

terms with their illness by first learning to accept it and then moving beyond it.

This includes learning coping mechanisms, believing in themselves as individuals by learning their strengths as well as their limitations, and coming to realize that they do have the capacity to find purpose and enjoyment in their lives in spite of their illness. **RECOVERY IS POSSIBLE!**

### How to Get Help

No insurance? Call the NAMI Southern Arizona office to help guide you to access mental health services.

### If you have tourette's:

- ◆ Seek medical care through a psychiatrist and/or your primary care physician.
- ◆ Find the right combination of treatment that works for you which may include medication, therapy, support groups, etc. *\*Sometimes people must try several different treatments or combinations of treatment before they find the one that works for them.*
- ◆ Take NAMI's Peer-to-Peer course and/or join the NAMI Connection support group.
- ◆ LEARN about your illness. The more you know, the more you are able to help yourself. Start with NAMI today!

### If you are a family member with a loved one who has mental illness:

- ◆ Take care of yourself.
- ◆ Take NAMI's Family-to-Family course, join a Family & Friends Support Group and/or take NAMI Basics if you have a loved one who is a child or adolescent.

- ◆ Family, friends and partners of military service members and veterans can take NAMI's Homefront course.
- ◆ Learn about your loved one's illness.

## NAMI Programs & Services

### ADVOCACY

We offer assistance and resources for individuals with mental illness as well as for family members. You or your loved one may ask us about patient rights, and how to obtain quality mental health services and information.

### EDUCATION

**Family to Family\***: An 8-class course for family and friends of adults with mental illness.

**Homefront**: A six-session program for family and friends of Military service members and Veterans with mental health conditions.

**NAMI Basics**: A 6-session course for parents and caregivers of children or adolescents with a mental illness.

**In Our Own Voice\***: A presentation by individuals sharing their personal stories of living with mental illness and achieving recovery.

**Ending the Silence**: An early intervention program that engages students in mental health education and discussion.

**Peer to Peer\***: An 8-class course for people with mental illness focusing on recovery.

**TRAINING-Peer Leader & Peer Support Specialist**  
Upon successful completion of Peer-to Peer participants can apply for Peer Leader and Peer Support Specialist (PSS) training and receive a state certification number preparing participants to be better equipped to acquire a job in the behavioral health field.

*\*Program or Service Available in Spanish*

# TOURETTE'S

**SHOW YOU CARE.  
WEAR A SILVER RIBBON.**



- Help break down the barriers to treatment and support.
- Help reduce stigma —talk about it!



**FIND HELP.  
FIND HOPE.**

Mental illness affects 1 in 5 people. We provide resources and support to all those affected by mental illness.

**NAMI SOUTHERN ARIZONA DEPENDS ON YOU.  
THERE ARE MANY WAYS TO HELP.  
BECOME A MEMBER, VOLUNTEER OR DONATE.**

NAMI Southern Arizona  
6122 E. 22nd St.  
Tucson, AZ 85711  
520-622-5582  
NAMIsa@NAMIsa.org

**COMMUNITY-WIDE CRISIS LINE:**  
520-622-6000 or 1-866-495-6735

NAMIsa.org



Educational information and local support provided by:



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## What are characteristics of Tourette's syndrome?

Tourette's syndrome (TS), or Tourette's disorder, is a neurologic illness that begins in childhood or adolescence. The primary feature of TS is tics—movements or vocalizations that are sudden, rapid and purposeless. Tourette's syndrome is treated by both psychiatrists and neurologists as many people with TS have other illnesses such as obsessive-compulsive disorder (OCD), insomnia and attention deficit/hyperactivity disorder (ADHD).

- ◆ Both multiple motor and one or more vocal (phonic) tics are present at some time during the illness, although not necessarily simultaneously.
- ◆ Tics are recurrent, non-rhythmic, actions or vocalizations that can usually be suppressed for a period when a person focuses on stopping them.
- ◆ Less than 40 percent of people with TS have coprolalia (outbursts of swearing).
- ◆ Most people experience a discomforting sensation prior to their tics that disappears after they carry out the tic.
- ◆ Tics occur many times a day, nearly every day or intermittently throughout a year.
- ◆ Onset occurs before the age of 21.
- ◆ Most people experience significant impairment or marked distress in social (at home or with friends), occupational (work or school), or other important areas of functioning.
- ◆ Symptoms can disappear for weeks or

months at a time and severity can change.

- ◆ Most people experience fewer tics as they get older; nearly 50 percent of people have significantly fewer tics as they reach adulthood.

## What are the first tics that may be characteristic of Tourette's syndrome?

Usually, a facial tic, such as rapid blinking of the eyes or twitches of the mouth, may be the first indication parents have that their child may have Tourette's syndrome. Involuntary sounds, such as throat clearing and sniffing, or tics of the arms and legs may be the first sign in other children.

## What other symptoms are associated with Tourette's syndrome besides tics?

Approximately 50 percent of people with TS experience inattention, hyperactivity, and other distressing symptoms that are characteristic of ADHD. In some people, these may actually be the most frustrating and worrisome symptoms of their illness. People with TS are at increased risk for developing anxiety disorders. Approximately one-third of people with TS experience severe and impairing obsessional thoughts and compulsive behaviors and may be diagnosed with OCD. Other common difficulties include learning disabilities and developmental stuttering.

## What causes Tourette's syndrome?

Approximately one in 200 children will have Tourette's syndrome. Although the cause has not been definitely established, there is

growing scientific evidence that TS is caused by a neurological illness affecting neurons (nerve cells) in different parts of the brain. People with TS may also have a dysfunction of their neurotransmitters—the chemicals that neurons use to communicate with each other. Multiple genes have been shown to cause the symptoms of Tourette's syndrome. Boys are approximately four times more likely to have Tourette's syndrome than girls.

## How is Tourette's syndrome diagnosed?

No blood analysis, x-ray or other medical test exists to identify Tourette's syndrome. The first step in diagnosis occurs when a young person is brought to his or her doctor for evaluation. Sometimes this happens when a parent is concerned about tics or another symptom of Tourette's syndrome; other times it occurs at a regularly scheduled check-up when a person's doctor notices these symptoms during a routine physical examination.

## What are the benefits of seeking early treatment of Tourette's syndrome symptoms?

When a child's behavior is viewed as disruptive, frightening, or bizarre, it may provoke ridicule and rejection by uninformed peers, family, teachers or friends. Some people can feel scared or threatened and exclude the child from activities or interpersonal activities and relationships. A child's difficulties in social situations may increase as he or she reaches adolescence. Therefore, it is very important for the child's self-esteem and emotional well-being that treatment be sought as early as possible to

avoid these difficulties. Tourette's syndrome alone does not affect the IQ of a child. Many children who have Tourette's syndrome, however, also have learning disabilities and/or difficulties paying attention. Therefore special education is frequently needed for a child with Tourette's syndrome.

## What treatments are available for Tourette's syndrome?

Not everyone with Tourette's syndrome is disabled by his or her symptoms and medication may not be necessary. Relaxation techniques and behavioral therapies (often called habit-reversal training) may be very useful in the treatment of tics. Many people with Tourette's syndrome may also benefit from psychotherapy (talking therapy) to address some of the self-esteem and self-consciousness issues associated with their illness. Medication treatment of Tourette's syndrome usually focuses on decreasing the severity, frequency, and discomfort of tics for people with significant social and occupational difficulties due to their symptoms.

Through effective treatment of their tics (and other coexisting psychiatric illnesses), the overwhelming majority of people with Tourette's syndrome can expect to see their symptoms decrease and can continue living the lives they want to live.

## Recovery

Recovery does not mean that the illness has gone into complete remission. Over time, and after what for many can be a long and difficult process, individuals can come to