

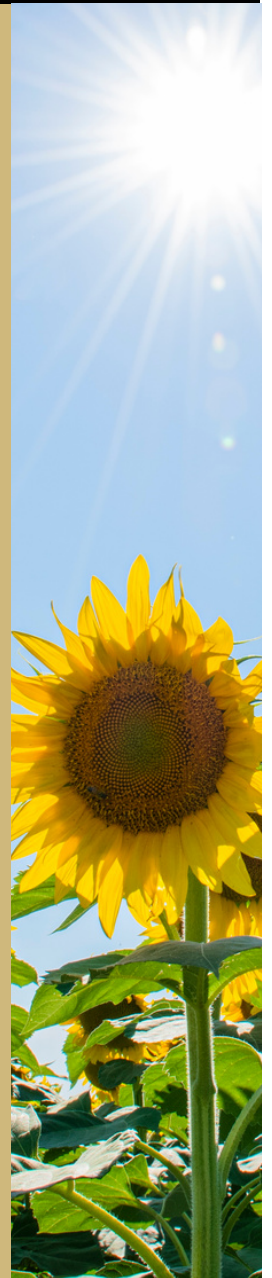
# INTRUSIVE THOUGHTS

A NEWSLETTER FROM THE DEPARTMENT OF PSYCHIATRY'S OCD CARE TEAM

## Spring into self-care!!!

As I sit writing this, I look out my open window and breathe a sigh of relief. The grass is beginning to green, the sky is a comforting shade of blue, and the birds have begun to sing. Spring is finally here (although being Colorado, snow is in the forecast tomorrow). I imagine that I am not alone in feeling like this was an unusually challenging winter. After a season of uncommonly frigid weather and near constant post-COVID illnesses, I am grateful for the warm days and fresh air to come.

As winter turns to spring, we have a wonderful opportunity to consider the role of self-care in our own lives. During the dark cold winter months, self-care can feel like a reactive measure to get ourselves back into health both physically and mentally. With spring's arrival, perhaps self-care can mimic the season and take on an energy of growth, potential, and beginnings. Maybe that means pausing to feel the sunshine on your face when you eat your lunch outside instead of at your desk. Perhaps a walk around the neighborhood to admire the new flowers is in order. Maybe self care comes from a deeper place of appreciating and acknowledging the bravery, strength, and kindness within all of us. Perhaps it means making that change that you have been thinking about or maybe it means allowing yourself to stay put, grow some roots, and see what fruits may come. What ever self care means for you, consider how it can be used not just to return to health, but to grow into something new and tender and full of fresh potential.



Department of Psychiatry

SCHOOL OF MEDICINE

UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

# Anxiety and OCD Treatment Across the Lifespan

Register now

**\$150**

September 13th-15th,  
2023

9:00AM-5:00PM MST

Virtual

Contact Emily  
Hemendinger  
(Emily.Hemendinger  
@CUAnschutz.edu)  
with any questions.

Anxiety Disorders and Obsessive Compulsive Disorder (OCD) can be experienced across the lifespan. This interactive, three-day, virtual education program for clinicians, therapists, and prescribers includes presentations on the identification, differential diagnosis, and treatment of anxiety and OCD. Interactive case discussions will highlight anxiety and OCD presentation and treatment in children and adults across the lifespan from diverse communities and contexts. At the end of this program, you will be able to incorporate ERP into your evidence based treatment toolkit.

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September 13, 2023: Overview of Treatment of  
Anxiety in Children

September 14, 2023: Overview of OCD and OCD  
Treatment in Adults

September 15, 2023: Exposure and Response  
Prevention Treatment for OCD in adults

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## Presenters:

*Dr. Rachel Davis MD*

*Dr. Scott Cypers PhD*

*Emily Hemendinger LCSW, MPH,  
CPH, ACS*

*Dr. Abigail Norouzinia PhD*

*Kasey Benedict LCSW*

*Dr. Stephanie Lehto PsyD*



## OUR TEAM

*Dr. Rachel Davis MD - Medical Director and Psychiatrist*

*Emily Hemendinger LCSW, MPH, CPH, ACS – Clinical Director/Licensed Clinical Social Worker and DBS Coordinator*

*Dr. Stephanie Lehto PsyD – OCD Therapist/Licensed Psychologist*

*Dr. Abigail Norouzinia PhD – OCD Therapist/Licensed Clinical Psychologist*

*Kasey Benedict LCSW -OCD Therapist/Licensed Clinical Social Worker*

*Dr. Scott Cypers – Licensed Psychologist/Therapist with Johnson Depression Center*

*Dr. Josh Evans MD-Psychiatrist*

*Katie Slnsko -- Social Work Intern*

*Maritza Martinez -- Volunteer*

*Interested in contributing to the newsletter? Email the editor at [Emily.Hemendinger@CUAnschutz.edu](mailto:Emily.Hemendinger@CUAnschutz.edu)*



## GROUP OFFERINGS

*Mondays at 4pm (monthly)  
Intro to ERP - for new group members*

*Mondays at 5pm  
For adults ages 18+ with OCD and related disorders*

*Tuesdays at 5pm  
For adults ages 18+ with OCD and related disorders*

*Wednesdays at 5pm  
For adults ages 18+ with OCD and related disorders*

*Thursdays at 4pm  
For adults ages 18+ with OCD and related disorders*

*Every other Friday at 4pm  
Non-clinical support group for loved ones of individuals with OCD*

*Our adolescent group is no longer offered*

*We do have a waitlist for individual and group therapy, please reach out to be added to our waitlist and/or send you other referrals.*

*Are you a clinician who wants to know more about OCD and ERP? We offer trainings, consultations, and supervisions!*

**[CLICK HERE FOR MORE RESOURCES ON OCD AND ERP FOR CLINICIANS AND PATIENTS](#)**

## STAFF SPOTLIGHT: DR. JOSH EVANS

Josh Evans, M.D. is a Psychiatrist and Senior Clinical Instructor with the OCD Program Treatment Team at the University of Colorado Anschutz School of Medicine. Dr. Evans completed Psychiatry Residency at University of Colorado School of Medicine, including additional specialized focus and training in psychotherapy. He earned his M.D. at University of Kentucky College of Medicine after earning a bachelor's degree in Spanish and International Economics. Following residency, Dr. Evans joined faculty at University of Colorado Anschutz School of Medicine working in Student Mental Health. From there, he opened a private practice where he continues to offer psychiatric and psychotherapeutic services. When he isn't working, Dr. Evans enjoys quality time with friends and family, comedy, the arts, weirdness, random trivia, an absurd amount of podcasts, experiences that open the mind and heart, and mixing it up with an eclectic and ever-changing group of interests/inspirations/fascinations.

## SPRINGTIME OCD RECOVERY RENEWAL

Every season brings an opportunity to slow down and reset our intentions. So, as you approach this spring, how are you doing in your OCD journey? Are you happy with your current efforts to keep OCD in check or minimize its impact on your life? If not, this can be a great opportunity to double down and reset.

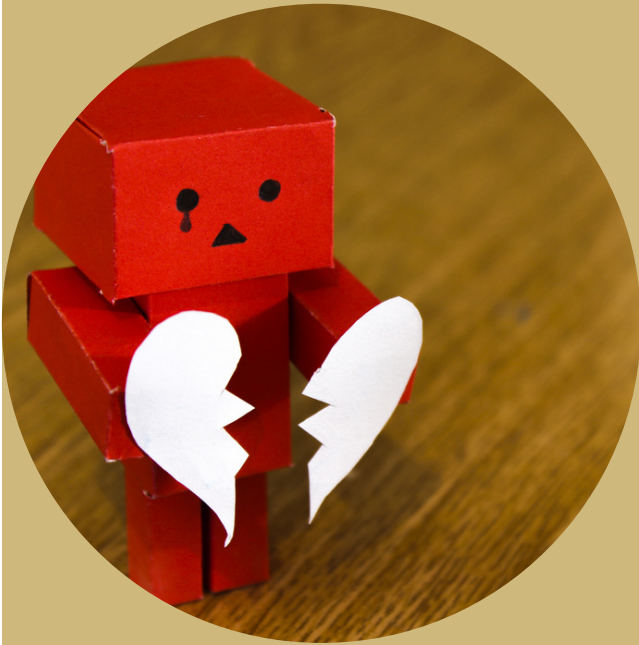
Let me illustrate this by telling a story. I called my best friend who is a GI doctor when I was curious about the best diet for my health and weight. He shared that thinking about approaching health with just a diet and losing weight would ultimately fail, as he said that a diet means that you are going to do something for a short period of time and then stop once you achieved your goals. So, he shared with me that if I wanted to be effective in this goal I had to be willing to adopt a lifestyle that would allow me to be healthy. He shared there are lots of lifestyle changes I could make to help me with that goal.

What lifestyle are you willing to adopt to minimize the impact of OCD? There are two strong factors to focus on, spending time on intentional exposure work and good stress management. Think about a space in your life where OCD has too much of a hold on you. Is this the season to create more structure in your life to focus on reducing the impact of OCD in this area? Can you commit to an exposure plan to help make this happen? Are you ready to adopt the lifestyle that will allow this to happen?

Lastly, stress triggers exacerbations in OCD. So, make sure to talk with your providers about developing a strong stress management program. It can be easier in the spring with better weather and more opportunity to get outside to lean into healthy stress management practices. Do you have those tools? If not, this could be a great season for springing into better stress management.



# Reconciling Relationship Loss



Have you ever found yourself at the end of a relationship that you did not want to end? Maybe you plead with the person, with a Higher Power, with the person's friends or family, or with yourself to fix it. Maybe you have had the experience of exhausting every option within your power and the relationship still ended without your agreement. Or maybe you chose to end the relationship because the situation required it, but it was the last choice you ever wanted to make. Relationship loss can be desperately painful to wade through and it's easy to become or feel stuck.

It is completely natural to be sad following a relationship loss and no one can define just how long that can or cannot be. However, if you notice yourself wanting/needing to move forward but feel like you cannot, you might start by considering the following questions:

- Where am I stuck in this grief process? Do I have any looping thoughts? (friends/family may notice looping thoughts and it can be helpful to ask them b/c looping thoughts can lend clues about where someone's brain feels stuck)
- What am I feeling like I cannot move forward from? Hurt? Interactions? Dreams about the future?
- Is there anything I feel like I will lose if I move forward?
  - oCan I move forward and still retain this?
  - ols this healthy to want to hold onto? If not, what would it look like to mourn this? Am I willing/ready? If not yet, that's ok!
- What are my reasons for moving forward? What are my reasons for holding onto my relationship (in my mind/heart)?
- What thoughts about the future do I have?
- Were there ways my identity was tied to the person or relationship?
- Was my hope knotted to the dreams I had in the relationship?

Some of these questions might be painful to answer honestly to yourself and the answers could incite uncomfortable emotions, but allowing yourself to emotionally process is one of the most important parts of grief. It can also be helpful to talk through these questions with a trusted friend or therapist who can provide compassion and space for your thoughts and emotions.

The way that you explain the ending of the relationship to yourself is often an important key when wrestling with loss.



## Reconciling Relationship Loss (continued)

Even when you've done everything you can think of, it may still feel like you "could have" or "should have" been able to do something more; it may still feel like it was your fault, even if you intellectually know it was not.

This might present in ruminative thought patterns like "If I had just done/not done X, then this would not have happened". Although these thought patterns help us feel as though we could have prevented the pain, they often lead to hyper-responsibility and excessive self-blame and shame, which prevent processing of the deepest emotions necessary for healing.

The painful truth is that there are many things, people being one of them, that are outside of our control. By allowing yourself to mourn the illusion of control, you can make space for viewing past and future interactions and events in a more balanced way which will make it easier to give yourself and others grace for the shortcomings we all have.

Self-compassion reduces the effort needed to move through grief by enhancing your acceptance of whatever your best is on any given day. Although self-compassion does not remove the pain of a situation, it can reduce the pain of sitting with yourself in the painful emotions that arise as you ask yourself the tough questions, remember the good moments, practice forgiveness and bravery- often these two occur simultaneously, and rebuild hope.



The natural question that many have about self-compassion pertains to how to actually practice it and grow it. One of the greatest ways to engage in our own redemptive process is to look at ourselves in all our mess, in all our confusion and to say with absolute conviction, "Yes, you who tried so hard and couldn't fix it, you are absolutely lovable, just as you are. You are lovable today with all your shortcomings that you've had in the past and even if you mess everything up in the future, you will remain lovable to me." It is only when we know we are fully loved and accepted that we are ever free to fully transform.

Now, this is certainly a tall order, but it is one that can come with practice. So, maybe, just for today you can practice telling one part of yourself, and it could be any part- a part that is sad, a part that is mad, a part that is afraid to move forward- that it is lovable. It can be helpful to imagine yourself or these parts of yourself as young children.



If you do not feel like you can say that in genuine sincerity, then just practice telling any part of yourself that you are going to work on loving yourself. The more parts of ourselves we practice accepting, the closer we get to accepting our whole selves, which will free us to sit with and move forward from the pain that keeps us entangled with our past.

# Spring, Depression, and Suicide

It is a common myth that suicide rates spike highest during the winter holidays, but research supports that suicide rates actually reach peak levels during the spring months. This occurs due to several reasons, primarily including social expectations, neurobiological changes, and (surprisingly!) spring allergies.

During the transition to spring, many people enter the new season expecting the changing weather to give them a sense of renewed energy and elation. If these expected emotions don't arise, or if symptoms of depression worsen, people may feel disappointed and hopeless. It can also be difficult for people to feel connected socially when most of their friends experience the expected uplift brought about by the weather and outdoor activities.

Spring allergies also contribute more to depression than most people would expect. Studies have shown that severe spring allergies makes a person 40%-50% more likely to experience symptoms of depression. This can further lead to feelings of isolation and disconnect.

All of the mentioned factors combined can heavily influence symptoms of depression and suicidality and are thought to be the primary contributors to the increased rates of death by suicide during spring.

So, what can we gain from knowing this?

- Providing people with psychoeducation on this topic can validate why people may be feeling the way they do, reminding them that these feelings can be common during spring and that they are not alone.

- Suicide prevention efforts should include information around this topic to prepare both practitioners and patients.

- Intentional self-care is always important, but it is particularly encouraged for people to use tools from their self-care toolboxes during spring.

Feelings of depression and suicide can be isolating, overwhelming, and draining. However, it is important to remember that there are resources out there that are available to those who need it. Be gentle with yourself and take care of yourself this spring!

#### Resources:

- Suicide and Crisis Lifeline: 988

- Texting a Crisis Counselor: 741741

- Colorado Crisis and Support Line: 1-844-493-TALK (8255)

- Trevor Project: 866-488-7386

- Self-Care tips for Spring Depression:

[https://www.distresscentre.com/2023/03/28/spring-self-care-coping-with-spring-depression/?utm\\_source=rss&utm\\_medium=rss&utm\\_campaign=spring-self-care-coping-with-spring-depression](https://www.distresscentre.com/2023/03/28/spring-self-care-coping-with-spring-depression/?utm_source=rss&utm_medium=rss&utm_campaign=spring-self-care-coping-with-spring-depression)

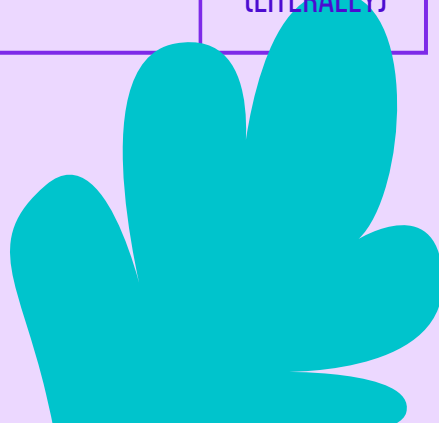
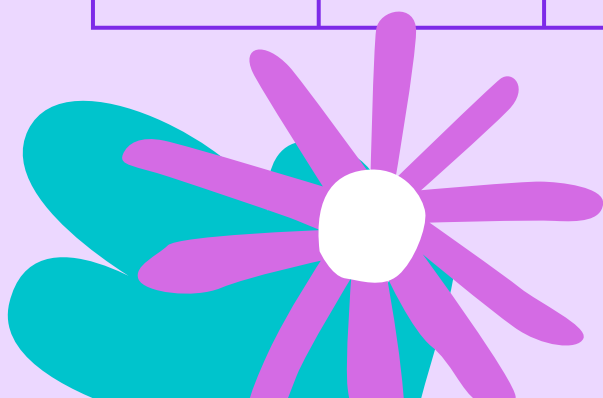


# SELF-CARE Bingo



Intentional self-care can be difficult, especially during busy or stressful times in our lives. This activity is a great intro and fun way to practice and try new self-care actions in an intentional and mindful way.

TOOK A SHOWER	COMMUNICATED MY NEEDS	CAUGHT UP WITH FRIENDS	PROCESSED MY FEELINGS	COMPLIMENTED MYSELF
MINDFULLY MOVED MY BODY	MEDITATED	COOKED A MEAL FOR MYSELF	PLAYED WITH MY PET	ENJOYED A CUP OF TEA
TOOK A BREAK	DRANK WATER	<i>Practiced self-compassion</i>	TOOK A SOCIAL MEDIA BREAK	PRACTICED GRATITUDE
ATE A TASTY TREAT	GOT 8 HOURS OF SLEEP	SHARED MY WINS/GOOD MOMENTS OF THE DAY WITH SOMEONE	ACCEPTED A COMPLIMENT	LISTENED TO A PODCAST AND/OR AUDIOBOOK
TOOK A MENTAL HEALTH DAY	SAT OUTSIDE IN THE SUN FOR 5-10 MINUTES	TOOK A POWER NAP (10-20 MINUTES)	WROTE IN MY JOURNAL	STOPPED TO SMELL THE FLOWERS (LITERALLY)





# OCD Program Happenings

Coming Soon!

The University of Colorado Anschutz Medical  
Campus

OCD and Anxiety Intensive Outpatient Program

3-days a week

8am-12pm

We will be taking Aetna, Anthem, Cigna, and  
Colorado Access Medicaid

Questions? Email [Emily.Hemendinger@CUAnschutz.edu](mailto:Emily.Hemendinger@CUAnschutz.edu)

## *Exposure-palooza 2023*

What: Carnival experience with exposures, opportunities to connect,  
games, inspirational speakers, and more!

When: October 28th

12pm-5pm

Where: Anschutz Health and Sciences Building

CU Anschutz Medical Campus

Why: Challenge yourself, learn about OCD, meet the team, and  
connect with the Colorado OCD community all while having fun!

Stay tuned for more info!

Questions? Email [Maritza.Martinez@CUAnschutz.edu](mailto:Maritza.Martinez@CUAnschutz.edu)