

Member Meeting

Thursday, November 11, 2021



The Connection
N.E.W. MENTAL HEALTH

AGENDA:

- **Staffing Update**
- **Project Spotlight:** TMS treatment for depression at St. Elizabeth Hospital
- **Agency Spotlight:** West Grove Clinic
- **Connection business:** Adoption of the refreshed Mission, Vision, Guiding Principles, and Impact Areas
- **January Member Meeting**

We said farewell to our
Project Evaluator for
Healthy Teen Minds,
Rachel Podoski.
We wish her all the best
in her new role.



Rachel will continue
half time at United
Way Fox Cities. Her
new role is with
Winnebago County
Health Department.

Project Spotlight



Transcranial Magnetic Stimulation (TMS)

St. Elizabeth Behavioral Health

Tracy Karnitz, TMS Program Coordinator



Ascension

Listening to you, caring for you.®

Transcranial Magnetic Stimulation (TMS)

St. Elizabeth Behavioral Health



Ascension

Listening to you, caring for you.®

What is TMS?

Transcranial Magnetic Stimulation (TMS) Non-drug treatment for depression

Tracy Karnitz

TMS Program Coordinator, Ascension St. Elizabeth Hospital

Treatment at the source....

Non-drug treatment for depression

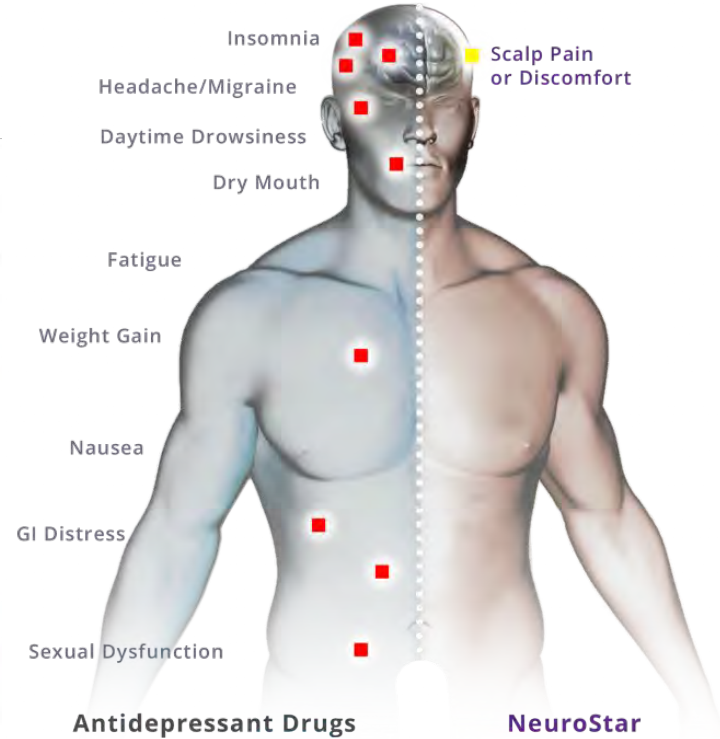
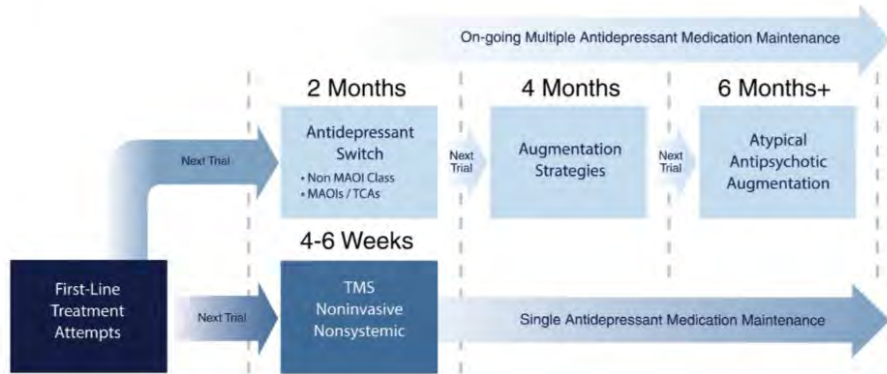
TMS treats depression at the source by measuring the precise area of the brain that is underactive in people with depression. Magnetic pulses are then administered to stimulate these areas thought to regulate mood.



Medication vs TMS

Best Practices Treatment Guideline for Depression

Based on 2010 APA guidelines and NeuroStar® Advanced Therapy Indication for Use



Adapted from: Practice Guideline for the Treatment of Patients with Major Depressive Disorder, 3rd Edition, APA (2010).

Who is an appropriate candidate for TMS?

Patients experiencing moderate-severe major depressive disorder.

- **Trialed 2-4 medications**
- **History of psychotherapy**
- **Diagnosis of MDD**
- **No history of seizure disorder**
- **No presence of pacemaker or metal in the head (dental fillings ok).**
- **Patients who are motivated for treatment.**

TMS is covered by the majority of insurance plans including Medicare/Medicaid. Patients qualify if they meet these criteria. We will work with the patient's insurance to obtain prior authorization prior to starting treatment.

Antidepressant medications and psychotherapy are the first line of defense when treating major depression. These treatments, however, do not always work for all patients. In these instances, TMS is an excellent adjunct treatment.

Frequently Asked Questions

How does TMS compare to ECT?

TMS is less costly, less invasive and better tolerated than ECT. Outcome reports regarding ECT vs TMS are similar in efficacy however TMS is the preferred option for most patients.

What are some of the contraindications of TMS?

Patients with metal plates or aneurysm coils, history of seizure disorder, those with a pacemaker or VNS/DBS, or displaying psychotic symptoms are not candidates for TMS therapy.

What are the side effects?

The most common reported side effect is initial discomfort at the treatment site and headaches. These are mild and generally diminish over the course of treatment.

How do I refer my patient?

Referrals can be made by completing the TMS referral form and faxing to the TMS clinic at: 920-831-1147 or you may email Tracy Karnitz at: tracy.lawson@ascension.org with your patient name and date of birth. Patients will be reviewed and contacted within 2-3 days of receiving the referral.

What our patients can expect during TMS treatment:

Transcranial magnetic stimulation is an easy in-office treatment that takes as little as 19 minutes and is administered 5 days a week for 4-6 weeks.

- The patient will recline comfortably in the treatment chair.
- A small, magnetic coil will be positioned on his/her head.
- The contoured coil delivers rapid magnetic pulses (often described as a tapping sensation on the scalp) directly to the targeted areas of the brain that are under-active in depression. These areas will be located during the first "mapping" session.
- Patients will remain awake and alert during the treatment. There is no anesthesia or sedation required.
- Normal activities can be resumed immediately.
- Because there are no effects on alertness or memory, you are free to drive yourself to and from treatment sessions.



TMS Consultation

Dr. Rowell

- Dr. Rowell will consult with the patient to obtain his/her medical and psychiatric history.
- During this consult, the patient will also tour the treatment room.
- Any questions they have will be answered fully as well as discussion over next steps.
- Prior authorization will then be submitted to the patient's insurance by the TMS Program Coordinator.



Insurance Payors

Who covers TMS?

Currently, TMS therapy is covered by Medicare, Medicaid (BCBS MA does NOT cover TMS, Network Health, United Healthcare, Aetna, Molina, Prairie States, BCBS, WEA (some groups are out of network with Ascension)).

Next Steps!

TMS Mapping

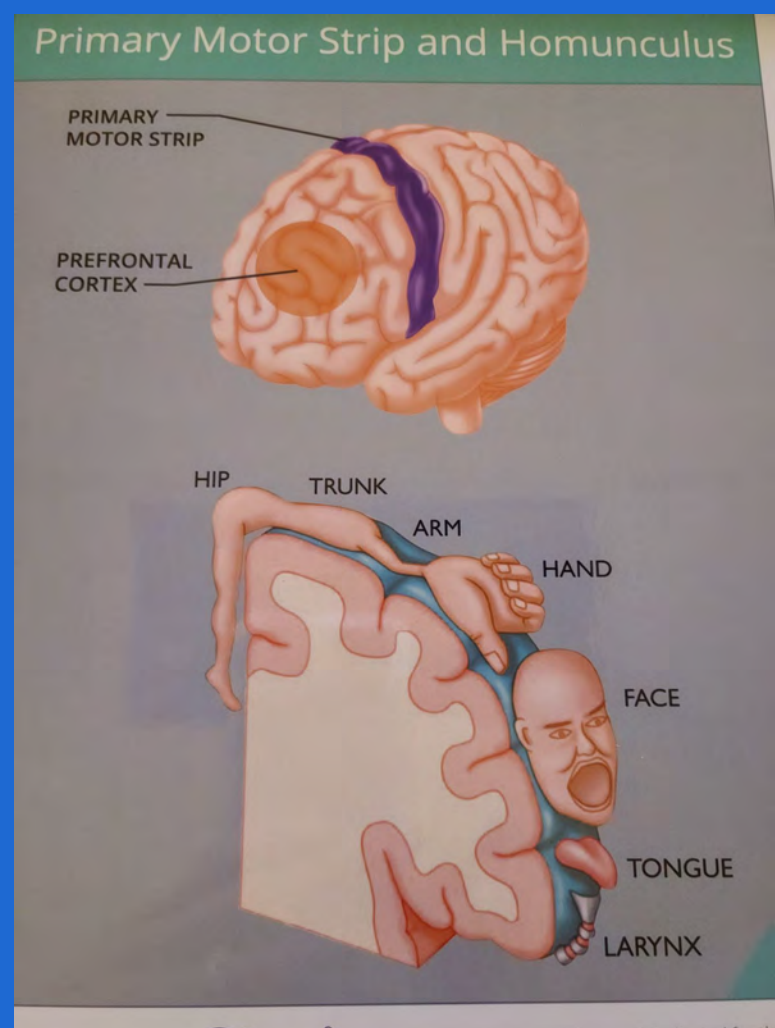
Once a patient has been approved for 36 treatments of TMS therapy, he/she will be contacted to schedule their mapping and series. Patients will receive their first treatment at the mapping session. Daily sessions begin the next day and span for the next 29 days (Mon-Fri).



TMS Mapping-How does it work?

In stimulating the motor threshold with low frequency single pulses, we are able to “map out” the patient’s treatment center.

In isolating the right thumb, we find our geographical marker. We move the treatment coil 5cm anterior, and will then be on the dorsolateral prefrontal cortex which is the area we are targeting.



Daily Treatment

Patients will attend treatment daily. Each treatment lasts approx. 18-20 minutes. Pulses are administered to the mapped area consisting of 10 pulses per second for 4 seconds with an 11 second break totalling 3000 pulses per session.

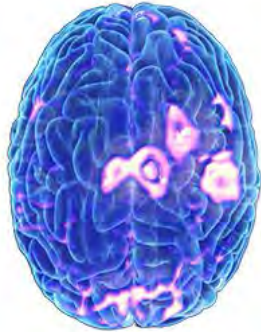
- **Patients can drive themselves to/from treatment.**
- **They are able to go to work afterwards as well as attend to daily routines.**
- **Flexible scheduling to accommodate their lives.**



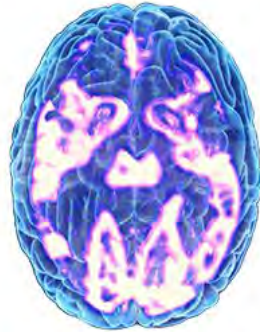
TMS Efficacy

Magnetic therapy-does it work?

Depressed



After TMS



In depressed patients, the electrical activity in certain areas of the brain is reduced.
(Illustrative image based on PET scans)

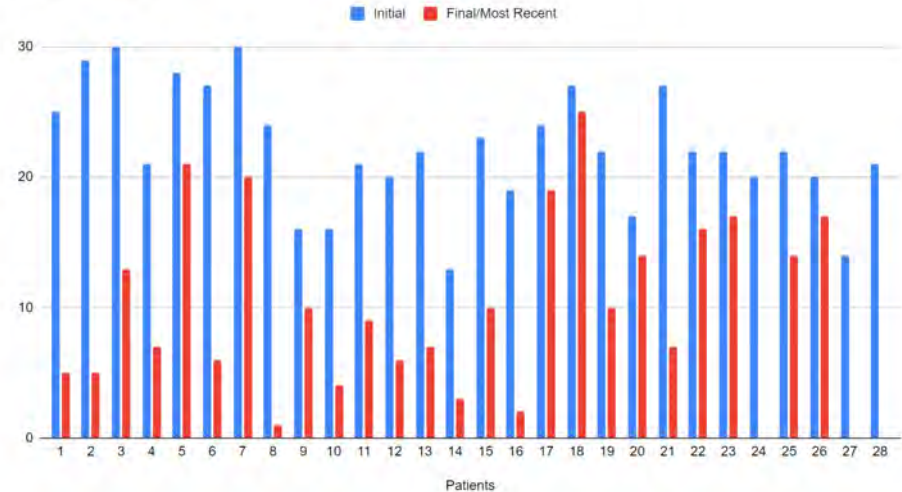
The answer is YES! In durability studies, patients that have achieved a response to TMS (defined as a 50% reduction in symptoms) find long lasting benefits over the course of 12 months and more. Those that have achieved full remission also experience ongoing benefit for at least 12 months.

TMS is another toolkit in our arsenal in combating treatment resistant depression.

Transcranial Magnetic Stimulation (TMS)

Since our “Go Live” date, we have treated 28 patients. Fifteen of those have completed their series. Of these completed series, we now have data indicating 74% of patients treated have experienced a response with 54% achieving full remission.

Initial and Final



Transcranial Magnetic Stimulation (TMS)



What our patients are saying:

“I took a moment to realize I was suddenly doing things I never would have done before. I feel better!”

“Thank you for being here, this treatment is so important.”

“My mom asked me the other day, ‘Why are you smiling so much?’ I laughed because I didn’t realize I haven’t smiled in over 3 years!”

“I am finally able to enjoy time with my daughter without worrying about my depression.”

“You gave me my life back. I had so many doubts that this would work, but it did!”

QUESTIONS?





West Grove Clinic

Mental Health and Addiction Clinic

Offered Services:

- *Medication Management* (mental health medications, Suboxone, Vivitrol, Sublocade, and other recovery medications)
 - Counseling Services for both mental health and addiction

Coming Soon:

- Substance Use Intensive Outpatient Program (IOP)

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www.westgroveclinic.com

QUESTIONS?



10-year Anniversary Refresh: Mission

The mission of The Connection is to lead a coalition of diverse stakeholders to champion mental health for everyone in the Fox Valley by addressing barriers, challenging systems, creating solutions, and prioritizing care and support.

Previously: Lead a collaboration of community stakeholders to create and continuously improve an exceptional mental health system of care

10-year Anniversary Refresh: Vision

A community that is resilient, connected,
and mentally well

Previously: A community that is mentally well and stigma free

10-year Anniversary Refresh: Impact Areas

- **Promoting Resiliency:** A focus on mental health and wellbeing, prevention, awareness and education
- **Reducing Stigma:** A focus on mental health literacy, storytelling about living well with mental illness and promotion of mental healthcare as healthcare
- **Connecting to Care:** A focus on access to mental health services, service navigation, crisis system reform, and diversion to treatment
- **Growing & Strengthening Workforce:** A focus on availability and accessibility of mental health professionals, training and development of a quality workforce, and expanding the spectrum of care providers
- **Seeking Solutions:** A focus on Collective Impact and Systems Change Models for solving, not managing, current problems, bringing incubating ideas to fruition, and supporting aligned activities

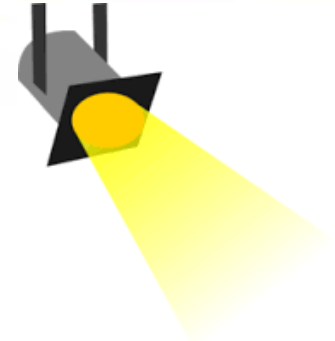
Previously: Prevention, Education, Access, Workforce and Advocacy

10-year Anniversary Refresh: Creation of Guiding Principles

- **COLLABORATION:** Collaborate with others on shared root cause and shared risk issues
- **EQUITY:** Elevate, understand and address disparities in mental health outcomes
- **DIVERSITY:** Enlist and engage diverse champions to voice the mental health needs and concerns of our community
- **INNOVATION:** Embrace innovation, challenge existing norms and structures, and champion out-of-the-box solutions
- **DATA-DRIVEN:** Make mental health, suicide, and substance use data accessible, digestible, and usable to drive strategy and decision-making for our community
- **LIVED EXPERIENCE:** Welcome and intentionally center the voice of lived experience in all activities
- **SYSTEMS ORIENTATION:** 94% of the problem is caused by the system, and 6% by the individual (Demings 94/6 Rule)

**Member Agency
Announcements?**

YOU
are
AMAZING



**January
Member
Meeting:
Happy 10th
Birthday to The
Connection
JOIN US!**

**Next Meeting:
January 13, 2022**