Wisconsin Public Psychiatry Network Teleconference (WPPNT)

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WPPNT Reminders

• Call 877-820-7831 before 11:00 a.m.
• Enter passcode 107633#, when prompted.
• Questions may be asked, if time allows.
• To ask a question, press *6 on your phone to un-mute yourself. *6 to remote.
• Ask questions for the presenter, about their presentation.
• The link to the evaluation for today’s presentation is on the WPPNT webpage, under todays date: https://www.dhs.wisconsin.gov/wppnt/2019.htm
Better Than Okay: Moving from Illness to Happiness

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New Data From the *General Social Survey* (public opinion research project since 1972)

- The number of Americans who rate themselves as “not too happy” has increased by 50% since 1990.
- Overall life satisfaction has taken a 6% plunge since 2007.
- Republicans have consistently been shown to be happier than Democrats, regardless of who is in the White House.
- White Americans are happier than black Americans.
New Data From the General Social Survey (public opinion research project since 1972)

- Urban Americans are now just as happy as rural Americans, gaining 10% since the 1970’s.
- Lower and middle class Americans are becoming less happy. Upper class Americans (3-4%) are becoming happier.
- Money is part of the equation, but just as important is health, which accounts for 25% of the variance. This difference has grown in recent years. Illness is becoming more difficult to deal with in America. We are in the longest decline in life expectancy since WWI.
What Is Mental Health?

• What is mental health? Is mental health like physical health? Being average? Better than average? Being content with what you have? Striving to be improve?
What is Physical Health?

- Physical Health
  - 1) Optimal functioning of bodily systems
  - 2) Freedom from disease
  - 3) Energy, stress management
  - 4) Healthy lifestyle and environment
  - 5) Productive engagement with the world
  - 6) Physical joy
Mental Health

• 1) Optimal functioning of the brain
  • Above average functioning – 91-100 on the old GAF scale

• 2) Freedom from disease
  • Mental illness, dementia

• 3) Energy, stress management
  • Resilience
Mental Health

• 4) Healthy lifestyle and environment
  • Challenge, meaning, connection

• 5) Productive engagement with the world
  • Social-emotional intelligence, maturity

• 6) Joy
  • Happiness
Optimal Brain Functioning

• Ability to work
  • Concentration
  • Interest
  • Motivation, future orientation
  • Self-actualization (living up to potential)

• Efficient problem solving
  • Accurate perception of reality
  • Environmental mastery
Optimal Brain Functioning

• General Mental Ability
  • Everyday life is an intelligence test. GMA has been linked to better physical well-being and economic well-being. The lower the IQ, the shorter the lifespan, the more risk of mental illness and cardiovascular disease.

• Autonomy
  • Recognition of one’s own needs
  • Being in touch with one’s own identity and feelings
Mental Health

• 1) Optimal functioning of the brain
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  • Resilience
Freedom from Disease

• Good enough genes
• Good enough parents
• Good enough home and neighborhood
• Good enough nutrition
• Good enough health care
• Good enough luck
Natural Course of Alzheimer’s

• Cognitive decline does not occur at a steady pace. After a certain point, it accelerates. More education shifts this change point to later in life. But once those with a later change point, once they reach it, decline much faster than people did who had an earlier change point.

• “Compression of morbidity” – It is possible and desirable to delay the onset of disease and compress the number of days one is ill and disabled at the end of life.
Cognitive Reserve

• The brain is our most adaptable organ. As cognitive decline occurs, the brain compensates. Cognitive reserve is the ability to maintain performance in the presence of brain deterioration. We don’t know whether compensation, efficiency, or structural explanations account for this.
Promoting Brain Health

• Stop smoking: smoking doubles the risk of dementia. Stopping smoking in midlife cancels the risk. Smoking also impairs name and face recall.

• Avoid illicit drugs, head injury, toxins

• Stay socially active: reduces stress and is intellectually stimulating in ways that games and reading are not. (Negative engagement is harmful.)

• Meaningful activity may be especially protective.
Promoting Brain Health

• Exercise: moderately vigorous and regular (walking briskly 5-6 hours/week.) Exercise promotes cardiac health, good lung function, and an increase in neurotropins.

• Eat a Mediterranean style diet: grains, fruits, vegetables, non-saturated fats. Omega-3 fatty acids from fish may be important.

• Moderate alcohol consumption: why?
Promoting Brain Health

• Keep learning: intellectual enrichment stimulate the brain to make more connections and may have greater reserves of cognitive ability to sustain more neuronal loss without problems.

• Manage stress: mild stress results in neurogenesis. but severe chronic stress does not. Cortisol damages neurons.

• Get a good night’s sleep: Sleep consolidates memories and reduces cortisol.
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Is there such a thing as mental energy?

• Well... we know that mental processes take energy. A long day sitting and sorting old papers can leave you exhausted, for instance.

• We know that using “will power” to control some behavior takes energy away from other bodily activities.

• Mental activities (thinking) result in increased metabolism in the brain.
Mental Energy

• Freud said that the “id” was the source of psychic energy in the brain. It consisted of the Libido (the instinct energy) and the Death Drive.

• Later writers would say that psychic energy acts on psychic phenomena (thoughts) as physical energy acts on physical objects.

• Psychologists often refer to certain individual being drained of energy by certain activities. (Myers-Briggs Type Indicator)
Mental Energy

• Other than historical opinions like these, there doesn’t seem to be any evidence that that mental energy is a different form of energy than the type the rest of the body uses.

• Mental processes use energy. A mentally healthy person will be able to access the energy of the body for mental events. A mentally compromised person will not (neurotic, fearful, depressed, etc.)
Some Factors that Affect Arousal/Energy

- Exercise
- Enough rest
- Type of foods eaten during the day
- Exposure to sunlight
- Exposure to interesting activities
- Variety of experience
- Social contact
Coping and Resilience

• Individual factors promoting resilience
  • Positive temperament
  • Intelligence and creativity
  • Humor
  • Good self-esteem - seeing oneself as a hero, not victim
  • Sense of control and self-efficacy, self-care
  • Sociability and close ties with others

• Environmental factors
  • Availability of social resources
  • Ability to maintain supportive relationships, being able to attract and use social support
Mental Health

• 4) Healthy lifestyle and environment
  • Challenge, meaning, connection

• 5) Productive engagement with the world
  • Social-emotional intelligence, maturity

• 6) Joy
  • Happiness
Healthy Lifestyle and Environment

• Challenge: recall that mild stress results in neurogenesis. Challenges are good for the mind as well as for the body. They help us develop a sense of mastery and confidence in our ability to manage whatever is coming next.
Healthy Lifestyle and Environment

• Meaning: people who have a purpose in life, seem to do better in many respects than those who don’t. It doesn’t seem to matter much if the purpose is saving the whales, or planting and tending a garden.

• People benefit from modest goals as much as from ambitious ones.
Healthy Lifestyle and Environment

• Connection: humans are social animals who are born to connect. It is very difficult to find any examples of people who are healthy physically or mentally who are not connected somehow to another human being.
Social Support and Life Expectancy

• Men and women without ties to others are 1.9 to 3 times more likely to die from ischemic heart disease, cerebral vascular disease, or cancer within a nine year period than individuals with more social contacts.

• The effect of social support on life expectancy appears to be as strong as the effects of obesity, cigarette smoking, hypertension, or level of physical activity.
Lack of Social Support

• Poor social support is associated with the onset and relapse of depression and the depression comorbid with several medical illnesses such as multiple sclerosis, cancer, and rheumatoid arthritis.

• Lack of social support is also implicated in the development of PTSD after trauma.
The Striatum (caudate, putamen, ventral striatum/nucleus accumbens)

• When we think we are choosing to do something, usually we are simply doing what we are programmed to do. The striatum is an important part of that programming. It receives input from all the reward circuits as well as the amygdala and, orbital frontal cortex, and anterior cingulate cortex.

• Neurons in the striatum integrate information about expected reward with motor information to guide behavior, including social rewards.

• Miswiring in the striatum is related to compulsive behavior (and addiction), tics, and problems with social connection.
Social Neurochemistry

• Social neurochemistry is linked to oxytocin, vasopressin, dopamine, and opioid receptors. Naloxone interferes with people’s ability to feel connected. Acetaminophen reduces social pain.

• Endogenous opioids play an important part in the reward associated with social behavior and counteract the aversive consequences of social stress.

• Social epidemiology has established a strong link between poor social integration and behaviors that result in alcohol and drug use. Conversely, the level of social integration has been shown to be associated with decreased relapse risk among treatment-seeking drug users.
Striatum and Loneliness

• In other words, the striatum is linked to loneliness. Loneliness hypersensitizes us to the striatum reward system. We become restless, irritable, and impulsive. This is a setup for opioid use.

• People with exposure to social stress will experience relief of distress when taking drugs that directly or indirectly activate the opioid system such as heroin and oxycodone. Alcohol also increases endogenous opioid levels in humans.
Addiction and Social Integration

- During early stages of drug use, the drug is typically taken in a recreational, impulsive manner. However, as addiction develops, drug users become increasingly compulsive. Compulsive users become increasingly impaired in their ability to function socially. This results in further social marginalization and exclusion — factors that promote further drug use.

- During recovery, relapse triggers are typically social; conflicts in the workplace and the family, lack of social support and problems associated with low socioeconomic status.

- Isolation is related to relapse.
Social Integration = Treatment

• Social integration, by restoring normal function of endogenous opioid systems, may decrease drug use and relapse. Improving the social integration of drug users through opportunities for housing, jobs and meaningful relationships is therefore a neurobiologically specific and critically important way to decrease drug use.

• Reducing stigma is important, not just as a compassionate intervention, but also as a way to reduce social isolation.
Reprogram the Striatum

• The striatum can be reprogrammed away from drug seeking behavior, not just by punishment, but by opioid reinforcement of socialization.

• We need to create social and psychospiritual interventions that can provide these rewards.
Mental Health

• 4) Healthy lifestyle and environment
  • Challenge, meaning, connection

• 5) Productive engagement with the world
  • Social-emotional intelligence, maturity

• 6) Joy
  • Happiness
Psychological Constructs in Successful Aging

• Resilience: a personality trait (hardiness), a process in responding to stress, or bodily responses to stress. A related process is adaptation.

• Optimism: positive expectations of the future. It is quite stable over time, and predicts greater participation in health protective behavior.

• Self-efficacy: related to lower anxiety, better cognitive functions, lower mortality
Psychological Constructs

• Positive attitudes toward aging (TV watching predicts worse attitudes toward aging in older people.)

• Spirituality: predicts longevity, better adaptation to medical illness, greater resilience, lower smoking and alcohol use.

• Wisdom: pragmatic life knowledge and decision making, emotional homeostasis, value relativism, management of ambiguity.
Wisdom

- Prosocial behavior and attitudes
- Pragmatic knowledge and effective social decision making
- Emotional homeostasis
- Reflectiveness and self-understanding
- Value relativism and tolerance
- Tolerance of ambiguity
Mental Health

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Comparing Mind

• We underestimate our “comparing” mind. We are always looking at those around us and comparing our circumstances to theirs. What makes people happy is not wealth, for instance, but relative wealth. Most of us would feel happier making $50,000/yr in a job where the average salary is $40,000, than making $60,000/yr in a job where the average is $70,000.

• Conversely, the health consequences of poverty are manifested more by people feeling poor than their actual level of poverty.
Social Media

• Social media allow us to be in constant contact with people who are richer, smarter, happier, more interesting, more fun, better looking, healthier, and more popular than we are.

• We are living in a perfect storm of rising socioeconomic inequality and a technology that rubs our noses in it, continually. No wonder we are struggling to feel OK.
“It is only a slight exaggeration to say that happiness is the experience of spending time with people you love and who love you.”

• Daniel Kahneman, Nobel Laureate