

Folks,

In last week's THE NEW YORKER, an article says that Martin Luther King, Jr., in the early days of his bus boycott, after receiving a threatening phone call, he prayed, and "became aware of the quiet assurance of an inner voice and heard the voice of Jesus saying still to fight on." The article reminds us that we need to use the word "voices," not the pathological sounding "hallucinations."

Thirty-seven years ago, St Es's Jed Wyatt pointed out in an editorial in Science that public health policies often do not lean on research. In the current Issue of Science and Technology, an editorial indicating that with the Trump administration, that will become even more so.

Friday's POST, an article, "Rural Americans more susceptible to top causes of death," list a number of contributing factors, but fails to list what some would see as an important factor: Studies that have shown that rural Americans are more opposed to using government health programs.

Late last year, a major new resource opened in Potomac, Dream Catcher Farm, with a focus on neurodevelopmental disorders, especially those associated with fetal exposure to alcohol [www.susandrich.com]. The Farm has a very comprehensive program, including use of therapeutic animals

At the Bedford L train stop in Brooklyn, NYC, an eleven-year-old boy named Ciro, has a booth providing Emotional Advice \$2. He is open for business two hours on Sundays, sees about two dozen, makes about \$50, which he gives to help feed kids at his school who can't afford to buy lunch [Upworthy.com, 15 Jan 2017].

In this month's JAACAP, an article championing the use of internet-delivered cognitive-behavioral therapy for adolescents with obsessive-compulsive disorder. An editorial in the same issue says that such has also been shown to help in mild or moderate depression and mild or moderate anxiety. The editorial goes on to say that the costs of developing and maintaining is significant, being a barrier to their availability. On the other hand, this month's JAMA Psychiatry suggest that internet cognitive behavioral for insomnia may become the primary treatment option for people with insomnia, partially because it is so inexpensive,

In 2005, 20% of state psychiatric hospitals were smoke-free. In 2011, it was 83%. SAMHSA recommends all of its funded treatment sites be tobacco-free [JAMA 16 Aug 2016]. {Over the years this topic would come up at St Es, and I would take the position that such a policy should only be implemented when it applied to all of us living in DC. Otherwise discriminating against the mentally ill, especially some of the long-term patients who valued a smoke more than anything.}

January I.T. News:

1] Hacking efforts against electronic health records are expected to increase in 2017. One IT firm predicts a major federal cybercrisis within in next four months.

2] Also worrying IT departments:

a] Downtime because of electrical shortages

b] Innovation challenges

In Sunday's Wall Street Journal:

1] To be added to the lakphy file, “It’s January again, and that means it’s time to repent, to repudiate December’s decadence and embrace anew the annual ritual of trying pointlessly to get fit. This is America’s number one resolution according to Nielsen, and the one of the first to be abandoned each year.

2] Sally Satel, who many of you know, writes: “I speak from long experience when I say that few heavy users [of opioids] can simply take a medication [e.g., buprenorphine] and embark on a path to recovery. It often requires a healthy dose of benign paternalism and, in some cases, involuntary care through civil commitment.”

Current Journal of Psychopharmacology has a number of articles on psilocybin suggesting it has antidepressant and anti-anxiety effects in patients with clinically significant cancer-related anxiety and depression.

In a Finish study, seniors, mean age 80, who were on antidepressants, were more likely to have hip fractures than those not on antidepressants [current Int J of Geriatric Psychiatry]. A similar theme in this month’s edition of Worst Pills, an article on medications that increase the risk of falling, half the listed medications are ours:

1] antidepressants,

2] anti-psychotics,

3] opioids,

4] meds for insomnia,

5] meds for smoking cessation.

Roger