

# PSYCHIATRY NOTES

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*Psychopharmacology and Psychotherapy for Adults, Adolescents, and Children*

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## *CANCER PATIENTS AND DEPRESSION*

Although many cancer patients cope well with their disease, psychiatric disorders occur in almost 50% of patients in the setting of malignancy. Untreated psychological and neuropsychiatric disorders can compromise quality of life as well as treatment compliance. Three behavioral syndromes are often encountered in clinical practice. These are depression, anxiety, and delirium.

Management of these syndromes begins with accurate diagnosis. Clinicians should assess for somatic and psychological symptoms of the syndrome and should always ask about suicidal thoughts or intent. In addition to medication, laboratory assessments can be reviewed, as metabolic disarray, anemia, low B12 levels, and thyroid dysfunction may all contribute to the development of depressive symptoms. Once depression is diagnosed, treatment involves antidepressant medication, sleep aids, when possible, removal of exacerbating agents, and psychotherapy.

## *IMPULSIVITY: TOO MUCH DOPAMINE?*

A brief report recently published in *Science* confirms the key role of dopamine (DA) in impulsive behavior. Joshua W. Buckholtz and colleagues used dual-scan positron emission tomography in healthy human volunteers to gauge whether diminished midbrain D2/D3 autoreceptor binding and greater amphetamine-induced DA release in the striatum were predictive of higher levels of trait impulsivity. The researchers found that impulse control directly correlated with the amount of DA released in the striatum. They further explored the relevance of enhanced striatal DA release to the risk for substance abuse. Their findings suggest that there is a neurobiological link between impulsiveness and drug abuse vulnerability—increased DA release predicted a stronger desire for drugs.

### ***HIGH SCHOOL STUDENTS WITH ADHD***

Adolescents with attention deficit/hyperactivity disorder (ADHD), conduct disorder, or who smoke cigarettes are least likely to finish high school (HS) on time or most likely to drop out altogether, researchers at the University of California, Davis, School of Medicine (UC Davis) have found. The researchers analyzed data collected during 2001 and 2002 from the National Epidemiological Survey of Alcohol and Related Conditions to examine the “joint predictive effects of childhood and adolescent onset psychiatric and substance use disorders on failure to graduate [on time].”

Together with colleagues, lead investigator Joshua Breslau, PhD, ScD, medical anthropologist and psychiatric epidemiologist in the department of internal medicine at UC Davis, reported in the July issue of the *Journal of Psychiatric Research* that of a total of 29,662 respondents, about one third (32.3%) of students with combined-type ADHD were more likely to drop out of HS than students with other psychiatric disorders. This figure was twice that of teens with no reported mental health problems (15%) who did not graduate. Students with conduct disorder were the second at-risk group (31%) to drop out or not finish on time. Cigarette smokers were third in line, with a staggering 29% who did not finish HS in a timely manner.

### ***IN THE NEWS***

Both doctors have been interviewed several times over the past months on a wide variety of newsworthy topics. Please check out our website for links to these items of interest.

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