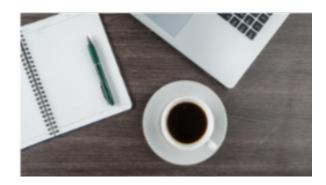
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## **Clinical Insights**

from Dr. Josh Spitalnick



Welcome to Fall in Atlanta....bye bye to the humidity, please?!?!?

#### What gets bigger the more you take away?

I always loved brainteasers as a kid but I could never have predicted the influence this specific one would have in my professional life this many years later...

When people come to treatment, most are coming in with the goal of working with a therapist to eliminate the bad stuff: guilt, shame, anxiety, anger, sadness, chronic pain, substance abuse, marital issues, body image issues, etc. But most therapists see this as only half of the equation. In anxiety and OCD treatment, there is also a significant emphasis on "making stuff go away." We focus on reducing compulsions/safety behaviors, called Ritual or Response Prevention (RP for short). Then comes the paradoxical goal of reducing anxiety by

facing it head-on (through exposures). But all of this is still only half the equation.

No matter how many painful, exhausting, or demoralizing symptoms you battle, and no matter how hard we work with our clients to help them alleviate suffering, there must be more to treatment (and life) than just taking the pain away.

Behavioral specialists like myself are aware that the removal of anticipated negative outcomes (e.g., social rejection, panic attacks) is highly motivating (this is called negative reinforcement). This is partly why it is so powerful and dangerous as a coping mechanism. This is why people get stuck in the pursuit of not feeling bad. It's highly rewarding to remove pain. You can spend all of your life scooping water out of that boat but, at some point, there must be another option to consider other than just *not sinking*.

We need to take actions that we hope have a direct positive outcome (i.e., positive reinforcement). This actually creates the possibility of more joyful life. This too can be motivating, but it's a lot of work. The problem: there is no guarantee of success. We are not guaranteed a good outcome just because we take action believing it will happen or because we try our best or because we are a good person.

This is a tough lesson, but its one that must be confronted in therapy AND in life. You must accept that there is only so much energy you can put towards the removal of bad...to make sure there is enough energy left over to pursue all the good things in life.

I'm not advocating for us to abandon treatment or neglect symptom management, I've spent my career helping people master "feeling less bad." Rather, I think we all need a reminder from time to time to recalibrate our priorities and goals, something that seems more present now than ever throughout this pandemic. We can all benefit from swapping out our magnifying glass that highlights all of our problems for a telescope to see what exciting adventures are up

ahead.

It seems simple, I know, but seeking out what brings you joy in life, what makes you happy, what brings opportunity, that's the motivation I want for people. Are you driven by the carrot or avoidance of the stick? Anything that you believe has the potential to bring good back in to your life should be part of your mental health package. It can't just be about "not worrying" or "not being rejected" or "feeling less pain." There is much more out there.

When your attention and energy shifts towards the possible joys in life, which I know takes practice, there is simply less space in your day to focus on the removal of bad stuff. This is simple math. It's not just semantics to shift your focus from "what you don't want" to "what you do want." It's a lifestyle change. It's a mindset. It's affirming.

What gets bigger the more you take away? A hole...and it just kept getting bigger the more you dig. Put the shovel down and plant some flowers, recognize your worth, your capabilities, and do something new tomorrow you've never done before.

Face your fears. Live with uncertainty. Take Control of your life.

Dr. Josh Spitalnick, CEO/Practice Owner
Licensed Psychologist
Board Certified in Behavioral and Cognitive Psychology

I can always be reached at <a href="mailto:drspitalnick@anxietyatl.com">drspitalnick@anxietyatl.com</a> if you have any questions, concerns, or positive news to share!

## **Upcoming Events**



# Atlanta 1 Million Steps 4 OCD Walk Fundraiser

#### **September 18, 2021**

The 1 Million Steps 4 OCD Walk provides a supportive community, increases awareness, and raises funds for the International OCD Foundation (IOCDF) and its local affiliates (OCD Georgia), enabling them to continue their mission.

Please join <u>Team OCD Avengers</u> (Anxiety Specialists of Atlanta's annual team name) on September 18, 2021, for the 1 Million Steps 4 OCD Walk fundraiser. Please walk with us, donate to the team, or send us words of encouragement. Our team is hoping to break \$5,000 this year. Ambitious we know, but we can do it together as a community!!

# To join Team OCD Avengers or simply to donate to our team and support us from afar, <u>CLICK HERE</u>

Support us by either registering to walk with us or by making a donation to our team. The process is fast, easy, and secure... and you can be sure that it will benefit a great cause.

Our local state affiliate, OCD Georgia, will be hosting the event September 18, 2021 near Chastain Park. For more information about the the event in Atlanta, CLICK HERE

And just to entice you to join the team (or donate) and have some

fun with all of us, here is Dr. Spitalnick and his family at the 2016 "1 Million Steps 4 OCD Walk."



## Staff Updates

#### Dr. Chris Noble, Director of Supervision

As we expand our training and consultation services to trainees and other professionals who pursue becoming anxiety specialists, we are excited to announce Dr. Chris Noble as our first Director of Supervision, effective September 1, 2021.



Dr. Noble has a rare (and impressive) set of credentials and passion that make her uniquely prepared for this role. Why? Dr. Noble is a "triple threat" as a Licensed Psychologist (Ph.D.), a Licensed Professional Counselor (LPC) and a Certified Professional Counselor Supervisor (CPCS), establishing her as one of the few

licensed mental health professionals in all of Georgia to be credentialed to supervise both doctorate-level and masters-level professionals. This is a rare combination! Dr. Noble has enjoyed a similar role previously as a member of the Anxiety & Stress Management Institute, with tremendous success partnering with local universities to recruit and train the next generation of anxiety specialists.

Dr. Spitalnick and Dr. Noble first met as Board Members of OCD Georgia about 8 years ago and, although it always seemed unlikely, Dr. Spitalnick had always hoped to have the opportunity to work alongside Dr. Noble in some clinical capacity. When the opportunity to hire Dr. Noble came up last year, during the onset of the pandemic, Dr. Spitalnick didn't hesitate. The entire team at Anxiety Specialists of Atlanta, LLC is better with Dr. Noble as one of its senior clinicians, and even more so now as one of the leaders in her new role. On a personal level, Chris' humor, kindness, humility, and sincerity is equally as adored as is her professional expertise.

In this new role, she will now be developing and refining evidencebased strategies for all of our supervisory staff to ensure that the trainees experience the highest quality of supervision, training and consultation, to best prepare them for successful careers once they are licensed.

Congratulations Dr. Noble for this much deserved leadership role!

# Welcome Dr. Catherine Worthington, Postdoctoral Clinical Fellow

As we continue to expand our team, train the next generation of anxiety and OCD specialists, and always strive to increase the availability and affordability of evidence-based services, we are very excited to announce the addition of several new therapists in the coming months.



Dr. Worthington is a psychologist joining us this month as a Child and Adolescent Postdoctoral Fellow. She recently graduated from Spalding University, earning her Psy.D. after completing a predoctoral residency with Mt. Washington Pediatric Hospital. As a CBT and exposure therapy specialist, Dr. Worthington's specialty areas of focus include social anxiety, medical/health anxiety, specific phobias, OCD, selective mutism, pediatric and adolescent sleep difficulties, and early-childhood

behavioral feeding challenges.

Dr. Worthington is currently in the process of seeking board certification in Behavioral Sleep Medicine (DBSM) and recently completed intensive training in Supportive Parenting for Anxious Childhood Emotions (SPACE).

If you want to learn more about her impressive background, click below!!! We are so very excited to have Dr. Worthington join our team as the mental health needs of our community continue to rise. Catherine, welcome to Anxiety Specialists of Atlanta, LLC!

Click Here to see Dr. Worthington's bio and contact information

#### Staff Highlights

In addition to our primary clinical roles, our team works hard to provide support, education, and advocacy to our colleagues, the communities we serve, and the scientific field of OCD, anxiety, and mental health. Here are many of the recent actions taken by our team to expand our reach and expertise.

**Dr. Katie Cullum** presented at the Emory class of 2025 freshman orientation: "Coping with Stress and Maintaining Wellness in the Transition to College. She also presented at the annual APA

convention: "Implementing a Local Interprofessional Behavioral Health Response to COVID-19."

**Dr. Shannan Edwards** completed training for "Creative Applications of CBT for Anxious Youth" with the Cognitive Behavioral Institute.

**Dr. Megan Faye** completed "Cognitive Behavioral Therapy training for Body Dysmorphic Disorder" with Dr. Sabine Wilhelm, "Creative Applications of CBT for Anxious Youth" with the Cognitive Behavioral Institute, and "Harm OCD" with Jon Hershfield, LMFT.

**Sarah Gazaway, MS** completed SPACE (Supportive Parenting for Anxious Childhood Emotions) training, a 2-day workshop for therapists taught by Dr. Eli Lebowitz of the Yale Child Study Center.

**Adam Jaffe, LMSW** obtained licensure (LMSW) as a Licensed Master of Social Work

**Dr. John Mohammadioun** completed training for "Creative Applications of CBT for Anxious Youth" with the Cognitive Behavioral Institute and SPACE (Supportive Parenting for Anxious Childhood Emotions) training, a 2-day workshop for therapists taught by Dr. Eli Lebowitz of the Yale Child Study Center.

**Dr. Cameron Mosley** was recently appointed as Adjunct Professor for the College of Health Professions at Mercer University

**Dr. Jessica Nasser** completed SPACE (Supportive Parenting for Anxious Childhood Emotions) training, a 2-day workshop for therapists taught by Dr. Eli Lebowitz of the Yale Child Study Center.

**Dr. Chris Noble** appointed as Director of Supervision at anxiety Specialists of Atlanta, LLC. Dr. Noble also completed trainings for supervision titled "Supervision: Legal and Ethical Issues" and

"Supervision: A Mental Health Guide for Professionals."

Alicia Porter, LPC completed training for "Creative Applications of CBT for Anxious Youth" with the Cognitive Behavioral Institute and SPACE (Supportive Parenting for Anxious Childhood Emotions) training, a 2-day workshop for therapists taught by Dr. Eli Lebowitz of the Yale Child Study Center.

**Dr. Josh Spitalnick** presented at nView's mental health panel discussion: "The Second Pandemic of Mental Health: An Expert Panel Discussion". <u>Click here to access recording.</u>

**Dr. Theresa Welles** completed training titled "Mastering anxiety and Telehealth in the age of Social Distancing."

**Dr. Catherine Worthington** completed SPACE (Supportive Parenting for Anxious Childhood Emotions) training, a 2-day workshop for therapists taught by Dr. Eli Lebowitz of the Yale Child Study Center.

### **Science Matters**

# Misophonia-Turning down the Volume on your Sensitivity to Noise

by Dr. Megan Faye, Licensed Psychologist An Anxiety, OCD, and Eating/Feeding Disorders Specialist

\*\*This article is an abbreviated version of the one posted on our website. See below to access the complete article\*\*\*

"Does is sound like someone is screaming in your ear?"
"No, it sounds like someone is screaming inside my brain."

This is how many patients describe the experience of misophonia.

Misophonia is a psychological phenomena wherein a person is

extremely sensitive to specific noises. Often a person with misophonia feels sudden rage or anxiety in response to their hated noises, followed by an urge to leave the situation immediately. Anything to make the disturbance stop.



Misophonia is not just a dislike of certain sounds, it is much more than that. Often it is highly specific. For instance, a person might be disturbed by the sound of family members chewing or talking, but are able to tolerate these same noises from friends. Sometimes there are particular qualities, rather than particular people, that are disturbing. This nuanced sound disturbance is a defining feature of misophonia, and helps assess whether a person's sensitivity to noise is psychological in nature, or due to something else more physiological in origin.

#### Getting to the Diagnosis: Who To Meet With, What To Look For

How do you know if you or a loved one is struggling with misophonia? Very often, misophonia is a diagnosis of exclusion. This means it is important to rule out other possible physical, sensory, neurological, and other psychological conditions, before arriving at a diagnosis of misophonia, which is currently considered an anxiety or obsessive-compulsive disorder.

Comprehensive evaluation from a variety of professionals ensures that you are receiving the right treatment, including

- meeting with an audiologist to help rule out a hearing concern, specifically tinnitus, or hyperacusis, which can have similar symptoms to misophonia
- an occupational therapist to rule out sensory processing disorder
- a neurologist, or an Ear, Nose, and Throat doctor to rule out anything structural or physiological that could be causing the

- sensitivities
- and if you meet with a mental health professional, it is important to make sure they are evaluating for other diagnoses that can lead to sensitivity to sounds and sensory information, such as Autism Spectrum Disorder and PTSD.

#### You've Got Misophonia, How Do You Treat It?

Treatment of misophonia is a new and emerging field. Current research with misophonia and related anxiety and obsessive-compulsive disorders suggests that a mixture of Cognitive Behavioral Therapy, Exposure and Response Prevention, and Acceptance and Commitment Therapy tools can be useful for building tolerance to noises, as well as managing distress related to noises (Frank & McKay, 2019; Schröder et al., 2017)

#### **Tools For Managing Misophonia: Practice, Practice, Practice!**

- 1. *Exposure* Intentional exposure to triggering noises can help you learn to engage with these noises on your own terms.
- Pairing Pairing aversive noises with an enjoyable activities can allow for something called "counterconditioning". By pairing these experiences with something positive, you have the potential to change these associations.
- 3. *Joining* One way to take the power back is to practice joining the noise, rather than leaving this situation.
- 4. Redirection of Attention Triggering noises often pull one's full attention, which can further intensify feelings of distress, because the noise is all that is being noticed.
- 5. Distress Tolerance Learning to manage these reactions is important. This includes communication of distress: everyone is entitled to their emotions, but we are all still responsible for how we express them (I'm looking at you, teens).

For the complete version of this article on Misophonia, Click Here

## We See you

We believe that having discussions about inclusiveness, equity, and diversity makes us a stronger team and creates a work culture that is more validating and empowering for our staff, our clients, and the community we serve. Aligned with this value system, this section is dedicated to sharing important resources related to mental health disparities, clinical issues specific to diverse populations, and the impact of cultural issues in psychotherapy.

# Depression is a Disease, Suicidal thoughts are a Symptom

by Dr. Josh Spitalnick Board Certified Licensed Psychologist

Although every month is important to discuss mental health awareness and advocacy, September is **Suicide Prevention Awareness Month**. In addition to shifting public perception, we use this month to spread hope and vital information to people affected by suicide. It is our goal to help as many people as we can get access to the resources they need to discuss their own mental health, suicide prevention, and to seek help. We rarely know someone's truest inner demons, so using compassion, being kind, and being available to listen are three ways you can help anyone struggling with mental health.

Suicidal thoughts, can affect anyone regardless of age, gender or background. Further, suicide is often the result of an untreated mental health condition. Suicidal thoughts can be common but should not be considered normal and require immediate attention by a professional.

No one calls a cancer patient weak or selfish when she dies from her disease. She was a warrior. No one blames the guy who suddenly died from a heart attack for not beating his illness. It was an untimely death. Yet, many are quick to blame someone who attempts

or completes suicide. Depression is also a *disease*, a disease of the brain, simple as that. Suicide is not being weak or selfish, it's losing the battle with depression. It's what my professional training has taught me, it's what my personal observations have taught me, it's what I know.

The stigma of mental illness destroys families and communities. Yet, I am encouraged by the increase in awareness and dialogue around mental health recently. Over the last year, we have heard from public figures, olympic athletes, and other influencers discussing their own struggles with mental health. I hope one day we talk about our mental health in a way that acknowledges EVERYONE has mental health, not just those who struggle with it. If you know someone who is struggling, talk to them, listen to them, support them. Get them help.

#### **Important Data:**

- 78% of all people who die by suicide are male.
- Although more women than men attempt suicide, men are nearly
   4x more likely to die by suicide.
- Suicide is the 2nd leading cause of death among people aged
   10–34
- It's10th leading cause of death overall in the U.S.
- Some of the highest rates of suicide in the U.S. are among American Indian/Alaska Native and non-Hispanic white communities.
- Lesbian, gay and bisexual youth are 4x more likely to attempt suicide than straight youth.
- Transgender adults are nearly 12x more likely to attempt suicide than the general population.

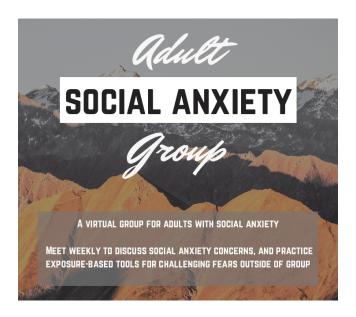
Data from CDC, NIMH, NAMI.

If you or someone you know is in a psychiatric emergency, call The National Suicide Prevention Lifeline at 800-273-TALK (8255) or call 911 immediately.

# Group Therapy & Support Groups

Join our **Adult Social Anxiety Group**, led by Dr. Megan Faye, which begins October 20, 2021. Registration is now open.

This group is for adults (18+) who are seeking group-based treatment and support for social anxiety. This group will be discussing common social anxiety concerns and practicing exposure-based tools to overcome social anxiety. This group will be offered via Zoom.



CLICK HERE to get full details and Register

Join our **Support Group for Mothers of Anxious Children**, led by Dr. Theresa Welles, begins Septmber 20, 2021. Registration is now open.



Meetings will start with answering common questions and challenges affecting mothers of children with anxiety. Group members will have the opportunity to share their own successes and struggles, past and current. Members will be able to offer support and guidance to other group members as well as receive encouragement and inspiration from other members. Personal goals will be set at the end of each meeting and the group's universal goal is for every member to: find balance and thrive in daily life, increase self-care activities, and rediscover your pride as a caregiver.

#### CLICK HERE to get full details and Register

Join our newest FREE Support Group for **Adults supporting other Adults with OCD**, whether it's a family member, a loved one, a spouse/partner, or your adult child. This group takes place securely over Zoom once per month, and it starts this month.



This is not a treatment group, it's a support group. This monthly group will provide a space for support and discussions about the do's and don'ts of supporting a loved one with OCD and/or health anxiety. We will discuss family accommodations, treatment considerations, and self-care in the process.

This group will be led by Dr. Josh Spitalnick. It will be held the 3rd Monday of every month, from 8-9pm. Each group will allow for 30 group members, RSVP is required. September's group will be 9/20. You must register for each monthly event separately to get a one-time use secure Zoom link.

#### CLICK HERE to get full details and Register

Join our monthly FREE **Divorce and Separation Support Group**.

This group takes place securely over Zoom.



This support group will provide a community of support and healing to help individuals move through the difficult process of ending and grieving a significant partner relationship. This group will be co-led by two of our Licensed Psychologists, Dr. Theresa Welles and Dr. Chris Noble. It will be held the last Wednesday of every month, from 6-7pm. Each group will allow for 20 group members, RSVP is required. July's group will be 7/28 and August's will be 8/25. You must register for each monthly event separately.

CLICK HERE to get full details and Register

Check out our <u>EVENTS</u> section of our website for descriptions, full flyers, and registration details for these and all other upcoming groups and events.









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