Welcome back from lunch!

Whole Health for Mental Health
Crossing the Mind-Body Divide

Day 1 Afternoon

- Thinking and Cognition, Part 1: Whole Health and Your Brain
- Thinking and Cognition, Part 2: Thinking Healthy Thoughts
- The Power of Meditation and Clinical Hypnosis
- Our Emotions, Part 1: Feelings Have Power
- Implementation, Part 1: Your Personal Mental Health Plan
- Local Site Presentation

6. Thinking and Cognition I: Whole Health and Your Brain

Whole Health in Your Practice
Whole Health for Mental Health
Day 1 Afternoon

Aspects of Mental Health

• **Thinking and Cognition**
  - Emotions
  - Behaviors and Choices
  - Peace and Ease
  - Vitality and Wholeness

...for there is nothing either good or bad, but thinking makes it so...
- Shakespeare, Hamlet

Cognition: Elements

}*Acquiring knowledge and understanding via thought, experiences, and the senses*

1. Thinking
2. Reasoning
3. Judgment
4. Orientation
5. Decision-Making
6. Memory
7. Attention and Concentration

We’ll go over how to keep the brain healthy, with any eye to memory and attention.

Our Amazing Brains

• 3 pounds, 60% fat, 75% water
• Consume 20% of our oxygen
• 20-25% of our blood (100,000 miles of vessels)
• 100 billion neurons, 100 trillion synapses
• Generate up to 23 watts of power when awake
• Take 1/10,000th of a second to respond (signals clock at 250 mph)
• Most of your brain works most of the time...
Whole Health for Mental Health
Day 1 Afternoon

Our Amazing Brains
Golgi, Rivista Sperimantale, 1875
Boston University, Cell, 2015

"The complexity of the brain is much more than what we had ever imagined." – N. Kasthuri, BUSoM

How Can Thinking and Cognition Feature in Personal Health Plans?

• Mindful Awareness
• Learning
• Creativity
• Focus
• Thought Patterns
• Insight

Your ideas?

Tony has a concern

My mother has memory problems. How can I prevent that for me?

• His mother has a double copy of the apo-e4 gene
• Tony's brother (10 years older) has trouble with his memory sometimes
• Tony is very worried about “losing his mind” and what can help prevent that
Memory

Other World records:
- 70,000 numbers in pi
- 273 binary digits (1 and 0) in 1 minute
- 1092 playing cards in 30 minutes
- 133 Historic Dates in 5 minutes

24 year old med student from US – winner of 2016 World Memory Championships


Memory Loss: Dementia

5% of Americans over 65 and 45% of >85 year olds have it

Multifaceted, personalized treatment approaches likely work best.

Dementia: Multiple Causes

1. Plaques: Beta-amyloid clusters that build between neurons
2. Tangles: Strands of dead cells
   - CNS immune system activates to deal with both
   - Markers of inflammation (like CRP) predict risk
     - Hormones
     - Genes
     - Loss of cholinergic neurons
     - Neurotransmitters
     - Vascular function

Brain cells are damaged for a variety of reasons – something triggers the immune system and inflammation.
Whole Health for Mental Health
Day 1 Afternoon

Memory Loss: Interconnections

Many causes AND many ways to prevent!

Memory: The MIND Diet
("Mediterranean-DASH Intervention for Neurodegenerative Delay")

Add in (and # of servings)
- Whole grains (3/day)
- Green leafy veggies (6/week)
- Other veg (1/day)
- Nuts (5/week)
- Beans (3/week)
- Fish (1/week)
- Poultry (2/week)
- Berries (2/week)
- Alcohol/wine (1/day)
- Cook with olive oil

Limit (servings)
- Red meats and meat products (<4/week)
- Fast food and fried food (<1/week)
- Cheese (<1/week)
- Pastries and sweets (<5/week)
- Butter/margarine < 1 Tbsp daily

Seems to work (so do the DASH and Medi Diets)

Memory: Recharge

- Regular sleep protects neurons
- Irregular sleep increases dementia risk
- Sleep apnea: CPAP slows decline in mini-mental scores
- Light therapy reduces aggression in AD

"Currently, no medications have proven effective... treatments and interventions should be aimed at reducing cardiovascular risk factors and prevention of stroke. Aerobic exercise, mental activity, and social engagement may help decrease risk of further cognitive decline."

Whole Health for Mental Health
Day 1 Afternoon

Memory: Family, Friends & Coworkers-
Social engagement prevents neurodegeneration

– Get out at least weekly
– Attend community events (e.g., sports)
– Connect with animals
– Attend religious services


Memory: Power of the Mind

• Daily mental fitness work is also valuable
  – Crosswords, sudoku
  – Listening to music, singing, playing an instrument, museums, galleries
  – Lectures, classes, books
• NOT passive mental activity
  – Keep TV <1 hour daily
• MAYBE NOT brain training games (data limited)


Memory: Moving the Body

• Inactivity is a risk factor for cognitive decline and exercises is protective
  – Especially aerobic
  – Increases brain volume (e.g., hippocampus)
  – Improves brain metabolism, memory, executive function, processing speed, blood flow
  – Increases antioxidant capacity, O2 uptake, and activity of neuroprotective genes

Memory: Moving the Body

- **Yoga**
  - Pilot study: Improved memory, neural connectivity in various memory centers
  - Daily practice for 1 month and weekly after that improved recall
  - For AD patients, improved mood and agitation, but not cognition

- **Tai chi**
  - Increased brain volume
  - Decreased risk of cognitive decline


Memory: Food & Drink

- **Eat low glycemic foods**
  - Alzheimer's: 20-40% drop in brain glucose metabolism

- **Nutrients**
  - Bump up omega-3 intake
  - Keep B6 and B12 levels up (B1 and B3 too)
  - Low D3 is found in people with cognition problems
  - Maybe vitamin E matters (gamma tocopherol)
  - Too much copper (esp non-dietary)
  - Too little zinc

- **Intermittent fasting**


Memory: Intermittent Fasting

- Reduces inflammation
- Fasting leads to ketone bodies
  - Beta hydroxybutyrate is neuroprotective
  - They increase mitochondrial function
  - Should be done with close guidance
- Eat last meal of the day 3 hours before bed
- Medium chain triglycerides may help too
  - Don’t require glucose abstinence
  - E.g., 1-2 tbsp coconut oil
- Work with dietitians, as appropriate

Whole Health for Mental Health
Day 1 Afternoon

Memory: Dietary Supplements

• Omega 3’s seem to enhance cognition
  – But 2014 review: not for adults without dementia
• May be best to get a variety of polyphenols and antioxidants
  – E.g., pomegranate juice
    • Mice performed better with it vs sugar water
    • Older adults, 8 oz a day for a month, did too
  – Resveratrol shows promise with memory
• Vitamin E gamma (not alpha) helps some, better with vitamin C

Photo: A.Rindfleisch
Photo: Washingtonpost.com

Memory: Dietary Supplements

• Huperzine A, from club moss, has reversible Ach inhibition effects
  – Promise in small trials – effects on iron and NMDA receptors
• Ginkgo – 2009 meta-analysis not supportive
• Bacopa, turmeric, rhodiola, enzogenol, choline and others are showing promise
• Phosphatidylserine may help
• NAC bumps cystine levels, increases glutathione activity, and may help in TBI

Insight: Letting Your Mind Wander

• 185 writers and physicists
• Journaled about creative moments
• 1/5 of creative moments were when mind wandered
• Especially “aha” moments

Photo: www.jwりhead.com

Schizophrenia: Potential Causes

- A polygenic condition
  - MHC, other receptors
- Single nucleotide polymorphisms
- Neurotransmission
  - Dopamine and glutamate and 30+ others
- Inflammation and autoimmunity
  - IL-1β, IL-6, glutathione
- Endocrine dysfunction
  - Corticosteroids, glucocorticoids, ACTH
- Metabolic problems
  - Insulin, ghrelin, melanocortin
- White matter changes

Neuro-inflammation?

- Microglia are usually in a “ramified” state
- They are injured or signaled to activate
- Release pro-inflammatory cytokines
  - IL-6 levels are up in their bloodstreams
  - ? Benefit from NSAIDs
  - Likely from omega-3's
- Many, but not all studies indicate this occurs

Schizophrenia: Moving the Body

- Activity is beneficial overall
  - Better CV fitness, less sedentary
  - Clinical symptoms, quality of life, global functioning, and depressive symptoms
  - And cognitive benefits
    - Neurogenesis from brain-derived neurotrophic factor?
- Mindful movement (tai chi and yoga) show potential, but few studies
Schizophrenia: Power of the Mind

- Mindfulness interventions for psychosis (MIps)
  - ACT
  - MBSR
  - Compassion-Focused Therapy
- 10 studies, 624 participants
- Significant small to moderate benefit for psychotic and depressive sx
- Group mindfulness worked better than individual ACT

“We concluded that mindfulness therapies can be safely used with people with psychosis and that they provide a number of therapeutic benefits compared with routine care...”

(Aust et al, J Psychiatric Mental Health Nurs, 2017; 24:69-83)
(Louie et al. Schizophrenia Research, 2018;192:57–63)

Schizophrenia: Food & Drink

- 2019 meta-analysis, n=832
- Antioxidants, inositol, and minerals NOT more effective than placebo
- Moderate benefit for B vitamins (pooled data)
  - Best given early
  - Higher doses better
  - More B vitamins at once better
  - Correcting folate and homocysteine issues?

(Firth et al, Psychol Med, 2017;47:1515-27)

Memory: Summary of Options

Diagnosed with ADHD when she was 8

Continues to struggle with focus, but told before she enlisted that “adults don’t get ADHD”

Wonders about taking a stimulant, but was told this is not ideal given all her other issues and meds


Shifting Gears: Mel and Attention
An Attention Pop Quiz

True or False?

1. Our brains do well at multitasking.
   
2. We can improve our ability to pay attention.
   
3. People who are most likely to multitask are best at it.
   
4. Driving while on a cell phone is even more dangerous than drunk driving.
   
---

An Attention Pop Quiz

True or False?

1. Our brains do well at multitasking.
   - Our brains are sequential processors
   - People who do a lot of things well are good at shifting from sequence to sequence
   - Adds ~50% more time to do more than one thing at a time

   **FALSE**

---

An Attention Pop Quiz

True or False?

2. We can improve our ability to pay attention.
   - Sure! This is the purpose of activities that cultivate mindful awareness
   - Brain activity changes even in novices
   - Brain changes in areas tied to attention-related task performance

   **TRUE**

---
**An Attention Pop Quiz**

**True or False?**

3. People who are most likely to multitask are best at it.

- A 2013 University of Utah study found *people who said they were best at driving and using their phone were the worst at it*
  - We don’t self-assess well
  - The worst self-assessors thought they were best

**An Attention Pop Quiz**

**True or False?**

4. Driving while on a cell phone is even more dangerous than drunk driving.

- UK’s Transport Research Lab, 2002
  - Cell phones (and hands-free) are worse
    - 30% slower reactions than people above legal alcohol limit
    - 50% slower than sober non-phone users

**Adult ADHD: A “Real” Disease**

- DSM V lists as a neurodevelopmental disorder
- Challenging to focus on one thing
  - Parietal area and temporal areas don’t function normally
- 95% recall it started by age 12
- 23% of those who had it as kids continue to have impairment
- Adult and child diagnoses don’t clearly overlap
- 20% of parents of kids with it have it themselves
ADHD: Background

• 2.5% of adults in general, as many as 20% of mental health outpatients

• Many associated risks
  – Double the risk of death
    • Suicide (impulsivity), overdose
  – Insomnia (43-80%) – meds contribute
  – 80% have at least one other mental health disorder
  – College less likely, employment a challenge

Adult ADHD: Self-Care Options

- Group training
- Common-sense stress management (medication based)
- Meditation should be practiced
- Moving meditation may be

- Motivation training
- Common-sense stress management (medication based)
- Meditation should be practiced
- Moving meditation may be

- Avoid smoking and drinking
  - People with ADHD have a higher risk of injury – see location, focus on safety
  - Environmental care helps
  - Nutritional interventions are good
  - A good lifestyle is important

- Nutrient deficiencies can occur in ADHD
  - The need for essential fatty acid
  - Hydration important
  - Supplements may help
  - Nutrients especially of food color, sweetener, and supplements
  - Caffeine is low doses may help?
  - Reduce intake
  - Low glycemic index foods

Adult ADHD: Professional Care

- Mindfulness meditation
- Fermented probiotics, and omega-3’s
- Antioxidants
- Omega-3’s

- Exercise helps especially if it assists with mental function
- Moving exercise might help
- Eating training tends to make these brain neurons work better

- Antioxidants and melatonin
  - A good lifestyle is important
  - Nutrient deficiencies can occur in ADHD
  - Hydration important
  - Supplements may help
  - Nutrients especially of food color, sweetener, and supplements

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- Avoid smoking and drinking
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  - Caffeine is low doses may help?
  - Reduce intake
  - Low glycemic index foods
Applying This in Your Work

- In the back of your workbook, (Module 6 section) write down:
- At least three things you could suggest in a Personal Health Plan to help someone prevent memory loss
- At least three things to help someone with attention and concentration
- Use the Self-Care and Professional care summaries in your workbook for ideas

7. Thinking and Cognition II: Thinking Healthy Thoughts

Mindful Awareness:
Noticing Thinking

- Metacognition: Being aware of what it is you are aware of
- That is, when your mind notices itself
Mindful Awareness Experience

SOLAR TIES

• Stop
• Observe
• Let it Be
• And Return

Thoughts
Images
Emotions
Sensations
...and anything else!

SOLAR and TIES Passport, Page 59
Cognitive Distortions/Unhelpful Thinking Patterns

Some Examples

Time to “Brainstorm”

Name some of the psychotherapies you know best

Psychotherapy Definitions:

• “The treatment of mental disorders by psychological rather than medical means.”
• “…research-based techniques to help people develop more effective habits…[It is] a collaborative treatment based on the relationship between an individual and a psychologist. (APA)
• “…a way to help people with a broad variety of mental illnesses and emotional difficulties…Both patient and therapist need to be actively involved…” (other APA)
Psychotherapies: Examples

- Depression
  - Acceptance and Commitment Therapy (ACT)
  - Cognitive Behavioral Therapy (CBT)
  - Interpersonal Psychotherapy for Depression (IPT-D)
- PTSD
  - Cognitive Processing Therapy (CPT)
  - Prolonged Exposure (PE)
- Serious Mental Illness
  - Social Skills Training (SST)

Examples: Passport, pages 206-9

Other: DBT, EMDR, Psychoanalysis, Animal-assisted, Creative Arts, Play

Behavioral Health
- CBT-Insomnia (CBT-I)
- CBT-Chronic Pain (CPT-CP)

Substance Use Disorders
- CBT for SUD
- Motivational Enhancement Therapy (MET)

Treatment Engagement: MI

Family Services
- Behavioral Family Therapy
- Integrative Behavioral Couples Therapy (IBCT)
- Cognitive Behavioral Conjoint Therapy for PTSD

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The Schizophrenia Spectrum

- Lifetime prevalence 1%
  - 8% if you count subclinical psychotic experiences
- Hallucinations, negative sx, cognitive dysfunction
- 1 in 3 respond very well to meds (standard of care)
- But 36% of people with schizophrenia respond poorly to medication
  - So we need adjunctive approaches

Art: Mentalwires.org

Note: This art was created by someone with schizophrenia to represent what it is like for them.

Schizophrenia Spectrum and Comorbidities

In the general population
- 20 years shorter life expectancy
- Suicide (5% prevalence) 20 times the risk
- CVD 1.5 times the risk
- Tobacco use (60%) Over twice average
- Obesity 2 times the risk
- Diabetes 2-5 times higher risk
- Insomnia 50-80% (versus 30%)


Schizophrenia Spectrum and Comorbidities

Older adults with schizophrenia compared to other older adults:
- Heart failure 45 vs 38%
- COPD 52 vs 41%
- Hypothyroidism 36 vs 27%
- Dementia 64 vs 32%
- But LESS cancer 31 vs 43%


The point here? That whole person care is vital here, to minimize problems from the mental health problem, AND the “physical” problems that come with it.

Schizophrenia: Working Your Body

• Activity is beneficial overall
  - Better CV fitness, less sedentary
  - Clinical symptoms, quality of life, global functioning, and depressive symptoms
  - And cognitive benefits
    • Neurogenesis from brain-derived neurotrophic factor?
  - Mindful movement (tai chi and yoga) show potential, but few studies

Schizophrenia: Power of the Mind

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  - ACT
  - MBCT
  - MBSR
  - Compassion-Focused Therapy
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Schizophrenia: Food & Drink

- 2019 meta-analysis, n=832
- Antioxidants, inositol ad minerals NOT more effective than placebo
- Moderate benefit for B vitamins (pooled data)
  - Best given early
  - Higher doses better
  - More B vitamins at once better
  - Correcting folate and homocysteine issues?

Schizophrenia: Self-Care Options

- While mind-body practices are often helpful, professional training in these is very important (see Schizophrenia: Professional Care graphic for options)
- Limited research on spirituality but worth exploring
- Group programs may help Avoid isolation
- Improving sleep may help with other symptoms as well
- Help with hygiene
- Explore talents and skills
- Omega-3 essential fatty acids
- Correcting deficiencies in other nutrients
- Consider low-inflammation diet

Information compiled from a number of sources. See references in slides for items not cited in this diagram.
Whole Health for Mental Health
Day 1 Afternoon

Schizophrenia: Professional Care

Address other health problems/comorbidities:
- Thyroid
- Hypertension
- Diabetes
- Sleep apnea
- Heart disease
- Cancer
- Case management
- Hospice and home care plans
- Case management
- 36% of persons with schizophrenia respond poorly to treatment
- Medications interventions for psychosis
- Antipsychotics benefit over another care
- Art therapy helps
- Music therapy helps
- Exercise might help psychosis (EBP)

Supplements:
- Vitamin and mineral supplementation may help some (e.g., biotin, B6, B2 for psychiatric symptoms)
- Maybe caffeine

No meds: 12-fold increase in risk of all-cause death
1.2-fold increase in death by suicide

Information compiled from a number of sources. See references in slides for items not cited in this diagram.

Putting it All Together

What might be useful for helping someone with schizophrenia?

Use the Self-Care and Professional Care options as a guide

Thank You!
8. The Power of Meditation and Clinical Hypnosis

Whole Health in Your Practice

Power of the Mind and Mindful Awareness are Closely Connected in Many Professional Care Approaches

We are going to cover two of the four mind-body approaches featured on List One.

Semantics

• What are the differences between:
  – Mindful awareness
  – Meditation
  – Mindfulness

...?
We all have it... the natural capacity to pay attention with curiosity and openness.

Attention comes and goes...

We also have the capacity for mindlessness, inattention, or going on autopilot.

Mind-Body: Meditation

- There are many types with different goals
- Different ways to find different states of consciousness
- Can help rest the mind
- Can help us learn more about ourselves
- Not a "religion"

Examples of Benefits:
- Less anxiety
- Peace of mind
- Better coping with pain
- Handle stress better
- Know yourself better

Many types:
- Mantram repetition
- Loving kindness
- Gratitude
- RAIN, etc.
What research findings have you seen?

Passport, Chapter 4

Research Highlights: Healthy Individuals

- Reduces
  - Stress and anxiety
  - Depression, rumination
  - Anger and distress
- Enhances
  - Quality of life
  - Emotional intelligence, creativity
  - Concentration
- And (per another study)
  - Enhances spirituality and values
  - Increases empathy
  - Fosters self-compassion

Remember, meditation is not merely a ‘therapy,’ but it has shown benefit with some conditions:

- Especially responsive/related to mental health:
  - Chronic stress
  - Depression
  - Somatization
  - Anxiety disorder
  - Psychosis
  - Substance use
  - Binge eating
  - Insomnia

Mindful Awareness and Physiology:

- Increases gamma wave oscillations on EEG
- Lengthens time in a relaxed state
- Activates brain attention center
- Lowers chronic inflammation
- Lowers stress hormones
- Stabilizes CD4+ counts in HIV
- Enhances natural killer cell function
- Alters interleukin levels
- Lengthens DNA telomeres (= longer life and less chronic illness)

81 systematic reviews thru Jan 2015

- Y axis = size of the literature
- X axis = efficacy
- Size of circle = number of reviews
- Color = type of mindfulness studied:
  1. Green = mix
  2. Pink = MBRSR
  3. Purple = MBCT
  4. Blue = combo of both
  5. Yellow = “unique interventions”


http://wholehealth.wisc.edu/overviews/mindful-awareness/

http://abstract.desktopnexus.com

Photo: Foter.com

Image:  Abstract.desktopnexus.com
Welcome back! How was that?

About Clinical Hypnosis?
Clinical Hypnosis - Highlights

- Used for centuries
- Invokes a state of concentration and focus (trance)
- Not like stage hypnosis!
- Patient always in control
- Uses imagery, symbols, and suggestions
- Changes thoughts, perceptions, feelings, behaviors
- Sessions can be recorded and repeated

Clinical Hypnosis: Evidence Map


Clinical Hypnosis - Uses

- Stress
- Depression
- Pain (perception)
- Trauma
- Sleep issues
- Allergies, asthma
- Labor
- Skin problems
- Gut issues (e.g., IBS)
- Weight problems
- Sexual problems
“Thanksgiving is an emotional holiday. People travel thousands of miles to be with people they only see once a year. And then discover once a year is way too often.”

--Johnny Carson

Aspects of Mental Health

• Thinking and Cognition
• **Emotions**
• Behaviors and Choices
• Peace and Ease
• Vitality and Wholeness

*The best and most beautiful things in the world cannot be seen or even touched. They must be felt with the heart.*

-Helen Keller

Emotions: A Starting Point

Work with a partner. Take a few minutes to answer these questions:

1. What makes you happy?
2. Why?
3. How do you know you are happy?
Emotions: What are they?

The 3 Key Elements of Emotion:
- Subjective Experience
- Physiological Response
- Behavioral Response

Paul Eckman’s 6 Basic Emotions:
- Fear
- Sadness
- Disgust
- Happiness
- Anger
- Surprise

Paul Eckman’s additional emotions:
- Relieved
- Satisfied
- Envy
- Amusement
- Pride
- Guilt
- Surprise
Whole Health for Mental Health
Day 1 Afternoon

Plutchik: Wheel of Emotions

Some emotions, like “Love” are thought to be combinations or variations on core emotions...

Kragel: Mapping Emotions in the Brain


The Body-Emotion Link: Feelings

Figure: Nummenmaa et al, PNAS, 2018;115(37):9198-9203.
### Back to Happiness: Definitions

- Includes multiple dimensions
  - Positive emotion
  - Engagement
  - Meaning
- Different people have different ‘set points’
- Depends on internal and external factors (how much varies with each of us)


### So... what are “healthy” emotions?

- What emotion do people most want to feel?
- What emotion is the “healthiest?”

Let’s look at a few specific emotions....


### Happiness

- Physiology, subjective descriptions can be similar
- Cultural perspectives can differ
  - **Americans:** Happiness is sought. Involves pleasure, excitement, or peace
  - **Ancient Greece & China (Germans, Russians, Norwegians, Japanese):** Happiness attributed to external factors or luck (happy circumstance)
  - **East Asian, Middle Eastern:** Happiness not always sought as the “best” emotion, can be disruptive
  - Varies with age, religious tradition etc

*Oishi et al, Curr Opin Psychol, 2016;8:54–6.*
What Influences Our Happiness?

- Different mediators play a role
  - Relationships
  - Individual factors
  - Social determinants (government, wealth)
  - Culture
  - Interventions and practices

Image: bbc.com
Oishi et al, Curr Opin Psychol, 2016;8:54-8.

Video - Are Negative Emotions Pathological?

https://www.youtube.com/watch?v=QT6FdhKriB8

WHY TRYING TO BE HAPPY ALL THE TIME COULD BE DANGEROUS

It’s important to allow yourself to feel a range of emotions.
Hostility: The PRIME Study

- 6953 men
- Hostility significantly linked to mortality
- Standardized Hazard ratio for CVD mortality: 1.33
- Standardized ratio for all-cause mortality: 1.14
  - Adjusted for demographic, psychological, behavior risk factors


Reversible Cardiomyopathy with Emotional Stress

- 19 people with LV dysfunction post emotional stress
- Average ejection fraction = 20%
- Prolonged Q-T
- ↑ Monocyte infiltration
- ↑ Troponin I (moderate)
- ↑ Catecholamines
- 95% had normal arteries


### Table 1: Clinical Characteristics of 19 Patients with Monocyte Cardiomyopathy after Adrenalin

| No. | Age  | Sex | Initial Diagnosis | Initial Medication | Initial Test | Final Test | Final Medication | Final Test
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*MAA: Myocardial artery aneurysm, PR: Paraganglioma, PT: Parathyroid, CVD: Cardiac vascular disease, LV: Left ventricle, CT: Cardiac magnetic resonance imaging, TTE: Transesophageal echocardiogram, TCT: Coronary computed tomography angiogram, MRI: Magnetic resonance imaging, CT: Computed tomography, CA: Carotid artery.
Laughter is Good for the Heart

- 150 people were given humorous manuscripts.
- Those with heart disease were 45% less likely to laugh.
- Those who did laugh were less likely to have heart disease and had less hostility.


Grief

- More than emotion
- Varies among individuals
- Veterans learn to go into survival mode; stoicism key
- Types of grief
  - Typical
  - Complicated (7%)
  - Anticipatory
  - Disenfranchised

https://wholehealth.wisc.edu/overviews/coping-with-grief/

Grief: PLISSIT – A Stepped Approach

1. Permission
   - Opportunity to share, to express
2. Limited Information
   - Educating about the nature of grief helps
3. Specific Suggestions
   - A Personal Health Plan with grief as the focus
4. Intensive Therapy
   - More in-depth approaches
   - Specialist care

https://wholehealth.wisc.edu/overviews/coping-with-grief/
Emotional Well-Being

- What is Emotional Well-Being?
- How is it different than “happiness?”
- What emotions are experienced by someone who has Emotional Well-Being?

Emotional Wellbeing

- Positive well being
  - Optimism
  - Life satisfaction
  - Acceptance of negative emotions as normal and transient
- Benefits
  - Reduces CVD risk by 35%
  - Reduces CVD incidence by 20-30%
  - Better immune, endocrine, and CV function
  - Also tied to healthier health behaviors diet, activity, smoking, adherence

Optimism and Mortality

- Decreased risk of mortality in optimists compared to pessimists
- 42% lower risk of dying for optimists compared to pessimists
Whole Health for Mental Health
Day 1 Afternoon

Emotions and the Circle of Health

- **ME:** Experiences of emotions differ from person to person
- **Self Care:** All the circles are linked to our emotions in different ways
- **Mindful Awareness:** There are practices to cultivate healthy emotions
- **Professional Care:** There are many potential ways for Veterans to receive support with emotional challenges

Can you think of examples?

Mindful Awareness:
Working With Emotions

- There are a variety of approaches
- Most involve “turning toward” an emotion
- RAIN, by Sharon Salzberg, is one example

Maybe the Circle needs a slight addition...
RAIN

Access a feeling
- Recognize
- Acknowledge
- Investigate
- Non-Identify

What did you notice?

Applying This in Your Work

- How might you incorporate emotional health more fully into the care you provide Veterans?
- What about in your own self care?

Write your ideas down in the back of your manual, in the section for Module 9.
At some points today, we hope you have been thinking,

“Hey, I do a lot of that already!”

Where Are We Headed?

Part 1: Your Life
Part 2: Your Team
Part 3b. The System
Part 3a: Your Facility

The Million Dollar Question:

How do you apply this to your own mental health?
(Reflect on that and we’ll "circle" back!)
Whole Health for Mental Health
Day 1 Afternoon

**The Whole Health Approach**
Fundamental Elements

1. Whole-Person Care
2. Whole-Health System Integration
3. The Circle of Health
4. Therapeutic Presence (Self-Compassion)
5. Care of the Caregiver
6. Map to MAP
7. Building on Current Programs

**Your Journey to Whole Health Clinical Care**

1. Empower
2. Equip
3. Integrate
4. Whole Health Clinical Care
5. Map to the MAP
6. Mission/Aspirations/Purpose
7. Fundamentals
8. PERSONAL HEALTH PLANNING

To learn more: [https://wholehealth.wisc.edu/overviews/part-i-what-whole-health-looks-like/](https://wholehealth.wisc.edu/overviews/part-i-what-whole-health-looks-like/)

**Whole Health Clinical Care**

1. Fundamentals
2. Build on other programs and courses
3. Whole-person care – beyond reductionism
4. The Circle of Health as a framework
5. Therapeutic presence
6. Care of the caregiver

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“Me” at the center is both you as an individual and the Veterans who you serve.

Discuss:

1. What are they?
2. What causes them?
3. What are some solutions?

4. What is your personal/professional experience with them? What are YOUR solutions?

Only discuss as much as you feel comfortable!
**Day 1 Afternoon**

**Compassion Fatigue**

Key elements:
1. Depersonalization & decreased empathy
2. Reduced performance
3. Poor judgement

21 studies of nurses:
- CS in 48% of sample
- CF in 53%
- Burnout in 52%

The solution?
PAUSE. REST.
BE KIND TO YOURSELF.

**Maybe It’s Really Empathy Fatigue**

Let’s try an activity. Recall a recent time when you felt another’s suffering. Choose one of these self-compassion options:

You can’t have too much compassion, but you can totally have too much of feeling the suffering of others...

1. Acknowledgement of the suffering.
   What are you feeling? Where in your body? What do you need to be comforted?


3. Soothing touch – heart, abdomen, face, self-hug

Best to do these right in the moment, when you can...

**Group sharing**
New Partner: Resilience & Engagement

1. What are they for you?
2. What fosters them?
3. What is your experience with them?
4. What do you personally need to cultivate them even more, at this point in your life?

Group sharing again...

Engagement: “The Blockbuster Drug”

*Patient engagement* is the desire and capability to **actively** choose to participate in care in a way **uniquely appropriate** to the individual, **in cooperation** with a healthcare provider or institution, to maximize outcomes or improve care experiences.

Whole Health for Mental Health
Day 1 Afternoon

Engagement and Clinicians

On a scale of 1-10, how engaged do you feel with your work?

1 10

Engagement: Our Most Powerful “Tool”

• Concept analysis of 722 articles on engagement
• Identified 4 key elements (PACT):
  1. Personalization (it’s individualized)
  2. Access (to things they need which help)
  3. Commitment (it matters to them – MAP)
  4. Therapeutic Alliance (good clinician connection)
  (Environment came up as well)


Key Drivers of Burnout and Engagement

Resilience Can Be Trained!

1. Think flexibly
2. Have a positive attitude
3. Develop “active coping skills”
4. Fine-tune your moral compass
5. Have role models

Resilience Can Be Trained!

6. Face your fears
7. Have strong social support
8. Maintain Physical well-being
9. Train regularly (plan ahead)
10. Recognize and foster your strengths

Practitioner Effects

Controlling for everything else, different psychiatrists had better or worse success treating depression. The key: Their healing presence.

Map to the MAP
- The Game Changer!
- Discover what matters most to Veterans (MAP)
- Establish and document shared goals
- Create a plan that supports what matters
- Supported by
  - Pathway Programs, Whole Health coaching
  - Whole Health courses and FIT Consultations
  - Tools (e.g., PHI, HLA, note templates)
  - Disease-Based Self-Management and Education
  - Existing treatment planning processes

Mapping to the “MAP”
- Mission, Aspiration, Purpose (MAP)
- “The Game Changer”
- Focusing there gets you “buy in” right away
- Even if time is short, still try to do this part for a moment
- Foundational to the Personal Health Planning Process

Mapping to MAP
- Foundational to Whole Health
- Key step in the Personal Health Planning Process
- Gets you “buy in” (engagement) right away
- Do this even when time is short
- People do better if care is centered on them
  - More likely to follow the plan
  - Trust their team more
  - Survive major events better
Large Group Discussion:

Any experiences using MAP in your practice?

Map to the “MAP”: Examples of ?'s

• It would really help me partner with you in your care, if I understood what is important to you in your life.
• What really matters to you in your life? What do you want your health for?
• What brings you a sense of joy and happiness?
• How does your current health impact what is most important to you?
• What is your vision of your best possible health?

Demo: Mapping to the MAP
Explore the “MAP” With a Partner

• Reflect a moment. What is your MAP? How is it linked to your mental health?
• Find a (new) partner. Decide who will ask questions first.
• Ask about each other’s Mission, Aspiration, and/or Purpose.
• Practice generous listening. OK to paraphrase or reflect back what they are saying.

Map to the “MAP”: Examples of ?’s

How was that?
How can you apply it even more fully in your work?

Journey to Whole Health Clinical Care

Equip

• Veterans are supported with meeting their goals and moving toward their MAP
• They have Personal Health Plans
• Communication is seamless
• Well-Being Programs and CIH are offered
• Whole Health Coaching, shared medical appointments, and online resources are shared
• Staff are also equipped with what they need
Empowering and Equipping

What resources do you already use?

What are others you could use?

Write your ideas in your workbook

There is an anxiety that is coming too...
Whole Health for Mental Health
Day 1 Afternoon

VA Patient Centered Care

http://www.va.gov/wholehealth/
External site - for everyone (Veterans, families)

Whole Health Veteran Handouts

~60 handouts related to the Circle

https://www.va.gov/WHOLEHEALTH/veteran-handouts/index.asp

OPCC&CT SharePoint Hub

• Internal – OPCC&CT SharePoint Hub
  https://www.infoshare.va.gov/sites/OPCC/Pages/Default.aspx
  – Education page on SharePoint
    https://www.infoshare.va.gov/sites/OPCC/Education/SitePages/Home.aspx
Whole Health for Mental Health
Day 1 Afternoon

Whole Health for Life Mobile App
Will be able to download on Android, iPhone
- Being rolled out in the next few months
- Has general info
- Can do PHI
- Can learn about self-care and other resources
- Can set goals
- Adds goals into calendar

Mobile App: More Screenshots

Bridges: Ways to Connect
Whole Health Clinical COP call
1st Thursday of month, 2 pm EST
https://vaww.infoshare.va.gov/sites/OPCC/COP/WholeHealth-
ContinueTheConversation/SitePages/Home.aspx
Has integrative health and acupuncture subgroups

Email for Integrative health questions:
vhaopccintegrativehealth@va.gov

FIT Consultant engagements
FIT CIH Specialty Team Email
VHAOPCCCTCI-
HSpecialtyTeam@va.gov
Whole Health for Mental Health
Day 1 Afternoon

**Equip: Personal Health Planning**

1. Ask what really matters
2. Gather info. (e.g., Personal Health Inventory)
3. Co-create a realistic, practical plan
4. Equip them with tools they need to succeed

**Whole Health Assessment**

Personal Health Inventories

**The PHP Arises Through Different Steps**

Personal Health Inventory (PHI)  Personal Health Plan (PHP)
**Shared Goals, SMART Goals**

- Life and Health Goals
- Veteran Goals
- Shared Goals
- Clinician Goals
- Clinical Goals
- SMART Goals
- Shared Decision-Making
- Success!
- Goal Attained

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**Shared Goals**

- Goals that the clinician and the Veteran agree are a priority
- Can tie into MAP
- Examples:
  - Veteran: *I want to lose weight so I can walk to my favorite picnic spot with my partner*
  - Clinician: *I want you to lose weight and increase activity to lower your risk for an MI*

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**The Circle Guides Goal-Setting**

- What area of the circle do you want to focus on? Why?
- Where are you now? Why that number?
- Where do you want to be? Why that number?
- What is one thing you could change?
- What would it be like to reach your goal in this area?
Whole Health for Mental Health
Day 1 Afternoon

SMART Goals

Specific
Measurable
Action-Oriented
Realistic
Timed

Follow-Up

• Timely follow-up is essential
• Specify timeframe, person, modality
• Specify what to do if lapse occurs
• Normalize lapse as different from relapse
• Reinforce effort and partial progress towards goals

Demo:
Personal Mental Health Planning
Reflection on the Demo

• What struck you about the demonstration?
• What did you appreciate?
• What was would you add?
• How would you make modifications to make it work in your practice?

The Million Dollar Question Revisited:

Time to start creating your Personal (Mental) Health Plan!

Putting it all Together

• Same partner as you did MAP with
• Play with doing Personal Health Planning for each other
  ① Introduce them to Whole Health
  ② Summarize their MAP
  ③ Choose a Circle and Set a Shared MENTAL HEALTH Goal – just one for now! SMART goals a bonus, but not required
  ④ Create a REAL follow up plan (something for tonight)
Journey to Whole Health Clinical Care

Integrate
• Whole Health team members seamlessly integrate planning across disciplines, with the Veteran guiding the process
• Clinical care encompassed within the larger Whole Health System
• Impacts of Whole Health are measured

One Thing You Can Do...
How can you more fully incorporate Personal Health Planning into your daily work?

What are some barriers you face?

How will you get around/through them?

Write ideas down in the back of your Workbook

Questions?

Pulse check, page ##

But don’t leave! We are not done yet!

Homework...
Homework Activity: Your Own Plan

1. Do one thing to move forward with the Personal Mental Health Plan you just created.

   We’ll ask people to share what they did tomorrow!

2. Reflect on Whole Health for Mental Health could be done on your team, and at your site.