people with severe mental illness using these methods?

A woman patient with severe postpartum depression after the birth of her first child developed bipolar disorder. She was treated for copper toxicity and recovered in three to four months. She now avoids touching copper items such as pipes and bracelets, or eating foods rich in copper like avocados and oysters. Another patient with a diagnosis of schizophrenia was temperamentally explosive with high energy. He was found to have kryptopyrrole and improved with two to four months of treatment.

Q. If an imbalance is low, you can add the nutrient. But what if the imbalance is to the high side?

Most of these imbalances are between two agents, such as between methyl and folate, or between copper and zinc. So, for example, adding more zinc to the body results in less copper.

Q. Do you combine these nutrient therapies with traditional medicine? And what is the American Medical Association's position on all of this?

Dr. Shapiro said she does not take patients off their traditional stabilizing medications. She wants to do what is most effective while at the same time being the least toxic alternative. As to the AMA, they have not yet weighed in on the subject.

“Medication is usually just a patch on the problem,” she said. “I want to figure out what is going on with the patient and make it better.”

Past Speaker Notes are available online at www.thomasthomas.com under “NAMI East Bay.”

Musings from the President

The word “resilience,” which is defined as one’s ability to handle and bounce back from adversity, has sort of become the “word du jour” these days. We used it a lot in the schools as we watched resilient children deal with chaotic lives and move on. It’s now being looked at and written about as a crucial element of adulthood. Our NAMI families are an obvious case in point. For many of us, life was proceeding relatively smoothly when adversity struck in the form of mental illness in a loved relative. Out the window went hopes, dreams, and expectations. In their place was sometimes a perfect stranger accompanied by a lot of grief, confusion, challenge, and anger—in both family members and loved ones. I’ve met and talked with so many families over the years and have seen them occupy every place on the resilience continuum.

A *New York Times* article last month dealt with this and it is worth sharing the main concepts here—with some paraphrasing.

As we age, we do gain more of an ability to regulate our emotions and use perspectives gained from living awhile. We may also have a better idea of what does and doesn’t work. “Scientists who study stress and resiliency say it’s important to think of resilience as an emotional muscle that can be strengthened at any time.” And there are things to do to help you build up this muscle. Here are some of the ways the article suggests and they don’t require putting on gym clothes:

- Practice optimism. This way of seeing the world is part genetic and part learned ... and it is part infectious. Hang out with others who are optimistic. Couldn’t this include small children and pets?
- Rewrite your story. Reframe the personal poor-me/poor-us narrative, if that is what guides you. If you see yourself as a victim, reframe yourself as someone who takes action to fight the challenges.
- Don’t personalize it. We all could have done things differently and then we tend to blame ourselves for setbacks and early behaviors we missed. Current problems always have multiple, intersecting causes. Focus on next steps.
- Remember your comebacks. As we go through life, we all get our fair share of challenges—and we notice those others who have it easier. But usually,

for folks living in this country, many others elsewhere have had it much harder. Revisit past successes that you accomplished.

- Support others. It’s always helpful to have your own support system, but helping others may be more of a factor in developing resiliency. A sense of purpose and feelings of altruism project resiliency and move you out of yourself.
- Take stress breaks. You will always have some kind of stress, but let yourself recover. That process is different for each of us: walking, yoga, visiting with friends, music, nature, faith. Put stress breaks into your life.
- Go out of your comfort zone. Put yourself into new, different, and challenging experiences. This may help your stress hormone systems become less responsive.
- Remember, you’re not alone.

—Liz Rebensdorf, President, NAMI East Bay

African American Caretakers Meeting

The steering committee of the African American Family Support Group hosted a meeting in North Oakland on July 29 for family caregivers of those living with serious mental illness, co-occurring disorders, or with substance abuse disorder. The informational event included well received presentations by Aaron Chapman, MD, the Medical Director for Alameda County Behavioral Health Care Services (ACBHCS) and by the Reverend Kenneth Love, a certified alcohol and drug counselor and founder of Break Free Ministries.

The African American Family Support Group campaign, a program of the Mental Health Association of Alameda County, is funded by ACBHCS in partnership with the African American Steering Committee for Health and Wellness. Charged with providing five educational workshops in Alameda County over the current fiscal year, the group presented its first event to forty-four attendees.

While rates of mental illness remain constant among all racial groups, African Americans with serious mental illness in Alameda County are disproportionately served in the mental health unit of the county jail and in involuntary hospitalizations at John George County Hospital. One of many strate-

gies required to improve outcomes for African American consumers is the educational outreach aimed at family caregivers about mental illness, substance abuse disorders, and county resources.

—Margot Dashiell, *Facilitator of the African American Family Support Group*

Recruiting for People to Offer Personal Support Services

The Proxy Parent Foundation is a non-profit organization that offers two integrated services: PLAN and PSS. The Special Needs Trust (PLAN) is open to disabled persons in California. Started by NAMI families some years ago, this is a Master Pooled Trust vehicle, which actually has a bigger presence in Southern California. The second service is Personal Support Services (PSS) for beneficiaries of the trust. PSS individuals deal with persons with mental illness, coordinating public and private social services and medical care while providing family-like attention.

The organization is now increasing its PSS offering in Northern California and is recruiting individuals who would be interested in becoming a PSS provider. They are looking for individuals who have experience—either clinical or personal—in dealing with persons with mental illness, who have empathy, and who intend to live in the area for some time. Criminal and financial background checks are part of the hiring process, and the PSS would be making monthly and quarterly reports to the Proxy Parent Foundation.

This is a part-time commitment and the person could have a day job as well. Hourly payments are \$65 to \$85, and travel time is compensated at a different rate. Please contact Bruce Lewitt at 888-574-1258.

Kaiser Permanente Extends Awareness of Mental Health

Kaiser Permanente is extending its national public health awareness campaign about mental health and is looking for people to publicly share their stories.

A StoryCorps session lasts 40 minutes (storycorps.org/listen) and you receive a downloadable copy and a copy will be archived in the Library of Congress. The format is a conversation between two people who know each other well to share stories about the impact of mental health conditions. The recording dates are Thursday-Saturday, September 21-23 in Oakland. Contact Margot Hardy at Margot.k.hardy@kp.org.

More Short Takes

- Family to Family Class announcements:
 - Richmond—August 31-November 16, 7-9 pm. Register at 510-374-9651 or 510-237-9277.
 - Oakland/Montclair—September 18-December 4, 7-9:30 pm. Register with our office.
 - Albany—dates pending mid-January, 6:30-9 pm. Register with our office.
- Family Education Resource Center (FERC) has moved to 440 Grand Avenue, Suite 360, Oakland—across from Lake Merritt. Phone number is 1-800-896-3372, www.askferc.org.
- If you would be interested in participating in a discussion group about DJ Jaffe's book, *Insane Consequences*, let us know.
- We have three copies of a book to loan out: *A Way Out Of Madness: Dealing with Your Family after You've been Diagnosed with a Psychiatric Disorder* by Matthew Morrissey (AuthorHouse, 2010).
- Community input meetings about Alameda County's mental health services: Upcoming on September 12, Livermore Community Center, 4444 East Avenue, Livermore; September 19, Weekes Community Center, 27182 Patrick Avenue, Hayward. Meetings are held 5:30-7:30 pm and a light meal is served.
- Invitation to NAMI families from Albany United Methodist Church, where we have our office, to join the congregation as it celebrates its 110th anniversary on Sunday, September 24, 10 am.



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Please check your mailing label. If the code "17" is over your name on the right side of the label, your dues are current through 2017. If your mailing label indicates a previous year, or nothing at all, your dues are not current.

We urge you to mail your 2017 dues now. And if you can afford to add a bit more, please do so. Your \$40 NAMI East Bay membership gives you our newsletter six times a year, the quarterly "Connection" from NAMI-California, and the NAMI-National "Advocate." NAMI East Bay is nonprofit [501(c)3] and your dues and contributions are tax deductible.

Family Membership, \$60 per year Open Door Membership, \$5 per year

Make checks payable to "NAMI EAST BAY" and mail to NAMI East Bay, 980 Stannage Avenue, Albany, California 94706

Contact me for Family to Family Education Class

Name: _____ Phone No.: _____

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