



## Mentally ill die 25 years earlier, on average

By Marilyn Elias, USA TODAY

Adults with serious mental illness treated in public systems die about 25 years earlier than Americans overall, a gap that's widened since the early '90s when major mental disorders cut life spans by 10 to 15 years, according to a report due Monday.

"We're going in the wrong direction and have to change course," says Joseph Parks, director of psychiatric services for the Missouri Department of Mental Health. He's lead author of the report from eight states — Maine, Massachusetts, Rhode Island, Oklahoma, Missouri, Texas, Utah and Arizona — that will be released at a meeting of state hospital directors in Bethesda, Md.

About 60% of the 10.3 million people with serious mental illness get care in public facilities, 90% as outpatients, Parks says. They have illnesses such as schizophrenia, bipolar disorder and major depression. Although the mentally ill have high accident and suicide rates, about 3 out of 5 die from mostly preventable diseases, he says.

Obesity is a serious problem. These patients often get little exercise, and many take a newer type of anti-psychotic, on the market for 18 years, that can cause drastic weight gains, promoting diabetes and heart disease, Parks says. He thinks these drugs are contributing to deaths from cardiovascular disease.

Recent studies question the advantage of the newer drugs. "Many could be switched to safer medicines," Parks says. Schizophrenics are thought to have a higher risk for diabetes already, he says.

Mentally ill adults also are more likely than others to have alcohol and drug-abuse problems, and to smoke.

Because of their mental disorder, patients often aren't good health advocates for themselves, says Andrew Leuchter of the UCLA School of Medicine. When patients do seek help, "I hear of great difficulty getting appointments even for simple problems like high blood pressure. ... The public health system is underfunded, and it's gotten worse over the years."

Medical needs of the mentally ill are least likely to fall through the cracks when psychiatrists and primary care doctors practice in the same facility, according to a 2003 report from the Bazelon Center for Mental Health Law. But integrated clinics are "quite rare," says Bazelon policy director Chris Koyanagi.

Sometimes internists disregard medical symptoms of the mentally ill, chalking them up to the patient's disorder, says Kenneth Duckworth of the National Alliance on Mental Illness. And needed treatment may be harder to get. He points to a study showing that after the mentally ill suffer heart attacks, they're less likely than other patients to get state-of-the-art care.

Parks thinks agencies such as the Centers for Disease Control and Prevention should track the health of adults with mental illness, just as they do other vulnerable groups, to identify problems and solutions. "Many struggle for decades to overcome mental illness," he says, "and after all that struggle, it's particularly cruel to think that you would die young."

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