

Health

Depressed still not seeking help

By Jacqueline Tran Van

"Empty and angry" is how one sufferer describes a disorder that, more often than not, goes unnoticed by everyone, including the sufferer.

"I felt so negative," Maree, 21, says. "I was lashing out at people I love, for no reason."

A recent Ministry of Health survey found 50 per cent of New Zealanders would meet the criteria for a mental disorder at some time in their lives.

However the study, released in September 2006, also found only a small proportion would seek help for it.

Depression can affect every aspect of a person's life because the symptoms are similar to the less serious "blues" many people experience.

Low mood, including guilt, loneliness, irritability and low self-esteem are symptoms, as well as disordered sleep and eating patterns, low energy and dissatisfaction in personal relationships with family and friends according to the Ministry of Health.

For people suffering from depression, these symptoms do not fade away with time.

The Ministry of Health website states the most common assumption is that people can simply "snap out of it".

"Too many New Zealanders have been ashamed to talk about it, as if it is a character weakness," Associate Minister of Health Jim Anderton says.

Ministry of Health sources say depression is "very common".

That depression is not thought of as common, can be linked to the shame that surrounds it.

Fortunately this is changing and the stigma long associated with a mental illness like depression is starting to lessen.

"Depression is not an easy thing for anyone to deal with let alone when they feel too ashamed to admit they are unwell," says therapist Jill Samson.

"It is important for public opinion to change."

Anderton says "the Ministry of Health's high profile 'Like Minds Like Mine' campaign has made a significant difference to attitudes towards mental illness."

The ads are a positive look at how depression can be approached to "help ourselves and our loved ones".

Former All Black John Kirwan fronted the television campaign and by sharing his experience of depression with New Zealanders he has raised the profile of a previously unseen illness.

Anderton says "John Kirwan is seen to embody the notion that there is a way through it."

"His presence makes a real difference."

Samson says: "It can only be a good thing to have mental health in the mainstream."

"John Kirwan's career as an All Black made him a role model and he has used that status to continue helping people."

Some names in this story have been changed

Bill threatens natural medicine

By Mike Kilpatrick

An Auckland protest group says New Zealand consumers will have 60 per cent fewer natural medicines to choose from if a Labour Party bill is passed by Parliament.

Health Freedom New Zealand has been organising protests around the country to try and stop the passage of the Therapeutic Products and Medicines Bill.

But Natural Products New Zealand (NPNZ), the industry

body that represents a significant proportion of New Zealand natural product manufacturers, supports the bill and disputes this figure.

It says that 80 per cent of products currently available are already made to the proposed standards and, therefore, will be available.

The bill is before the Parliament's select committee and is due back before the house on June 15.

If passed, the bill would see the creation of the Australia New Zealand Therapeutic Products

Authority (ANZTPA) which would oversee the regulation of complementary medicines in New Zealand for the first time.

This would mean that all medicines would need to be manufactured and tested to international quality standards, increasing the safety of the products.

Joe Sutich, owner of Advanced Natural Medicine in Avondale and a Health Freedom New Zealand supporter, says that the bill is an attempt to "impose Western science methods on medicines not based on that culture".

To Sutich, a reduction in the number of available products won't be due to safety issues. He says the natural substances have been around for thousands of years and have a low rate of adverse reactions compared to pharmaceutical products.

To him it's about killing small, innovative companies and financially benefiting those represented by NPNZ.

Health Freedom New Zealand also says that consumers will pay between 30 and 100 per cent more for vitamins and supplements.

However Myles Chandler, owner of NutraNZ and member of NPNZ, is looking forward to the creation of ANZTPA.

To him, it's positive for consumers. It's about regulating quality and ensuring that the product is what it says it is on the label, Chandler says.

This is achieved by manufacturing to established quality systems. "But it costs more to manufacture in a quality environment," he says.

This means that those who don't follow quality systems can sell their products cheaper, putting those who do at a disadvantage.

This is problematic because consumers make an automatic judgement that the products on the shelves are all made to the same standard, Chandler says.

Despite the furore it's still not clear if the bill is going to become law.

The bill passed by a single vote in its initial reading. Since then Taito Phillip Field has left the Labour Party.

One of the concessions gained by NPNZ in the current bill was a comprehensive subsidy package to allow all companies to come up to speed with the new regulations, including the increased registration fees.



PHOTO: MIKE KILPATRICK

OUT IN FORCE: Therapeutics bill protesters leave Western Park on their April 28 march.

New hope for eating disorder patients

By Geraldine Roper

New national guidelines due to be released this month mean people suffering from eating disorders won't have to wait until they are in a life-threatening condition before they receive treatment.

A lack of funding and resources has meant that, in the past, sufferers have been on long waiting lists while the under-staffed services work with the most severe cases.

The guidelines, being put out

by the Ministry of Health, will define what kind of treatment should be provided for people with any level of anorexia or bulimia.

Auckland Eating Disorder Service clinical director Roger Mysliwicz says the regional service is not given enough resources by the three district health boards, Auckland, Waitemata and Counties Manukau, which fund them.

"The government pours money into the DHBs who then decide how to distribute it," says Mysliwicz.

"Unfortunately, in the past, eating disorder services have been overlooked by the DHBs."

The Auckland Eating Disorders Service is currently funded to employ 14.8 full-time workers.

"This is 50 per cent of what the blueprint for mental health services in New Zealand says we should have to run an outpatient system," says Mysliwicz.

He says that with the national guidelines in place, "it will become more difficult for DHBs to just shrug their shoulders at the problem".

"Being so under-resourced means we struggle to see those in still stable, mild anorexic conditions," says Mysliwicz.

"This is a big problem because the earlier we can see someone, the better their chances are for recovery."

The national framework for eating disorder services, which was put out last year by the Ministry of Health, suggested starting more services and better co-ordination between current services.

Ashburn Clinic psychiatrist Brett Ferguson says the first

step is to initiate some of the services mentioned in the framework.

He says different levels of care would mean less severe cases would receive treatment.

"There needs to be a tiered approach, with inpatient and outpatient care as well as a day programme," says Ferguson.

"Patients could start at the bottom of the ladder as an out patient."

"Then if they can't be helped there, they can take another step up the ladder."

Ferguson says that if the treatment of an eating disorder is started earlier on in the process, it gets sorted out a lot quicker.

He says it's unsettling that some people who suffer from the disease are excluded because "they aren't sick enough".

"I don't think anyone in the public system wants it to be like that. It just comes down to a lack of resources," says Ferguson.

Dietician Vicki Paulin says, "It would make sense to treat people earlier than to wait till they have a full blown disease with everything that comes with it."

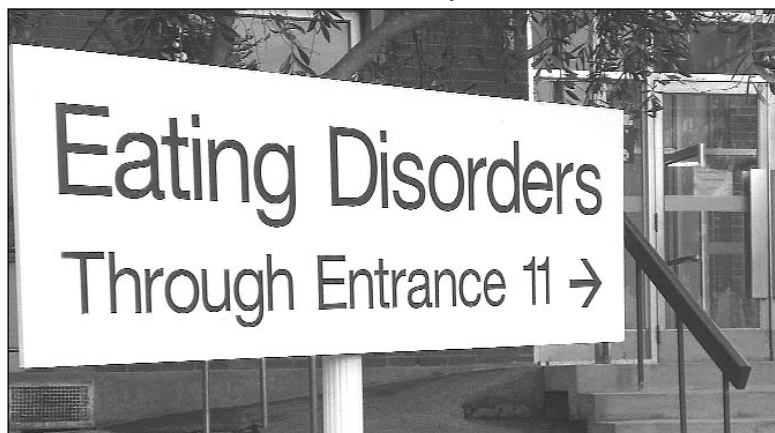


PHOTO: GERALDINE ROPER

RELIEF: Sufferers will be treated sooner under the new guidelines.