

Emerging Mental Health Treatment Options

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Agenda

- Existing mental health treatment landscape
- Psychedelics in treatment (e.g., ketamine, LSD, MDMA, psilocybin)
- Importance of evidence-based therapies
- Where are we now?

Existing Mental Health Treatment Landscape



Mental Health Treatment Landscape



Reactive vs. Proactive



"One Size Fits All"



Temporary Impact

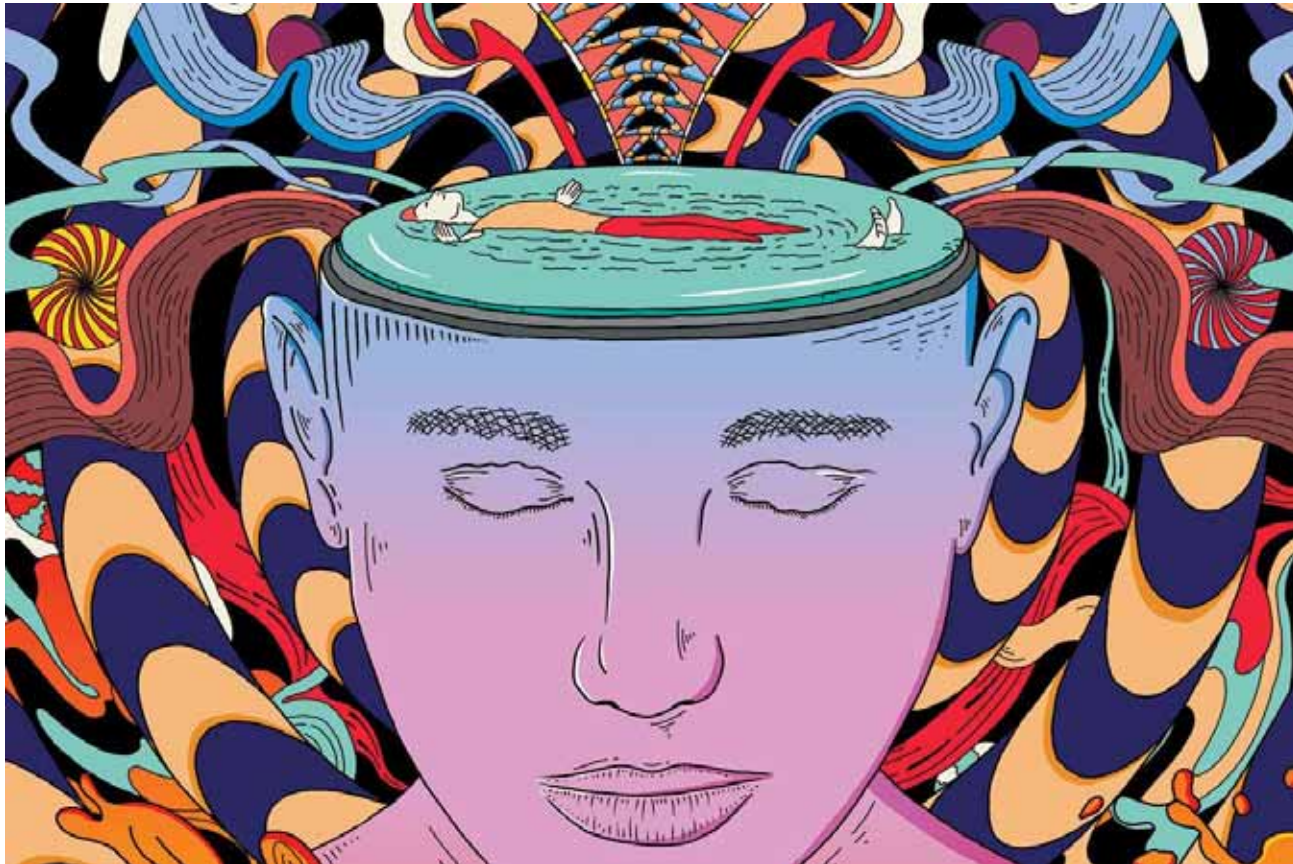
Stigma around therapy and counseling prevents broad acceptance; wait times for professional services hinder employees from getting support when needed

Mental Health Treatment Landscape

- For every \$1,000 of economic burden, research and development investment was:
 - \$3.1 for schizophrenia
 - \$1.8 for major depressive disorder
 - \$0.4 for bipolar disorder
- In contrast, investment per \$1,000 of burden was significantly higher for other conditions:
 - \$75.5 for cancer
 - \$9.4 for chronic obstructive pulmonary disease
 - \$7.6 for diabetes
 - \$6.3 for cardiovascular disease
 - \$5.3 for rheumatoid arthritis

MacEwan et al (2016). Pharmaceutical innovation in the treatment of schizophrenia and mental disorders compared with other diseases. *Innovative Clinical Neuroscience*, 13(7-8), 17–25. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5022985/>

Psychedelics in Treatment



TRD: Treatment-Resistant Depression

- Treatment Resistant Depression (TRD)*:
 - Definition: Treatment-resistant depression (TRD) is a major depressive disorder (MDD) in which an affected person does not respond adequately to at least two different antidepressant medications at an adequate dose and for an adequate duration.
 - Prevalence: In the United States, it is estimated that TRD affects 2.8 million people. The total annual burden of TRD was \$43.8 billion.
 - Burden: TRD was 56.6% (\$25.8 billion) of the healthcare burden, 47.7% (\$8.7 billion) of the unemployment burden, and 32.2% (\$9.3 billion) of the productivity burden of medication-treated Major Depressive Disorder.

*The Journal of Clinical Psychiatry. March 16, 2021

Psilocybin

- Aka Magic Mushrooms, 'Shrooms
- Legal status
 - Legal in Oregon at licensed service centers
 - Legal in Colorado to consume, not for sale
- Research focus
 - Treatment of depression, alcohol use disorder, anorexia, tobacco and opioid dependence
- Effects
 - Produces perceptual changes and hallucinations. Alters awareness of thoughts, feelings, and surroundings.
- Side effects
 - Headache, nausea, dizziness, and fatigue at trial dosages
 - In recreational use, side effects include anxiety/panic and paranoia/ suspiciousness

MDMA (Methylenedioxyamphetamine)

- Aka Ecstasy, Molly
- Legal status
 - Not legal, apart from use in clinical trials.
- Research focus
 - Treatment of PTSD
- Effects
 - Changes in perception, including increased sensitivity to touch, feelings of closeness, empathy, and euphoria.
- Side effects
 - At trial dosages: Muscle tightness, decreased appetite, nausea, and feeling cold
 - In recreational use, MDMA is often adulterated with substances (e.g., methamphetamine or cocaine) and taken at dangerously high doses

Ketamine

- Aka Special K
- Legal status: Three forms of ketamine can be used legally
 - Esketamine Nasal Spray (brand name: Spravato)
 - FDA-approved for depression
 - Administered in a doctor's office or medical setting
 - IV Ketamine infusion
 - FDA-approved for anesthesia and used off-label at lower doses for depression
 - Administered in ketamine clinics by anesthesiologists, pain-management doctors, or psychiatrists
 - Treatment is most effective when combined with preparatory and integration sessions and administered in multiple doses (six to eight doses over several weeks)
 - Ketamine Lozenge
 - Ketamine lozenges, prescribed by a psychiatrist, are mailed to the home, and a "psychedelic guide" conducts preparatory and integration sessions online
 - Multiple doses work best

Ketamine

- Research focus
 - Treatment of depression and suicidality
- Effects
 - Feelings of dissociation, weightlessness, disconnection from reality and euphoria
- Side effects
 - Elevated blood pressure and heart rate in clinical settings.
 - In recreational use, it can cause paranoia and suicidal thoughts
 - There is a low risk of dependence

Importance of Evidence-Based Therapies



Evidence-Based Therapies

CBT

DBT

IPT

**Psychodynamic
Therapy**

Where Are We Now?



Preventative Approach



Primary



Secondary



Tertiary

Primary Intervention



Foundational Learning



Personalized Plans



Continuous Support

For every
\$1 Invested in mental
health programs

There's a return of
\$1.62–\$2.18

Secondary Interventions



Contextualized Group Support



Early Social-Emotional Expression



Adaptive Systems

Depression and anxiety disorders are the leading cause of sickness absence and long-term work incapacity in most developed countries.¹

Source: LaMontagne, Sanderson and Cocker

Tertiary Interventions



Professional Support
and Rehab



Employee Assistance Programs



Ongoing Responsibility
of Leaders

A study published in the Journal of Occupational and Environmental Medicine found that employees who received mental health treatment through workplace programs reported a 30% improvement in productivity and a 40% reduction in absenteeism.

The Future of Organizational Mental Health Strategies

A shift toward **tailored** prevention:

By utilizing AI, we can create personalized approaches that not only analyze individual and organizational data but also provide unique responses and actionable next steps for enhancing personal well being.



Key Takeaways

- Mental health issues are a growing health burden but there are many issues hindering employees from getting support when needed
- Treatment-resistant Depression continues to plague many people and lead to the exploration of new treatments.
- There are multiple levels of interventions to address the mental health crisis.

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