



PsycHealth, Ltd. Provider NEWSLETTER

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Special points of interest:

- PCP Coordination is part of quality care
- Too much work impacts health

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Are you Coordinating Care with the Primary Care Physician?

PsycHealth actively promotes coordination of care between mental health and primary care medicine. PsycHealth works to obtain signed releases of information so that this coordination of care can take place within legal parameters and as authorized by the member. For members who have received services on an inpatient or partial hospitalization level, PsycHealth forwards a Release of Information (ROI) to the treating facility to request signature. Once signed and returned, this ROI can be used to support the appropriate coordination of care between the services. Transitional care visit therapists also present ROIs to post-discharged members.

PsycHealth does not routinely request ROIs from outpatients. It is incumbent upon outpatient providers, however, to obtain these outpatient ROI signatures. Release of information forms can be found on the PsycHealth website, <http://www.psychhealthltd.com/phl/downloads.shtml> PCPs are also encouraged to obtain ROIs from their members during initial or ongoing paperwork collection.

Coordination of care includes communications with the PCP. All medical and lab work-ups must be ordered through the PCP.

Interfacing data for members on psychotropic medications may include lifestyle behaviors including diet, exercise, smoking, substance abuse and sleep hygiene as well assessment for impact on sexual functioning. Medical co-morbidities and their impact on mental health must also be integrated. Routine medical follow-up for psychotropic medications including antipsychotic medication is essential for dosage recommendations, alternative considerations and minimizing side effects while working to preserve physical health. These tests and procedures may include blood pressure, liver function, blood work-up, electrolytes, renal function, hormonal/endocrine panels as well as prolactin and EKG levels if symptomatic or indicated by history. Medical illnesses may present as psychiatric disorders and vice versa.

As our field continues to evolve and medications continue as significant aspects of a member's psychological treatment, providing treatment in a void without the appropriate coordination of care is contraindicated and can be dangerous. Take the time to obtain ROIs and coordinate care. Your member's quality care depends on these efforts.

Too Much Work? Effects Reported

A recent study reports that individuals who work the longest hours have the highest associated health risks. This may be the flip side of the couch potato and those related health impact. British researchers found that among government workers, those who worked more than 10 hours a day had the highest risk of cardiac problems. Overtime was found to be associated with a 60% increased risk of heart problems. Increased hostility, stress and sleep disorders were also reported. Both males and females were affected by workplace stress.

Dr. Gomez Comments: This study is likely little news to providers in mental health. The current economic stresses fill call logs at PsycHealth. Members report increased work load, increased fears of losing their jobs, increased pressures and concerns regarding finances and ability to pay bills and maintain their homes. Some of our members have been forced to sell their homes or lost their homes in foreclosure and job stresses are routinely reported. The toll of the current economy impacts both physical and emotional health.

DSM - V - The Next DSM for 2013

The process of the development for DSM - V has continued since 2000 when Dr. Reiger was recruited to serve in coordinating the development of DSM-V. At that time, conferences for the research agenda and to propose work planning groups ensued.

13 conferences from 2004 - 2008 followed with experts focusing on specific diagnostic questions and literature reviews. The results of seven of these conferences have been published and the additional publications are expected.

Work groups have been working since 2007 and it is expected that the diagnostic categories of the mental disorders will reflect new scientific understandings. These work groups continue to meet for comprehensive review of the research, analyses and incorporation of clinical expertise. The work groups will prepare the DSM-V diagnostic crite-

ria which will be followed by a period of comment. The questions and concerns which are submitted during the comment period will be reviewed. Revisions will then be drafted as indicated and the final draft of the DSM-V will be submitted to the APA Council on Research, Assembly and Board of Trustees. From there, review and final approval will be pending for release of the edition which is targeted for May 2013.

Dr. Gomez Comments: The website, www.DSM5.org, states "Your input, whether you are a clinician, a researcher, an administrator, or a person/family member affected by a mental disorder, is important to us. We thank you for taking part in this historic process and look forward to receiving your feedback." Consider taking the time to review and comment and be part of this historical undertaking.

Cultural Relativism: An Illogical and Flawed Position Rescinded by AAP for Female Genital Mutilation but Debate Continues Worldwide

The American Academy of Pediatrics was to endorse the position that a "ritual nick" of the knife will be safer and offer compromise which may help to avoid greater harm that can ensue by more traditional, unclean and often brutal female genital mutilations. Female genital mutilation is reported to affect 100 million women according to recent UN statistics.

As reported by Equality Now, "The new policy statement essentially promoted Type IV FGM, as categorized by the World Health Organization (WHO), and suggested that federal and state laws might be more effective if they "enabled pediatricians to reach out to families by offering a 'ritual nick'."

From the AAP's rescinded statement:

"Mutilation" is an inflammatory term that tends to foreclose communication and that fails to respect the experience of the many women who have had their genitals altered and who do not perceive themselves as "mutilated." It is paradoxical to recommend

"culturally sensitive counseling" while using culturally insensitive language. "Female genital cutting" is a neutral, descriptive term.

The fatal flaws in this argument do not require retaking your freshman Logic 101 course. And, the defensive use of euphemisms is clear. Other psychological projections, rationalizations and denials can also be noted by those versed in mental health. Feminist theory would seek to remind us that women's sexuality has been the object of attempted control for centuries and violence has been a prime factor in such control.

Notwithstanding the reality of these defensive posturings, history and culture have been used as flawed arguments to rationalize and perpetuate violence and perpetrated atrocities throughout mankind.

While adults are free to choose to mutilate their bodies as they wish, children do not have such options for self protection and self direction. In

keeping with the Rights of the Child as well as principles of good medicine and health maintenance philosophy, children should be protected from all interventions that are not medically necessary. A child should have the right to an intact body that is not subject to non-medically necessary cutting, cultural or otherwise. It can be reasonably assumed that the pediatricians will charge for their "cultural female genital cutting" services as is true with male circumcisions. It is hoped that insurance will support the Rights of the Child and opt for non-coverage and non-reimbursements of these medically unnecessary treatments, assaults, mutilations or alterations on the child's sexual organs. Every action that is experienced by human beings affects the brain. Working to promote life experiences that support optimal development, growth, learning and compassion remain an ongoing ideal. In terms of healthcare, medical necessity remains a framework which must unite all providers while protecting all consumers.

Continued: See Update p. 3

UPDATE: LOGIC and RIGHTS OF A CHILD PREVAIL

EQUALITY NOW WELCOMES DECISION BY AMERICAN ACADEMY OF PEDIATRICS (AAP) TO WITHDRAW ITS 2010 POLICY STATEMENT ON FEMALE GENITAL MUTILATION (FGM) THAT ENDORSED PEDIATRICANS' "NICKING" OF GIRLS' GENITALIA

Equality Now, an international human rights organization has reported the AAP's decision to withdraw its revised policy statement on female genital mutilation (FGM) issued on April 26, 2010. The AAP has now stated that it has rescinded its 2010 revised statement on FGM, is opposed to "all forms of female genital cutting".

In addition to Equality now, WHO and the United Nations challenged the AAPs revisions and assumptions regarding the harm of FGM. Their position was that all forms of FGM constitute violence and discrimination against females.

While the U.S. has recently introduced a bipartisan bill (H.R. 5137), The Girls Protection Act which would make it illegal to remove a minor girl living in the U.S. for the purpose of FGM, debate worldwide in this area continues. The Girls Protection Act is also hoped to provide for educational programs in FGM practicing immigrant communities in the U.S. regarding the lifelong trauma and harm of FGM.

World Trends and Movements Towards Non-Violence

Liechtenstein is added to the list of countries banning all corporal punishment in homes. Liechtenstein is the 26th country to do so.

Let's hope the U.S. is not one of the last.

And, moves towards prohibition elsewhere...

Estonia: The newly formed Department of Children and Family Policy in the Ministry of Social Affairs announced prohibiting corporal punishment as a priority task. Draft legislation was targeted for introduction in April 2010.

Norway: Norway abolished corporal punishment in 1987, but a Supreme Court ruling in 2005 supported that light smacks were lawful. The law has been subsequently re-

viewed and amendments in 2010 have been passed to confirm that all corporal punishment of children is prohibited.

Poland: "On the Prevention of Family Violence" a bill prohibiting corporal punishment by parents, has moved to the Senate. If accepted, it should come into force in July.

Also ...

India: The Right to Free and Compulsory Education Act, prohibits corporal punishment in schools and became effective in April 2010.

Kenya: The Attorney-General has published the draft Constitution which states the right of every person "not to be subjected to corporal punishment" (article 29). There will be a national referendum on this draft of the Constitution in August.



Brain Research

Are you incorporating the latest brain research in your psychotherapeutic work? The current brain research is so compelling and rapidly evolving. It has important implications for our clinical endeavors. In the coming newsletters, I will begin a series of short articles to share some of the state of the art in this area and hopefully, empower your clinical work which in turn should serve to empower your patients.

As related, did you know that synthesizing of an organism

has recently been achieved? In the recent weeks researchers at the J. Craig Venter Institute generated an organism from a shelled out Myobacterium into which they inserted 1000 genes and demonstrated that the cell was operational. While there is discussion that this was merely gene substitution, others are labeling it as man-made life. Genetic manipulations' capabilities appear ready for significant expansions and increase in knowledge bases.



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Claims

Are you submitting claims on the PsychHealth portal yet? PsychHealth is actively working towards full compliance. Please contact PsychHealth if you need support or training in this area. In the future, there will be a penalty assessed for paper claims.

Daily Dose of Humor - Dog Humor that is...

How many dogs does it take to change a light bulb?

Golden Retriever: The sun is shining, the day is young, we've got our whole lives ahead of us, and you're inside worrying about a stupid burned out bulb?

Food for Thought

I object to violence because when it appears to do good, the good is only temporary; the evil it does is permanent.

- Mahatma Gandhi

Violence does, in truth, recoil upon the violent, and the schemer falls into the pit which he digs for another.

- Sir Arthur Conan Doyle

Violence can only be concealed by a lie, and the lie can only be maintained by violence.

Any man who has once proclaimed violence as his method is inevitably forced to take the lie as his principle.

- Alexander Solzhenitsyn

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