



## Magnetic Seizure Therapy:

### ***A New Treatment for Depression***

In August 2012, a new treatment for depression was introduced in Canada. Magnetic seizure therapy (MST) uses magnetic pulses to induce targeted seizures affecting only the prefrontal cortex of the brain. Unlike electroconvulsive therapy (ECT), this form of therapy is localized in only a small portion of the brain that doesn't affect cognition. Hence, those who use this therapy don't suffer short-term memory loss, disorientation and other side effects. Most importantly, it works.



Still a relatively new treatment, the earliest study on this treatment dates back to 2003; the only place in Canada to offer this treatment is in Toronto's Centre for Addiction and Mental Health (CAMH). It's also one of a few places around the world to offer this therapy.

Besides severe depression, doctors are also testing to see whether MST can help patients with schizophrenia, bipolar depression and obsessive compulsive disorder. They are also using the technology to research and record activity in the brain, which can lead to better diagnosis and treatment of mental illness.

The therapy is supported by the Tenerty Family Foundation, which donated \$7.4 million dollars to the clinic.

By Melinda Cadarette

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## Teen Suicide: Causes and Intervention

Suicide is a serious problem among young people today. Children don't often commit suicide but as they get older the risk of suicide becomes higher. According to **Teen Mental Health**, death by suicide among young people is the second leading cause of death in Canada.

Mental illness, such as depression, bipolar disorder, schizophrenia, is one of the main causes. Drug and alcohol abuse also plays a large role in teen suicide.

According to KidsHealth some other factors that greatly increase the risk are:

- Feelings of hopelessness and worthlessness that often accompany depression.
- A previous suicide attempt.
- A family history of depression or suicide.
- Emotional, physical, or sexual abuse.
- Lack of a support network, poor relationships with parents or peers, and feelings of social isolation.
- Dealing with bisexuality or homosexuality in an unsupportive family or community or hostile school environment.

Most suicide attempts are not carried out with the intention of actually dying; rather they are cries for help. According to **ericdigests.org** "there seems to be universal agreement on the manner in which to counsel suicidal teens." The site recommends:

- Don't be judgmental
- Take all their problems and threats seriously.
- Don't try to talk the person out of it.
- Make your questions direct, such as, "Are you thinking about suicide?" Do not be afraid to do this. Often bringing up the subject is taken as a relief.
- Show that you are concerned and supportive
- Try to determine how serious the risk is "in order to make the appropriate referral to a health care professional, counselor, or concerned teacher."
- Do not agree to keep it a secret.
- Engage the appropriate help for the person if they don't want to seek help themselves.
- If you feel the person will act on their threats do not leave them alone. *(continued)*

Many young people do succeed with their plans to commit suicide but if family or friends watch out for the warning signs and intervene, it can be prevented. It just takes patience and understanding. Many times if the person is given the opportunity to discuss their problems and situation with a caring, non-judgmental person, it will help them get through their crisis and allow them to get on with life.

There are times though when intervention simply doesn't work and the person carries out the act anyway. It is not the fault of the person who intervenes and they should not feel guilty about it. I believe that the reason the intervention did not work is because the person's mind was already made up and no type of intervention would change their mind.

By Tony Legere

References:

"About Teen Suicide." *KidsHealth*. 17 November 2012.  
 < <http://kidshealth.org/parent/emotions/behavior/suicide.html> >

"Suicide." *Teen mental health*. 17 November 2012.  
 <<http://teenmentalhealth.org/for-families-and-teens/suicide/>>

Peters, Lori J, "Teenage Suicide: Identification, Intervention, and Prevention. Highlights: an ERIC/CAPS Fact Sheet." *ericdigests.org*. 1985. 17 November 2012.  
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## Family-Centered Care for Mental Health Consumers

The Mental Health and Addiction Services of Annapolis Valley Health (MHAS) is planning to implement a new service delivery model. On November 22, 2012 at Kings Riverside Court in Kentville, CMHA Kings co-hosted a session called “Working in Collaboration with Families.” They invited consumers and their family members to take part in the discussion with the view to discovering what their needs would be in a family-centered delivery system.

The idea of the family-centered service came out of the 2012 Nova Scotia Mental Health Strategy and it is currently being applied by the Family Work Implementation Committee of Mental Health and Addiction Services. It is designed after a model of care from the United Kingdom called the Meriden Family Work Programme.

About twenty people attended the session hosted by Val Davis. She began the session by saying, “We want to make our service more family sensitive.” The Meriden model of family-centered care reduces stress for families and reduces feeling of isolation and stigma. This model has also been found to reduce relapses in the consumer.

The audience, consisting of consumers, family members and health care professionals, was actively involved in the discussion. They welcomed the concept of family-centered delivery of care. They talked about the central role played by the RCMP in mental health and about the need for paramedics to be trained to handle a consumer in a crisis situation. They also sought a definition of mental illness and how to help a consumer realize they need treatment.

By Heather Frenette

[www.gov.ns.ca/health/msh/reports/together\\_we\\_can.pdf](http://www.gov.ns.ca/health/msh/reports/together_we_can.pdf)  
[www.meridanfamilyworkprogramme.com](http://www.meridanfamilyworkprogramme.com)

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Staff of **A Mental Health Perspective** and  
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## Kings Community Action Group on Gambling Launching VLT Free Sticker Campaign

Kings Community Action Group on Gambling (KCAGoG) aims to foster the growth of healthy communities shaped by citizens who make choices based on what is best for their area.

Founded in May 2011, Kings Community Action Group on Gambling (KCAGoG) is beginning its first public campaign. The group is distributing VLT Free stickers to businesses all over Kings County. These stickers will be prominently displayed on doors of local businesses to proclaim they are proud to run their operations without VLT income.

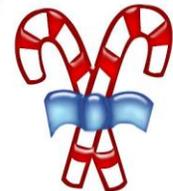
Working in Kings County, the objectives of KCAGoG are to reduce gambling harm, to increase awareness of the impact of gambling harms, to support local businesses and organizations to decrease their reliance on gambling revenues and to envision a future without dependence on gambling revenues. The villages and towns of Kings County are our communities. We feel people living here should have the choice to support VLT free businesses.

For more information about the sticker campaign or about KCGoG or to receive a sticker or fridge magnet, email [info@kingscommunityactiongroupongambling.ca](mailto:info@kingscommunityactiongroupongambling.ca). Or call Heather Frenette 542-2363.



## Holiday Hours

The offices of the  
**Canadian Mental Health Association Kings Branch**  
Will be closed for the holidays from  
**Noon on December 24, 2012**  
and will re-open on **January 2, 2013**



### A Mental Health Perspective Mission Statement:

The purpose of this newsletter is to bring faith, hope and courage to members of the local mental health community of Kings County, Nova Scotia, as well as others who are involved with a mental, emotional or psychological condition.

Donations to support this newsletter and other important programs and services can be made to CMHA Kings County Branch, 11 Opportunity Lane Suite 3 Box 10, Coldbrook NS B4R 0A5 (Cheque or money order, or online donations through [CanadaHelps.org](http://CanadaHelps.org))

#### Staff & Volunteers

Editor: Heather Frenette Writers: Tony Legere and Melinda Cadarette

Printing and Distribution: Laurel Taylor, James Taylor, Nancy Mailman and Heather Frenette

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