

NEVER say NEVER



*In the midst of the seemingly endless storm,
look to the promise of the rainbow -
the rain shall not prevail!*

Spring/Summer 2007

OCF National Conference

By Jennifer Shanburn

I was extremely fortunate to be able to attend this year's 14th Annual OCF Conference which took place July 19-22 in The Woodlands, near Houston, TX. This is a conference that brings together many of the "big names" in the OCD professional world as well as many OCD sufferers and their families. There were over 90 presentations that ranged from topics such as OCD and the media to updates on genetic research. Presentations were aimed at particular populations, such as consumers (those with OCD), children, young adults and teens, parents, family members and treatment providers. Often I wanted to be at more than one presentation at the same time!

Part of the agenda was an offering of support groups on different topics and I had the privilege of leading one on "When OCD Invades Your Marriage or Dating Relationship" with my husband. We have first-hand experience in this area and it was neat

to see people come together to encourage, share with and support one another.

The conference was put on extremely well with wonderful food and amenities. There was even a reception on Saturday night complete with dinner, drinks and dancing!

There was a place for exhibitors to set up their booths and these included mainly OCD treatment centers or research projects. One of the main supporting organizations for this conference was the Peace of Mind Foundation, which is based in Houston. See peaceofmind.com for more information on this important group.

Look for upcoming newsletter articles highlighting some of the presentations I attended. I highly encourage anyone to attend an OCF national conference when at all possible.

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SAVE THE DATE

Saturday, October 6, 2007. That's the date of our next Rainbow Luncheon, when our guest speaker will present "Children of Hoarders: The View From the Other Side." Watch your mailbox for details when they become available.

THE OCD FOUNDATION OF MICHIGAN

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* Thanks to Mark Fromm, president of Business Growth Today, Inc., for hosting our website.

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NEVER say NEVER

is the quarterly newsletter of the OCD FOUNDATION OF MICHIGAN,
a non-profit organization.

Please note that the information in this newsletter is not intended to provide treatment for OCD or its associated spectrum disorders. Appropriate treatment and advice should be obtained directly from a qualified and experienced doctor and/or mental health professional. The opinions expressed are those of the individual authors.

To submit articles or letters, write or e-mail the OCDFM at the above addresses.

LIST OF SELF-HELP GROUPS

ANN ARBOR:

Group is not meeting until 10/07
Call Mary Jo at (734) 883-4038

DEARBORN:

2nd Thursday, 7-9 PM
First United Methodist Church
Garrison and Mason Streets
Call (313) 438-3293

FARMINGTON HILLS:

1st and 3rd Sundays, 1-4 PM
Trichotillomania Support Group
Botsford Hospital
Administration & Education Center,
Classroom C
28050 Grand River Ave. (North of 8 Mile)
Call Bobbie at (734) 522-8907

GRAND RAPIDS:

Old Firehouse #6
312 Grandville SE
Call the Anxiety Resource Center
(616) 356-1614

www.anxietyresourcecenter.org

Anxiety (all forms)

Meets every Wednesday, 7 to 9 p.m.
Open to individuals who have any kind of anxiety problem as well as their friends and family members.

Adults Obsessive-Compulsive Disorders

2nd and 4th Tuesdays, 7 to 9 p.m.
Open to any adults who have or think they may have Obsessive-Compulsive Disorder. Friends and family members welcome.

Young Adults OCD

1st Monday, 5:30 to 6:30 p.m.
A monthly support group for young adults, aged 16 to 21, who have or think they may have Obsessive-Compulsive Disorder. Friends and family members welcome.

Body Focused Repetitive Behaviors

1st Tuesday, 7 to 9 p.m.
A monthly support group for adults who have Compulsive Hair Pulling, Skin Picking and Nail Biting problems. Open to friends and family members.

Compulsive Hoarding

3rd Tuesday, 7 to 9 p.m.
A monthly support group for people who have trouble with compulsive hoarding. The group is open to friends and family members.

Other Kids Like Me

1st Tuesday, 4:30 to 5:30 p.m.
A monthly support group for children, aged 7 to 15, with compulsive habits that seriously interfere with their lives including Obsessive-Compulsive Disorder, Compulsive Hair Pulling, Skin Picking, Nail Biting, Obsessions Around Appearance or Health and Tic Disorders.

HOLLAND:

Call Geraldine at (616) 335-3503 or
Tony at (616) 396-5089

LANSING:

1st Thursday, 7:30-9 PM
Delta Presbyterian Church
6100 W. Michigan
Call Jon at (517) 485-6653

ROYAL OAK:

1st and 3rd Tuesdays, 7-9 PM
St. John's Episcopal Church
115 S. Woodward at 11 Mile
Call Terry at (586) 790-8867

SPRING LAKE / MUSKEGON / GRAND HAVEN:

1st and 3rd Mondays, 7-9 PM
Spring Lake Wesleyan Church, Classroom E-111
Call Pam at (231) 744-3585

AKRON, OH

Parents of Kids with OCD
3rd Monday, 7 PM
Outpatient Pediatric Psychiatry Dept.
Akron Children's Hospital, 300 Locust Street
Suite 280 in Conf. Room
Call Susan at (330) 499-0373
To receive free e-newsletter,
Contact Marie at ooocccddkids@yahoo.com

AKRON/CANTON, OH

OCD/Scrupulosity
2nd and 4th Tuesdays, 7 - 8:30 PM
Queen of Heaven Parish, (In the Bride's Room)
1800 Steese Road, Green, OH
Call Susan at (330) 499-0373

Saving the World

By Fred Penzel, Ph.D.
Western Suffolk Psychological Services
Huntington, N.Y.

I was recently reminded of a type of obsessive-compulsive disorder (OCD) known as "compulsive hoarding" when a patient brought me an article from a British newspaper that jokingly looked into the homes of several people afflicted with this problem. The reporter, in his ignorance, seemed to think it humorous that these homes were knee-deep in possessions, papers, broken or useless things, or just plain trash. Even in our own country, those who compulsively hoard and collect are sometimes kiddingly referred to as "pack rats," and they are laughed at as being eccentrics. Unfortunately, compulsive hoarding is no joke. It can in fact be quite excruciating, just like any form of OCD. When you look closely at the lives of compulsive hoarders, there is no doubt that they can become incapacitated and disabled by their habits, and their lives frequently become disorganized and unmanageable. Their home lives can be rather isolated, and socializing is often a problem. They are unable to have visitors or even repairmen come into their homes, due to the serious embarrassment they would feel at having someone see the clutter.

Hoarders may collect large quantities of old newspapers and magazines, greeting cards, bottles, junk mail, plastic containers, broken appliances, old clothes, shoes, furniture, etc. They not only save broken and useless things, they also tend to save quantities of stuff that can greatly go beyond what a person could possibly ever need. This could include buying things such as soap or paper goods several cases at a time, or dozens of an item that might be on sale, but which most people would only own one of.

Typical symptoms of compulsive hoarding could include any or several of the following:

- *Saving broken, irreparable, or useless things*
- *Buying excessive quantities of goods beyond the amount needed for reasonable usage*
- *Purchasing large amounts of useful items and storing them away for future usage, but never using them*
- *Retrieving numerous materials from the trash on a regular basis*
- *Having difficulty discarding anything due to a fear of accidentally throwing out something important*
- *Saving excessive quantities of printed matter (newspapers, magazines, junk mail, etc.)*
- *Making and keeping extensive lists or records of certain things, even after they are no longer needed*
- *Saving large amounts of certain items for possible use by others or for future recycling*

Actually, the urge to hoard and collect may well be strongly instinctive in many species. The familiar sights of squirrels storing seeds and acorns and birds gathering nesting materials tell us that humans are certainly not alone when it comes to collecting and saving. Among our fellow human beings, we can observe a whole range of such behaviors, both positive and negative. However, when it is expressed through OCD, it may be that an instinctive program we all carry in our brains has been inappropriately activated. This may resemble trichotillomania, where it has been theorized that grooming instincts are wrongly turned on.

I have observed that one of the main reasons for hoarding is this: a fear that if things are thrown away, they will almost certainly be needed one day, but will be gone for good. This loss will then lead to some kind of serious hardship or deprivation. This symptom is due to the chronic doubt of OCD. Because of this, many hoarders seem to lack the ability to discriminate between what is truly useless and what isn't. Ironically, hoarders rarely use, much less look through, the things they save. Even when they do search through their piles and heaps, they are usually unable to find what they are looking for. There are some who hoard for what seem like sentimental reasons they keep many or most of their old belongings. One adult patient of mine had all of her childhood toys, as well as all the clothes she had ever owned since she was a youngster. There may be a number of reasons behind such behavior. One may be superstitious bad luck may occur if they let go of any of these things. Another may be the previously mentioned fear of the loss of something needed one day.

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Such doubts may be further compounded if the individual is reluctant to grow up or has some reason for not wanting to give up the past.

A different type of hoarding seems to relate more closely to the sort of hyperresponsible thinking often seen in OCD. Here, hoarders save things they believe will be useful to others rather than themselves. They would feel guilty and worry about being neglectful if they didn't have these things around for others who might need them someday. They may also feel guilty if they don't save a potentially useful item that could be repaired or recycled rather than discarded or wasted. In reality, no one ever really needs the things they save, and most of the things saved never get repaired or are too damaged to be fixed in any case.

Some who appear to hoard actually don't save things for their own sake. Their obsessive doubts cause a fear that, when throwing trash away, something important will be thrown out with it by mistake. These people compulsively thumb through every page of newspapers or magazines, and they double-check the seams of paper bags, boxes, and envelopes to be certain they have not thrown out money, jewelry, or important papers. Throwing things out can involve hours of searching and checking. This can become so difficult and time-consuming, that they may eventually just stop throwing things away altogether: This type of saving may not really be true hoarding, but something more like a type of double-checking.

Compulsive hoarders can accumulate such large amounts of things that they create storage problems and fire hazards. In particular, huge stacks of papers, excessive furniture, old clothing, non-working appliances, etc., can quickly overwhelm a house or apartment. The range of items saved can include something potentially useful such as reusable containers, except that hoarders may have hundreds. The other end of the range may include such unlikely things as cigarette ashes, pet hairs, or used tissues. Entire rooms become completely unusable. I know of people who have been evicted or threatened with eviction due to the large amounts they have collected. I also know of divorces resulting from a spouse refusing to live under such overwhelmingly disorganized conditions. Several years ago in our area, a case was reported of a woman who burned to death in a house filled with newspapers.

In the most extreme cases, homes can almost look as if they have been vandalized, with floors covered with debris and rooms filled to overflowing with boxes and bags full of possessions. The most famous example of a compulsive hoarder was Langley Collyer who, between 1933 and 1948, filled a mansion on Fifth Avenue in Manhattan with 120 tons of refuse, junk, and human waste. He would prowl the streets of Manhattan at night looking for items to rescue from the trash. Both he and his invalid brother, Homer, were found dead among possessions that included 11 pianos and all the components of a Model T Ford. Langley was actually crushed by a falling heap of heavy items he had rigged as a booby trap for burglars.

There are other types of hoarding, such as having to make a "complete" collection of a particular item to get a sense of "perfect" closure. There is "mental" hoarding, which is having to memorize all information on a particular topic. There is also the hoarding of memories or experiences. These symptoms seem to overlap with the problem of compulsive perfectionism. It is not unusual for some hoarders to buy and save large amounts of useful things that they then must maintain in a pristine and perfect condition. The items may be carefully wrapped, packaged, and stored away, never to be touched by anyone. Ironically, many of the saved items often deteriorate after years in storage, becoming totally unusable. Certain types of compulsive buying may be related to hoarding, depending upon what is done with the purchase.

Proper treatment for compulsive hoarding relies heavily on behavioral techniques. Hoarders need to be encouraged to gradually discard items that they find harder and harder to part with. A therapist may have to accomplish several goals: first, visit the home in order to survey the dimensions of the problem; second, determine the order in which things need to be tackled; and third, assist in the throwing-out process if the person can't seem to get started or is too great a procrastinator. I have sometimes encouraged people to begin by bringing bags of belongings to my office to start the discarding process.

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Hoarders also need to be given guidelines for what is to be saved or discarded, now and in the future. We often use a "two-year rule." This states that if you haven't used it, worn it, or read it in the last two years, you don't need it. This obviously doesn't include valuables, heirlooms, or tools used only for special purposes. Some need even more specific rules. Most are discouraged from keeping more than the current week's newspapers or the latest issues of magazines, and articles are saved rather than entire issues. Mail must be sorted the day it arrives. Many also need help in organizing important personal papers and bills, and the purchase of filing cabinets is encouraged.

In serious cases, medication may help a sufferer approach the therapy process with less anxiety and fewer obsessional worries. It can also relieve serious depression that robs someone of the energy needed to clean house. The usual antidepressant drugs shown to help OCD are recommended. It is important to find a psychiatrist who is sympathetic and experienced in the treatment of OCD, which can take a certain amount of expertise to do properly.

With determination and support, hoarding can be conquered. I have seen people clean up some of the worst accumulations and keep them cleared up. There is no cure, however. In order to stay well, hoarders must learn to think differently and to keep up their new habits. Interestingly, upon recovering, the hoarder's reaction is often one of relief rather than anxiety. If this is your problem, get help. You don't have to drown in a sea of possessions and junk.

If you would like to read more about what Dr. Penzel has to say about OCD, take a look at his self-help book, "**Obsessive-Compulsive Disorders: A Complete Guide to Getting Well and Staying Well,**" (Oxford University Press, 2003). You can learn more about it at www.ocdbook.com

WORDS OF WISDOM

You gain strength, courage, and confidence by every experience in which you really stop to look fear in the face. You must do the thing which you think you cannot do.

- Eleanor Roosevelt



It's hard to fight an enemy who has outposts in your head.

- Sally Kempton

I can feel guilty about the past, apprehensive about the future, but only in the present can I act. The ability to be in the present moment is a major component of mental wellness.

- Abraham Maslow

Craig and Mr. Worry

By Jennifer Bulk, Fremont, MI

I first noticed that my son had something “different” going on with him when he was four. One day I watched the movie As Good As it Gets and it hit me that my son was like the character in that movie. I remember sitting there realizing that my son had fears of germs. Craig, my son, would carry around a diaper wipe and would always be a clean little boy with only a few exceptions. At his preschool check up I mentioned this to his doctor. She said that it sounded to her like he had Obsessive Compulsive Disorder but he was too young yet to tell and if it got to be a bigger problem to bring him in again. This was the first time I heard of OCD.

Things were just fine until Craig went into first grade. Then more OCD issues grew while he was in class. He would ask his teacher over 30 times a day if he had after school program. Craig would wash his hands all the time and not dry them; he would come home from school with soaking wet sleeves. I took him back to his doctor who admitted that she did not know very much about OCD and wanted to study up on what medication she could put him on. I was one of those parents who despised putting her child on medication but after much consideration we tried it. Craig was put on 25 milligrams of Zoloft. After a few weeks things were a lot better. A year went by and then BAM the OCD was back with full force. It was as if one morning we woke up and we had totally lost our son. He had to wash his hands over and over without drying them. He would wash his hands until they were red, swollen, and bleeding. Craig could not even move them they hurt so badly. Online I researched Obsessive Compulsive Disorder; finding a million sites and staying up countless hours going over and over the many pages I came across. I learned about Cognitive Behavior Therapy (CBT) and knew that I had to get Craig in with a therapist who knew about OCD and how to do CBT. I was on the ocfoundation.org website and found a therapist in Muskegon that could help us. The next day I called this therapist and of course he was too full to take on any more patients. Hopeless, I took him to a therapist in our town who handled one other OCD case before Craig. This therapist had us keep track of how many times a day he would wash his hands and had us intervene when Craig would go and try to wash his hands. This would stir up a lot of anger in Craig where he would kick and scream and fight us back. Realizing that this therapy wasn't working I began calling everyday to the specialized OCD therapist in Muskegon; day by day they would tell me that he was full. On May 16th 2006, I created a website for Craig through caringbridge.org. This website allows me to write a journal, place photos, and have people sign a guestbook for Craig. I gave the website out to our family and friends to keep them informed on Craig and his progress. My first journal entry:

Tuesday, May 16th 2006

It seems like Craig is getting worse day by day. He has been so angry lately because of all the frustration he has of thinking he is always dirty. For his weekly therapy sessions I have had to chart how many times a day he washes his hands and on a school day he washes them anywhere from 16 to 19 times a day. And it takes him anywhere from 2 min. to 7 min. to wash them. He is struggling right now and does not really know that he is doing all of this. What is logical to him is un-logical to us. He thinks that if he walks by someone who is dirty then he to will get dirty. There is a good website that explains more about OCD you all should check it out the address is ocfoundation.org. Today I go alone to the medicine doctor in Muskegon to start getting him on a medicine that will work. I will update you all on this. Thanks for being there for us. This is a hard disorder to understand and we appreciate all of your prayers.

(Continued on page 8)

*“Craig and Mr. Worry”
(Continued from page 7)*

Once again, I turned to the internet in hopes of finding a parent that has gone through what we were going through. I came across another website, where I found Linda, a mom of an OCD child, and her email address. Linda was a Godsend for me and I emailed her on an every day basis. I was so desperate to understand my son and what he was going through. It was literally tearing me up inside and if I felt like that I could only imagine how scared and confused my 7 year old was. Craig became worse, not wanting to leave the house, go shopping, or out to eat. I would go to work in tears everyday after fighting with my son to get ready, go faster, what are you doing, why are you closing all the doors in the house, don't go back and check if you got everything for the 7th time, why are you washing again. I had no idea how to handle him and I was on the verge of losing it myself. I remember thinking this will never get better, he is illogical, what is going on, and who is going to help us, and I was convinced that we were not going to ever get through it. Linda mentioned the OC Foundation Conference and told me that we should all go. Linda offered to take us there as she brought her whole support group every year. So, with lots of prayer we decided to take her up on her offer and go to Atlanta, Georgia for the OC Foundation Annual Conference. That conference saved us. We learned so many things. My husband and I finally understood what our son had to face everyday. We got questions answered and our family became close once again. Craig was of course worried to attend the conference but he made friends there who also had OCD. For the first time in a year we saw our son relax; here he was amongst friends from whom he did not have to hide his OCD. When we returned home from the conference Craig was a little better and then back into his old ways. Every week would be a different OCD struggle. We finally got in to the OCD Specialized therapist. His first appointment was on Sept. 27, 2006. A support mom (whom I met online) suggested that Craig and I write a list of every ritual that he does and of all the questions he asks me to be better prepared when seeing the new therapist. From the OC Conference we purchased two children's books about OCD. After reading one of those books Craig came up with some names for his OCD. He drew a picture of his good brain, the part of him that was normal and he calls that Mr. Good Brain. Then he drew a picture of his OCD which he calls Mr. Worry because he tells Craig to do bad things. That night was the first time Craig openly discussed his OCD with me. Craig's first appointment went well; he really likes his new therapist and actually goofed around with him (something he did not do with the other one). Dr. Mike, as we call him, has taught us ERP therapy. We have learned how to challenge Craig on his thinking. Craig suffers from asking reassurance questions which can be really off the wall kind of questions. When asking these questions I have to look at him and cannot take my eyes off him until he is totally done. He would ask these questions all day long and would repeat them 10 times in a row and now with the ERP training we are finally down to asking one time only a few times a day. Craig has times where he slips back into his "old" habits but they are short lived and every day is always something new. One thing we are learning is how to stop them before they get too bad. We often have to say to Craig, "What's the worst thing that is going to happen to you?" And have him feel the anxiety and walk him through it. Now, I can proudly say that we are living with his OCD and standing up to it – not letting it do all the controlling.

Jennifer has started a new support group for anyone with OCD, parents of children with OCD, and their family members. Meetings will take place the first Monday of each month from 6pm to 7pm at the Empowerment Network, 7 East Main Street, in Fremont. You can reach Jennifer at 231-924-1088, or e-mail her at jennifer_bulk@hotmail.com. Also, you can visit her website at www.caringbridge.org/visit/craigdenney.

Loving Someone with OCD

by Karen J. Landsman, Ph.D., Kathleen M. Rupertus, MA, MS, and Cherry Pedrick, RN.

Reviewed by Jennifer Shanburn

There are not too many books out there aimed at the friends/family/caregivers of those who have OCD, and this book is an excellent one. Karen J. Landsman, Kathleen Rupertus, and Cherry Pedrick deliver much-needed advice, instruction and information on this important topic. The book is practical, easy to understand and implement, and full of worksheets and questionnaires.

It is addressed to the person who has a loved one with OCD, but the OCD sufferer him/herself would greatly benefit from reading it as well. The idea is for both parties to work together toward recovery from OCD. From this book, OCD sufferers can get an idea of what their loved ones experience, feel and think as individuals who live with someone who has OCD. It is important for all those in relationships to understand and respect each others' perspectives.

The introductory chapters give an overview of OCD: what it is, what the treatment for it is, and how the OCD mind works. This is important as it helps the person without OCD to get a better idea of what is going on in his/her loved one. While it is true that one can only fully understand OCD by having it, this goes a long way to help foster as much understanding as possible.

There is a lot of space for introspection in this book, in that it provides worksheets for identifying and evaluating feelings, thoughts and behaviors associated with living with someone who has OCD. By thorough evaluation, one can begin to see how OCD is affecting his/her life, the family's life and his/her relationship with the loved one who has OCD. Having this foundation is vital to starting the process of fighting against the OCD and eventually triumphing over it.

This book does a good job of pinpointing the types of feelings people who have a loved one with OCD often experience. It also gives an excellent overview and description of common accommodating behaviors.

Once the background of understanding the OCD and one's behaviors/feelings/thoughts associated with it has been established, the authors enter into the practical, step-by-step part of the book, which is their program of family contracting. The reason and purpose behind family contracting is explained, including describing the unhealthy cycles that develop when OCD accommodation and involvement goes unchecked, as well as how to go about setting up a family contract. A blank form for such a contract is provided, which is extremely helpful; no reader can give the excuse of not knowing how to structure or start a contract. Overall, the instructions on family contracting are extremely practical and easy to follow.

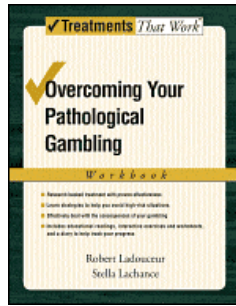
The family contract involves setting up small, incremental goals aimed at eliminating the family/friends' unhelpful involvement and accommodations of their loved ones' OCD. It is behavioral in nature, focusing on shaping desired behavior by the use of rewards.

There is a chapter devoted specifically to parents, siblings and friends of those with OCD, as well as a chapter addressing spouses of those with OCD. The book also covers how to care for oneself as someone who has a loved one with OCD. There is some information about when your loved one has another disorder(s) in addition to OCD, what to do when your loved one won't admit he/she has OCD or will not seek treatment, and how to find a qualified therapist. While this book is self-help in nature, it stresses that it is still important to find a professional who is familiar with OCD and cognitive-behavioral therapy, specifically exposure and response prevention. There is an extensive resource list at the end of the book as well.

Overall, this is a must-read for anyone who has a loved one with OCD with whom they have a close/involved relationship, whether that be a spouse/partner, child, parent/stepparent, sibling, aunt, uncle, grandparent, grandchild, cousin, nephew, niece, friend, student, or perhaps even coworker. This book can give hope and direction to many who feel hopeless and helpless when it comes to their loved one's OCD struggles.

SUGGESTED READING

Robert Ladouceur, Stella Lachance
Overcoming Your Pathological Gambling: Therapist Guide
 Oxford University Press, 2007
 ISBN-10 0-19-531703-3
 ISBN-13 978-0-19-531703-9

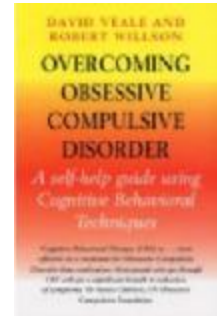


Christine Demeter, M.A., Robert L. Findling, M.D.
 “Current controversies in the use of antidepressants in children”
International Drug Therapy Newsletter
 Vol. 42, 2007, No. 2
 Pages 9-16

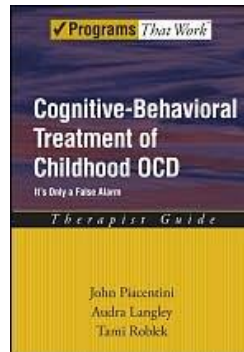


Jeff Bell
Rewind, Replay, Repeat
A Memoir of Obsessive-Compulsive Disorder
 Hazelden, 2007
 ISBN-13 978-1-59285-371-7
 (Available from www.amazon.com)

David Veale, Robert Wilson
Overcoming Obsessive-Compulsive Disorder: A Self-Help Guide Using Cognitive-Behavioral Techniques
 Constable & Robinson, 2005
 ISBN-10 1841199362
 ISBN-13 978-1841199368



Stefan G. Hofmann, Mark H. Pollack, Michael W. Otto
 “Augmentation treatment of psychotherapy for anxiety disorders with d-cycloserine”
CNS Drug Reviews
 Vol. 12, 2006 No. 3
 Pages 208-217



John Piacentini, Audra Langley, Tami Roblek
Cognitive Behavioral Treatment of Childhood OCD Therapists Guide
 Oxford University Press, 2007
 ISBN-10 0-19-531051-9
 ISBN-13 978-0-19-531051-1

ONLINE SUPPORT

OCD-Support (<http://health.groups.yahoo.com/group/OCD-Support>)

This is a very large and well-connected support group. Among its many members are doctors and treatment professionals who respond to questions.

OCD-Family (<http://groups.yahoo.com/group/OCD-Family>)

This is a mailing list for the loved ones of OCD sufferers, a safe place to discuss OCD and the way it affects the family as well as the sufferer. Its purpose is to help learn new ways of dealing with OCD from a second-hand perspective and to learn how to help our loved ones. It is asked that OCDers themselves not subscribe to this list.

Organized Chaos (<http://www.ocfoundation.org/organizedchaos>)

For teenagers/young adults only, this is a site for learning about OCD from each other, and from treatment providers.

JJ's Place (www.jjsplace.org)

The website for kids with OCD. Also has resources for family and friends, teachers, and therapists.

For a long list of websites relating to OCD, see our website at www.ocdmich.org.



BULLETIN BOARD

UNIVERSITY OF MICHIGAN STUDY

U of M is announcing that it will be offering free Cognitive-Behavioral Therapy to eligible subjects as part of a research study looking at brain function in OCD.

To be eligible for the project, you must not be taking psychiatric medications. Before entering the treatment study, subjects first undergo a screening interview, initially over the phone, and then in person. Subjects will participate in an EEG (electroencephalogram) and an fMRI (functional magnetic resonance imaging), in which the researchers will be looking to how the brain is working in OCD. The total time involvement for this initial project is approximately 10-12 hours over 3 visits, and subjects are compensated at \$15 per hour. After completion of this initial study, interested subjects will then be eligible for 12 weeks of free Cognitive-Behavioral Therapy. After the completion of therapy, they will then participate in another EEG and fMRI to see if brain function has been altered by a course of CBT.

If you are interested in this project, please contact the study coordinator at the University of Michigan: Jamey Lister at (734) 936-1732 or by e-mail at lijerjj@med.umich.edu. He can answer questions you might have about the project, and if you are interested, he will ask you some questions to determine your eligibility. If you are eligible in the phone interview, you will be invited for a face-to-face interview for a full assessment.

NEW SUPPORT GROUP STARTED IN FREMONT

Jennifer, the mother of an OCD child in Fremont, Michigan, has started a new support group for anyone with OCD, parents of children with OCD, and their family members. Meetings will take place the first Monday of each month from 6pm to 7pm at the Empowerment Network, 7 East Main Street, in Fremont. You can reach Jennifer at 231-924-1088, or e-mail her at jennifer_bulk@hotmail.com. Also, you can visit her website at www.caringbridge.org/visit/craigdenney.

NEW OCDFM MISSION STATEMENT

The OCDFM Board of Directors recently rewrote its Mission Statement to better reflect what we do and what we believe about Obsessive-Compulsive Disorder. Check out the reworded statement on the back page of this newsletter.

PROFESSIONAL DIRECTORY

Advertise with us

Treatment professionals, what better way to find the OCD sufferers who need your help, and to give them a way to find you. Just place your business card in *Never Say Never*, the quarterly newsletter of the OCD Foundation of Michigan. For just \$25.00 per issue, your card can be in the hands of the very people who need you most. It's a great way to reach out to the OCD community, and at the same time support the OCD Foundation of Michigan. Send your card to OCDFM, P.O. Box 510412, Livonia, MI 48151-6412, or e-mail to OCDmich@aol.com. For more information, call 313-438-3293.

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ADVERTISE WITH US
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COULD BE HERE!

PLEASE HELP

The OCD Foundation of Michigan is funded solely by your annual membership fees and additional donations. We have no paid staff. All work is lovingly performed by a dedicated group of volunteers. **WHY NOT VOLUNTEER YOUR TIME?** Call 313-438-3293 or e-mail OCDmich@aol.com.

The OCD Foundation of Michigan Membership Application

Please Print:

Name: _____

Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

Phone Number: _____ E-mail Address: _____

May we send you notices and announcements via e-mail? _____

- Enclosed please find my check for \$20 annual membership fee.
- Enclosed please find an additional donation of \$ _____

Make check or money order payable in U.S. funds to
Terry Brusoe, Treasurer
THE OCD FOUNDATION OF MICHIGAN
25140 Docksider Lane
Harrison Twp., MI 48045-6707

8/2007

Please Don't Throw Me Away

You've finished reading me and don't need to keep me anymore. Or worse (boo-hoo), you don't need me and don't even want me. In either case, please take me somewhere where I can help someone else. Take me to your library. Take me to your doctor, therapist, or local mental health clinic. Take me to your leader. But please, please, don't throw me away.



OCD Foundation of Michigan Mission Statement

- ◆ To recognize that Obsessive-Compulsive Disorder (OCD) is an anxiety-driven, neurobiobehavioral disorder that can be successfully treated.
- ◆ To offer a network of information, support, and education for people living with OCD, their families and friends, and the community.

**IF YOU WOULD LIKE TO BE ADDED TO OR DELETED FROM THE MAILING LIST
PLEASE CONTACT US**

The OCD Foundation of Michigan
P.O. Box 510412
Livonia, MI 48151-6412