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**DIDACTIC PRESENTATION**

***Treatment Resistant Depression***

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[Recording](#)

[Presentation Slides](#)

**CASE SUMMARY**

We explored the complicated case of a 17yo non-binary high school senior that was diagnosed with ADHD as a child and experiences persistent, significant levels of anxiety and depression. The patient is isolated, sad, does not feel good, and has recently admitted to thoughts of self-harm.

**KEY QUESTION(S)**

- How can I make more progress in helping them to feel better?
- What approach can I take considering they are not interested or motivated for counseling?

**CLARIFYING QUESTIONS**

<p>Does he have any learning challenges at school?</p>	<p><i>There is a question of an autism spectrum disorder. Academically he does well. He is easy going, his teachers are supportive and flexible with him when he misses school and assignments.</i></p>
<p>Is he engaged in care, overall?</p>	<p><i>Not particularly, he is almost apathetic at times. He does take his meds, but he is isolated, and has minimal social support. Dad attends appointments but doesn't push him or guide him. Patient is not self-motivated.</i></p>
<p>Does he have good sleep Hygiene? Is he willing to try to implement this?</p>	<p><i>He did get a new mattress, and admits the medication helps some but, he does not have a good bedtime routine, he is on electronics all night with no limits. He is not motivated to make changes and dad does not set limits.</i></p>
<p>Any history of trauma?</p>	<p><i>Only that his mother left the state for a new relationship and left the children with their father. He reports that he does not like his brother at all but has not gone further into why. Dad seems supportive but will not call him by his preferred pronoun or name and continues to use she/her.</i></p>
<p>Has he had In-Home Support services, like HCT to help the dad around behavior.</p>	<p><i>No, but the brother has had extensive in-home support services as he is on the autism spectrum and had very challenging behaviors while growing up.</i></p>

## KEY RECOMMENDATIONS: Support Gender Identity

Sometimes in the complexity of a case we get lost in the details. ADHD medications may not be where we need to focus, this can contribute to his anxiety and sleep issues. Sense of Identity is #1. The most important thing to anyone is Who am I? How do I fit in? Psycho education can go far.

- Consider having a conversation and take a moment to validate how he is feeling. Let him know it is not fair that dad will not support you, and it is not your fault.
- Consider having a frank conversation with the family (dad) about respecting gender preferences.
  - “If you don’t get on board, the risk of suicide is very high.”
  - We need to respect and use the preferred pronouns.

## KEY RECOMMENDATIONS: Connect to Peer Group

This patient has had a remarkably rough start. He really needs a support group to know he is not alone. Explore options to get him connected.

- OutMaine has weekly Zooms, which may be a great way for this young person to connect with peers and feel heard/seen. The different groups are based on participant age.  
[https://secure.lqlforms.com/form\\_engine/s/ P0tyhddM\\_hxbPaJ-T\\_X3Q](https://secure.lqlforms.com/form_engine/s/ P0tyhddM_hxbPaJ-T_X3Q)
- MaineTransNet <https://www.mainetrans.net/about> is a community-based organization that provides peer-based support services, education, and advocacy.
- Youth Peer Support Network <https://www.mainehealth.org/Maine-Behavioral-Healthcare/Services/Counseling-Therapy-Services-Adult-Child/Peer-Support/Youth-Peer-Support-Statewide-Network>
- Parent and youth PEER support. <https://gearparentnetwork.org/>
- OutMaine has parent and family nights via Zoom: <https://outmaine.org/programs/parents/>

## KEY RECOMMENDATIONS: Therapy / Mentorship

Progress will come in incremental steps. Fear and anxiety typically come in the way of taking the first step. With parents that are separated and his having lived a sheltered life, it will be important to support the first step. A challenge is that some areas have minimal access or success with counseling, are resource poor including quality of providers, especially around LGBTQ.

- Can you see this patient monthly to build on that relationship?
- Consider using the COPE program: <https://www.cope2thrive.com/>
  - This program has been useful and helpful for those patients in this age group who do not want to go to therapy.
- Big Brother/Big Sister program - If it is offered in your area: <https://www.somebigs.org/>
- Agencies in your area that focus on work preparedness.
  - Such The Center for Entrepreneurial Studies in Farmington <https://www.cesmaine.com/>
- <https://mainequerhealth.org/>

**You may always reach out for a consult through the MPBHP access line 1-833-672-4711.**