

December Newsletter

The Dec. meeting was held at The Meadowview Conference Center in Kin was sponsored by Wyeth Neuroscience. John Fenley, MD was our speaker on the topic “Clinical Data on Recurrence Prevention during Maintenance Phase of Major Depressive Disorder.”

PRESENTATION HIGHLIGHTS

Major Depressive Disorder

DEPRESSION IN ADOLESCENTS:

Early onset of major depression (before age 17 yrs) has about a 25% risk of recurrence. SSRI's are still a good choice for treatment. Black box warning is for increased risk of suicidal ideation and suicidal acting out, but not for suicide.

Consider using Lamictal as an alternative

DEPRESSION SEQUALE:

The degree of impairment from depression is worse than CVD, DM, and asthma. It is the second leading cause of disability in the U.S.

It is a chronic disease that is often recurrent

Sleep apnea often goes along with depression

DEPRESSION SCALES:

PHQ-9

Beck Depression Inventory

RECURRENCE:

Each successive episode = increased risk of recurrence

The more episodes that occur, the more disconnected the patient becomes. Increased episodes of depression leads to a decrease in hippocampal volume, making recovery more difficult.

TREATMENT GUIDELINES FROM THE APA:

Acute phase should be treated 4-8 weeks

Continuation phase requires at least 4-5 months of treatment to prevent relapse

Exercise is an excellent treatment for mild depression

Must treat with psychiatric medications as well as psychotherapy if moderate to severe

depression

Continue to use the same medications that brought the patient to remission
Treat 1st episode of recurrence for 4-9 mos, 2nd episode for 2 yrs and
lifelong treatment.

CLINICAL TRIALS:

STAR D: Clinical trial for relapsed depression. Revealed that patients who
were 3x as likely to relapse and 3x as fast to relapse. 28% remission

PREVENT: Revealed Effexor XR was 92% effective in preventing a 2nd

STRATEGIES TO EFFECTIVE TREATMENT:

Assess adequacy of treatment response

Maximize initial treatment

Always increase the dose of the current treatment before changing medication

Change treatment when maximum dose is not working

Augment/Combine treatments if obtaining a partial response

Discuss adverse events up front

Tell patient that they will most likely be on treatment at least 6-9 mos

Business Meeting

President Kathy Sharp opened the meeting by thanking our Wyeth representative
Fenley

Secretary's Report: The minutes were approved by unanimous vote.

Treasurer's Report: Deferred

Old Business:

State-wide Salary Survey: please go online to www.tnaonline.org and complete
are helping sponsor this and thus far only a little less than 400 have responded
This ends on Dec. 31, so please, please, please respond. It takes 5 minutes
data is very important. We at NETNPA initiated this with our regional

have adequate representation at the state level. The data will be available at the February meeting, possibly by the January meeting.

Federal Motor Carrier: I would like to again ask that each of you go only to those providers who will be certified to perform DOT physicals. I recall Connie Morgan who stated that there are still many openings for NFPA's on board, we need equal representation. Go to www.nrcme.fr

State regulations regarding nurse practitioners: At last month's meeting for the DNP to be instituted in some states, the nurse practice act was amended. Thankfully, in Tennessee, we are very fortunate that our language states that a practitioner must have a masters degree or higher in a nursing specialty and national certification as a nurse practitioner. This wording means that our practice act will not have to be amended.

Pharmaceutical Samples: We have talked about the issue of some pharmacies asking our collaborating physicians to sign a paper of approval, allowing them to dispense certain samples. Specifically sampling of Lyrica (made by Pfizer), has caused a bit of stir in the community. I would like to have some feedback regarding this.

New Business:

It has come to the attention of one of our members that the Tennessee State Board of Nursing approved an online FNP program. This was discovered after a FNP member contacted our members requesting assistance with finding a preceptor. Your comments and suggestions are welcomed.

In reviewing the speaker's bureau list, I realized that we desperately need more speakers. I am sending out an email shortly asking for volunteers to be speakers.

AANP elections: Would anyone be interested in being a state representative or director. I especially would like to have someone who is interested in staying up to date and keep AANP up to date on local and regional legislative issues. Please consider this!! Since NETNPA is now an affiliate member we need someone to represent us in East TN I have more details if anyone is interested.

The Center for Nursing Advocacy: This group is a non-profit organization that helps nurses improve public understanding of their work and work with other professionals in clinical nursing practice, research and education. Please go to www.cna.org and sign up for their news alerts and emails. They can also use financial

donations.

Dues for all members are due at the January meeting. Dues are still \$30 for students.

Job Opportunities:

Cardiovascular Associates, P.C. in Bristol has openings for 2 Nurse Practitioners. The Heart Center of Memphis needs a NP for cardiology office. Some experience needed. Email resume to lmcewen@theheartcenterofmemphis.com

The TN Department of Health has 2 full-time primary care APN positions in Greeneville. Clinic hours at 8:30-5 pm M-F. Mail a CV and letter to Linda McClure FNP, Family Nurse Practitioner Director of Primary Care Services, Regional Health Office 1233 Southwest Avenue Extension Johnson City, TN 37601. Linda.McClure@state.tn.us

College of Nursing-Student Health Services-Clinical Services Director-Leadership Services (SHS) is part of the Faculty Practice Network of the College of Nursing. The SHS is a nurse managed clinic providing a broad range of primary care and specialty services to university students with the potential for care of faculty and staff. The SHS serves as a clinical site for educational experiences for health professional students and a practice site for CON faculty. The Clinic Director reports directly to the Dean of the College of Nursing. Essential Functions: The Clinic Director provides clinical leadership for the SHS and is responsible for assuring in the development of the annual budget; the administration of operating expenditures; developing and implementing policies; supervising and evaluating clinical personnel; developing and evaluating the SHS goals; and assisting in the implementation of expanded clinic services. This is an excellent opportunity to lead a team of dynamic professionals and to be part of a supportive environment that encourages creativity and excellence. The advanced practice nurses will combine clinical practice with administrative leadership. Qualifications: Must have a graduate degree in nursing and national certification as a Nurse Practitioner; must be licensed as a Registered Nurse in TN and obtain advanced practice certification in Tennessee prior to the start date; must demonstrate ability to lead a team effectively; show evidence of successful leadership skills; possess a minimum of 5 years experience; knowledge and experience in advanced practice, team management, continuous quality improvement and Human Resources.

Experiences in college health or related health care setting preferred
resume or curriculum vitae and three references to: Nancy Alley, PI
Practice, College of Nursing, East Tennessee State University, Box
37614-1709

Next Meeting: January 18th at 6:30 pm-place to be announced at a later date
attend!!