A Patient’s Path to Recovery
For Samantha (not her real name) and her family, her entry into Behavioral and Mental Health Services at St. Clair Hospital was precipitated by a host of issues that included relationship, stress-inducing family issues, including a troubled marriage and, like so many other Baby Boomers, with some daily life.

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People suffering from mental illnesses today—whether mood disorders such as major depression, anxiety or panic disorders, or other psychiatric disorders—are being treated effectively and successfully with a combination of treatments.

And, says Dr. Wright, the goal in treating people with mental illness is much like that of physicians who are treating patients with physical ailments. “Our aim is not to just make people feel better. It is to bring about a remission, where they feel completely better.”

Dr. Wright says he and the board-certified psychiatrists, as well as the therapists at St. Clair, are helping people every day return to lives free of despair and worry. He says the majority of men and women who are treated at St. Clair are suffering from mood disorders, which include major depression and anxiety disorders, in which people are unusually or overly anxious, or may experience panic attacks.

Dr. Wright says some studies show that up to 15 percent of the general adult population suffers an episode of major depression at some point in their lives. (Women are twice as likely to experience episodes of major depression as men.) He says those numbers reflect, in part, the growing number of men and women who are actively seeking treatment for mental illness after seeing that other people have been treated effectively for it, including celebrities.

People realizing that psychiatric illnesses are diseases, not a sign of weakness, he says. “They know it’s not as simple as pulling yourself up by your bootstraps.”

But, he says, he found the Partial Hospitalization program at St. Clair to be a source of comfort when it came to dealing with mental health issues, the stigma of seeking out help needs to be removed,” she says. “Our society needs to realize that mental health is the same as physical health. If I had a physical ailment or a more severe mental health issue because we have stereotyped people who do not ridicule or belittle me because I had a relapse and had to come back to the program. That was heartwarming to me that they did not make me feel that way.”

Today, Samantha is seeing a private therapist outside the Hospital, but believes the veil of depression she was living with has been lifted. “I am doing great. I feel the Partial Hospitalization program has helped me to look at life and how to handle issues and stressors that arise in my life in a more positive and productive way.”

Samantha credits the dedication and professionalism of the staff of both programs with helping her make great strides toward recovery. “I felt like I was treated like a human being and not just another patient in a hospital,” she says. “The staff in both the inpatient and the Partial Hospitalization program were dedicated to their profession and very dedicated to their patients. They wanted us to make improvements and we encouraged us to do so.”

Also key to making progress was developing a level of trust between not just herself and staff, but other patients during group therapy. “When I was in therapy, I wanted to be able to talk to people who were going on as well so that we could help each other but you had to develop a level of trust. That’s something I thought was definitely developed at St. Clair,” Samantha says.

A combination of therapy and medication was helping Samantha, but she suffered a relapse when she stopped taking the prescribed doses of medication. “I made a big mistake in taking off my medication, a decision I had made on my own without conferring with my psychiatrist.”

But, she says, she found the Partial Hospitalization program served as a “safety net” for her just when she needed it most. “I found I could rely on St. Clair Hospital and the staff to welcome me back to the program and not ridicule or belittle me because I had a relapse and had to come back to the program. That was heartwarming to me that they did not make me feel that way.”

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She credits the good connections she made with other patients with helping her form a solid support mechanism to fall back on. Samantha agrees with Dr. Wright that the stigma long associated with mental illnesses is preventing people from getting help. “When it comes to dealing with mental health issues, the stigma of seeking out help needs to be removed,” she says. “Our society needs to realize that mental health is the same as physical health. If I had a broken bone, or diabetes, or bad suffered a heart attack, I would not hesitate to seek out medical attention. But you have to make sure people are going to people who do not ridicule or belittle me because I had a relapse and had to come back to the program. That was heartwarming to me that they did not make me feel that way.”

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