



Mihom News

Depression:

Are those Post Holiday Blues Something More?



According to the Center for Disease Control, (CDC), depression affects 1 in every 10 US adults in the US (2008). Depression is described by the Mayo Clinic as "a medical illness that causes a persistent feeling of sadness and loss of interest" (2012). Depression is more than just a bout of the blues, but instead an illness, not a weakness, that cannot just be shaken off. It affects one's ability to perform day-to-day activities. In children and teens, depression often occurs alone or with behavior problems and other mental health conditions, such as anxiety or Attention Deficit Hyperactivity Disorder (ADHD). It may appear more subtly in older adults. They may want to stay home, rather than go out to socialize. While the exact cause of depression is not known, many researchers believe that it is caused by chemical changes in the brain. It may be genetically linked as well. There are certain risk

factors that are associated with an increased incidence of depression: alcohol or drug abuse, certain medical conditions, such as hypothyroidism, cancer, or long term pain, certain medications such as steroids, sleeping problems, and stressful life events. Examples of these include: breaking up with a boyfriend or girlfriend, failing a class, death or illness of someone close to you, divorce, childhood abuse or neglect, job loss, and social isolation.

Depression can adversely affect the course and outcome of common chronic conditions such as arthritis, asthma, cardiovascular disease, cancer, diabetes, and obesity. The US Preventive Task Force recommends that healthcare providers screen adults for depression in order that accurate diagnosis and effective treatment be provided, along with careful monitoring and follow up. Screening tools ask questions that address the

symptoms of depression, such as feelings of sadness, irritability, frustration, loss of interest or pleasure in normal activities, reduced sex drive, insomnia, changes in appetite, restlessness, slowed thinking or speaking, indecisiveness, fatigue, tiredness, crying spells, as well as unexplained physical problems (mayoclinic.com, 2012). Health professions must be skilled at determining if individuals are at risk for causing harm to themselves, by directly asking them if they considered taking their lives and if so, if they have a plan. These signs can never be ignored, as it can literally be a life-saving tool to conduct the screening appropriately and to make the necessary referrals for treatment once it is identified that an individual is at risk for self-harm. Patients that admit to suicidal thinking, and who have a realistic plan, should be referred for emergency

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Patient Advocacy Chronicles

Home Health Aides and skilled services provided by nurses, social workers and physical therapists can be acquired on a private pay basis. These services allow for filling a gap

when needed services are not covered by Medicare and Private Insurance Companies. Often the provision of a home health aide in the home can be the determinant as to whether

or not a loved one can be cared for at home versus a Skilled Nursing Facility or Assisted Living Facility. At times there is simply a need for someone to be present and to (cont pg 2)





psychiatric evaluation. The presence of chronic medical illness may reduce the likelihood that physicians or other health care providers recognize or treat depression. Primary physicians must be alert to the possibility of depression in their patients with chronic disease. Depression should be treated separately because if it is not, patients are often unable to or unwilling to comply with treatment recommendations for their chronic physical conditions. Treatment for depression may begin with the initiation of an antidepressant, especially if the depression has persisted for two weeks or longer and interferes with routine functions of family, work, or school life.

The two classes of drugs most commonly used are selective serotonin-reuptake inhibitors (SSRI) and tricyclic antidepressants (TCAs). SSRIs are often considered first-line treatment for depression based on their relatively safe side effect profile. Non-pharmacological therapies include psychotherapy and counseling, as well as exercise and behavior change. Individuals tend to isolate themselves, so they may benefit from joining a social or religious group, taking a class, or becoming a volunteer. While primary care providers should be astute and recognize when their patients are depressed, they lack the time and expertise for initiating cognitive and interpersonal therapies. Referrals to mental health professions facilitate a more comprehensive approach to managing depression.

We consulted John A. Tallarido, LCSW (Licensed Clinical Social Worker), who graduated from Rutgers in 1993 with a Masters Degree in Social Work. He has been working full time in the counseling field since that time. Mr. Tallarido, a Licensed Clinical Social Worker and a Medicare provider, has his own private practice. He provides counseling in the convenience of one's own home. He has been working with MIHOM Healthcare Inc. for a year. In 1998, he obtained his Law Degree and is also a Florida licensed attor-

ney with a law office in the West Palm Beach area. Mr. Tallarido states, "The reasons why people with depression might avoid seeking help are because they may harbor a belief that they should be able to overcome these negative emotions and that seeking outside help might be a sign of weakness. People may also be embarrassed to seek outside treatment because of the stigma attached, especially for men, in having to open up one's emotions and feelings to a complete stranger, in order to feel better." Mr. Tallarido believes that embarrassment is also connected to a fear that others may think less of them if they found out that they are in therapy. The older generations tend to believe that they can figure out their difficulties on their own without seeking outside help, as they experienced some very difficult times due to wars and depressions while growing up. He explains, the younger generations have become more accepting in seeking counseling, as the stigma slowly erodes. Additionally, as information becomes more readily available as to the benefits of counseling, people are less inhibited in seeking a therapist.

If one comes from a family that tends to not be supportive, or there is a family understanding that difficulties and problems are solved within the confines of one's home, a family member may be less inclined, or perhaps even embarrassed, to admit that they can't solve their difficulties and problems alone anymore. Mr. Tallarido states, "A family member can help another family member cope with their depression by being supportive, loving and remaining positive ". Mr. Tallarido cautions that comments such as 'just snap out of it' reveals that the family member probably does not understand the depth of emotional turmoil involved. He adds, "If family members tend to not communicate well with one another or if a family member was berated or made to feel weak when they attempted to express their difficulties, they may resist sharing their thoughts and feelings.

Resources that are available for counseling will depend on the type of insurance coverage that one has. Mr. Tallarido offers, "It is best to ask a customer service representative from your insurance company what counseling services are available within the immediate area. Your doctor or psychiatrist may have someone that he or she works with for counseling services. Mr. Tallarido provides counseling in his clients' homes. However, most counselors or therapists will require you to go to their office when seeking treatment". He points out that people suffering from depression, who seek outside help, are displaying strength, not weakness and that staying involved with treatment will most likely provide the best hope in overcoming their depression. In addition, medications may be needed along with therapy to provide the most beneficial possibilities in their struggles with depression. It is also important to let their other health care providers know that they are in therapy for depression, so they may be informed of the overall care that their patient is receiving.

For a self evaluation for depression visit http://www.mayoclinic.com/health/depression/MH00103_D.

If you have any further questions for Mr. John Tallarido, he may be reached at: (561) 422-0900, or you may leave a message at Mihom Healthcare and we will be happy to pass it along to him. Our number is 772-873-3838.

REFERENCES:

CDC: current depression among adults (2008) Retrieved from: www.cdc.gov/features/datastatistics.html

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Double Chocolate Brownies

Ingredients:

- 1 pound butter
- 21 oz Hershey's Extra Dark Chocolate
- 6 eggs
- 1 teaspoon vanilla extract
- 21 ounces sugar
- 5 1/2 ounces all purpose flour
- 1/2 teaspoon salt
- 15 oz HERSHEY'S Chocolate Chips
- 6 1/2 ounces toasted walnuts
- 1/2 ounce baking powder



Directions:

Melt butter and chocolate in the microwave, mix until incorporated and set aside. In a mixing bowl with a whisk attachment, whip the eggs, sugar, vanilla, and salt until light and fluffy.

On low speed, slowly add the chocolate mixture to the egg mixture. Add the dry ingredients and mix well. Add the chips and nuts. Place batter on a greased baking pan and bake at 350 degrees for 35-45 minutes. Let cool at room temperature.



Patient Advocacy Chronicles (cont from page 1)

assist with activities of daily living, yet a skilled nursing facility is chosen because there is no one in the family who can stay home with their loved one due to financial obligations. Not only does private duty translate into tremendous cost savings for the patient and family, but it also allows the patients to remain in the comfort of their own home. Medicare covers limited home health aide services, and does not allow for extended care service. On a private pay basis, some of the services that home health aides can provide include, transportation to doctor appointments, the grocery store, and to

out-patient surgery centers, light house-keeping, meal preparation, personal care and grooming, as well as companionship.

Skilled Nurses can provide services such as post-operative care, wound care, medication management, chronic disease management, such as diabetes and heart failure monitoring. Mihom also offers monitoring with our tele-health system. Home telemonitoring enables us to monitor patients in between nursing visits by collecting data such as, blood pressure, pulse rate, pulse oximetry, and weights. The

data is transmitted to a central monitoring station within the agency. Significant changes are communicated to your physician. Also, Social Workers and Physical Therapists may assist on a private pay basis if needed. Usually a 4 hour minimum is required for services. Our team of dedicated professionals helps with easing the burden of emotional, financial, and educational needs when family members are unable to stay at home with their loved ones around the clock. Please call with any inquiries: Mihom Healthcare (772) 873-3838.



Inauguration 2013

Best Care from Mihom to Yours...

M W A S H I N G T O N D C A A
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Americas Future
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 Barack Obama
 Bible
 Fifty Seventh
 First Lady
 Inauguration
 John Roberts
 Malia and Sasha
 Michelle Obama
 National Anthem
 Prayer
 President
 Rifle salute
 Speech
 Swearing in
 Washington DC



MIHOM Healthcare is a Medicare Certified Agency servicing:
 Indian River, Martin, Okeechobee, Palm Beach and Saint Lucie Counties.

Our Services include:

- ♥ Skilled Nursing Speech Pathology ©
- ♥ Physical Therapy Occupational Therapy ©
- ♥ Professional Care Management Medical Social Work ©
- ♥ Home Health Aide Hourly Private Duty ©
- ♥ In-home Telemonitoring

We accept Medicare, Major Insurance, Managed Care Network Providers,
 Workman's Comp, Long Term Insurance and Private Pay.

We will provide a current list of insurances upon request!

We are available 24/7 to meet your home care needs!

