



ISSUE
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H-3 Monthly Newsletter

This special holiday season is often a time of depression / stress / anxiety for so many people, based on lost due to death, personal relationships, illness, financial responsibilities, etc. The December Newsletter has been devoted to general holiday depression and anxiety,

as well as stressors associated with the Coronavirus Pandemic that has plagued the world for the past 10 months. Please take the time to read this month's edition at your leisure. There is a wealth of medical / clinical language included, but this was necessary to provide the explanations for depression, anxiety and stress associated with this Holiday and COVID-19!!

Please continue to practice the 3 Ws to ensure safety and good health for yourself, your family members, and others. 1) Wear a Mask. 2) Wash Your Hands. 3) Watch You Distance (six feet between you and others).

A Prayer for Putting on a Face Mask

Creator God, as I prepare to go into the world, help me to see the sacrament in the wearing of this cloth. Let it be a tangible and visible way of living love for my neighbours, as I love myself.

Christ Jesus, since my lips will be covered, uncover my heart, that people would see my smile in the crinkles around my eyes. Since my voice may be muffled, help me to speak clearly, not only with my words, but with my actions.

Holy Spirit, as the elastic touches my ears, remind me to listen carefully and caringly to all those I meet. May this simple piece of cloth be shield and banner, and may each breath that it holds, be filled with your love, I pray.
Amen

*Rev. Richard Bott, moderator,
Presbyterian Church of Canada*



In His Service,
H-3 Ministry



"But if you truly obey his voice and do all that I say, then I will be an enemy to your enemies and an adversary to your adversaries.

Exodus 23:22



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Our prayer for you / your family: That you will remember the "REAL" reason for this special season - The birth of a baby boy in Bethlehem more than 2000 years ago!!! Keeping our focus on Jesus as God's gift to the world, will hopefully have a calming effect on our overall health/wellness!!!

PREPARING FOR THE HOLIDAYS DURING COVID-19

For many people, the holiday season will look different this year. Often, the last few months of the year are busy with parties and visiting family and friends. But due to COVID-19, things like traveling and gathering in large groups may not be possible.

Many people have lost loved ones and will be missing someone's presence during the festivities, and even more have lost their jobs and are dealing with financial stress. Others, like healthcare workers, may be working overtime and unable to take as much time off around the holidays as they usually can. It can be hard to cope with these kinds of changes, especially if certain holidays are the only time you see some of your loved ones.

If you live with a mental health condition, you may have an especially difficult time with the uncertainty and the change of plans this year. Many people with mental health conditions find consistency important in their recovery, especially during times of high stress - like both the pandemic and the holiday season. A sudden shift in tradition may have you feeling an extreme loss of control on top of disappointment.



Change is difficult for most people, especially when you didn't ask for or even expect these changes. But that doesn't mean that the holidays are destined to be a disappointment this year. There are plenty of ways to cope with the tough feelings you're having while still enjoying the holidays.

IDENTIFY HOW YOU'RE FEELING.

Figuring out your emotions about the upcoming holidays can make things feel less overwhelming. Most people are feeling a lot of different ways at once right now, which is hard for our brains to process and understand. This year has been a difficult year for many reasons. That means that some of your distress is likely related to things other than the holidays. It is completely normal for you to be feeling a bit more emotional than usual right now. Take some time to sort through your emotions in whatever way is most productive for you - you can journal, talk to a friend, or just spend some quiet time alone thinking. Once you have a better idea of the specific feelings you're experiencing, you can start making plans to cope with them.

ACKNOWLEDGE WHAT YOU'VE LOST.

While the holidays are mainly about thankfulness and celebration, this can also be a really hard time of year, even during normal circumstances. If you're missing a loved one, think of ways to honor them during your festivities. If you've lost a job or had to drop out of school, take the time to recognize the challenges that came with that. Even if you haven't lost anything concrete, we've all lost our sense of normalcy this year - it's okay to grieve that during this time.

MAKE THE MOST OF IT.

There's no denying that things will be different this year, but holidays don't need to be canceled (or even minimized). There will be some things that you can't do right now, but there are surely some that you can. You can make ornaments, send sweets to your friends and family, decorate gingerbread houses, and break out confetti poppers for New Year's Eve. For the things you can't do - brainstorm how to adapt them for COVID times. Feeling lonely because you won't get to see your extended family? Round up your cousins to video chat while preparing Christmas/New Year's dinner.

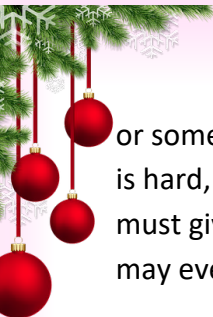
DON'T ROMANTICIZE YOUR TYPICAL HOLIDAY PLANS.

Remember that while your holiday season may normally be full of excitement and joy, it can also be a time of high stress. Long days of travel, endless to-do lists, and dinners with that one family member you don't get along with are all part of the holidays too. Even though you may be giving up some of your favorite things about the holidays this year, you're probably leaving some stressors behind too. You don't need to be happy about this - sometimes the chaos is part of the fun! - but be careful not to distort the situation and make it seem worse than it really is.

PRACTICE GRATITUDE.

Gratitude is a major focus this time of year, and while it may seem harder to find things to appreciate, there is still plenty to be thankful for. Make a conscious effort to regularly identify some things that you're grateful for. It can be something as broad as your health,





or something as specific as your favorite song playing on the radio the last time you got in the car. Change is hard, but it isn't always bad. There are still ways to celebrate the season with your loved ones, even if you must give up some of your favorite traditions. Find creative ways to adapt. Or start new traditions – they may even add more meaning to your holiday season.

If you're still finding yourself sad, hopeless, or unable to enjoy the holidays this year, you may be struggling with a mental health condition. Take the time to determine if what you're feeling is a sign of something like depression or anxiety rather than holiday stress. Don't be afraid or ashamed to get assistance in making this assessment.

COVID-19 PROVEN TO LIVE UP TO A MONTH ON THESE 4 ITEMS

The COVID-19 pandemic has made us pay very close attention to a lot of things that we didn't think were important before. Also, many public health campaigns have urged people to be cautious around several surfaces and items that can carry the virus for up to a month.

While it was scientifically proven that COVID-19 spreads primarily from person to person, one can also get the virus from touching contaminated surfaces. That's why it's so important to wash your hands frequently, because even though you might not get in contact with other people, maybe you've touched a contaminated surface, and boom, you're infected.

I'm sure that most of you are tired of constantly hearing new information about COVID-19, a recent study made in Australia found that the virus can live for up to 28 days on certain surfaces at room temperature. According to the study, among those items mentioned in the study, are two things we touch the most throughout the day: money and phone.

The study found that the smooth surface of the phone and banknotes contributed to giving COVID-19 a longer lifespan. What concerned scientists the most, was the fact that the virus proved to be more powerful than the flu, which was also proven to live up to 17 days.

According to Debbie Eagles, MD, co-author of the study, "Our results show that SARS-CoV-2 can remain infectious on surfaces for long periods of time, reinforcing the need for good practices such as regular handwashing and cleaning surfaces."

"At 20 degrees Celsius (68 degrees Fahrenheit), which is about room temperature, we found that the virus was extremely robust, surviving for 28 days on smooth surfaces such as glass found on mobile phone screens and plastic banknotes."

However, it's important to note that the virus is expected to live less outside the laboratory, as the conditions are obviously very different. The study I've previously mentioned was conducted in the Australian Centre for Disease Preparedness, under a UV light known to eliminate the virus. Nonetheless, this study states again how important it is to frequently wash your hands after touching cash. Also, your phone needs to be properly cleaned regularly, as it is considered a COVID-19 high-risk surface.





1. SKIN

You are probably thinking “Wait, what?” But our skin is actually one of the surfaces where COVID-19 survives for longer than you’d expect. According to a study conducted in Japan, COVID-19 was found to live up to 9 hours on human skin, while the influenza A virus was found to live up to 1.82 hours.

However, the researchers couldn’t test on live human subjects, so they used skin models and materials gathered from a post-mortem examination. They published their findings in the journal Clinical Infectious Diseases in October.

To sum up, even though it might be concerning to find out that coronavirus can live up to 9 hours on human skin, the good news is that the virus can be killed by simply using an 80-percent ethanol hand sanitizer. So there’s no need to panic, just wash your hands frequently and make sure to always carry a hand sanitizer with you, just to be safe.

2. COTTON

According to a study conducted by the CSIRO researchers, another surface where the coronavirus was proven to live up to 14 days at 20 degrees Celsius was cotton. What can be done? Wash your laundry at higher temperatures, as the coronavirus wasn’t identified when washed over 40 degrees Celsius (or 104 Fahrenheit),

As the scientists have mentioned, “The majority of virus reduction on cotton occurred very soon after application of virus, suggesting an immediate adsorption effect.”

3. CARDBOARD

According to studies, cardboard is one of the surfaces where COVID-19 apparently doesn’t like to live, so it is considered a “safer” material. As the infectious disease specialist, Frank Esper, MD, told the Cleveland Clinic has mentioned, the virus doesn’t like surfaces that have a lot of holes or tiny little grooves.

He also mentioned that COVID-19 prefers smoother surfaces, like doorknobs, cell phones, and cash, just like the Australian researchers mentioned. Another study published in the New England Journal of Medicine in April found that coronavirus could live up to 24 hours on cardboard at room temperatures, Esper added.

4. PLASTIC

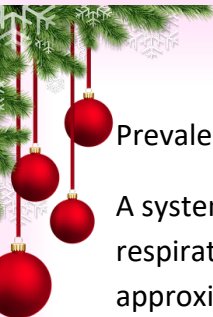
Another study published in the medical journal The Lancet in April discovered that COVID-19 lives up to 6 days on plastic. According to the study authors, “SARS-CoV-2 was more stable on smooth surfaces.”

MAJOR DEPRESSION IN THE AFRICAN AMERICAN COMMUNITY

DEPRESSION & COVID-19

Psychiatric symptoms and disorders can occur in clinicians exposed to COVID-19.





Prevalence of Anxiety – 12 to 20 percent and Depression – 15 to 25 percent

A systematic review examined psychiatric problems in patients hospitalized for SARS or Middle East respiratory syndrome (60 studies, n >2500 cases). The study found that **during acute infection**, approximately 20 to 40 percent of patients manifested neuropsychiatric symptoms consistent with delirium:

- Insomnia – 42 percent
- Impaired attention or concentration – 38 percent
- Anxiety – 36 percent
- PTSD symptoms – Online surveys in China have found that the prevalence of PTSD symptoms varies widely, ranging from 3 to 7 percent of adults:
 - An internet survey of nearly 300 adults from China in February 2020 found that symptoms of PTSD (intrusion symptoms, avoidance, negative alterations in mood and cognition, and hyperarousal) were present in 7 percent [20].
 - An internet survey of home-quarantined college students (n >2400) in February 2020 suggested that PTSD was probably present in 3 percent
- Memory impairment – 34 percent
- Depressed mood – 33 percent
- Confusion – 28 percent
- Altered consciousness – 21 percent

EPIDEMIOLOGY, AS RELATES TO THE AFRICAN AMERICAN COMMUNITY:

A survey of United States adults in the community found the lifetime prevalence of major depression for whites was 18 percent, Caribbean blacks was 13 percent, and African Americans was 10 percent. However, major depression was more **chronic** and associated **with greater functional impairment** in both **African Americans and Caribbean blacks**, compared with whites. Meaning, minority groups have this condition longer and sometimes simply don't seek help and ignore the signs of depression.

Interesting fact: Most adults with clinically significant depression visit a primary care physician rather than a psychiatrist and 50 percent of patients are not screened or assessed for depression by their health care providers. In addition, multiple studies suggest that the **diagnosis is missed in at least 50 percent of depressed primary care patients.**

SYMPTOMS OF DEPRESSION INCLUDE:

- Depressed mood most of the day
- Loss of interest or pleasure in most or all activities
- Insomnia or hypersomnia
- Significant weight loss or weight gain (e.g., 5 percent within a month) or decrease or increase in appetite nearly every day
- Psychomotor retardation or agitation nearly every day that is observable by others
- Fatigue or low energy
- Decreased ability to concentrate, think, or make decisions
- Thoughts of worthlessness or excessive or inappropriate guilt
- Recurrent thoughts of death or suicidal ideation, or a suicide attempt

Depressed mood that occurs most of the day, more days than not, and is persistent (e.g., **lasts for at least two weeks**), can occur in several disorders.

Other symptoms, recognized by doctors during evaluation include slowed speech or movements, agitation (e.g., restlessness, handwringing, inability to sit still, or pulling on clothing or skin) in older



adults, and in younger persons at risk for major or mild neurocognitive disorder or delirium. Random bodily symptoms, without finding a cause, such as chronic pain syndromes, can be manifested from major depression and or anxiety.

RISK FACTORS IN DEVELOPING MAJOR DEPRESSION INCLUDE THE FOLLOWING:

1. Internalizing factors
 - Genetics
 - Neuroticism
 - Low self-esteem
 - Early-onset anxiety disorder
 - History of major depression
2. Externalizing factors
 - Genetics
 - Substance misuse: alcohol, illicit drugs, pain prescription medications.
3. Adversity
 - Conduct disorder
 - Trauma during childhood or adulthood
 - Stressful life events in past year
 - Parental loss or poor relationships with parent(s)
 - History of divorce
 - Marital problems
 - Low social support
 - Low education

CERTAIN MEDICAL CONDITIONS INCREASE RISK OF MAJOR DEPRESSION:

- Neurologic disorders – Epilepsy (seizures), Parkinson's disease, multiple sclerosis, Alzheimer's disease, stroke, traumatic brain injury.
- Head injury between the ages of 11 to 15 years was the strongest predictor of subsequently developing depression.
- Infectious disorders – Neurosyphilis, HIV/AIDS, COVID-19.
- Cardiac disease – Ischemic heart disease, heart failure, cardiomyopathy.
- Endocrine and metabolic disorders – Hypothyroidism, diabetes mellitus, vitamin deficiencies, parathyroid disorders. As an example, vitamin D deficiency appears to be associated with depression. Studies found an increased risk of depression with low vitamin D, especially in AA community.
- Inflammatory disorders – Collagen-vascular diseases, inflammatory bowel disease (Crohn's or Ulcerative colitis) and chronic liver disorders (such as liver cirrhosis)

CHILDREN/COVID-19 AND PSYCHIATRIC SYMPTOMS:

Children – Chinese students in grades 2 through 6, who were quarantined at home for an average of 34 days, completed a cross-sectional, online, self-report survey in February and March 2020. **Anxiety symptoms and depressive symptoms were each reported by roughly 20 percent and almost two-thirds were worried about becoming infected.**

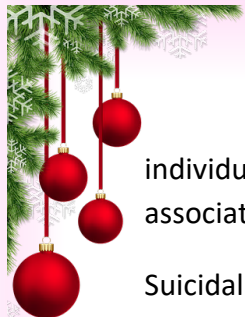
COVID-19 & SUBSTANCE ABUSE.

COVID-19 pandemic may be associated with exacerbation of substance use behaviors and disorders

COVID-19 & SUICIDE RISK.

COVID-19 pandemic may also increase the risk of suicidal ideation and behavior, based upon studies that found previous viral epidemics were associated with increased rates of suicide deaths, including suicides that were reported as an adverse effect of quarantine. Among





individuals aged 65 years or older, the 2003 severe acute respiratory syndrome (SARS) epidemic was associated with a 30 percent increase in suicide

Suicidality related to COVID-19 may be due to the hardships imposed by the pandemic, including economic privation, social isolation, reduced access to general medical and mental health care, and the stigma of having COVID-19. The spike in gun purchases in the United States during the pandemic represents another risk factor for suicides. In addition, the deaths caused by the pandemic may leave health care workers vulnerable to suicide

PATIENT WITH PRE-EXISTING PSYCHIATRIC ILLNESS.

Among patients with pre-existing psychiatric illness, infection with severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) may exacerbate the pre-existing illness. In patients with schizophrenia, for example, COVID-19 and medications used to treat the infection may be associated with psychotic relapses, and patients may incorporate the virus and COVID-19 into their delusions (e.g., "The staff are trying to infect me").

In addition, psychotic symptoms, cognitive deficits, disorganized thinking and behavior, poor insight, and marginalized social status (congregate living or homelessness) **may impair their ability to follow public infection control measures such as physical distancing, hand washing, and wearing masks.**

****Note, a patient with noncompliant/untreated psychiatric illness or homeless and concomitant positive COVID-19 (without symptoms) may be considered the most infectious person to others, especially others who are more immune compromised. ****

PERSONS IN QUARANTINE.

Individuals in quarantine during the COVID-19 pandemic may develop a wide range of psychiatric symptoms, based upon studies of previous epidemics. Adverse psychological outcomes included anger, anxiety, boredom, confusion, fear, depression, emotional exhaustion, frustration, irritability, and stress. Other adverse outcomes included avoidance behaviors (e.g., avoiding crowded or public places), detachment from others, subthreshold symptoms of alcohol use disorder and PTSD, excessive preoccupation with distressing somatic symptoms, and stigma, as well as domestic violence and suicidal ideation and behavior.

SEROTONIN & DOPAMINE – BRAIN NEUROTRANSMITTERS.

Neurotransmitters are chemical messengers that carry electrical signals between neurons in the brain. Dopamine and Serotonin are two important neurotransmitters for mental health. They affect your mood, memory, sleep, libido, appetite. Imbalances can contribute to mood conditions, such as depression, memory issues and attention difficulties.



MAJOR DEPRESSION/ANXIETY/PSYCHIATRIC ILLNESS TREATMENT MODALITIES.

SSRIs (selective serotonin reuptake inhibitors) are the most widely prescribed class of antidepressants. Common SSRIs include: [Citalopram](#), [Escitalopram](#), [Fluoxetine](#), [Fluvoxamine](#), [Paroxetine](#) and [Sertraline](#).

SSRIs treat many other psychiatric disorders besides depression, including panic disorder, obsessive-compulsive disorder, generalized anxiety disorder, social anxiety disorder, posttraumatic stress disorder, body dysmorphic disorder, bulimia nervosa, binge eating disorder, premenstrual dysphoric disorder (premenstrual syndrome), and somatoform disorders.

Common side effect of SSRIs: Sexual dysfunction is one of the most common adverse effects of SSRIs, causing nonadherence, but this side effect is dose dependent, meaning the lower the dose, the less likely to occur. Other side effects include dizziness and insomnia, to name a few.

Other (in conjunction to above), recommended treatment modalities:

- Yoga, meditation, prayer groups – helps brighten mood, reduce stress, better well-being, improved sleep.
- Vitamin D – Sunshine, eat foods high in vitamin D such as tuna, fortified cereal and dairy products, mushrooms. (African Americans tend to have lower Vitamin D levels) * **Note:** *African Americans are at higher risk of Vitamin D deficiency/insufficiency due to higher BMI, stemming from poor dietary choices and lower physical fitness levels.*
- Exercise 30 minutes a day – boosts immune system, helps battles depression and anxiety and psychiatric disorder – indoor YouTube exercise videos.
- Light therapy – helps treat Seasonal affective disorder (depression that comes on in shortening of daylight hours)
- Seek Counseling/therapy
- Help others' lives shine (AARP)
 - Study examining 6,000 participants over 14 years that was published earlier this year in Psychological science found that those who felt they had a purpose in life, were more likely to live longer, healthier lives than those who didn't.
 - Other research has found that a sense of purpose seems to protect the brain from Alzheimer's disease and the health effects of stress, so Volunteer!
 - Reach out to family members.
 - Your life will brighten as you focus on others'.

You can have major depression, anxiety, or any psychiatric disorder and CHOOSE to rejoice!!!

Biblical reference: *“Though the fig tree should not blossom, nor fruit be on the vines, the produce of the olive fail and the field yield no food, the flock be cut off from the fold and there be no herd in the stalls, yet I will rejoice in the Lord; I will take joy in the God of my salvation” – Habakkuk 3: 17-18*

Resources: <https://sciencetoday.eu/covid-19-proven-to-live-up-to-a-month-on-these-4-items.html>
<https://mhanational.org/preparing-holidays-during-covid-19>

