TMS TRENDS SEPTEMBER 2013

A publication of the TMS Institute of Pennsylvania – Advanced Neuropsychiatric Solutions Terrence A. Boyadjis, MD, Director

INDEPENDENCE BLUE CROSS COVERAGE

Effective October 01, 2013, access to repetitive transcranial magnetic stimulation (rTMS) will now be available to approximately 3.1 million Independence Blue Cross (IBC) subscribers in Pennsylvania. The plan may also cover those IBC members living outside or PA who have TMS treatments within the commonwealth of PA.

Coverage is subject to terms and conditions and limitations of the member's contract. There must be documentation that an individual has had a treatment resistant depression. For example, an individual must have failed to have clinically significant benefit from at least 4 different antidepressant medications from 2 different antidepressant classes. TMS would also be considered medically necessary if an individual has been unable to tolerate the side effects of antidepressant medication or failed to response to psychotherapy.

Given the expense and risks of electroconvulsive therapy (ECT), those individuals who were currently receiving ECT and subsequently switched to TMS may be reimbursed for TMS therapy. In addition, those individuals who had previously undergone TMS therapy successfully in the past, would be considered appropriate candidates for reimbursement.

We believe that this IBC policy change reflects years of research and data which demonstrates the safety and efficacy of TMS. It is our hope that other insurance providers will make similar policy changes in the near future so that all deserving depressed individuals will have access to TMS therapy.

HEALTHY EATING REDUCES RISK OF DEPRESSION

A healthy diet may reduce the risk of severe <u>depression</u>, according to a prospective follow-up study of more than 2,000 men conducted at the University of Eastern Finland. In addition, weight loss in the context of a lifestyle intervention was associated with a reduction in depressive symptoms.

"The study reinforces the hypothesis that a healthy diet has potential not only in the warding off of depression, but also in its prevention," says Ms Anu Ruusunen, MSc, who presented the results in her doctoral thesis in the field of nutritional epidemiology.

Depressed individuals often have a poor quality of diet and decreased intake of nutrients. However, it has been unclear whether the diet and the intake of foods and nutrients are associated with the risk of depression in healthy individuals.

A healthy diet characterized by vegetables, fruits, berries, whole-grains, poultry, fish and low-fat cheese was associated with a lower prevalence of depressive symptoms and a lower risk of depression during the follow-up period.

Increased intake of folate was also associated with a decreased risk of depression. Vegetables, fruits, berries, whole-grains, meat and liver are the most important dietary sources of folate. In addition, increased coffee consumption was non-linearly associated with a decreased risk of depression. In addition, participation in a three-year lifestyle intervention study improved depression scores with no specific group effect.

Furthermore, a reduction in the <u>body weight</u> was associated with a greater reduction in depressive symptoms.