

NEVER say NEVER



*In the midst of the seemingly endless storm,
look to the promise of the rainbow -
the rain shall not prevail!*

Fall 2012

OCD POTPOURRI

This issue of *Never Say Never* is a collection of articles and items from various sources and on various subjects. Some of them were found when researching previous issues and just kept for future use. A couple were found in the newsletters of other OCD and Anxiety organizations. The “Words of Wisdom” are repeats of some of our favorites. We hope you enjoy it.

The OCD Foundation of Michigan wishes everyone a joyous holiday season, and good health and happiness in 2013.

EXCITING NEWS! SAVE THE DATES.

SATURDAY, March 2, 2013. Christina Pearson, the Founder of the Trichotillomania Learning Center (TLC) in Santa Cruz, CA, will be here to present a 1-Day Workshop on Hair Pulling and Skin Picking. If you or someone you love deals with Trichotillomania, this is a can't miss event. Details to follow.

SUNDAY, March 3, 2013. THEO (Trichsters Helping Each Other), the Trichotillomania Support Group, is marking its 20th Anniversary with a big celebration. And yes, Christina Pearson will be celebrating with us. Mark your calendars. Details to follow.

THE OCD FOUNDATION OF MICHIGAN

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* Thanks to Mark Fromm, President of Business Growth Today, Inc., for hosting our website.

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NEVER say NEVER

is the quarterly newsletter of The OCD FOUNDATION OF MICHIGAN,
a 501(c)(3) non-profit organization.

Please note that the information in this newsletter is not intended to provide treatment for OCD or its associated spectrum disorders. Appropriate treatment and advice should be obtained directly from a qualified and experienced doctor and/or mental health professional. The opinions expressed are those of the individual authors.

To submit articles or letters, write or e-mail the OCDFM at the above addresses.

LIST OF SELF-HELP GROUPS

ANN ARBOR:

1st Thursday, 7-9 PM
St. Joseph Mercy Hospital Ann Arbor
Ellen Thompson Women's Health Center
Classroom #3
(in the Special Centers area)
5320 Elliott Drive, Ypsilanti, MI
Call Jeannie at (734) 846-9656
E-mail bellajejan333@att.net

DEARBORN:

2nd Thursday, 7-9 PM
First United Methodist Church
22124 Garrison Street (at Mason)
Call Joan at (734) 479-2416

FARMINGTON HILLS:

1st and 3rd Sundays, 1-3 PM
Trichotillomania Support Group
Botsford Hospital
Administration & Education Center, Classroom C
28050 Grand River Ave. (North of 8 Mile)
Call Bobbie at (734) 522-8907 or (734) 652-8907
E-mail rslade9627@aol.com

GRAND RAPIDS:

Old Firehouse #6
312 Grandville SE
Call the Anxiety Resource Center
(616) 356-1614
www.anxietyresourcecenter.org

Anxiety (all forms)

Meets every Wednesday, 7 to 8:30 p.m.
Open to individuals who have any kind
of anxiety problems as well as their
friends and family members.

Adults Obsessive-Compulsive Disorders

2nd and 4th Tuesdays, 7 to 8:30 p.m.
Open to any adults who have or think they
may have Obsessive-Compulsive Disorder.
Friends and family members welcome.

Body Focused Repetitive Behaviors

1st Tuesday, 7 to 8:30 p.m.
A monthly support group for adults who have
Compulsive Hair Pulling, Skin Picking and Nail
Biting problems.
Open to friends and family members.

Compulsive Hoarding

3rd and 5th Tuesday, 7 to 8:30 p.m.
A monthly support group for people who have
trouble with compulsive hoarding.
Open to friends and family members.

Social Outings

3rd Tuesday and 4th Saturday, call for details
Challenge your anxiety in the comfort of others while
attending fun-filled events.
Past activities have included: game night, visiting a
bird sanctuary, concert and comedy events, sunset strolls
on the beach and even canoeing.

LANSING:

3rd Monday, 7-8:30 PM
Delta Presbyterian Church
6100 W. Michigan
Call Jon at (517) 485-6653

LAPEER:

2nd Wednesday, 7:30 - 9 PM
Meditation Self-Healing Center
244 Law St. (Corner of Law & Cedar Streets)
Call Mary at (810) 793-6544

PETOSKY:

2nd Tuesday, 7-9 PM
Northern Michigan Regional Hospital
Community Health Education Center (CHEC)
360 Connable Avenue
Call Kevin P at (231) 838-9501
E-mail Runocd@gmail.com

ROYAL OAK:

OCD Support Group
1st Wednesday, 7-9 PM
Beaumont Hospital, Administration Building
3601 W. Thirteen Mile Rd.
Use Staff Entrance off 13 Mile Rd.
Follow John R. Poole Drive to Administration Building
Park in the South Parking Deck
Meets in Private Dining Room
(If the building is locked, press the Security button next
to the door, tell them you are there for a meeting, and
they will buzz you in.)
Call Kevin S at (248) 991-9350
E-mail jogger112@earthlink.net

IT'S JUST FINE TO MAKE MISTAKES

by Alina Tugend

WE all know that old saw that nothing in life is certain except death and taxes. We should probably add mistakes to that category. More than three years ago, I wrote a column about mistakes and my regret about making a mistake in an article. I asked why we are taught when young that everyone makes mistakes, but as we grow older, we're more often punished for making mistakes. That column eventually grew into a book, *Better by Mistake: The Unexpected Benefits of Being Wrong*, (Riverhead), which was published March 13, 2011.

Here is an excerpt: Perfectionists often get caught in an endless cycle of regret and blame that makes it difficult, if not impossible, to move on from their mistakes. "Perfectionism," says Jeff Szymanski, executive director of the Obsessive Compulsive Foundation in Boston, is "a phobia of mistake--making. It's the feeling that if I make a mistake, it will be catastrophic." Wait a minute here. Aren't we always complaining that things are going to hell in a handbasket--that no one really cares about doing a good job? Why not strive to be the very best you can be? And that is true up to a point. Being a perfectionist is not a bad thing; in fact, it may mean you have very high standards and you often achieve those standards. Those who have perfectionistic tendencies, but those tendencies do not rule-or-ruin their lives, are what psychiatrists call "adaptive" perfectionists. They find it important to do things in the right way, but this need does not hinder their lives and can actually help them achieve great success. For instance, Dr. Szymanski told me, he likes all the glasses in his kitchen cupboard lined up a certain way. That does not mean he freaks out if someone changes them (as friends sometimes do for fun), or that everything else in his house is equally ordered. He also strives to be the best executive director and psychologist he can be. But he knows he is not a great tennis player, and that's O.K. with him—it doesn't mean he will give it up because he is not world class, or line up a pro to work with him seven days a week. He is O.K. being O.K. at some things. On the other hand, what psychiatrists call "maladaptive" perfectionists need to be the best at everything, and if they make a mistake, it's a crisis. It is also not just about how they perceive themselves, but how others perceive them: they believe they will lose the respect of friends and colleagues if they fail. They have to hit all their marks all the time. Their need for perfection can also sabotage their own success. They do not turn in projects on time because they're not yet perfect. They can't prioritize what needs to be done quickly and what needs more time to complete. They want to rigidly follow rules to get things "right," and this means they're terribly uncreative, because creativity involves making mistakes, Dr. Szymanski says. Even worse, they don't learn from their mistakes, because if, God forbid, one occurs, it should be concealed like a nasty secret. So they cannot get crucial feedback—feedback that would both stop them from making similar mistakes in the future and make them realize that it is not a disaster—because they won't risk punishment or alienation for a blunder. And such a drive for perfection takes a heavy psychological toll, because every flaw, no matter how small, is cause for agony. A lot of perfectionists feel that they simply have high standards and that it is the rest of the world that falls short.

The problem with maladaptive perfectionists, Dr. Szymanski said, is not that they should not have goals, but those goals are often unrealistic and inevitably lead to a sense of failure. There is some controversy in

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the field among those who study perfectionism about whether, in fact, the term “adaptive perfectionism” is valid, as by their very nature, perfectionists have trouble adapting.

Randy O. Frost, a psychology professor at Smith College in Northampton, Mass., who has studied perfectionism for years, said he would prefer the term “positive achievement striving,” but he acknowledged that this phrase was going to be a tough one to sell. It is also important to remember that few people fit neatly into one category or another. We all tend to be on a continuum of perfectionism.

One of his studies shows how fearing criticism prevents maladaptive perfectionists from improving. He asked 51 female undergraduates—some considered high in the perfectionist trait (more maladaptive) based on a scale developed by Professor Frost and his colleagues and some considered low (adaptive and nonperfectionists) to reword a passage from an introductory writing composition text succinctly as possible without changing its meaning or deleting any important themes or ideas. The assignment was then graded by two college professors who were blind to the difference in participants. The findings? Those high in perfectionism wrote passages that “were judged significantly poorer in quality than subjects low in perfectionism.” Perhaps, Professor Frost theorized, that is because maladaptive perfectionists avoid writing tasks, procrastinate about them, and avoid having others review and comment on their work to a greater extent than nonperfectionists. “The result may be that those perfectionists don’t practice writing in any consistent way and don’t benefit from feedback on their work,” he wrote. “Consequently, they may not develop the same quality of writing skills as nonperfectionists. “Perfectionists seem to be motivated by a fear of failure, and new tasks are viewed as opportunities for failure rather than accomplishments.”

There are ways that those with superperfectionist traits can try to take things down a notch. They can try to break down tasks into more manageable bites, so it does not feel overwhelming. They can work on getting more feedback at an early point in a project to get a reality check. They can learn to prioritize and set deadlines, so they do not get subsumed in every project to the detriment of other needs. This is where self-help books can be helpful, Dr. Szymanski said, by providing such strategies. But the problem arises when a perfectionist knows the strategies and will not use them. That’s when therapy may be necessary. It’s good to remember that while we often think of saints as the ultimate perfectionists, in the Catholic tradition, the saints were not always, well, saintly. As Thomas J. Craughwell, author of the pithily named book, *Saints Behaving Badly* (Doubleday, 2006), put it: “The Catholic calendar is full of notorious men and women who turned their lives around and became saints.” According to Mr. Craughwell: “St. Camillus de Lellis was an Italian mercenary soldier, a card shark and a con man. For six years, St. Margaret of Cortona lived as a Tuscan nobleman’s mistress. St. Moses the Ethiopian led a gang of cutthroats in the Egyptian desert. And St. Pelagia was the porn queen of 5th century Antioch.

Of course, they went through great suffering to become saints—but the point is they made their fair share of mistakes. And most of us are not—and more important should not be—aiming for canonization.

Reprinted, with permission, from the Fall, 2011 issue of the Grapevine, the newsletter of N. A. M. I. Macomb County, Michigan.

TMS (Transcranial Magnetic Stimulation) Therapy

Review written by Kay Zeaman

On Friday, October 19, 2012, Dr. Phil presented a show titled “Inside the World of Obsessive Compulsive Disorder”. His invited guests included a man and a woman who were experiencing extremely severe OCD.

The other guest was Dr. Bradley Jabour who talked about TMS (transcranial magnetic stimulation) therapy performed at his clinic, Smart Brain and Health, in Santa Monica, CA. His team has provided this therapy for the last 15 years. The difference between his clinic and others who offer TMS therapy is that they use fMRI technology to show brain activity in real time as opposed to the traditional MRI scan.

TMS therapy uses magnetic pulses to stimulate that part of the brain which is not functioning normally. The therapy is FDA approved. Each therapy session lasts about 40 minutes. There are 5 therapy sessions per week for a 4 to 6 week period.

During therapy, the individual will hear a repetitive clicking sound that mimics a tapping sensation on the scalp. Possible side effects include headaches and scalp discomfort.

Dr. Phil’s invited guests with severe OCD will be going for treatment at the Smart Brain and Health Clinic.

Most health insurance plans cover the therapy. Their website smartbrainandhealth.com can answer many questions as it provides a general overview of their services. Call 1-310-829-3438 for more information or to receive a complimentary consultation. Additionally you may send email requests to joanngadsky@micsc.com I emailed Joann and she said they have had an “overwhelming response” from Dr. Phil’s show. I did get the impression that this clinic has cutting edge technology which is probably why Dr. Phil chose this particular clinic.

There are quite a few locations that do TMS. I found clinics in Boston, San Diego, New York, Kansas City, etc. Most of them talk about TMS for depression that does not respond to anti-depressants. However I did find references on the internet that talk about using TMS for chronic pain, PTSD, alcohol and substance abuse, Parkinson’s disease, ADD, dementia, autism, bipolar disorder, OCD, trauma, schizophrenia, and anxiety disorders.

Many clinics in the United States use TMS NeuroStar technology. Neurostar.com gives details. It uses electric currents to cause neurons to be active and cause the release of neurotransmitters which lift the depression.

How technology is reshaping ERP treatment for OCD patients

by Dr. Kristen Mulcahy

I realized that I wanted to work with people with OCD when I was in graduate school. My roommate was working at the Bio-Behavioral Institute, a world renowned treatment center for OCD in New York and would come home with most fascinating stories of the types of issues she was working with and the very interesting things she would do to treat them. I was hooked. When it came time to interview for internships, I knew I had to train and work there. The only problem was they were looking for an intern who was Spanish-speaking, which I was not. Not to be deterred, however, I went on the interview and convinced my future boss, Dr. Fugen Neziroglu that I was indeed the best candidate. Even though I was not fluent in Spanish, I assured her that I would learn and that I had even purchased the books to do so. Okay, I embellished a little. Fortunately, she was taken by my sheer determination and hired me. To this day, whenever I see her, she asks how my Spanish is coming along. I tell her, “Bueno.”

Throughout the past 15 years, I can positively say my work has been exceptionally rewarding and never dull. I feel so incredibly fortunate to have received the training I did and, as a result, to be able to offer a form of treatment (Cognitive Behavior therapy, most specifically Exposure and Response Prevention) that can have such a profound effect on people’s lives. However, knowing there are so many OCD sufferers not getting the right type of help or any help at all has always bothered me and made me wonder how I could help in some bigger way. I can see only so many people in my Cape Cod, Massachusetts practice.

About two years ago, I got my answer... an OCD app. The fact that I had an idea to create an OCD app is really pretty funny if you know me at all. I am fairly technologically challenged. In fact, prior to my iPhone, I could not even figure out how to retrieve my voicemail. However, once again I set out undeterred by my shortcomings, certain that these sophisticated mobile devices could be transformed into effective and powerful treatment tools for OCD sufferers. When I boil down the reasons why OCD sufferers are not overcoming their OCD, I come up with two main issues: 1) they do not have access to the right type of treatment or 2) they are in treatment, but are not consistent enough with it to get results. I saw the app as being able to help with both of these issues. If one does not have access to an OCD specialist, this could be the next best thing, an interactive application that will guide the sufferer through the appropriate treatment. The second issue, consistency of treatment, is something I am passionate about. I really hate when people do not comply with treatment and, therefore, do not get results. I know if I could be there with them all the time, guiding them in what to do and what not to do they would get better. Unfortunately, it is not possible for me to provide that type of 24-hour service. But, the app can be a sort of “pocket therapist” on call 24/7.

And so the ideas for Live OCD Free poured forth. The now completed app can help users set up their exposure hierarchy, which is the first step in any good OCD treatment plan. It guides users in how to practice their ERP and what to do if they are struggling with an obsession or have just given in to a compulsion. It allows them to set reminders to practice, establish goals for resisting compulsions, and

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*How technology is reshaping ERP
(Continued from page 7)*

obtain rewards for meeting their goals. It also provides an extensive toolbox for users to access when they are practicing an exposure or need help managing their anxiety or staying consistent with treatment.

From a therapist's perspective, my favorite aspects of the app are the audio record function and the progress reports it creates. With the record function, I can record specific things I want my patients to listen to. This could be something for exposure purposes or it could be one of the many brilliant things I say (wink, wink) during a session that I think would help during a time of struggle. Patients often tell me they hear my voice in their heads when they are about to give in to a compulsion. Well, now they really can hear me as annoying as that may be. The progress reports allow me to see exactly what my patient is doing or not doing when they are on their own. As a result, I can better figure out what is working and what is not, making treatment much more efficient.

And, of course, the children's version is super cool. Knowing how much of a difference ERP can make in a child's life, I felt very strongly about providing a specific version for kids that could motivate them to fight their fears. The Worry Wizard does just that. By mastering their challenges, kids get closer and closer to revealing the wizard's true identity. And if they are struggling, they can just shake their mobile device and their pal, Sage the owl, will come to their aid. As a therapist, it is a dream to have a young patient be not just willing, but genuinely excited to engage in treatment.

With Live OCD Free now available on iTunes, it is wonderful to hear the stories of how this app is helping people with OCD. Anoop Kumar is using the app to combat his OCD as there are virtually no resources for help in his hometown of New Delhi, India. Twelve-year-old Alexandra Douglas has struggled with debilitating OCD symptoms since the age of four. Unable to afford treatment with a specialist, she has courageously battled her OCD using the app. Her mom reports that her symptoms are significantly diminished and she is able to do things she never dreamed possible. Stories like these are why I created the OCD App. Knowing Live OCD Free can bring treatment into the hands of people who otherwise might not get help is the most rewarding.

For more information, please visit www.LiveOCDFree.com or contact Dr. Kristen Mulcahy at info@LiveOCDFree.com or 508-457-0440.

About Dr. Kristen Mulcahy

Dr. Kristen Mulcahy is an expert in the use of Exposure and Response Prevention (ERP) therapy to treat children and adults suffering from obsessive compulsive disorder. She is the director of the Cognitive Behavioral Institute in Cape Cod, Massachusetts. Dr. Mulcahy received her Ph.D. in clinical/school psychology from Hofstra University. She developed a specialty in OCD spectrum disorders through research and clinical work at the Bio-Behavioral Institute, an internationally renowned treatment and research center in New York. She is also the founder of Pocket Therapist LLC and the creator of the Live OCD Free, a mobile therapy application. In addition to treating patients, Dr. Mulcahy runs support groups for OCD sufferers. Dr. Mulcahy lives in Falmouth, MA, with her husband and three children

Reprinted by permission from the OCD New Jersey Newsletter, Winter 2012.

The Battle . . .

by Bill Hrenchuk

Hello Anxiety,

I need to talk to you. I need to tell you how it is that you affect my life. I'm certain that what I'm about to say won't be news to you, however, I need you to hear it and I need to put it down. So I'm going to tell you anyway. I'm doing this for me, not you.

You are an unwanted companion. Never did I ask for you to be part of my life. When I wake up in the morning, sometimes you are there waiting to talk to me; waiting to tell me that I won't be able to conquer the challenges that the day will offer. It's almost like you're a child with a secret, standing there in front of me, almost bursting with anticipation; hardly able to restrain yourself. I hate to see you first thing. I hate to hear your voice.

You make me silent. You keep me from speaking. You make me afraid to give voice to feelings, opinions and even needs. I suppress everything because you make me afraid that the things I'll say will cause anger, annoyance and perhaps pain. So behind the false smile, the one that only the closest people to me can recognize as false, your words go on in my head with your dire predictions of consequences in the form of played out mini-movies. You show me that nothing I say will end well. So I keep silent.

There are mornings, when I wake, and you're not right there in front of me. Everything feels right. Everything feels good. However, you are never gone. You're just further away. Sometimes I catch a glimpse of you sulking in the corner; sullen and angry that I'm not paying attention to you, or, better put, that there is nothing that is allowing you to pay attention to me. Sometimes I can go a whole day or two without being harassed by your

foolishness. If only I could figure out how to create that peace, that beautiful and silent peace, find the ingredients and blend them together, bottle it up and save it for the days when you first open your mouth to speak to me. Then, perhaps, I could never see you again; never hear your deceitful, harmful, hurtful words. Never worry the way you make me worry.

However, there is no magic potion, no fantastic elixir and no permanent cure. There is management.

I have gotten help. I've learned some things about you. How you work. How you manipulate. How you tell lies. I've learned about ways to stop you, ways to work around you and, while I may not be able to silence you completely, I've learned ways to quiet you. You and I will probably always battle. Right now you win more than I do because you've had years of training. You have several strategies and numerous tricks. I'm new to performing in this type of fighting game. I will learn my own tricks and build my own strategies. At some point you will lose more often than I.

And I will wake up more often without you there. I have learned there can be a life without you so close to me; that you and I will go days without speaking and, when we do, it will be me that does most of the talking. I will be in control of the conversation. I will speak and, if need be, perhaps I'll permit you to. I look forward to those days because I know, if I can find the strength to speak over you, I won't need to keep silent in life.

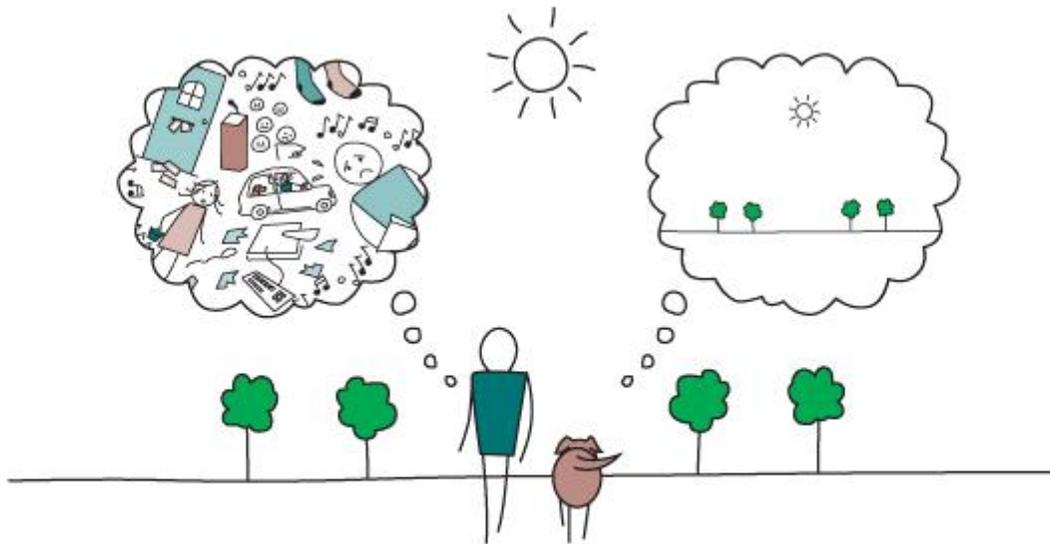
My voice is just as important as any other. I will be heard.

For now, Anxiety, Goodbye.

Reprinted from the Spring/Summer 2012 issue of "On track", the newsletter of ADAM, the Anxiety Disorders Association of Manitoba (www.adam.mb.ca)

What is Mindfulness?

Ever wonder where the good and enjoyable times go as we rush through life? Do you find that you are spending a great deal of your time thinking about the future or the past, while the present slips by?



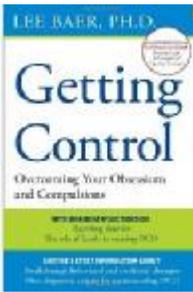
Mind Full, or Mindful?

Is your mind racing, thinking ahead, worrying, judging, whilst you are feeling stressed to the max, anxious or overwhelmed? Do you often find yourself on automatic pilot?

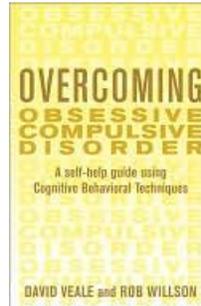
Mindfulness keeps your attention in the present moment. The goal “is simply to observe-with no intention of changing or improving anything.” Mindfulness enables us to live each and every moment to the fullest. Mindfulness is a means of observing and accepting what is occurring at the time, instead of demanding how things should be. Accepting what happens in our mind just as it is right now, with all the positives and negatives, often leads to increased confidence, calmer moods, and enhanced coping skills. Mindfulness is awareness of the moment - something that is beneficial in many aspects of life such as working, talking, playing, or eating. Tuning into the present moment is what mindfulness is about.

From www.cbt-partnership.org/mindfulness

SUGGESTED READING

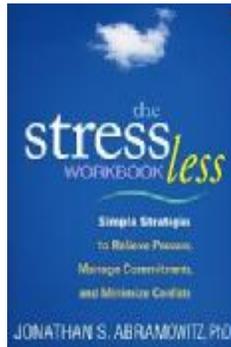


Lee Baer, PhD
Getting Control: Overcoming Your Obsessions and Compulsions
 Updated Edition
 Plume, 6-26-12
 ISBN 978-0452297852

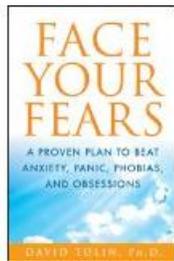
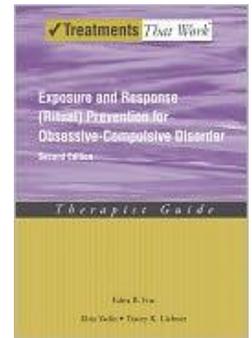


David Veale, Robert Wilson
Overcoming Obsessive Compulsive Disorder: A Self-Help Guide Using Cognitive Behavioral Techniques
 Basic Books, 2009
 ISBN 978-0465011087

Jonathan S. Abramowitz, PhD
The Stress Less Workbook: Simple Strategies to Relieve Pressure, Manage Commitments, and Minimize Conflicts
 Guilford Press, 7-12-12
 ISBN 978-1609184711



Edna B. Foa, Elna Yadin,
 Tracey K. Lichner
Exposure and Response (Ritual) Prevention for Obsessive-Compulsive Disorder: Therapists Guide
 (Treatments That Work)
 Oxford University Press, 3-2-12
 ISBN 978-0195335286



David F. Tolin, PhD
Face Your Fears: A Proven Plan to Beat Anxiety, Panic, Phobias, and Obsessions
 Wiley, 2012
 ISBN 978-1118016732



Dr. Fiona Challacombe
 Dr. Victoria Bream Oldfield
 Professor Paul Salkovskis
Break Free From OCD: Overcoming Obsessive Compulsive Disorder with CBT
 Random House U. K., 2011
 ISBN 978-0091939694

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Always get the latest news and events. Go to our Facebook page,
www.facebook.com/pages/The-OCD-Foundation-of-Michigan/192365410824044
 and click "Like".

TELL US YOUR STORY

You've told us what you want to see in your newsletter - more personal stories. What is OCD like for you? How has it affected your life? How have you dealt with it? What advice do you have for others? We would like to hear your stories and include them in these pages. Send your story to OCDFM, P.O. Box 510412, Livonia, MI 48151-6412, or e-mail to OCDmich@aol.com.

Know a Good Therapist??

Are you working with a therapist that you like, that knows a lot about OCD and how to treat it? Have you had good success with your treatment professional?

TELL US. WE'D LIKE TO KNOW.

Call The OCD Foundation of Michigan at 734-466-3105, or e-mail us at ocdmich@aol.com.

MARK YOUR CALENDARS

The International OCD Foundation Annual Conference, July 19-21, 2013, in Atlanta, GA. Info at www.ocfoundation.org/conference

Help is Still Wanted

The OCD Foundation of Michigan is still looking for individuals who would like to serve on the Board of Directors. Have you ever felt the desire to help out your Foundation? Are you passionate about helping others with OCD? Have you been helped by the Foundation and want to give back? The commitment is small. The Board meets only once a month. Beyond that, you can put in only as much time as you wish. If you're interested, call (734) 466-3105 or e-mail OCDmich@aol.com.

PROFESSIONAL DIRECTORY

List with us

Treatment professionals, what better way to find the OCD sufferers who need your help, and to give them a way to find you. Just place your business card in *Never Say Never*, the quarterly newsletter of The OCD Foundation of Michigan. For just \$25.00 per issue, your card can be in the hands of the very people who need you most. It's a great way to reach out to the OCD community, and at the same time support The OCD Foundation of Michigan. Send your card to OCDFM, P.O. Box 510412, Livonia, MI 48151-6412, or e-mail to OCDmich@aol.com. For more information, call 734-466-3105.

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PLEASE HELP

The OCD Foundation of Michigan is funded solely by your annual membership fees and additional donations. We have no paid staff. All work is lovingly performed by a dedicated group of volunteers. **WHY NOT VOLUNTEER YOUR TIME?** Call 734-466-3105 or e-mail OCDmich@aol.com.

The OCD Foundation of Michigan Membership Application

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May we send you newsletters, notices and announcements via e-mail? _____

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c/o Terry Brusoe, Treasurer
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12/2012

Please Don't Throw Me Away

You've finished reading me and don't need to keep me anymore. Or worse (boo-hoo), you don't need me and don't even want me. In either case, please take me somewhere where I can help someone else. Take me to your library. Take me to your doctor, therapist, or local mental health clinic. Take me to your leader. But please, please, don't throw me away.



The OCD Foundation of Michigan Mission Statement

- ◆ To recognize that Obsessive-Compulsive Disorder (OCD) is an anxiety-driven, neurobiobehavioral disorder that can be successfully treated.
- ◆ To offer a network of information, support, and education for people living with OCD, their families and friends, and the community.

**IF YOU WOULD LIKE TO BE ADDED TO OR DELETED FROM THE MAILING LIST
PLEASE CONTACT US**

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