



NINET-IMH Clinic Newsletter

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www.ninet.med.ubc.ca

The NINET-IMH Clinic and Laboratory researches clinical applications of Non-Invasive Neurostimulation Therapies to improve the health of those suffering from a variety of mental illness.

Hello again! This is our 2nd newsletter from the NINET Public Advisory Committee (PAC), comprised of members of the public, clinic patients, lab personnel and Dr. Fidel Vila-Rodriguez. We meet monthly to discuss improvements at the clinic, on-going research, and to exchange of ideas to improve access to and education about non-invasive neurostimulation therapies for people with mental illness.

Our goal is to keep you updated with news, events, current research, as well as clinical trial results, from the NINET-IMH Clinic & Laboratory that may benefit you. Since our first newsletter, PAC is excited to be part of early discussions to form a nation-wide public advisory committee to support research, clinical application and public health adoption of non-invasive neurostimulation therapies across Canada. We will keep you posted on our progress!

If you have specific questions, suggestions, or topics you would like to see canvassed in the newsletter, please contact us at newsletter.ninetlab@gmail.com or leave a note for the newsletter with Rose at the NINET office.

POWER OF PATIENTS' VOICES

Alberta, Quebec, and Saskatchewan are the only provinces that repetitive Transcranial Magnetic Stimulation (rTMS) is publicly funded for treatment of Major Depressive Disorder (MDD) and Treatment-Resistant Depression (TRD). Many physicians from other provinces are also voicing the need for the same to be done in their provinces. However, the route to making rTMS free of charge for those in need has been difficult.

In 2016, Manitoba Health had declined adding rTMS treatments to the list of publicly funded treatments. But the patients and the physicians did not let this set them back. The patients took initiative and went to share their experiences of rTMS treatments to the press, raising awareness of the positive impact of rTMS and advocating for public funding. Patients also wrote to the government, asking for reconsideration of rTMS as a publicly funded treatment.

"rTMS helped me live life again," a patient noted on the Saint Boniface Hospital's [website](#). Moved by the voices of the patients and physicians, Manitoba Health positively accepted the request in 2018 and has asked the physicians to re-submit the application for rTMS to be publicly funded. If approved, Manitoba would be the 4th province in Canada to publicly fund rTMS. "The power of the patients' voice was critical to Manitoba Health positively reconsidering rTMS," stated Dr. Mandana Modirrousta.

The effort to make rTMS publicly funded in British Columbia is also in progress. NINET-IMH Clinic & Laboratory has led the submission of a nomination to the Health Technology Assessment Committee (HTAC) for rTMS to be funded by the Government of BC for the treatment of depression. As part of this nomination, it is critical for the public, especially the patients that received rTMS treatments, to voice their opinions. - Haslin Park

MSP COVERAGE FOR rTMS: UPDATE

Repetitive Transcranial Magnetic Stimulation (rTMS) for major depressive disorder and treatment resistant depression is not widely available or publicly funded in BC. The NINET-IMH Clinic is funded by research grants, not the public health care system. Practically, those living outside of Greater Vancouver have no access to rTMS unless they are able to travel for daily treatments for up to six weeks at a time. This is a significant barrier to treatment, especially since up to 40% of people with major depression do not respond adequately (and some at all) to drug therapies.

To have rTMS eligible for coverage by BC Medical Services Plan, the technology needs to be first approved by the provincial "Health Technology Assessment Committee" (HTAC). HTAC is a joint ministry and health authority process used to make evidence-informed decisions about which health technologies (devices, diagnostics and clinical procedures) should be publicly provided. To be approved, rTMS technology must be expected to have a significant patient and/or health system impact.

The NINET-IMH Clinic & Laboratory led the submission of a nomination for rTMS approval in late 2018. If the nomination is accepted, the HTAC Committee will conduct both a scientific and financial analysis of the costs and benefits of rTMS treatment over the coming months. To receive updates from HTAC directly, you can subscribe to their notification process by sending an email to HTR.Office@gov.bc.ca.

If HTAC approves rTMS as a health technology, the next step is for the Ministry of Health to act on that approval and fund access to rTMS treatment at no cost to patients under the BC Medical Services Plan.

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Public input may help the Ministry of Health move forward. rTMS patients in Manitoba significantly influenced that province's decision to fund rTMS treatment.

Manitobans lobbied their Ministry of Health with a letter writing campaign. They gave specific examples of how their mental health improved with rTMS after anti-depressant drugs or counselling failed to help them to any degree.



PAC is gathering anonymous survey responses from rTMS patients to support the HTAC application. If you are interested in participating, please complete the survey [here](#). Survey results will be shared in aggregate as part of the HTAC process.

If you are interested in writing your own letter to the Ministry of Health in support of MSP coverage for rTMS across British Columbia, you can write to Ross Hayward, Executive Director, Clinical Leadership (Mental Health), Ministry of Health, PO Box 9638, STN PROV GOVT, Victoria BC V8W 9P1 and copy the Minister of Health, the Honourable Adrian Dix (same address).

RECENT PUBLICATIONS / NEWS



2019 International Brain Stimulation Conference

The third biannual International Brain Stimulation Conference (IBSC) took place in Vancouver, February 25-27. Our staff and trainees at NINET Lab had the opportunity to present some of their research through poster presentations at the conference. Congratulations!

- Ruiyang Ge, "[Long-term Effects of rTMS on the Functional Brain Networks in Treatment-Resistant Depression](#)"
- Afifa Humaira, "[Side Effects Trajectories in rTMS Treatment for Depression: High Frequency Left \(10 Hz\) vs. Intermittent Theta Burst Stimulation](#)"



RESEARCH SPOTLIGHT

NINET-IMH Laboratory is currently accepting participants for three clinical trials involving treatment resistant depression and bipolar depression.

Here, we focus the spotlight on the ASCERTAIN-TRD study. This study is conducted by several researchers across Canada and the USA.

The purpose of this trial is to compare three treatment arms for Major Depressive Disorder (MDD) patients with treatment-resistant depression to determine the effectiveness and speed of response in treating major depression. The three treatment arms are: the drugs Effexor/Cymbalta, the drug Abilify, or rTMS.

To learn more about this research, including eligibility for enrolment, please visit <https://ninet.med.ubc.ca/research/>



Follow us on [Twitter](#) for updates or visit our website at www.ninet.med.ubc.ca

GROUP MEDICAL VISITS

Dr. Vila-Rodriguez leads a weekly Group Medical Visit for rTMS patients every Tuesday from 3 until 4 pm. This is your opportunity to ask questions about treatment and to learn from the experience of others. To book a spot, please contact Rose at the NINET-IMH Admin Office by email rose.ninetlab@gmail.com or by phone, 604-827-1361.



ASK AN EXPERT: SLEEP

Our research expert, Dr. Fidel Vila-Rodriguez, shares why you may want to add some tips and tricks to improve the quality of your sleep if you struggle with a mood disorder.

Sleep is one of the fundamental building blocks for health, especially mental health. There's a reason sleep deprivation can be considered torture under the *Geneva Convention!*

Many people with a mood disorder struggle with sleep – whether it is trouble falling asleep, trouble staying asleep, or sleeping too much. The change of the seasons (and the clocks) can also cause sleep disturbances.

There are some simple things you can try to improve your sleep:

- Commit to a set bedtime and wake time each day and stay consistent ("catching up" on sleep on the weekends doesn't work).
- Turn off electronics (televisions, cellphones, iPads) and lower light levels in your environment an hour before bed.
- Avoid caffeine in coffee, black / green teas, soft drinks, and energy drinks generally (especially after 2 pm).
- Consider using a high energy "SAD" light for 30 minutes each morning September through May.
- Consider developing a daily practice of mindfulness meditation to practice quiet and staying present in the moment.
- Consider adding some gentle exercise (yoga, walking) to your day on a consistent basis.

And with help from your doctor, consider being screened for sleep apnea if you snore or always wake up tired. Equally, ask your doctor if a trial of 5 mg of timed-release melatonin at bedtime for a few weeks is something s/he would recommend. Magnesium supplements are also known to help with sleep but they will counteract some rTMS protocols. If you do change your medications, including vitamins, please let the Clinic staff know at your next appointment.



SIXTY SECONDS OF HOPE

I think we're all sailors, navigating by the stars. Sometimes they're hard to see. The sky's overcast, the city's too bright. The waves are rough and you have to fight just to stay afloat. Sometimes, it's hard to remember why you sail at all. But there are moments, sometimes weeks, sometimes minutes, when the sea lies still. When the wind is fair and the air is bright. When the stars are out. And you stand on the bow and realize the beauty of it all. These are the moments we must remember. Because no matter how overcast the sky and cold the sea, the storm will always pass. When it does, and you stand up on shaky knees to peer over the horizon, maybe you'll finally find land. And hey. You're doing good.
– Kevin Jiang