



January 2002

Volume 2, No. 1

## WHOLISTIC NEWS REVIEWS

(Regular *IJHC* column)

**Larry Lachman, PsyD**

### **Traditional, complementary, alternative, and psycho-social modalities of treatment**

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#### **Personality Traits Different In Male and Female Asthma Sufferers**

In the October 2001 edition of the journal *Allergy*, Finnish researcher Dr. Jaakko Kaprio from the University of Helsinki, reports that men and women exhibit different personality traits as it relates to the risk of developing adult-onset asthma.

Based on a study of 11,540 men and women it was found that associations between asthma and stress, and asthma and extroversion, was suggested with woman subjects but were not prevalent with the male subjects. In an incidence analysis, extroversion was associated with an almost three times higher risk of asthma in women with high extroversion scores compared with women with low scores. However, extroversion was not a significant predictor of asthma in men. Dr. Kaprio and colleagues speculate that these associations may result from asthma itself, which may alter the personality.

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#### **Loss of Religious Faith Impacts Mortality**

Dr. Harold G. Koenig, an associate professor of psychiatry at Duke University Medical Center in Durham, North Carolina, writing in the August 2001 edition of the journal, *Annals of Internal Medicine*, reports that elderly patients who became pessimistic about their religious faith had a higher risk of mortality. After questioning 596 patients over the age 55 who had been hospitalized for various illnesses at Duke Hospital or the VA Medical Center in Durham between January 1996 and March 1997, Dr. Koenig and his colleagues found that patients who said they felt "unloved by God" and "attributed their illness to the devil" were found to have a 19% to 28% increased risk of dying within 2 years. Dr. Koenig concludes by saying, "Sick people need to have their spiritual issues assessed and addressed, otherwise it will have a negative effect."

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#### **Medical School Applicants Should Be Screened for Personality Disorders**

In the December 2001 issue of the *Journal of Medical Ethics*, the authors encourage

medical schools to more thoroughly screen for sociopathic behavior in incoming medical students.

Dr. Michael Lowe of the Fiji School of Medicine states that screening applicants may help avoid incidents like the one involving British physician Dr. Harold Shipman, who is suspected in killing as many as 236 of his patients.

The article also states that those applicants who do exhibit psychopathic, antisocial or narcissistic personality characteristics, have a higher likelihood of engaging in unethical behavior.

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### **Cyberonics Device to Treat Depression**

In the November 2001 issue of *Neuropsychopharmacology*, it is reported that a vagus nerve stimulation (VNS) device manufactured by Cyberonics, Inc., is said to achieve a 30.5% response rate in severely depressed patients.

Of the 30 patients in the pilot study who completed at least 1 year of VNS, Cyberonics reported 42% experienced at least a 50% improvement and 26% achieved remission.

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### **Marital Problem Discussions May Raise Blood Pressure**

In the October 2001 issue of the *Journal of Behavioral Medicine*, a study found that many couples in marital therapy avoid talking about their problems due to experiencing adverse physiological reactions.

Dr. Wayne H. Denton, of the Wake Forest University School of Medicine in Winston-Salem, North Carolina, found that 46 individuals, about two thirds of whom were male, were classified as "avoiders" of relationship discussions and 70 individuals, about 60% of whom were female, were classified as "initiators."

Avoiders exhibited a greater increase in systolic blood pressure during the interview than did initiators. Males who initiated relationship discussions exhibited larger increases in their heart rate during the interview than their male peers who avoided such discussions.

Dr. Denton suggests that if an individual is reluctant to discuss problems with their partner, "it may not be because they don't care about the relationship. Rather, it may be that such discussions are more difficult for them because of physiologic reactions they are experiencing."

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### **Depression-Related Autonomic Dysfunction May Increase Post-MI Mortality**

In the October 2001 issue of the journal *Circulation*, a study suggested that reduced heart rate variability (HRV) may be the mechanism by which depression increases the risk of cardiac mortality in post Myocardial Infarction patients.

After adjusting for age, sex, diabetes, and current cigarette smoking, Dr. Robert M. Carney, of the Washington University School of Medicine in St. Louis, found that depression remained significantly associated with three of four indices of heart rate variability.

Dr. Carney says, "I think we can now say that it is depression that is responsible for the lower HRV. . . HRV may explain most if not all of the effects of depression on mortality."

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***Antidepressants and Psychotherapy Produce Similar Changes in Brain Activity***

In the July 2001 issue of *Archives of General Psychiatry*, Dr. Arthur L. Brody, from the University of California at Los Angeles, found that antidepressants and psychotherapy, when used to treat major depressive disorder, appear to affect the brain in similar ways.

Using positron emission tomography (radioactive imaging technique), Dr. Brody assessed metabolic changes in the brains of 24 patients with major depressive disorder who were treated with the antidepressant paroxetine or with interpersonal psychotherapy.

Depression scores improved more in the paroxetine-treated group than in the psychotherapy group, but *both* groups experienced similar changes in metabolic activity. Both groups demonstrated increased basal ganglia blood flow, while only the psychotherapy group showed increased limbic blood flow.

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***Fear Leads Psychiatrists to Self-Medicate Depression***

At the annual meeting of the *American Psychiatric Association* in New Orleans, in May of 2001, it was reported that nearly *half* of all surveyed psychiatrists suffering from depression say that they would rather treat themselves than risk a record of mental illness on their health insurance.

Dr. Richard Balon, professor of psychiatry at Wayne State University and a co-author of the study that surveyed psychiatrists' attitudes toward self-treatment said, "...Contrary to ethical and practical concerns, nearly half of psychiatrists surveyed would consider treating themselves or friends or relatives for depression."

If the respondents were suffering from mild or moderate nonsuicidal depression, the survey found that

14% would self-medicate.

28% would consider self-medication.

20% would seek treatment from a friend.

29% would consult a psychiatrist he or she didn't know.

.8% would avoid treatment altogether

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Dr.Lachman leads a weekly cancer patient therapy group, two bereavement therapy groups and is working on two cancer related books: Seasons of Survival and Under The Hammer of Fate. His psycho-social cancer related web resource center is located at: <http://www.seasonsofsurvival.com>

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