

## Subscribe to Depression Center Update

You've received this newsletter because you elected to be added to our mailing list, or because you have been identified as someone interested in advances in the treatment and prevention of illnesses.

If you want to be added to or deleted from our mailing list, please contact Trish Meyer at [meyerpa@umich.edu](mailto:meyerpa@umich.edu) or 734 763 7495.

Information about depression is available online. Please visit our website at [www.depressioncenter.org](http://www.depressioncenter.org).

**The Executive Officers of the University of Michigan Health System:** Robert P. Kelch, Executive Vice President of the University for Medical Affairs; Douglas L. Strong, Director and CEO, U-M Hospitals and Health Centers; James O. Woolliscroft, Interim Dean, Medical School; Mary Sue Coleman, President of the University of Michigan

**The Regents of the University of Michigan:** Julia Donovan Darlow, Ann Arbor; Laurence B. Deitch, Bingham Farms; Olivia P. Maynard, Goodrich; Rebecca McGowan, Ann Arbor; Andrea Fischer Newman, Ann Arbor; Andrew C. Richner, Grosse Pointe Park; S. Martin Taylor, Grosse Pointe Farms; Katherine E. White, Ann Arbor; Mary Sue Coleman, ex officio

The University of Michigan is an equal opportunity/affirmative action employer.

Copyright ©2007 Regents of the University of Michigan, Ann Arbor, Michigan, 48109

Published 5x/yr by the University of Michigan Depression Center. Produced by: Trish Meyer and Elizabeth Sikkenga.

University of Michigan  
Depression Center  
Rachel Upjohn Building  
4250 Plymouth Road  
Ann Arbor, MI 48109 5763

[www.depressioncenter.org](http://www.depressioncenter.org)

Nonprofit  
Organization  
U.S. Postage  
PAID  
Ann Arbor, MI  
Permit No. 144

DEPRESSION CENTER

# Update

from the nation's first comprehensive depression center

[early spring 2007]

*This issue of the Depression Center Update is made possible by the generous support of the Dr. Michael Louis Smith Fund, created by a gift from Edith and Michael Smith in memory of their son, for Depression Center education and outreach.*

## Upcoming Events

### Bright Nights: Eating Disorders and Depression

On March 6 from 7:00 8:30 p.m. the Depression Center continues its popular educational series, Bright Nights, with a program focusing on the connections between eating disorders and depression. The program will be led by David Rosen, MD, MPH, an expert in adolescent development and eating disorders, from the U M Depression Center.

Co sponsored by the Depression Center and the Ann Arbor District Library, the Bright Nights public forums provide an opportunity for community members to obtain up to date information on a variety of topics related to depression, through discussion and Q & A between audience members and expert panelists.



*Keeping active, getting exercise, and spending time outside in the light can all be very helpful in managing depressive illnesses.*

All Bright Nights programs are held from 7:00 8:30 p.m. in the Multi Purpose Room of the Ann Arbor District Library downtown branch.

For the complete listing of Bright Nights programming, visit the Depression Center website:

[www.depressioncenter.org](http://www.depressioncenter.org).

## Recent Events

### Community Open House

Over 400 people visited the new Rachel Upjohn Building during the Community Open House on November 12, 2006. Visitors received guided tours which highlighted the research, clinical, and educational activities taking place in the building. Remarks by John Greden, M.D., executive director of the Depression Center, and educational displays hosted by research scientists, illustrated the qualities that make the Depression Center unique.



### From the Director

John F. Greden, MD

Disrupted and irregular sleep, multiple unfamiliar stresses, a major life change, alcohol or drug abuse: these factors put anyone at an increased risk for depression. But college students, who are at the prime age of onset of depression and other psychiatric disorders, are particularly at risk.

In recent years, the number of college students diagnosed with depression or bipolar illness has increased steadily. University of Michigan research shows that as many as 15 percent of all college students may have symptoms of depression, and about 10 percent of college students arrive on campus with a history of the illness. However, depression and other illnesses may remain hidden and go untreated: the disorder may not be easily recognized by faculty or staff, or students may attempt to actively hide their symptoms because of academic or social pressures. The Depression on College Campuses Conference was designed to bring together educators, administrators, researchers, and students to explore the unique issues surrounding student depression, and to discuss what colleges can and must do about it.

The good news is that treatment tends to be most effective when it is begun at this age. But we can do better on diagnosing and treating, students, and on fighting stigma on campus. We need to continue learning more.

Dr. Greden is the Executive Director of the University of Michigan Depression Center.

## DEPRESSION ON COLLEGE CAMPUSES

### New Challenges, New Approaches

March 19-20, 2007

The University of Michigan Depression Center invites you to attend the **5th Annual Depression on College Campuses Conference**.

Conference speakers will explore the **core issues** surrounding depression among college students. Clinicians, university faculty, administrators, staff and students, and concerned parents and friends will all find the conference useful.

The conference is **FREE** for all students, and \$99 for others. For more information, and to register online, please visit [www.depressioncenter.org](http://www.depressioncenter.org), or contact Trish Meyer at 734-763-7495, or [meyerpa@umich.edu](mailto:meyerpa@umich.edu).



*We look forward to seeing you!*

*The pressures and changes of college life can create a "perfect storm" for depression. We can do more to help.*

## Undergraduates and Psychostimulants

by Sean Esteban McCabe, PhD, MSW

In the past ten years, there has been a significant increase in the number of diagnoses of attention deficit hyperactivity disorder (ADHD) in young people in the United States. The good news is that the rise in diagnoses means that more young people in need are receiving treatment, usually through the prescription of psychostimulants such as Adderall (an amphetamine/dextroamphetamine formulation) and Ritalin (a methylphenidate). One unhappy consequence, however, is a rise in the nonmedical use of prescription stimulants, possibly because young people simply have greater access to these drugs. The nonmedical use of prescription stimulants among U.S. college students is now at its highest level in 15 years. Interestingly, it is more prevalent among U.S. college students aged 18-24 than among their same age peers who are not in college.

Among full-time undergraduates, the number of nonmedical users of prescription stimulants is greater than the number of medical users of prescription stimulants, according to a recent study by Dr. Sean Esteban McCabe, Dr. Christian Teter, Dr. Carol Boyd, and other investigators at the University of Michigan Substance Abuse Research Center. And there is growing evidence to indicate that abuse of other substances, such as alcohol, marijuana, and cocaine, is more

Many students are under intense pressure to succeed, which may motivate them to hide or mask symptoms of depression.

prevalent among nonmedical users of prescription stimulants than it is among medical users and those who don't use prescription stimulants for any reason.

Young people appear to fall into two main categories of nonmedical use of prescription stimulants: "performance enhancement" (those who are looking to improve concentration, help themselves study, and increase alertness; and "recreational use" (those who use these medications to get high and for experimentation. In any case, efforts aimed at reducing nonmedical use will have to take into consideration that prescription stimulants are highly effective and safe medications for many individuals with ADHD.

Several important issues still need to be examined, such as the relationship between depressive symptoms and the medical and nonmedical use of prescription stimulants. And it needs to be remembered that college students are, in most cases, taking on new responsibility for the management of their own health care and medications. Appropriate diagnosis and monitoring of college students who receive prescription psychostimulants is crucial not only to improve treatment results, but also to help prevent abuse of these medications.

**Dr. McCabe is a Research Associate Professor at the University of Michigan Substance Abuse Research Center.**



## Healthy Minds: National Study of College Student Mental Health

by Daniel Eisenberg, PhD

If any health topic merits a regular and comprehensive national study, college student mental health seems to be it. Consider these facts:

- 75% of mental disorders have their first onset shortly before or during the typical college age of 18-22 years;
- Approximately 60% of young people in the U.S. attend college in 2006, over 15 million students were estimated to be enrolled in U.S. degree-granting institutions, according to the National Center of Education Statistics);
- College communities offer a variety of channels (such as residential, academic, extra-curricular, health services) through which to identify, prevent, and treat mental health problems.

The Healthy Minds Study is currently being developed by researchers at the University of Michigan. Led by Daniel Eisenberg, PhD, Healthy Minds is the first effort to produce comprehensive mental health data for representative student populations. Using a nationwide sample of colleges and universities, the study collects data using web-based surveys. The surveys ask students primarily about seeking help for symptoms of depressive and anxiety disorders, and the access they have to care and treatment.

Healthy Minds began with a pilot version at the University of Michigan in autumn 2005. There were a number of interesting

findings. For example, 60% of students who screened positive for major depression had not received any mental health treatment in the past year, even though all students at the university have access to free short-term psychotherapy as well as basic medical services.

The study is being fielded at about a dozen schools around the country in spring 2007. It will then be expanded to a larger sample in each succeeding year, with the aim of having a nationally representative sample of at least 50 schools by 2009. In the long term, the study will represent not only an annual source of important data, but also a large network of schools collaborating to design and evaluate new initiatives to improve student mental health.

**Dr. Eisenberg is an Assistant Professor in the University of Michigan School of Public Health.**

## Saving Lives: QPR

by Todd Sevig, PhD

Every year, approximately 1,100 college students die from suicide, and 24,000 more make suicide attempts, according to the Journal of the American Medical Association. The Centers for Disease Control and Prevention tell us that suicide is the third leading cause of death in people aged 15 to 24 years in the United States. We can do more to prevent these deaths.

University of Michigan Counseling and Psychological Services (CAPS) has launched a major suicide prevention program called QPR: Question, Persuade, and Refer. QPR teaches "Gatekeepers" on campus, those who regularly see students, such as faculty, staff, resident advisors, physicians, and friends to recognize the warning signs of distress and help students get professional help before it's too late.

We know from research that early detection of mental health issues gives a much greater prognosis for recovery, and that early intervention can sometimes be critical. The ultimate goal is to ensure

that students who need help, get help. Christine Asidao, Assistant Director of Outreach and Education for CAPS, explains, "QPR recognizes that people who are at risk for suicide, no matter how socially isolated they may be, have contact with potentially helpful individuals in the community."

Like CPR, QPR is a behavioral intervention that focuses on recognizing distress and helping the distressed person get the professional help he or she needs. Also like CPR, it is designed to be easily learned and applied by everyone, including or especially people outside of mental health professions. Participants learn to recognize the verbal, behavioral, and situational warning signs of suicide, and then how to Question a person about suicidal thoughts, how to Persuade them to get help, and how to Refer the person to the appropriate professional.

Learning to manage their own nutritional and medical needs is a challenge for many young people.



University of Michigan CAPS staff members are certified and licensed to provide QPR Gatekeeper training. Since beginning the program in November 2006, more than 70 U-M units and departments have requested training. QPR was developed by the QPR Institute (www.qprinstitute.com) in Spokane, Washington. The program is now in use by over 60 colleges across the country, but it is not just for educational institutions. The QPR Institute recommends that at least one person in every household should be trained in QPR.

By surrounding students with people who care and know how to support them, CAPS works to help to prevent the tragedy of suicide.

**Dr. Sevig is the Director of the University of Michigan Counseling and Psychological Services.**

## Advice for College Students

### Preventive Steps

- Avoid major disruptions in your sleep patterns, even on weekends
- Get plenty of regular exercise
- Make sure you have a dependable support system of friends, family, and campus professionals
- If you have been receiving treatment back home, make sure you have referral arrangements worked out before you get to campus

### Treatment Steps

- Depression is an illness, and it's treatable. If you suspect you may be depressed, go see your doctor
- Treatment is ongoing: don't stop your treatment as soon as you feel better. Always consult your doctor before making treatment changes
- If you notice you feel worse during the winter, consider "bright light" phototherapy

### The Importance of Education

- Learn as much as you can about the topic of depression on campus
- Learn how to manage your illness: become a partner with your clinicians, and refer to trusted books and web sites for information such as [www.depressioncenter.org](http://www.depressioncenter.org)
- Counteract stigma! Talk about depression, and use honest and appropriate language

This month's articles are written by leading researchers in the field of depression among college students. Learn more about these topics from the authors at the Depression on College Campuses Conference. Register at [www.depressioncenter.org](http://www.depressioncenter.org).