reetings

Centre for CBT

COGNITIVE and BEHAVIOURAL THERAPIES



Archways Centre for CBT is a private psychology clinic dedicated to helping individuals get well and stay well with CBT.







Optimizing Treatment by Combining Psychotherapy and Medication

By Joanna Jeffers, M.A., C.Psych.

There is plenty of evidence for prescribing medication and recommending psychotherapy (usually CBT) in the treatment psychiatric disorders. However, there is no current test to determine which is best for the individual. Many factors can be considered when choosing best treatment for patients with mental health issues:

- Clinical practice guidelines based on most recent findings from scientific studies (some conditions respond better to medication than to psychotherapy e.g. ADHD).
- Medication can be a more financially feasible option than psychotherapy.
- Some patients may be more inclined to engage in therapy rather than try medication when nervous about side-effects.
- Some patients might prefer medication, viewing it as involving less work in comparison to psychotherapy.
- · Low tolerance for medication might indicate psychotherapy serving a more primary role. More complex presentations might benefit
- from a clinical psychologist exploring symptom maintenance factors. Sometimes an "either-or" treatment can be considered. Other times a combination approach can be

Medication Helping CBT

advantageous.

When an individual is not responding well to CBT (or is responding slowly) adjunct medication can be considered. As psychologists, we explain to our clients that medication can help turn the volume down on anxiety. It can make engaging in CBT is more manageable and more efficient. For example, gradual exposure therapy might be more manageable if the anxiety is first lowered with medication. Sometimes CBT is simply not enough, and some patients require pharmaceutical intervention. Family doctors and/or psychiatrists can further help psychologists by reminding their shared patient that CBT has an important role in relapse prevention, and helping patients feel some autonomy over their illness.

CBT Helping Medication

Starting a medication can be anxiety-provoking for patients, and adherence sometimes challenging for physicians. Having a psychotherapist involved can assist with the process. For example, a psychologist can develop a behavioural formulation to better understand non-compliance with

medication, and plan strategies to enhance adherence. Furthermore, a foundation of CBT can help patients better understanding the factors maintaining their symptoms, and to teach strategies to further improve quality of life. CBT also plays a vital role in relapse prevention for mood and anxiety disorders.

Combination Therapy: Two heads better than one

Having a multidisciplinary team (psychiatrist + psychologist) can be beneficial for diagnostic consultation, the provision of evidence-based psychotherapy, psychotropic medication, and enhanced médication adherence. Psychiatrists and psychologists serve important yet different roles. Virtually gone are the days in Ontario when psychiatrists have time to provide psychotherapy. Psychiatrists and psychologists are both trained to identify mental health issues and disorders. Both professionals can make formal diagnoses. Both can provide psychotherapy, but psychologists cannot prescribe medication. Psychologists can provide evidence-based CBT which is considered first line treatment for major depressive disorder, anxiety disorders, obsessive-compulsive and related disorders, and trauma-and stressor-related disorders.

Archways Centre for CBT and Medication

Staring in the Fall 2022, any client who is engaged in active treatment with a psychologist at Archways now has access to our new on-site

At Archways, approximately 70% of our clients are taking psychotropic medication. Some are on multiple medications and family doctors are sometimes reticent about adjusting established medication regimes without consultation with psychiatry. We have found it increasingly difficult to find psychiatrists to recommend for our clients. Many family doctors are aware of the shortage and are left without options for their more challenging cases. We are pleased to be able to offer a new option for our referring physicians.











Archways Team

Joanna C. Jeffers, M.A., C.Psych.

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Jerrica Hunter, M.Psy., R.P.

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Did You Know?

COVID-19 pandemic triggered a 25% increase in prevalence of anxiety and depression worldwide (WHO, 2022).

To learn more about our therapists, visit:

www.archways.ca





Congratulations DOCTOR Darryl Quinlan!

Dr. Quinlan successfully defended his doctoral thesis. As such he is now pursuing registration with the College of Psychologists of Ontario. He is an integral part of Archways, using CBT and acceptance and commitment therapy (ACT) to help adults with mood and anxiety issues, OCD and PTSD. We are proud of his recent accomplishment!

Introducing Dr. Janine Przysiezny, FRCPC

Dr. Przysiezny (per-shez-nee) specializes in the treatment of complex trauma with comorbid mood, anxiety, substance use, dissociative and/or personality disorders. She has a special interest in psychological safety in the workplace, psychiatric rehabilitation, pregnancy /postpartum mental illness, and disaster psychiatry. She is a staff psychiatrist at St. Thomas Elgin General Hospital (inpatient and outpatient) and adjunct professor of psychiatry at Schulich School of Medicine and

Dentistry at Western University (London, Ontario). At Archways she provides psychiatry consultation for our clients presenting with a range of difficulties, including (but not limited to) anxiety, depression, OCD, trauma and PTSD.

Archways Psychiatry

We are excited to announce the launch of our new service: Psychiatry Consultation. Clients at Archways can now meet with our onside psychiatrist to discuss medication options. A psychiatry consultation can also establish or confirm a diagnosis and lead to appropriate treatment recommendations (psychotropic and psychotherapeutic). Consultations are 100% OHIP-covered and require a referral from a physician. Written reports are sent to the physician and shared with the patient's psychologist/clinician at Archways, to enhance the collaborative treatment process. Following the consultation, the patient might be asked to return for a follow-up appointment, but most often the patient will be referred back to the family physician for maintenance of prescriptions.



Season's greetings

Thank you for continuing to trust us to help your patients.

Wishing you and your staff the best holiday season and new year!

COVID-19 Update

Sick of hearing about this yet?

The College of Psychologists of Ontario has suggested that we use our discretion when deciding when to provide virtual therapy, and when to offer in-person sessions to our clients. This decision is based on many factors, including the clinician's personal situation, privacy issues, clinical utility etc. At Archways you will find that we are all working a little differently when it comes to the delivery of services. As a group in October (2022), we provided 80% of our sessions virtually. We are hoping this figure reduces in the upcoming year, however some of our clients are preferring to avoid commuting and parking fees, while others live to remote areas far from London. So, moving forward, our model of service delivery will be a hybrid of virtual and in-person therapy sessions.



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