BIANC Family Conference Presentation

Kelsey:
Thanks so much for having us here. My name is Kelsey Lucas and I am a speech-language pathologist at New Hanover Regional Medical Center’s Rehabilitation Hospital in Wilmington and this is Morgan Lankford. We are co-facilitators of the Wilmington brain injury support group. We have been asked to speak on the topic of emotional adjustment following brain injury, and specifically we will be discussing depression and anxiety. A big thanks to Susan Fewell and all the BIANC staff who invited us to be a part of this conference.
As a speech-language pathologist, my main role is working with individuals on their swallowing, communication and cognitive skills after brain injury. I often observe depression and anxiety in my patients when working with them. Depression and anxiety also come up frequently during our support group meetings. However, as a licensed professional counselor, Morgan is more of the expert on this topic, so I will be asking her some questions, hopefully to shed some light on the situation and to discuss some helpful strategies.

If you have any questions, please save those for the end of the presentation because might find that they are answered along the way. It might be helpful for you to write them down as we go. We want to make sure that we answer your questions to the best of our ability. Now I will let Morgan introduce herself.

Morgan:
Hi, I am Morgan Lankford. I am a licensed professional counselor and certified brain injury specialist. I work both at the Rehabilitation Hospital and at my private practice in Wilmington where a high majority of the clients I see are brain injury survivors. As Kelsey mentioned, I co-facilitate with Wilmington BISG. The members are comprised of an incredible group of both survivors and caregivers. We have learned so much from one another and from their individual stories of recovery. I know several of our beloved members are in the audience today and we are so glad you are here.

Kelsey:
First, let’s talk about how common depression and anxiety can be after brain injury. Some studies have concluded that individuals who have experienced a brain injury
are 6x more likely to experience depression and 2x more likely to experience anxiety as compared to the general population. That statistic is staggering. Morgan, do we know when and why depression and anxiety most likely occur?

Morgan:
Dr. Ana Mills, a neuropsychologist at Virginia Commonwealth University, gave a presentation at BIANC’s professional conference in the fall and described depression as a “common reaction to an unwanted experience” – and brain injury is of course an unwanted experience for anyone who goes through it! According to the Model Systems Knowledge Translation Center, about half of the people who experience brain injury are affected by depression within the first year after injury. This is a rate 8 times higher than the general population according to a study in the Journal of American Medical Association. Of those survivors with depression, more than half also have significant anxiety, and only 45% receive adequate treatment. We are learning more about when and why this happens. The “when” and “why” questions are often related. We see that oftentimes psychological symptoms actually INCREASE as physical symptoms DECREASE. This may SEEM counterintuitive, but this can often coincide with someone transitioning home from a supportive rehabilitation hospital or they complete their course of outpatient or home health therapy. The reality of the situation is often setting in and people are often more aware of the changes that have happened at this point. And it is common for survivors to experience lingering cognitive challenges (such as memory loss, decrease in attention and concentration, and loss of word finding) that they are having a difficult time adjusting to. Individuals can also be experiencing difficulty coping with loss of functioning and independence, loss of job, changes in family and friend dynamics, and possibly pain. These can all be triggers for depression. So, it is important to be mindful of what a person who has experienced a brain injury is going through emotionally when we think about why they might be experiencing depression. We have also learned that depression is likely because of changes in the way the brain actually functions. Brain injury can often impact areas of the brain that control emotions. The frontal lobe, which is the most common injured area in a brain injury, is responsible for emotions. Changes in the way that certain chemicals (called neurotransmitters) work in our brain can also lead to depression.

In regards to anxiety, I am going to read some possible causes of anxiety after brain injury - these include:
• A survivor might become anxious about making too many mistakes or feeling like they are “failing” at a task.
• Difficulty reasoning, processing information, or concentrating can make it difficult to solve problems and may cause a person to feel overwhelmed, especially if they are asked to make a decision or they feel time pressured.
• Many situations can be harder to handle if a person feels rushed or there is sudden change in plan.
• A person might feel that there are too many demands placed on them such as returning to employment too soon after injury.
• Auditory and visual overstimulation is also common. Examples of such situations might be crowded environments, heavy traffic, or noisy children.

Kelsey:
It does help to hear the possible causes for those emotional changes. I think it is also important for both brain injury survivors and their families to know how to be on the lookout for signs and symptoms, so they can take steps towards help and recovery. What can friends, family members and caregivers who are here in the audience be on the lookout for?

Morgan:
Okay, I will begin with depression-
Some feelings a person might experience after a brain injury may be:

Sadness, low mood, a loss of interest or pleasure in doing things you once enjoyed;
Sleep disturbances and/or changes in appetite or weight;
Difficulty thinking, concentrating, or remembering;
Increased tearfulness;
Isolating and withdrawing from others;
Lack of energy or fatigue;
Feelings of inappropriate guilt, worthlessness, or hopelessness.

It is also important to assess if a person has thoughts of harming themselves or that life is not worth living. These thoughts should be taken very seriously. These can all be appropriate responses to the losses and changes a person faces after adjustment to a major injury, and would be diagnosed as
“adjustment disorder with depressive symptoms.” However, if these symptoms persist for 2 weeks or more and interfere with daily role performance, then a person might be diagnosed with “depression.”

Now let’s talk about anxiety-
So what does anxiety feel like? Well when you are anxious you may feel nervous, tense, and irritable. Anxiety might also cause changes in sleep and appetite. It is important to know that distress and anxiety can disturb the body’s internal equilibrium, leading to physical symptoms such as headaches, upset stomach, increased sweating, and elevated blood pressure. Sometimes if the anxiety is severe it can result in a “panic attack.” During a panic attack, you may feel more severe symptoms such as shortness of breath, rapid breathing, irregular heartbeats, and chest pains. Symptoms of a panic attack present themselves differently in every person. Depression and anxiety both lower your immune system, and can be risk factors of numerous health problems including stroke and heart attack.

Kelsey:
Thanks for giving all of us some ideas of what to look for should we have concerns about a loved one’s emotional health. So now for the part we get excited about; treatment approaches! I hope we are able to impart a message of hope as research is supporting many new positive coping mechanisms as well as advances in treatment modalities. Morgan, talk to us about some of the different treatment approaches and what have you as a counselor found to be effective.

Morgan:
Well it is important to get treatment early to prevent needless suffering and worsening symptoms. There are many positive coping mechanisms when dealing with emotional adjustment. First, I believe that a primary effective treatment is psychotherapy. It is important to find a counselor or psychologist that is experienced in treating persons with brain injuries. When I work with survivors and their caregivers, I find it important to begin with brain injury education. The more someone knows about their condition (the physiology of the brain and common physical, emotional, cognitive, and behavioral symptoms that follow) the more it lessens their fears by normalizing their experience. Then the therapy can be catered to the individual since every brain injury is different. A treatment for almost all of my brain injury survivor clients is to teach them compensatory strategies to
cope with any lingering cognitive challenges (some examples would be a memory notebook, alarm reminders, or helpful phone apps). Then certain therapy modalities such as cognitive behavioral therapy, behavioral activation therapy, acceptance and commitment therapy, guided imagery and relaxation teaching, and mindfulness-based cognitive therapy can be used based on the person’s needs. In conjunction with therapy it is important to encourage a client to get involved in other holistic approaches, many of which we have heard about today. In my practice, I call this their “homework” that they should follow through with outside of therapy sessions to enhance their recovery. Utilization of activities and/or holistic therapy such as biofeedback, acupuncture, yoga, and participation in pleasurable hobbies and social support – including support groups might allow someone to re-assimilate into their daily responsibilities, develop a more positive outlook, and increases their independence.

Kelsey:
Wow, one of the things that I’m always surprised about are the number of different treatment approaches out there when someone is struggling with depression or anxiety. To me it sounds like an effective treatment approach that might work well for one person who has experienced a brain injury might look completely different than another effective approach for someone else after brain injury. We are all different and so there is no cookie cutter method for dealing with emotional changes after brain injury. The key is knowing the individual and that’s why I think that finding a counselor like yourself with a background in BI is so important. What other health care professionals should families involve?

Morgan:
It is also beneficial to have other practitioners on their team such as a neurologist, pain management physician, neuropsychologist for testing, and possibly a psychiatrist for medication management. One more thing that I want to touch on is something that I strongly believe in for the treatment of anxiety, depression, pain, cognitive deficits, as well as a slew of other physical and mental ailments is CBD. For those of you who have not heard of CBD (aka cannabidiol), it is a plant compound extracted from the hemp flower and it is growing in popularity. Unlike its cousin THC, CBD provides no “high”/euphoria. It can be purchased legally in this state, and has minimal side effects and minimal interactions with medications. It comes in many forms: edibles, vapor oil, tincture, topical creams, and supplements. Like any other remedy, it
is important to get the correct dosage, strain of cannabis, and delivery method that is best for your body. So please make sure to purchase at a reputable store that specializes in CBD so that you can get appropriately counseled about the best form and dosage for you. CBD is in preliminary testing phase of clinical research studies in the US, but human testing is said to be close. The existing studies have found reduction in cognitive impairment; facilitation of the growth of new neurons; reduction in brain damage; improvement in brain metabolic activity; decrease in brain edema and seizures; and improvement in functional recovery after brain injury. There have been studies that suggest the potential benefit of CBD treatment for psychiatric/cognitive symptoms such as depression and anxiety. These are very promising developments for the treatment of brain injury. CBD is not yet FDA approved in the US; however, the FDA has been supportive of research in this area. I have seen significant success in my clients. It has made a remarkable change in their life by treating their symptoms naturally. So if it is something you are interested in I encourage you to discuss it with your doctor.

Kelsey:
It is great to hear about what is on the horizon for treatment of brain injury. Ok, there is one more thing I wanted to talk about today. Let’s say that there is a friend, family member or caregiver in the audience who has recognized possible signs of depression or anxiety in their loved one. Now they may know some potential options out there for treatment that you discussed, but what else can they do to encourage healing and wellness?

Morgan:
Well along with the positive treatment options we have discussed, a healthy lifestyle is also key. Exercise, healthy diet, getting enough rest are all critical in healing and in helping someone to be at their best and to achieve overall wellness.
I think one other way that people stepping into the caregiver role can help to provide purpose and structure to the day is to implement a schedule board. This board is something that I show to people attending the caregiver class at our hospital as well as to friends and family members who come in for counseling at the private practice. When someone transitions out of therapy-filled days at a rehab hospital or outpatient clinic, there is often a big gap in terms of how to fill the day. Creating an agreed-upon routine is beneficial for both the person who has experienced a brain injury as well as the person in the helper-role. The person with brain injury now knows that he or she has
daily routines in place to continue to aid them on the road to recovery, and the helper or caregiver also has a visual means of encouraging consistency and structure. The survivor should be involved in helping to create this weekly schedule. Therefore, when it is time to do at-home therapy exercise or take a walk, for example - it helps hold them accountable. As the caregiver you have to institute tough love. When they say they don't feel like it, you can say, “well, it’s on the board and we agreed on this schedule so let's get ready.”

Last, I think that community involvement is a very positive way of combating or alleviating depression and anxiety. We have talked a lot about purpose and meaning and there is no greater way to give purpose and meaning to the day than reaching out to help someone else. Volunteering is a great way to get involved. Think about what is meaningful to the person! If there is a love of animals, then commit to regularly volunteering together at the animal shelter. We have several former rehabilitation patients who have experienced a stroke or brain injury come back regularly to visit current patients as a volunteer peer support.

I also think support groups can be a great way to get involved with community, but don’t stop at just attending! Connect with other support group members. Send an encouraging email to a group member who may be going through a tough time. We have mentioned that we have a great support group in Wilmington and if you live anywhere near the Wilmington area we welcome all of you who are interested in attending. If you live elsewhere in the state, we encourage you to contact BIANC to find the closest support group near you.

Kelsey:
A main goal of our message is that everyone here can walk away with some hope regarding the potential for treatment and healing when we think about emotional changes following BI. These things don't happen overnight, and they do require work and commitment. We wanted to wrap things up by challenging every person in this room (whether BI survivor, caregiver, friend, family member, or anyone else touched by BI), to take one small step outside of their comfort zone, towards healing and wellness. Part of the goal is building support, but also providing support to others. We will close by reading a list of ideas. We challenge you to choose one, or maybe something from this list will spark an alternative idea.
Several of the ideas in this list are taken from the book "To Root and To Rise - Accepting Brain Injury", by Carole Starr. I highly recommend this book!

- Attend a support group meeting
- If you are already in a support group, invite another member from the group for a walk or coffee, and/or email them an encouraging message.
- If you are already in a support group, ask your facilitator to allow you to share your story at an upcoming meeting
- Identify one positive person in your life and invite them to meet you for lunch
- Identify one person in your life that you know is a negative influence; choose to limit your contact with this person
- Attend a yoga class (assuming this is approved by your doctor)
- Start a garden or even just begin caring for a potted plant
- Begin a "Stuff I'm Proud Of" folder or box
- Commit to learning more about brain injury
- Begin a gratitude jar; each day write one thing you are grateful for on a slip of paper to add to the jar
- Write a letter thanking someone who has helped you in your recovery
- Spend time trying a new craft, "paint-by number" activity or adult coloring book
- Attend a meditation class
- Allow yourself a half hour to devote to your spiritual formation
- Attend a BI conference or camp event (Camp Carefree in the Fall!)

Morgan:
Thank you Kelsey for reading those helpful tips and we hope that you all can challenge yourself to do one.

Please note that there will be handouts available on the table outside that outline the sign and symptoms of emotional adjustment, as well as helpful tips for coping.

Please feel free to ask any questions you may have at this time.
Emotional Adjustment Following Brain Injury
Signs, symptoms, and tips

Signs and symptoms to be aware of could be:

**Depression**
- Sadness, low, mood, a loss of interest or pleasure in doing things you once enjoyed;
- Sleep disturbances and/or changes in appetite or weight;
- Difficulty thinking, concentrating, or remembering;
- Increased tearfulness;
- Isolating and withdrawing from others;
- Lack of energy or fatigue;
- Feelings of inappropriate guilt, worthlessness, or hopelessness;
- Thoughts of harming oneself or that life is not worth living.

**Anxiety and/or panic attack**
- Nervousness;
- Feeling tense;
- Irritability;
- Changes in sleep and appetite;
- Headaches;
- Upset stomach;
- Elevated blood pressure;
- Chest pain.
- Shortness of breath;
- Rapid breathing;
- Irregular heartbeats;
- Increased sweating.

**Examples of cognitive strategies:**
- Memory notebook- keep with you at all times
- Alarms on phone
- Pill dispenser or sorter
- Sticky note reminders and labels
- Dry erase boards for tasks and daily to-dos
- Phone apps for cognitive strengthening:
  - Lumosity
  - Left vs Right
  - [https://www.symbaloo.com/mix/memory6](https://www.symbaloo.com/mix/memory6) (a website that provides links to helpful apps and adaptive technology)
- Phone apps for anxiety and depression:
  - CALM
  - Power of Positive Thinking Daily Cards
A few effective treatment approaches:

**Counseling:** for brain injury education, supportive psychotherapy, behavioral change, compensatory strategy education, relaxation teaching, etc.

**Biofeedback:** a mid-body technique in which individuals learn how to modify their physiology for the purpose of improving physical, mental, emotional and spiritual health.

**Acupuncture:** it is believed to help remove blockages and restore energy flow, balancing your organs, mind, and body.

**Yoga:** can reduce the impact of exaggerated stress response through physical stretching poses, controlled breathing, and short periods of deep relaxation or meditation.

**Participation in pleasurable hobbies:** keep positive recreations in your daily life to bring activity and enjoyment.

**CBD (cannabidiol):** a plant compound extracted from the hemp flower that provides no euphoria/"high", has minimal side effects, and minimal interactions with medications. It comes in many forms: edibles, vapor oil, tincture, topical creams, and supplements. Purchase at a reputable store that specializes in CBD so that you can get appropriately counseled about the best form and dosage for you. Discuss it with your doctor.

List taken from the book "To Root and To Rise - Accepting Brain Injury", by Carole Starr:
- Attend a support group meeting
- If you are already in a support group, invite another member from the group for a walk or coffee, and/or email them an encouraging message.
- If you are already in a support group, ask your facilitator to allow you to share your story at an upcoming meeting
- Identify one positive person in your life and invite them to meet you for lunch
- Identify one person in your life that you know is a negative influence; choose to limit your contact with this person
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- Attend a meditation class
- Allow yourself a half hour to devote to your spiritual formation
- Attend a BI conference or camp event (Camp Carefree in the Fall!)

**Caregiver tip:**
Weekly dry erase schedule board was purchased at Office Depot (At-A-Glance WallMates Dry Erase Weekly Planning Surface) or make your own on a dry erase board.