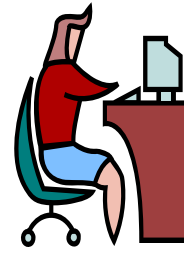


Special points of interest:

- Disease Update
- Featured New Resident
- Causes of Wait Times

What You Would Like to See in the Newsletter?

Please use the attached sheet to ask questions or make comments. Turn it into the receptionist when you check out



JANUARY , 2005

*Carolyn
Abrahamson*

RACINE FAMILY MEDICINE CLINIC & RESIDENCY PROGRAM 262/687-5600

The Practice Pipeline

1320 Wisconsin Ave., Racine, WI 53403



Patient Communication Newsletter

DISEASE UPDATE

DEPRESSION

Depression is a mood disorder characterized by a depressed mood and/or a decrease in interest in things that used to give pleasure. In any given one year period, about 18.8 million American adults suffer from a depressive illness. Most people with a depressive illness do not seek treatment even though most people can be helped with appropriate evaluation, counseling, and treatment. Here is some information that can help you decide whether or not you may be depressed, and the resources that are available to you.

What is depression? Depression is an illness that involves the body, mood, and thoughts. It can affect the way a person sleeps and eats, the way one feels about oneself, and the way one thinks about things. Depression IS NOT a sign of weakness or something that can be wished away. People with depression generally cannot “pull themselves together” and expect to get better. Without proper treatment, depressive symptoms can last for weeks, months, or even years. With correct treatment, people can get the appropriate help needed to get through their depressive episode.

What are the risk factors associated with depression? The primary risk factors for depressive disorders include:

- Female gender
- Family history of depression
- Prior episodes of major depression
- Lack of social supports
- Significant stressful life events
- Current alcohol and substance abuse

How do I know if I am depressed? If you experience at least five of the following symptoms, you may be depressed:

- Significant weight loss or gain
- Insomnia (trouble sleeping) or hypersomnia (sleeping too much)
- Acting fidgety or not feeling like you want to do anything
- Fatigue or loss of energy
- Feelings of worthlessness or guilt
- Difficulty concentrating or making decisions
- Recurring thoughts of death or suicide

What treatments are out there? The first step to acquiring appropriate treatment is a complete history and physical examination by your doctor. Certain medications and some medical conditions can cause the same symptoms of depression, and should be ruled out first.

(Cont'd on Page 2)

(Cont'd from Pg. 1—Depression)

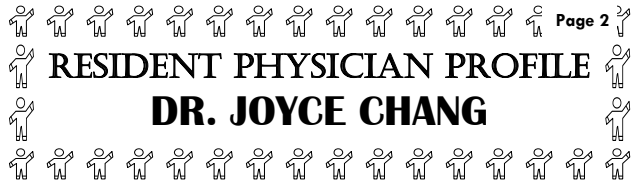
If a physical cause is ruled out, the next step is to get a psychological evaluation by a physician, or by referral to a psychiatrist or psychologist.

The first thing you can do, if you feel depressed, is to get more exercise. Even taking a brisk walk for at least 20 minutes at least 3 times a week can improve a person's mood. Exercise increases the amount of endorphins in your body, which are directly related to elevating a person's mood. Certain medications can also help you feel better. These medications may take up to 6 weeks to get therapeutic effects, so it is important to know that if you are on an antidepressant, continue taking them as prescribed unless told otherwise by your physician. Counseling or talk therapy has also been known to be helpful in treating depression.

Where can I get more information?

- Talk to your doctor or other healthcare provider if you or any of your loved ones feel down and blue, to discuss evaluation and possible treatment options.
- Use the internet.

By Dr. Javier Rios



This month's profile is on **Dr. Joyce Chang**, incoming 1st Yr. Resident. Dr. Chang is originally from Los Angeles. She graduated from the University of California with a Bachelor of Science Degree in Biology. She then received her Masters in Health Services Administration from St. Joseph College in Standish, ME. Dr. Chang graduated from St. Christopher's College of Medicine in Scotch Plains, N.J. in June of 2004 and started her residency here at RFPC on November 1, 2004. She was recently married and her personal interests are traveling, shopping, roller-blading, snowboarding and going to fine art galleries.

WHY YOUR WAIT IS SOMETIMES LONGER WHEN YOU COME TO THE CLINIC FOR YOUR APPOINTMENT!

What is taking so long???

We do our best to respect your time and have your appointment process go as smoothly as possible, but some times the process takes longer than it should. There are many reasons why your appointment could take longer than you expected. The reasons listed are some of the common reasons; but remember there may be other reasons that can affect the amount of time you spend with us for your appointment. Please ask any one of the staff to help explain to you why you may be waiting longer than you expected. One of the most common reasons is that the doctor is running behind schedule. This happens for many different reasons. One patient may need more time than the appointment was planned for. Our doctors try to spend the time that each patient needs. Sometimes our patients come late and that can put the doctor's schedule behind. Some of our patients have special needs that add to the amount of time that is needed for their appointment. Our staff will let you know ahead of time if they know the doctor is running behind. Another reason that appointments may take longer is that our resident physicians need to consult with our faculty (the supervising teaching physician) on each patient. This process is called precepting. This is why your doctor may leave the room several times during your visit. This adds time to the visit. Our doctors have only 2 exam rooms each to see patients. The doctor is usually in one room seeing a patient and the patient in the other room is waiting to see the doctor. This may mean that until one of the rooms is available you may need to wait in the lobby. If you need to have lab work done, the nurse needs to perform a test or if there is paperwork that needs to be completed, the process may take longer and adds time to your visit. Every year we monitor the amount of time our patients spend on average for a visit. We ask 50 random patients to complete a time study. This provides us data on how well we are managing our wait times and how well the process is going for our patients. This information will be posted in our lobby each year after the survey is completed so you can see how we are doing. If you have any feedback or suggestions we would like to hear from you. We care about your experience with us and are always looking for ways to make things better. **Connie Kinnee, Program Administrator**

