Low-Income Patients Rarely Screened for Diabetes

Although adults with serious psychiatric disorders are at high risk for diabetes, a study in the *Journal of the American Medical Association* revealed that low-income patients on Medicaid are rarely screened for it. The findings support growing efforts to integrate mental health services and primary care to improve diagnosis and treatment of medical issues associated with mental illness.

The California Department of Health Services’ Data and Research Committee combined public mental health and medical records during a State Quality Improvement project, allowing researchers to compare individuals across the two datasets. Researchers retrospectively identified 50,915 adults diagnosed with serious mental illness who were prescribed antipsychotic medications during two study periods: January 1, 2009 through December 31, 2009, and October 1, 2010 through September 1, 2011. They then examined medical records to determine whether patients received diabetes-specific screening, nonspecific screening, or no screening.

Researchers found that >70% of patients did not receive a diabetes-specific test. However, those who had at least one primary care visit in addition to mental health services were twice as likely to be screened.


New Care Option for Individuals With Eating Disorders

Eating disorders are serious emotional and physical conditions that can have life-threatening consequences for females and males if not properly treated—they have the highest mortality rate of any mental illness. Currently, an innovative individualized care option is available through Eating Disorder Recovery Specialists (EDRS) at http://www.EatingDisorderSpecialists.com. EDRS offers a transitional support plan—the first and only program in the country to exclusively care for individuals with eating disorders in the comfort and privacy of their own homes and communities.

EDRS’ unique approach to recovery support provides one-on-one care and step-by-step guidance in all stages of the recovery process to help smooth the transition and bridge the gap between treatment and one’s environment. EDRS provides supplemental meal support, clinical coaching, therapeutic exposures, life skills, and in-home cooking to clients who struggle with and are recovering from eating disorders.

EDRS provides transitional recovery support for all eating disorders, including anorexia, bulimia, binge eating, emotional eating, avoidant/restrictive food intake disorder, orthorexia, bigorexia, and unspecified feeding or eating disorder.


Self-Injury Needed to be Recognized as a Mental Disorder for Insurance Coverage

Researchers estimate 10% to 40% of adolescent individuals, and up to 10% of adults, harm themselves physically—usually by cutting or burning their skin. The condition, known as nonsuicidal self-injury, is not officially recognized by the American Psychiatric Association as a mental disorder, which means insurance may not cover treatment.

To qualify for medical coverage, individuals who cut, burn, or otherwise injure themselves must fit other existing diagnoses (e.g., borderline personality disorder, depression, anxiety disorder). The current fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders* reports self-injury is a condition that needs further study, which is short of the recognition needed to (a) trigger insurance coverage, (b) better define the affected population, and (c) permit development of more effective treatment methods.


More Drug Abusers Concurrently Using Prescription Opioid Drugs and Heroin

New research shows that drug abusers are not completely abandoning prescription medications for heroin. Instead, many use the two concurrently based on availability, according to a survey of 15,000 patients at drug treatment centers in 49 states.

Researchers conducted anonymous surveys when users entered drug treat-
ment, asking about drugs of choice and patterns of use and abuse. Respondents had the option of relinquishing anonymity to answer more detailed questions about their drug use. The study included detailed data from 267 patients. Of them, 129 reported they had abused prescription opioid drugs prior to heroin, and 73% cited factors such as cost and accessibility when explaining why they began using heroin.


Improving the Mental Health of Lesbian, Gay, Bisexual, and Transgender Youths

Researchers at the University of Missouri School of Medicine explored the role resilience plays in offsetting stress and depression among lesbian, gay, bisexual, and transgender (LGBT) adults and youths, and found that LGBT youths have lower levels of resilience than LGBT adults after collecting >5,000 surveys from LGBT individuals. The responses suggest resilience is a characteristic that may increase with age. The researchers suggest caregivers, school counselors, and health professionals use resilience-based programs and strategies to improve the mental health of LGBT youths earlier in their lives.

The researchers plan to develop intervention strategies that may nurture resilience in LGBT young adults by teaching them how to better balance their emotional responses to difficult situations.


New Links Found Between Bullying and Eating Disorders

Being bullied in childhood is associated with increased risk for anxiety, depression, and eating disorders. However, according to new research, it is not only victims, but also bullies, who could be at risk psychologically. In a study of 1,420 children, those who bullied others were twice as likely to display symptoms of bulimia, such as bingeing and purging, when compared to children not involved in bullying. Participants were divided into four categories: (a) children who were not involved in bullying; (b) victims of bullying; (c) children who sometimes were victims and sometimes were instigators; and (d) children who were solely bullies without ever becoming victims.

Children who were victims of bullying were at approximately twice the risk of displaying symptoms of anorexia (11.2% prevalence compared to 5.6% of children who were not involved in bullying) and bulimia (27.9% prevalence compared to 17.6% of children not involved in bullying).

Children who were both bullies and victims had the highest prevalence of anorexia symptoms (22.8% compared to 5.6% of children not involved in bullying) and binge eating (4.8% of children compared to <1% of

Exposure Therapy May Benefit Patients With Obsessive-Compulsive Disorder

Patients with obsessive-compulsive disorder (OCD) may improve their symptoms significantly by adding exposure and response prevention therapy to their treatment regimen when common drug treatment options have failed, according to new research published in the Journal of Clinical Psychiatry.

The study included 32 patients who received 17 weeks of exposure and response prevention therapy treatment after not benefitting sufficiently from risperidone. Evaluation at 12 and 16 weeks showed significant symptom improvement, with 25 (78%) patients completing treatment; 17 (53%) were classified as treatment responders and 11 (34%) as excellent responders at 32-week follow up. The remaining patients required medication changes during follow up, which enabled them to shift to excellent responder status.

uninvolved children), and vomiting as a way to maintain their weight.

However, the impact of bullying behavior on those who were bullies was also significant, with 30.8% of bullies having symptoms of bulimia compared to 17.6% of children not involved in bullying.


Lower Levels of Omega-3 Fatty Acids Associated With Bipolar Disorder

Individuals with bipolar disorder have lower levels of certain omega-3 fatty acids that cross the blood–brain barrier compared to those who do not, according to a new study in Bipolar Disorders.

Researchers compared fatty acids in 27 individuals with symptomatic bipolar disorder and 31 healthy control patients, and measured levels of different forms of the polyunsaturated fatty acids omega-3 and omega-6. They also collected self-reported information on fatty acid consumption and bipolar medication use.

Researchers did not find altered ratios of omega-3 to omega-6 fatty acids in individuals with bipolar disorder; however, they found lower levels of omega-3 fatty acids in patients with bipolar disorder that correlated with symptoms.


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New Coalition for Improving Patient Care During Psychiatric Emergencies

More than 80% of emergency physicians say the mental health care systems in their regions are not working for patients, according to a new survey of approximately 1,500 emergency physicians. To help address these challenges, more than 30 of the nation’s top mental health and emergency medicine leaders are launching the Coalition on Psychiatric Emergencies (COPE), aimed at improving patient care in emergency departments during psychiatric crisis.

COPE specifically aims to:

• Decrease waiting time for inpatient psychiatric beds (“boarding”) for psychiatric patients in emergency departments;
• Ensure education and training for emergency health care providers who care for patients experiencing psychiatric emergencies;
• Ensure adequate funding and resources for treating psychiatric emergencies;
• Drive improved quality and safety of diagnosis and treatment for psychiatric emergencies;
• Advance the research around psychiatric emergencies;
• Develop a continuum of care to include prevention and aftercare; and
• Improve patient and health care provider experience during psychiatric emergencies.