

PSYCHIATRY NOTES

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HOWARD R. BELKIN, M.D. AND BARBARA HERZIG BELKIN, M.D.
Psychotherapy and Psychopharmacology for Adults, Adolescents, and Children

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HOWARD R.
BELKIN M.D.

BARBARA
HERZIG
BELKIN,
M.D.

*Psychotherapy and
Psychopharmacology
for Adults,
Adolescents, and
Children*

1137
HOLLAND
STREET
BIRMINGHAM
MI
48009

(248) 644-
3605

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LOCATED OFF OF
S. ADAMS, JUST
NORTH OF
LINCOLN

YOUTHS WITH ASTHMA ARE MORE LIKELY TO BE DEPRESSED OR ANXIOUS

In a recent study published in the *Journal of Adolescent Health*, researchers showed that 16% of youths aged 11 to 17 years of age with asthma had one of several depressive or anxiety disorders. These disorders included depression, panic disorder, generalized anxiety disorder, and agoraphobia. This is as compared to youths without asthma, in which group only about 9% were positive for these disorders. The University of Washington group showed that asthmatic youths were about 1.9 times more likely to be depressed or anxious than their non-asthmatic cohorts. Additional risks included being female, living in a single-parent household, more recent diagnosis of asthma and more severe asthmatic symptoms.

The authors also indicated that depressed and anxious youths are harder to manage asthmatically because of the combination of the asthma and the depression or anxiety. These youths also have a higher incident of the use of cigarettes, making control of their respiratory problem even more difficult.

GENETICS AND ADHD

Attention-deficit/hyperactivity disorder (ADHD) is one of the most widely diagnosed disorders: an estimated 8% to 12% of children are affected. The genetic components that underlie the disorder are still being discovered. A special issue of the *American Journal of Medical Genetics* highlights recent research and includes results from the first genome-wide study of patients with ADHD.

In one study examining 600,000 genetic markers from more than 900 families, the authors were able to identify “novel genetic associations as viable ADHD candidate genes.” They called for larger studies to confirm their findings and to fully understand the genetic mechanisms that underlie the disorder.

INSOMNIA TREATMENT IMPROVES EFFICACY OF ANTIDEPRESSANTS

A significant number of patients with major depression also suffer from chronic insomnia that hampers recovery, according to sleep expert Dr. Drake. The prevalence of insomnia associated with psychiatric disorders is 40.4%, with major depression accounting for about 15%, he said in a recent presentation. However, most insomniacs do not seek treatment for the condition. In a study by Gallup Organization, only 6% of individuals with insomnia had seen a physician primarily for sleep problems.

According to Dr. Drake, treating insomnia in patients with major depressive disorder improves antidepressant response. In a study published in the journal *Biological Psychiatry* in 2006, patients who took both the sleep aid Lunesta along with Prozac had an antidepressant response about two weeks earlier than patients treated with Prozac alone.

DEPRESSION AND BONE LOSS IN WOMEN

Premenopausal women with major depressive disorder (MDD) have less bone mineral density (BMD) than those without MDD, according to a study in the *Archives of Internal Medicine*. Researchers reported that the level of bone loss in premenopausal women with MDD was at least as high as that associated with recognized risk factors for osteoporosis. The study was designed to reduce the possibility that lower bone mass was linked to factors other than depression. Except for MDD, the study participants were similar in all other risk factors for osteoporosis; smoking; fitness level; use of oral contraceptives; and age of onset of menstruation.

The team found that the prevalence of low BMD was greater in premenopausal women with MDD than in those in the control group at the femoral neck, total hip, and lumbar. There was no significant link between the degree of bone loss and the severity of depression or the number of depressive episodes. According to the researchers, the use of an SSRI did not contribute to low BMD.

HOWARD R. BELKIN M.D

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