Message from SARDAAA, CEO

Dear Friends,

This is the season for remembering all of the wonders of the past year and the hopes for the year to come. Please be sure to remember all of the individuals who are suffering because they are not receiving treatment and their families who suffer along with them. Please help SARDAAA address the discrimination people experience because they live with a brain illness that they did not elect to have.

People who are affected by anosognosia (the inability to perceive they are ill) are the most likely to have a poor prognosis because they will not engage in treatment. SARDAAA and the L.E.A.P. Foundation are offering a training designed to help professionals, family members and peer specialists to create relationships, that will lead to treatment and recovery—avoiding homelessness, criminalization and suicide.

Along with the L.E.A.P. training we have workshops for diagnosed individuals and families.

Be sure to register before the January 1st Early Registration Rate expires. Register NOW
I personally want to thank all of our staff: Gordon Lavigne, Angel White, Sandy Dimiterchik, Grace Lee, Mark Fleming, Guide Consulting, and the amazing volunteers including: Mary Johns, Dewansh Goel, Rosie Neupert, Marie, Matt S., Nora B., Katie L., Sue Dutch, Lee Icenhower, Caroline Garza, Veronica Patout, Jordan Helwig, Donna Budai, Liz, All of the Special Events volunteers. All of the dedicated SA Leaders. The dedicated SARDAA Board of Directors: Raymond Cho, M.D, M.Sc., Chair, Mary Palafox, RN, Secretary, Russell Stalters, MS Treasurer, Sandy Dimiterchik, BS, Matcheri Keshavan, M.D., Robert Laitman, M.D., William Lawson, M.D., Ph.D., Tim Murphy, Ph.D., Susan Sheena, AA, Consuelo Wals-Bass, Ph.D., Laura Pogliano. It takes a very dedicated crowd of compassionate and passionate people to eliminate discrimination and change the treatment paradigm. We look forward to working more closely with all of the organizations who have the same goal to improve lives affected by psychosis.

With the sincerest of gratitude,

Very best,
Linda Stalters, MSN, APRN (ret)
Chief Executive Officer
Schizophrenia And Related Disorders Alliance of America
Message from FFS, Family and Friends, Coordinator

In closing out this year I want to wish all of the SARDAA community the best in the coming new year, and to thank SARDAA for all its very positive steps on our behalf. Per the wisdom of an unknown writer “Hope sees the invisible, feels the intangible and achieves the impossible”. In this I see so many of our SARDAA families and I feel in awe of their devotion and strength.

With Heart,
Mary Ross
Message from SA Staff Supporter
Different Environments for SA Groups
By Sandy Dimiterchik

Schizophrenia Alliance Psychosis Support and Acceptance (SA) groups come in all sorts of shapes and sizes. Sometimes they are found at the local drop-in center or mental health clinic. Libraries and churches are also an option. Finally, occasionally they are found in prisons and hospitals. The setup of the group and the leadership differs depending on the environment. For regular groups, the requirement is a leader, with possibly a co-leader or pro staff supporter, a professional who might lead initially, then serve as a resource to the facilitators. In a secured environment, such as a prison, a staff supporter is needed.

Have you ever considered volunteering in a prison or hospital to help people diagnosed with brain disorders, such as schizophrenia, bipolar disorder, schizoaffective disorder, depression with psychosis, or experience with psychosis? Be a light of hope and a guide to the path of recovery! If you are interested, please contact me at 832-439-1586 or sandy.dimiterchik@sardaa.org. SARDAA provides the training, and I am there as a resource.

SARDAA is a wonderful, thoughtful, caring organization which offers understanding and hope that is not found any
place else.
Leslie Wilson -- Parent

On behalf of SARDAA and the thousands of individuals we have served this year, thank you for your commitment to our mission.

With your support, we are providing awareness, compassion, and support for those living with schizophrenia and related brain diseases and helping create a safety net for individuals within their communities.

But our work isn’t finished. To help us serve more individuals like Leslie and her family living with Schizophrenia and related brain illnesses, we have received a generous matching gift challenge from an anonymous donor who has agreed to double the impact of donations made between now and December 31, 2018.

That means for every $50 you give, SARDAA will receive an additional $50—for a total gift of $100 to support our work – doubling its impact!

How your donation helps
$100 > $200 = One individual’s support group call for five months
$250 > $500 = One individual’s scholarship for L.E.A.P. training
$500 > $1,000 = One emergency grant for a needy household

Our medical experts tell us that we have never been closer to making disease-modifying progress in the fight against schizophrenia spectrum brain illnesses. BUT we know that too many people are exhibiting the signs and symptoms of serous brain illness and are undiagnosed and untreated. And we know that more consistent quality of care for those who are diagnosed must be accessible.

There has never been a more urgent time for you to stand Up and Stand with us as we aim to transform schizophrenia spectrum brain illnesses, but we need your help to make it happen. As you plan your year-end giving, I hope you will consider making a gift to increase our impact nationwide.

Supporters like you have grown our community to touch the lives of thousands – whether they faced a new diagnosis, sought to improve their quality of life, or wanted to reach out to others going through the same experience.

Make your gift today to do TWICE AS MUCH to help people living with Schizophrenia and related disorders right now.
Thank you for your support!

PS - Remember, you only have limited time to DOUBLE the impact of your gift! Make a donation today!

**Remember, you only have limited time to DOUBLE the impact of your gift!**

**Make a donation today!**

[Donate Here]

---

**Personal Story of SA Members**

**Paul C.**

In the past, I have had two psychotic breaks (meaning: breaks from reality). During the first break I experienced abnormal thinking, voices, and visual hallucinations. I thought that the world was coming to an end. Naturally I feared for my family’s lives, hoping to save them from this great catastrophe. They knew that something was wrong with me as soon as I began describing to them what I thought. Then I received treatment at Clinton Valley Center, a state mental hospital, and it took about a year outside to recover from the shock (of being in the hospital) and depression. At the end of that year, December 1985, the doctor and I talked about schizophrenia. The medicine, Haldol, took away all the symptoms.

In February 1986, I got sick again, experiencing a complete new set of hallucinations, like the one I call the “Sun Dance.” While “sleeping” in bed, I had a Native American drummer pounding a drum, and I’d see these visions. Of course, the whole thing was a hallucination; however, this time I didn’t panic throughout the experience. I sort of had a scientific detachment and fascination with it. After February, I went back to the doctor to resume the medicine.

Then I discovered the SA group to help me battle schizophrenia. The group has helped me psychologically to fight my symptoms (voices), and the medicine does the rest. The voices are not a nuisance, because they usually last a few seconds while I’m attempting to sleep (day or night). In short, schizophrenia is a frightening experience, but that’s in the past. For me, recovery and overcoming apathy are important today.
We welcome your message/art from SA Members for inclusion in the newsletter. Please submit your message to: info@sardaa.org or mail to SARDAA PO Box 941222, Houston, TX 77094-8222 for consideration for next month's newsletter.

Your story might be included in a SARDAA newsletter and might be published in a future edition of the SA Blue Book.

Phone Support Groups
SA Conference Call Groups
Only for individuals diagnosed
Sundays - 7 pm Eastern Time
Mondays - 4 pm Eastern Time
Thursdays - 7 pm Eastern Time
Fridays - 7 pm Eastern Time
Saturdays - 1 pm Eastern Time
Young Adult SA Conference Call Group
Saturdays - 3 pm Eastern Time
Spirit of SA Conference Call
For SA Leaders and Potential Leaders
First Wednesday of Each Month - 7 pm Eastern Time
Family and Friends Support Group
Not for individuals diagnosed
Every Tuesday - 7 pm Eastern Time
Toll-free Calls
Call-in information (855) 640-8271
Entry Code 88286491#
International Number (720) 362-6499
Facebook Support Group
Only for individuals diagnosed
JOIN The Facebook Group Here
This is a Closed group, ask to be added.

To read personal stories from people who have been treated for TD,
visit Patients.CMEinstitute.com
SARDAA Strongly Opposes New CMS Part D "Six Protected Classes" Rule Will Hurt Care for People with Schizophrenia

Linda Stalters, SARDAA CEO, Calls on Congress to Intervene

Washington, D.C. - Today, Linda Stalters, Chief Executive Officer of the Schizophrenia and Related Disorders Alliance of America (SARDAA) spoke out strongly against a new Centers for Medicare and Medicaid Services (CMS) regulation that would reduce the availability of anti-psychotic and anti-convulsant medications through the critically important Medicare Part D prescription drug program.

SARDAA urgently seeks improvement in lives affected by schizophrenia-related brain illnesses (mental illnesses involving psychosis). SARDAA promotes hope and recovery through support programs, education, collaboration, and advocacy. The organization runs a network of peer support groups and volunteer chapters across the United States.

READ MORE

William B. Lawson MD, PhD, DLFAPA

Board member of Schizophrenia And Related Disorders Alliance of America

Adjunct Professor, University of Maryland

Director, Mental Health Research

Emerson Clinical Research Institute

I recently was invited to present at the Annual Conference on “Brain Disorders, Neurology and Therapeutics” in Paris France. My talk was “Schizophrenia: Neurological Disorder or social phenomenon?”
Meet Linda Stalters of Schizophrenia and Related Disorders Alliance of America
November 28, 2018
Voyage Houston Magazine
Linda, let’s start with your story. We’d love to hear how you got started and how the journey has been so far. As founder and currently the Chief Executive Officer for Schizophrenia and Related Disorders Alliance of America (SARDAA), I have devoted not only the years since the inception of SARDAA in 2008 but also 52 years as a Licensed Practical Nurse, Registered Nurse and an Advanced Practice Registered Nurse Psychotherapist to serving the most seriously mentally ill.

My career has spanned the disparaging years of relegating people with schizophrenia into nursing homes and “rewarding” behavior with cigarettes to serving in a more enlightened and therapeutic milieu in a private long-term private hospital, as well as helping develop the DCVAMC schizophrenia unit and within my compassionate and therapeutic private practice.

How to Make New Housing & Hospitals Available for Mentally Ill
December 1, 2018
DJ Jaffe
Great news: The federal government just made it easier for your state to expand housing and hospitalization options for the seriously mentally ill. But we have to act fast. The new policy allows states to use Medicaid money to pay for some hospitalization and housing that was previously prohibited. However, in order to use Medicaid to expand housing and hospitals in your state, the state Medicaid Director has to apply for a waiver.

Childhood Infections May Trigger Mental Illness
December 5, 2018
JAMA Psychiatry
A large Danish population-based study provides strong evidence of an association between childhood infection, antibiotic treatment, and subsequent neuropsychiatric disorders.

Investigators found that the risk of developing a mental disorder increased by more than 80% after hospitalization for severe infection. The use of anti-infectives, specifically antibiotics, to treat the infection was associated with about a 40% increased risk for a subsequent mental disorder.
Childhood Trauma Hikes Adult Psychosis Risk
November 21, 2018
Childhood and adolescent trauma can cause psychotic experiences in young adulthood, new research shows.

Investigators longitudinally studied close to 4500 youngsters between ages 0 to 17 years to assess whether trauma exposure in early childhood, middle childhood, or adolescence was associated with psychotic experiences at age 18 years.

They found that exposure to any trauma up to age 17 years was associated with highly increased odds of later psychotic experiences, with exposure to multiple trauma types and at multiple age periods leading to greater risk.

CMS Announces New Medicaid Demonstration Opportunity to Expand Mental Health Treatment Services
November 13, 2018
CMS letter to State Medicaid Directors outlines new opportunities for states to receive payment for residential treatment services

Today, the Centers for Medicare & Medicaid Services (CMS) sent a letter to State Medicaid Directors that outlines both existing and new opportunities for states to design innovative service delivery systems for adults with serious mental illness (SMI) and children with serious emotional disturbance (SED). The letter includes a new opportunity for states to receive authority to pay for short-term residential treatment services in an institution for mental disease (IMD) for these patients. CMS believes these opportunities offer states the flexibility to make significant improvements on access to quality behavioral health care.

Gene Risk Scores May Predict Antipsychotic Response in Patients with First-Episode Psychosis
American Psychiatric Association
A study published today in AJP in Advance suggests that calculating the polygenic risk score (PRS) of a patient with first-episode psychosis can offer clues as to whether he or she will respond to antipsychotics. A PRS involves adding up the total number of genetic variants associated with schizophrenia risk in an individual's DNA.

“Polygenic risk scores represent the combined effects of many thousands of genetic variants across the entire genome, and better represent the very complex genetic nature of schizophrenia,” said
lead study author Jian-Ping Zhang, M.D., Ph.D., an assistant professor at the Feinstein Institute for Medical Research, in a press release.

**Specialized Psychotherapy Found to Reduce Severity of Delusions in Patients with Schizophrenia**

American Psychiatric Association

Participating in a brief course of individualized metacognitive training—a psychotherapy designed to specifically target delusional beliefs—can reduce the severity of delusions and positive symptoms in patients with schizophrenia, according to a study published Tuesday in Schizophrenia Bulletin.

The study found that patients who received metacognitive training had significant reductions in delusional thinking compared with patients who received cognitive remediation, a program designed to improve cognitive abilities. These improvements were maintained at six months.

**Link Between Neonatal Vitamin D Deficiency and Schizophrenia Confirmed**

Newborns with vitamin D deficiency have an increased risk of schizophrenia later in life, a team of Australian and Danish researchers has reported.

The discovery could help prevent some cases of the disease by treating vitamin D deficiency during the earliest stages of life.

The study, led by Professor John McGrath from The University of Queensland (UQ) in Australia and Aarhus University in Denmark, found newborns with vitamin D deficiency had a 44 per cent increased risk of being diagnosed with schizophrenia as adults compared to those with normal vitamin D levels.

"Schizophrenia is a group of poorly understood brain disorders characterised by symptoms such as hallucinations, delusions and cognitive impairment," he said.

**'Master key' Gene has Links to Both ASD and Schizophrenia**

November 5, 2018

Emory Health Sciences

Recent studies of complex brain disorders such as schizophrenia and autism spectrum disorder (ASD) have identified a few "master keys," risk genes that sit at the center of a network of genes important for brain function. Researchers at Emory and the Chinese Academy of Sciences have now created mice partially lacking one of those
master keys, called MIR-137, and have used them to identify an angle on potential treatments for ASD.

**Movement Disorders in Children Warrent Screening Evaluations**

November 5, 2018

MDEDEDGE Psychiatric Coverage

Movement disorders should be a factor in screening children receiving pharmacotherapy, Jagan K. Chilakamarri, MD, said in the annual meeting of the American Academy of child and Adolescent Psychiatry.

"I started seeing a very, very complex group of pediatric patients in my office," said Dr. Chilakamarri, medical director at the Atlanta Psychiatric Institute, and co-director of the Movement Disorders Program at Emory University, Atlanta. "I decided I needed to coordinate with a neurologist and sort out what was happening."

**It Begins with Basic Science**

November 30, 2018

Joshua Gordon

NIMH

In my Director’s messages, I’ve written about the breadth of research funded by NIMH. I’ve written about services research, learning what it takes to ensure that effective treatments can be delivered in real-world settings; about translational research aimed at finding biomarkers and novel therapeutics; and, about how we are trying to use the latest genetic information to understand how psychiatric dysfunction is encoded in our genomes. These are all important, directed efforts to explore the mechanisms of mental illnesses, with the expectation that these discoveries will lead to novel treatments or the better application of existing ones.

**Previous Studies Oversimplified Schizophrenia Symptoms**

November 27, 2018

Neuroscience News

Summary: Researchers have developed a new method to classify the negative symptoms of schizophrenia. Traditionally, schizophrenia’s symptoms are placed into two categories, but the new study argues this is too simple and suggests using a five category system.

Source: University of Nevada Las Vegas.

**Psychotic Experiences May Increase Risk of Suicidal**
Behaviors, Met-Analysis Finds
American Psychiatric Association
People who have hallucinatory experiences and delusional beliefs may be more likely to think about, attempt, and die by suicide than those without psychotic experiences, suggests a meta-analysis published today in JAMA Psychiatry. “Psychotic experiences are reported by 5% to 8% of the general adult population,” wrote Kathryn Yates, M.Sc., of the Department of Psychiatry at the Royal College of Surgeons in Ireland and colleagues. “While initial research focused on an increased risk for psychotic disorder in individuals who report PEs [psychotic experiences], much subsequent research has demonstrated that PEs are associated with high risk for a broad range of mental disorders and poor mental health outcomes in general.”

READ MORE

Researchers Alleviate Schizophrenia Symptoms in New Mouse Models
Despite extensive research efforts, schizophrenia remains one of the least understood brain disorders. One promising area of research is in receptors on the surfaces of brain cells that help sense growth factors. But there's been a problem: in previous schizophrenia studies, researchers have genetically manipulated brain cell receptors in very young mice. Schizophrenia usually affects adults.

In a recent issue of the Proceedings of the National Academy of Sciences, Lin Mei, MD, Ph.D., asked, does all the tinkering in young mice hamper their brain development, causing schizophrenia-like symptoms? Or, do their brain cells develop normally, but in adulthood struggle to communicate? Researchers need to know whether to focus their efforts on brain cell development or communication, or both, because the answer to these questions implies different therapeutic approaches.

READ MORE

The Brain Continues to Develop in Young People with Schizophrenia
November 7, 2018
Brain & Behavior Research Foundation
A research team has discovered something important—and encouraging—about what happens to the brain in the period immediately following the onset of schizophrenia. Based on analysis of functional MRI brain imaging, they conclude that during the first one to two years following diagnosis, the brain continues to follow its normal developmental path in most young patients.

Such patients do not show deterioration or disruption of the developmental process, the researchers say. This is important since
the illness typically manifests during adolescence or young adulthood, a period crucial in the maturation of the brain. “Patients show ongoing brain development comparable to that of healthy controls [of the same age], highlighting the possibility for plasticity and developmental capacity” that might be boosted by therapy.

Why isn't Mental Illness Treated Like Any Other Illness?
Cecile Tebo
November 21, 2018
When my sister was diagnosed with incurable brain cancer she was totally embraced by the medical community. Despite her delusions, hallucinations and at times difficulty to manage, she was well taken care of.

She was given a 24-hour sitter. We were never dismissed or asked to take her home. She was never just discharged, despite her disease being incurable. There was understanding that the symptoms she had would be virtually impossible for us as her family to manage.

She died in the hospital and was guided in this journey with fantastic medical care. This experience gave me time to reflect on how different we would have been treated if her psychosis would have been from a different origin. If her psychosis was caused by mental illness, I know without a doubt that we would have faced a rapid discharge with limited resources.
Help Support Schizophrenia and Related Disorders Alliance of America

Amazon donates to Schizophrenia & Related Disorders Alliance. Shop for great deals at smile.amazon.com/ch/33-1213657

Easy steps to support Schizophrenia and Related Disorders Alliance of America through Amazon Smile:

Sign in to your Amazon account at smile.amazon.com.

Select Schizophrenia and Related Disorders Alliance of America
Search for and select Schizophrenia and Related Disorders Alliance of America as your charity. Once selected, you will receive a confirmation email.

Shop and checkout as you would on Amazon. No extra cost is passed on to you, but Amazon will automatically donate 0.5% of your purchases to Schizophrenia and Related Disorders Alliance of America.

Please share with your friends and family to join you to support Schizophrenia and Related Disorders Alliance of America!

By choosing Schizophrenia and Related Disorders Alliance of America as your charity on smile.amazon.com, Amazon will donate 0.5% of your eligible purchases to Schizophrenia and Related Disorders Alliance of America.

Please take a moment to find out how you can help support SARDAA, not only today but every day - at no extra cost to you!!

IT’S SO SIMPLE: just bookmark this link http://smile.amazon.com/ch/33-1213657, start shopping and support us every time you shop.

Shop with PayPal and choose SARDAA to Donate with PayPal Giving Fund to help support SARDAA.

Texas and Louisiana Friends:
Re-Enroll Your Kroger Plus Cards

You can support SARDAA without spending a penny! Register Schizophrenia and Related Disorders on your Kroger Plus Card and they will donate a percentage to SARDAA each time you use your card.

Please register online at www.krogercommunityrewards.com
Link to: Schizophrenia and Related Disorders–Kroger Plus
Help Change Lives -- Donate Now

Thank you to those who already made a donation. Every contribution makes a difference.

Sincerely,
Jordan Helwig, Creative Designer
Angel White, Editor