



InPsych

Fall, 2010



PIRC - The Psychiatric Institute Residents' Clinic

Psychiatrists in training at New York State Psychiatric Institute (PI) are in the enviable position of working with experts at the top of the field, including experts who conduct research with patients in a wide variety of diagnostic categories, affording residents the opportunity to work with a broad range of patients. One way in which they are able to take advantage of the Department of Psychiatry's outstanding faculty is through their work at the Psychiatric Institute Residents' Clinic (PIRC), a service that provides teaching opportunities in psychopharmacology and various psychotherapies for residents in their 2nd, 3rd or 4th year of training.

The treatment of outpatients has of course been an integral part of the residency training program for many years, and for the past four years this part of the residents training took place at Columbia University Medical Center. On July 1st, the Clinic moved to PI, where it provides free services not only to patients who have completed research studies at the Institute, but individuals referred by staff at the Medical Center's outpatient service line, 212-305-6001, and direct referrals from Columbia-affiliated physicians all over the Medical Center.

Dr. Eileen Kavanagh, a graduate of the residency program and director of PIRC, has been collaborating with research coordinators and principal investigators to facilitate referrals from

the research clinics for follow up care with residents. For researchers like John Markowitz, MD, this is good news: "As a clinical researcher, I know the difficulty we face in referring patients who have not responded or only partially responded to study treatments and follow-up treatments, and it is wonderful to have a clinic of talented young psychiatrists to refer to."



Dr. Eileen Kavanagh, Director

One major change has been that Dr. Kavanagh has combined various sub-clinics under one umbrella "with one electronic medical record, one person overseeing [residents'] caseloads and the diversity of the caseload." As providing valuable learning opportunities is at the crux of the Clinic's mission, cases will be screened carefully by Dr. Kavanagh to ensure a rich and diverse caseload. In this endeavor, Dr. Kavanagh will work closely with Drs. Maria Oquendo, Deborah Cabaniss and Melissa Arbuckle to fulfill residents training needs.

"We will track the clinical work both case-by-case and resident-caseload by resident-caseload," said Dr. Kavanagh. "It is clearly a great learning opportunity to have a resident see a patient who needs a medication that they don't normally

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Hospitalist Improves Psychiatric Care at NewYork-Presbyterian



Dr. Anne Skomorowsky, Hospitalist

This April, NewYork-Presbyterian Hospital created one of the nation's first Hospitalist positions dedicated to providing mental health care for inpatients admitted for medical and surgical conditions. Since then, Dr. Anne Skomorowsky has used the position to provide a more consistent approach to psychiatric care for individual patients, while also raising awareness among attending physicians, residents, and physician's assistants about the mental health needs of the populations they serve.

"We are developing a different model of psychiatric care," noted Dr. Skomorowsky. "Every morning, I join hospital physicians on their rounds and am able to assess patients for psychiatric disorders and acute behavioral

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Message from the Chairman & Director Jeffrey A. Lieberman, MD

Columbia Psychiatry Collaborates

As the year draws to a close I want to say how grateful I am to faculty, staff,

students, patients, research participants, volunteers, donors and friends alike who are a part of the amazing cornucopia we call Columbia Psychiatry.

Everyone contributes in their own way: whether by participating in a research study (see article on page 11), receiving a new grant (p. 8), helping patients in our Resident's Clinic (p.1) or Consultation-Liaison Service (p. 1), or training to become a leader in mental health (p.10), all are adding to the extraordinary achievements that make Columbia Psychiatry – as I have often stated – a whole that is more than the sum of its parts.

It has been a year of notable achievements and collaborations. In June we began a strategic planning process that involved faculty and staff alike, and resulted in an outpouring of ideas and suggestions for improving how and what we do now and in the future. I deeply appreciate the sincerity and intensity of purpose which was brought to this process. We will continue to develop and implement these ideas over the next months and years, starting with a Grand Rounds on Strategic Planning in January, 2011, along with a department-wide poster session planned for the same day.

Anxiety Disorders, a brand new book edited by H. Blair Simpson, Roberto Lewis Fernández, Yuval Neria and Franklin Schneier, all faculty in our division of Clinical Therapeutics, is another wonderful example of what collaboration has achieved.

Pulling together the wealth of new information that research has yielded in the field in the last few years, this

volume draws from almost every part of Columbia Psychiatry. Over 50 faculty, including clinicians from adult and child psychiatry, in NewYork-Presbyterian, New York State Psychiatric Institute and Columbia University Medical Center settings, along with basic, translational and clinical researchers from The Lieber Center, The Psychoanalytic Center, The Center for Neurobiology and Behavior, the divisions of Behavioral Medicine, Brain Stimulation, Child and Adolescent Psychiatry, Clinical Phenomenology, Clinical Therapeutics, Developmental Neuroscience, Epidemiology, Geriatric Psychiatry, Integrative Neuroscience, Mental Health Services and Policy Research, Molecular Imaging and Neuropathology, Psychiatric Education, and Social Psychiatry, have contributed to this outstanding work.

Collaboration on the clinical side has resulted in the new Women's Mental Health Program. What began as a desire to learn more about diagnosing and treating perinatal and post-partum depression by residents in the adult psychiatry program three years ago has grown into a full-fledged comprehensive clinical program. The Program's multidisciplinary staff, comprised of an expert team of psychiatrists and psychologists, together with clinicians in clinical settings throughout CUMC and NYPH and in the department of obstetrics and gynecology at NewYork-Presbyterian Hospital work together to provide a new and much needed service.

Looking forward to 2011, I am eager to continue our work together as Columbia Psychiatry continues to grow, developing new programs, reaching out across the medical center and beyond to provide new research, new treatments and help for our patients and their families.

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Hospitalist Improves Psychiatric Care at NewYork-Presbyterian *(continued from cover)*

problems.” This extra layer of attention enables mental health care needs to be factored into patient care earlier, often before symptoms have manifested in ways that interfere with effective treatment. Previously, hospital physicians were only able to call for psychiatric assessments once mental health issues had already grown problematic.

Dr. Skomorowsky described one recent example in which a woman was being repeatedly admitted to the hospital for asthma exacerbations. Through Dr. Skomorowsky's intervention, it was determined that the patient was also experiencing hyperventilation due to a panic disorder, a diagnosis which enabled significant improvements in her overall medical care. In another case, an elderly woman was experiencing psychotic delusions which made it difficult to determine whether she was being abused by the relative with whom she lived. Through participation in a family meeting, Dr. Skomorowsky was able to help craft a treatment plan for the patient.



Dr. Skomorowsky with residents at NewYork-Presbyterian Hospital/CUMC

The position is officially titled the “Barbara Jonas Psychiatric Hospitalist” for longtime mental health advocate and former psychotherapist Barbara Jonas, who with her husband Donald gave \$500,000 to honor NewYork-Presbyterian Hospital President and CEO Herbert Pardes' longtime commitment to addressing mental health and behavioral issues. Dr. Skomorowsky, the first incumbent in the position, is a psychiatrist with specialized training in working with hospital patients. She has been with the hospital since 2004, and from 1997 to 1999, and from 1998-2008 served as a psychiatrist at St. Luke's-Roosevelt Hospital.



Anissa Abi-Dargham, MD (Translational Imaging) was awarded the Connie Lieber award at the New York State NAMI conference on November 6 in Albany. The award recognizes "Excellent research using imaging in schizophrenia."

Victoria Arango, PhD (MIND) has been elected Councilor-at-Large by the membership of the Society of Biological Psychiatry. The Council is made up of four previous presidents and three Councilors-at-Large, who serve a four-year term.



Stephen Billick, MD, who teaches the clinical rotation for child and adolescent forensic psychiatry in the Forensic Psychiatry Residency, has been elected president of the American Academy of Psychiatry and the Law, the largest national organization of forensic psychiatrists. He is also a member of the Board of Directors of the American Academy of Forensic Sciences, which is the largest national organization of multidisciplinary forensic scientists.



Maura Boldrini MD, PhD (MIND) was an invited lecturer at the National Academy of Sciences' twenty-second annual Kavli Frontiers of Science symposium at the NAS Beckmann Center, November 4th-6th, 2010 in Irvine, CA. The title of her talk was *The Neurogenic Hypothesis of Depression*.

Deborah Cabaniss, MD (Residency Education) has been selected by the Gertrude and Ernest Ticho Foundation and the American Psychoanalytic Association's Program Committee to be the 2011 Ticho Lecturer at the June 2011 American Psychoanalytic meeting in San Francisco.



Herbert Kleber, MD (Substance Abuse) is the winner of the 2010 Strecker Award given by the University of Pennsylvania. He will present Grand Rounds there on November 11, 2010. The title of his talk is *Opioid Maintenance: Terminable or Interminable*. Previous winners of this prestigious award include Columbia Psychiatry Chairman, Dr. Jeffrey Lieberman.



Robert Klitzman, MD (HIV Center) has accepted an appointment to serve on the Headquarters, United States Army Medical Research and Materiel Command (USAMRMC) Research Ethics Advisory Panel (REAP). The invitation to participate acknowledges Dr. Klitzman's "prominent national role in the areas of Research Bioethics, Clinical Psychiatry, and [his] emphasis on the ethical and social issues in medicine and psychiatry..."

J. John Mann, MD was presented the Morselli Medal (established in honor of Enrico Morselli (1852-1929)- A Pioneer in Scientific Suicidology) from the International Society For Suicide Research on September 3, 2010 in Rome, Italy for "outstanding and enduring achievements in the science and art of suicide prevention."



Yuval Neria, PhD (Clinical Therapeutics) has learned that his book, *Mental Health and Disasters*, of which he is lead editor, was favorably reviewed by *JAMA* in its September 22/29 issue.

Dr. Margaret Spinelli was given the Channi Kumar Memorial Award and gave a Memorial Lecture at the recent meeting of the Marce Society, an international society for the understanding, prevention and treatment of mental illness related to childbearing.



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The Division of Mental Health Services and Policy Research's Center for Practice Innovations has been awarded the Brandon Hall Research 2010 Excellence in Learning Gold Award for Best Custom Content for their new Focus on Integrated Treatment (FIT) training courses. The FIT course is a series of web-based-training modules for mental health professionals to improve treatment for people coping with Co-Occurring mental health and substance use Disorders (COD).

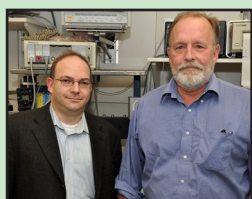


David Strauss, MD

In September 2010, Dr. David Strauss assumed his new departmental role as Vice Chair for Research Administration, Ethics and Policy. Dr. Strauss was formerly the Chairman of the Institutional Review Board (IRB) at Psychiatric Institute. In this new position, he will be responsible for the administrative oversight of the research divisions, centers, core research facilities, and research ethics and compliance functions, including the IRB, the Institutional Animal Care and Use Committee (IACUC), and Ethics Advisory Board.

He received a bachelor's degree in Biochemistry from SUNY Binghamton and an MD from Cornell University Medical College. Following his residency training in Psychiatry at Columbia, David has held a number of key clinical and research administrative positions within the department, including Unit Chief of the Schizophrenia Research Unit, Clinical Director of the NYS Psychiatric Institute, and currently co-chair of the Ethics Advisory Board. He is co-director of the HIV Center's Ethics, Human Rights and Public Policy Core and chairs Columbia's Standing Committee on the Conduct of Research. Dr. Strauss's scholarly work has focused on research ethics and human subjects protections. He serves as a member of the DHHS Secretary's Advisory Committee on Human Subjects Protections.

Charles Schroeder, PhD, and Joshua Berman, MD, PhD



As of Oct. 1, 2010, Sarah Lisanby, MD, former Chief of the Division of Brain Stimulation and Therapeutic Modulation at Columbia Psychiatry, became Chair of Psychiatry and Behavioral Sciences at Duke University. While a search is underway for a new division chief, Charles Schroeder, PhD, has agreed to serve as interim Chief of the Division and Joshua Berman, MD, PhD, will serve as Interim Medical Director. Dr. Schroeder has been a longtime collaborator with researchers at PI and has been a member of the Columbia faculty since 2005. He will split his time between NKI and NYSPI and oversee the division from an administrative and scientific perspective. Dr. Berman will oversee the

clinical components of the division's treatment and research services.

Dr. Schroeder did his undergraduate studies at the Ohio State University and received his PhD from University of North Carolina, Greensboro in 1984. After post-doctoral work at Albert Einstein College of Medicine, he continued at that institution, rising to Professor of Neuroscience in 2002. Since 1995, Dr. Schroeder has also held a research scientist appointment at the Nathan S. Kline Institute for Psychiatric Research; his current rank is Research Scientist VII. In 2005 Dr. Schroeder was appointed Professor in the Department of Psychiatry at Columbia University College of Physicians and Surgeons, and continues in that position. His research focuses on the neurobiology of sensory processing, integration and perception in both human and nonhuman primates, and is supported by several NIH grants. Dr. Schroeder is also a member of the editorial board at several scientific journals and he is Reviewing Editor at the Journal of Neuroscience.

Dr. Joshua Berman received both his MD and PhD at the Mount Sinai School of Medicine and completed his residency in psychiatry at Columbia University Medical Center and New York State Psychiatric Institute, prior to research fellowships there in affective disorders and substance abuse. He has been recipient of a NARSAD Young Investigator Award and a K08 Award from NIDA, studying striatal mechanisms for integration of hedonic drive and stress in rodent models with emphasis on systems affected by both nicotine and stress. Recently he has focused on how such mechanisms may be involved in the antidepressant efficacy of brain stimulation treatments such as Transcranial Magnetic Stimulation (rTMS) and Electroconvulsive Therapy (ECT). He has been credentialed at Columbia in ECT, rTMS, and other brain stimulation techniques, and has served as Medical Director for the Brain and Behavior Clinic and Brain Stimulation Service Outpatient Clinic.

Daniel Richter, MD and Edward Nunes, MD

Drs. Edward (Ned) Nunes and Daniel Richter were appointed co-chairs of the Institutional Review Board of the New York State Psychiatric Institute-Columbia University Department of Psychiatry in October 2010. Each will serve in a part-time capacity; Dr. Nunes will continue his work in the Division of Substance Abuse, and Dr. Richter will remain Associate Director of the Inpatient Research Unit 4-Center.



Dr. Nunes earned his AB in Psychology and Chemistry from Dartmouth College in 1977 and his MD from the University of Connecticut School of Medicine in 1981. He completed an internship in internal medicine at St. Elizabeth Hospital in Boston (1982) and a psychiatry residency (1982-1985) and a research fellowship in clinical psychopharmacology (1985-1987) at NYSPI. He joined the Columbia University Department of Psychiatry faculty in 1985 and became Professor of Clinical Psychiatry in 2005.

He has been principal investigator or collaborator on numerous NIH-funded R01s and, since 2000, has served as principal investigator of a node in the National Institute on Drug Abuse (NIDA) Clinical Trials Network (now in its third funding period), which has led three multi-site clinical trials. He has received consecutive career development awards from the National Institute on Drug Abuse (K20, two K02s, and K24) and serves as a research mentor to numerous junior faculty members and fellows in the Division of Substance Abuse. He has served as the IRB's Vice Chairman since 2008.



Dr. Richter earned a BA in Psychology from the University of Pennsylvania in 1992. He spent two years in clinical research on SAD and Pediatric Autoimmune Neuropsychiatric Disorders (PANDAS) at the NIMH as part of Susan Swedo's group, and then a year involved in psychiatric research in critical care settings (Cardiac Care Unit and the Burn Unit) at Johns Hopkins. Dr. Richter received his MD from Cornell University Medical College in 2000. Following his internship and residency at Columbia University-NYSPI in 2004, Dr. Richter was recruited to become an attending psychiatrist on NYSPI's General Clinical Research Unit. In 2007, he was appointed Associate Director of that clinical research service. In this capacity, Dr. Richter has served to facilitate research while managing the clinical care of patients participating in clinical research undertaken by NYSPI's Eating Disorders Research Unit, Child and Adolescent Psychiatry, Molecular Imaging and Neuropathology, the Depression Evaluation Service, and Substance Abuse. Dr. Richter became a member of the NYSPI IRB three years ago, and has served in a leadership capacity chairing IRB subcommittee and full board meetings since 2010.

Columbia Psychiatry/New York State Psychiatric Institute Selected as Field Trial Site for DSM-5 Upcoming Manual's Proposed Criteria to be Tested in Real-World Clinical Settings

The Division of Child and Adolescent Psychiatry at New York State Psychiatric Institute and Columbia University Department of Psychiatry has been selected to carry out one of four pediatric field trials to test proposed diagnostic criteria for the American Psychiatric Association's (APA) fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM).

Used by health professionals around the world, DSM is the manual that provides descriptions, symptoms and other criteria for diagnosing mental disorders. The field trial will be carried out in collaboration with colleagues at NewYork-Presbyterian Hospital - Morgan Stanley Children's Hospital of New York, Weill-Cornell Medical Center and Westchester Division, and at the North Shore Child and Family Guidance Center in Roslyn Heights, New York. These trials are designed to help assess the practical use of proposed DSM-5 criteria in real-world clinical settings.

"We feel it is important to participate as a site in the field trials to ensure the viability of the DSM-5 diagnostic system," said Dr. Jeffrey Lieberman, chairman of the Columbia University Department of Psychiatry and director of New York State Psychiatric Institute. APA has reported that the selection process was very competitive; only 11 organizations were chosen from the 65 that submitted proposals to be considered for a field trial site.



This collaborative field trial will be led by Prudence Fisher, PhD, a Research Scientist at New York State Psychiatric Institute and Assistant Professor in the Department of Psychiatry at Columbia. Disorders being studied as part of the pediatric trial include Attention Deficit Hyperactivity, Oppositional Defiant, Conduct and Substance Use Disorders, as well as two new disorders being proposed for inclusion in DSM-5: Non Suicidal Self Injury and Temper Dysregulation Disorder with Dysphoria. Clinicians participating in the field trial will evaluate

new and existing patients at different stages of treatment using the proposed DSM-5 diagnostic criteria and measures.

The field trial is designed to address several important aspects of the proposed diagnostic criteria, including:

- **Feasibility:** are the proposed criteria easy for clinicians to understand and to use?
- **Clinical Utility:** do the proposed criteria do a good job in describing patients' psychiatric problems and help clinicians make decisions about treatment plans?
- **Reliability:** are the same conclusions reached consistently when the criteria are used by different clinicians?
- **Validity:** how accurately do the diagnostic criteria reflect the mental disorders they are designed to describe?

In addition, the field trials will test new tools that help clinicians evaluate the severity of symptoms, and whether patients are improving over time; as well as "cross-cutting dimensional assessments" that measure symptoms that occur across a wide range of diagnoses, such as sleep problems.

"The clinicians and researchers who will be involved in the study undertaken by the Division of Child and Adolescent Psychiatry at New York State Psychiatric Institute-Columbia Psychiatry demonstrate the highest level of expertise in mental health research and clinical care," said David Kupfer, MD, chair of the DSM-5 Task Force. "This field trial research is a part of a critical phase in development of DSM-5 and will give us the information we need to better understand how the proposed revisions affect clinicians' practices and, most importantly, patient care."

The field trials follow a public comment period in which more than 8,000 written comments on the draft diagnostic criteria were submitted to the DSM-5 web site by clinicians, researchers and family and patient advocates. Submitted comments were reviewed by DSM-5 Work Groups and resulted in further refinement of the criteria. The field trial results will help even further to refine the criteria and provide invaluable information for DSM-5, to be released in May 2013.

More information on all of the participating field trial sites and the specific disorders being tested is available on www.dsm5.org.

NewAppointments, continued



Avalon Lance, MHA assumed the position of Interim Department Administrator and Chief Financial Officer of the Columbia University Department of Psychiatry in November, 2010. Avalon is an experienced administrator who came to Columbia from the University of Washington in Seattle where she was the Director of Finance and Administration for the Department of Surgery

from 2003 until 2010. During this same period, she also served as Senior Administrative Director of the Institute for Simulation and Interprofessional Studies. Prior to her employment at the University of Washington, Avalon held positions managing multi-specialty physician group practices. Avalon started her career in healthcare as a Registered Nurse with a Bachelor of Science in Nursing from Seattle Pacific University and later earned a Masters in Healthcare Administration from the University of Minnesota.

Gray Matters at Columbia New Fellows Reception



On Thursday, October 7th **Mrs. Farah Moinian** hosted a private reception in her home to introduce the 2010 *Gray Matters at Columbia* Fellowship Award Recipients. Special guest **Mrs. Matilda Cuomo** was in attendance. **Dr. Jeffrey A. Lieberman**, Chairman of Columbia Psychiatry, introduced the five recipients and invited each to speak about their research: **Drs. Alla Landa** (Lyme Disease), **Susanne Ahmari** (Obsessive Compulsive Disorder), **Christoph Kellendonk** (Schizophrenia), **Catherine Clelland** (Schizophrenia, Bipolar Disorder), **Holly Moore** (Schizophrenia). **Dr. Moore** holds the Sidney R. Baer, Jr. Fellowship in honor of a commitment from the Sidney R. Baer, Jr Foundation in support of critical advances in early intervention for schizophrenia. Each year the *Gray Matters at Columbia* Fellowship is awarded to young scientists exhibiting outstanding performance in the genetics of brain disorders. The chosen fellows benefit from the multidisciplinary expertise of a peerless



team of clinicians and scientists that includes two Nobel laureates. Funds for these awards were raised at the 2010 Annual Benefit Luncheon at The Plaza featuring special guest speaker **Ms. Paula Zahn**. The next *Gray Matters at Columbia* Annual Benefit Luncheon will take place in spring 2011. Past recipients of this award include **Drs. Suzanne Goh** (Autism), **Scott Schobel** (Schizophrenia) and **Laura Murillo Rodriguez** (Schizophrenia).

GRAY MATTERS AT COLUMBIA SPRING BENEFIT LUNCHEON

SAVE THE DATE

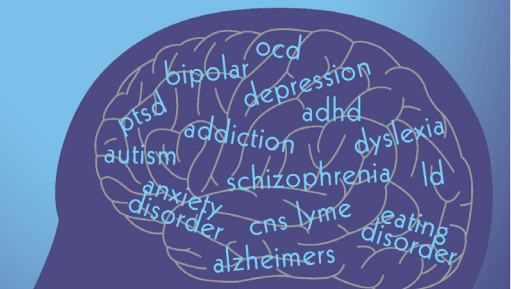
TUESDAY, MAY 3, 2011

INVITATION TO FOLLOW

For further information, please contact Erin Jadney
at 212-304-7223 or email ej2181@columbia.edu
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GRAY MATTERS AT COLUMBIA

SUPPORTING YOUNG SCIENTISTS AS THEY UNRAVEL THE MYSTERIES OF THE BRAIN



The 2010 Paul Janssen Fellowship Symposium



The Paul Janssen Fellowships in Translational Neuroscience Research and The Paul Janssen Professorship in Clinical Neuroscience, held by **Dr. J. John Mann**, were established in 2004 through the extraordinary philanthropic support of Johnson & Johnson. The Janssen Fellowship Symposium, held on November 1, 2010 at the New York State Psychiatric Institute, was led by Dr. Mann and attended by several Janssen fellow mentors as well as **Dr. Rocky Kass**, Columbia University Medical Center Vice Dean for Research, and **Dr. Roy Vagelos**, Chair of Columbia University Medical Center's Board of Visitors. Dr. Mann discussed the influence and importance of Johnson & Johnson's philanthropy, and the impact that the Janssen Fellowships have had since their inception in 2005, giving a sense of the broad scope of investigatory interests and successes of the Janssen Fellows to date. Dr. Mann subsequently introduced presentations from three recent Janssen Fellows (**Drs. Maura Boldrini**, **Scott Schobel** and **Susanne Ahmari**), all of whom discussed how vital Janssen support was to their continuing work, making it possible for them to have protected research time, significant input from their clinical and basic science mentors, and access to the most sophisticated laboratories.

Dialogues in Science

On Monday, November 8, 2010 **Jeffrey A. Lieberman, MD** welcomed special guest speaker **Lesley Stahl**, 60 Minutes correspondent and award-winning journalist, for Columbia Psychiatry's annual *Dialogues in Science* reception. Held each year at **Arader Gallery**, *Dialogues in Science* is a private reception for special friends and supporters of the department. Ms. Stahl was joined by **Steven Roose, MD**, Professor of Clinical Psychiatry at Columbia University Medical Center and Research Psychiatrist at NYSPI, for an engaging in-depth conversation about depression, its effect on the family, and the link between depression and cardiovascular health.



New Grants



Balapal Basavarajappa, PhD (NKI) received an NIH R01 grant to support his study, "Endocannabinoid Signaling in Postnatal Ethanol Effects." The five year grant totals \$1,478,520.



Diana Martinez, MD, (Substance Abuse) received an R01 from the National Institute on Alcohol and Alcoholism to support her study, "Imaging the Neurochemistry of Binge-Drinking in College-Aged Young Adults." The total grant award over five years is \$1,708,930.

Cristiane Duarte, PhD (Child and Adolescent Psychiatry) received an R03 from the National Institute on Alcohol Abuse and Alcoholism to support her grant, "Parental Criminal Justice Involvement & Substance Use Among Puerto Rican Youth." The total grant amount over two years is \$79,950.



Yuval Neria, PhD (Clinical Therapeutics) was awarded an R01 from NIMH in support of his study, "Brain Circuitry and Psychological Predictors of PTSD." The total grant award is \$2,921,113 over a period of four years.



Elana Zion Golumbic, PhD (Cognitive Neuroscience) received an F32 grant totaling \$156,438 from NIMH to support her study, "Neuronal oscillations as a tool for attentional stream selection."



Ryan David Ward, PhD (Cognitive Neuroscience) received an F32 grant from NIMH to support his study, "Dopamine D2 receptor over-expression, adenosine A2A receptors, and motivation." Total grant support is \$54,974 for one year.

A NIDA R01 grant was awarded to **Margaret Haney, PhD** (Substance Abuse) to support her study, "Marijuana Relapse: Influence of Tobacco Cessation and Varenicline." The five-year grant totals \$2,702,423.



Patrick McGrath, MD (Clinical Therapeutics), **Ramin Parsey, MD, PhD** (MIND) and **Myrna Weissman, PhD** (Epidemiology) were awarded an NIMH grant to support their study of "Biosignatures of Treatment Remission in Major Depression" over the next four years. The total grant award is \$7,565,677.



2010-11 Irving Institute Collaborative and Multidisciplinary Pilot Research (CaMPR) Phase I Awards

This year two of the funded proposals went to multidisciplinary teams led by Columbia Psychiatry faculty: **Cheryl Corcoran** and **Lawrence Yang**, et al. "Schizophrenia Prevention: Using the Tools of Cognitive Neuroscience to Understand Stigma Associated with the Risk Label in the Community." and **Diana Martinez**, et al. "Progress in molecular imaging: using nanoparticles to image cellular targets."

PIRC - The Psychiatric Institute Residents' Clinic (continued from cover)

prescribe. At the same time, if the residents all have a certain type of patient in their case load, at some point in the year we might stop taking such cases."

Since the Clinic began operating at PI, Dr. Kavanagh notes, psychotherapy is in great demand as a treatment. Right now, however, she would like more "true psychopharmacology cases." These cases involve "patients already in stable therapy with an outside provider" – which will introduce residents to working with clients who have multiple providers (i.e., those patients in a split treatment) – or cases that only require medication management once a month if not more frequently. There is also value in working with stable cases, added

Dr. Kavanagh, where residents, for example, may explore the long-term effects of lithium in a patient who has been stable on the same medication for 20 years. "This type of case is very interesting for the trainee."

Researchers who would like to refer subjects to PIRC should complete an internal referral form which Dr. Kavanagh can provide. Write to her at ek2155@columbia.edu or kavanagh@pi.cpmc.columbia.edu. Other patients, including employees, should contact the Medical Center's outpatient referral line at (212) 305-6001. Columbia-affiliated clinicians who want to refer a patient can contact Dr. Kavanagh directly via e-mail or by calling 212-543-5549.

Are you a Columbia Department of Psychiatry alum? We'd like to hear from you! Let us know how you're doing so we can share the news with your fellow classmates.

Please send your news (including year of graduation) to yarmoli@pi.cpmc.columbia.edu.

1960s

David Peretz, MD, who graduated residency at PI in 1963 and the Columbia Psychoanalytic Center in 1967, shares the following review of his second novel, *The Broderick Curse*, in Dr. Michael Blumenfield's "Psychiatry Talk" of February 2010. "With his second novel, David Peretz enters the major leagues of detective fiction." Those interested can have a look at his website www.davidperetznovels.com

In the past year **Michael H Stone, MD** (Class of 1966) has lectured abroad in Munich ("The Psychiatrist Faces Evil"), Kiev ("The Role of Dream Analysis in Psychoanalysis"; "The Psychology of Serial Killers"), Marrakech, Morocco ("Marijuana-Induced Psychosis in Forensic Patients") at the World congress of Social Psychiatry. He has also made appearances on "TruTV" and ABC's Nightline.

Ruth Szmarg, MD (class of 1969) left New York for Israel two years ago after closing her practice. "I now live in Ashdod and spend my free time learning Hebrew [and] getting adjusted to the customs of the middle east" while still unpacking cartons of old patient files. She hopes to open a practice soon.

1990s

Jane Rosenthal, MD (PI graduate 1990; Consultation Liaison Fellowship 1991) has kept quite busy since completing her residency. She currently directs the Consultation-Liaison Psychiatry Service at Tisch Hospital, NYU Langone Medical Center and the Psychoanalytic Fellowship, Columbia University Center for Psychoanalytic Training and Research. She was also promoted to Clinical Associate Professor of Psychiatry, NYU School of Medicine.

Class of 1996 graduate **Daniel Schechter, MD**, has been living in Geneva, Switzerland with his family since April 2008. He now heads the Pediatric Psychiatry Consultation-Liaison and Parent-Infant Research Units at the Children's Hospital of the University of Geneva Hospitals. On December 6, 2010, he was officially promoted to Associate Professor of Psychiatry (in pediatrics) on the University of Geneva Faculty of Medicine. He remains Adjunct Assistant Professor of Psychiatry at Columbia.

His project in Geneva – examining individual differences in child outcomes and maternal-child endophenotypes in the context of violence-related maternal PTSD and mother-toddler interactions – was accepted by the Swiss National Science Foundation's National Center of Competence in Research. This multi-institutional center is the largest federal mental health research grant ever awarded in Switzerland.

Mark Nathanson, MD, reports that he is the director of the Mobile Crisis team at Elmhurst Hospital/Mt. Sinai. The team recently won an award from NYC Health and Hospitals Corp for Excellence in Clinical Practice. Dr. Nathanson has also written a chapter in Dr. Toner's *Geriatric Mental Health Disaster and Emergency Preparedness*. The chapter is titled, "Assessment in Geriatric Mental Health Disasters."



Honoring a Colleague

A recent generous gift to the Frontier Fund by faculty member **David V. Forrest, MD** (P&S '64) was made "in honor of **David T. Lane**, the last and final great Psychiatric Institute Librarian, who together with Luis Minaya and Alfa Garcia, conserved and culled the wisdom of psychiatry for the benefit of us all." Best wishes to Mr. Lane upon his retirement, and many thanks to Dr. Forrest for his ongoing support of the Frontier Fund.

COLUMBIA PSYCHIATRY GIVING

The Frontier Fund is the annual fund of Columbia Psychiatry and provides critical support for our core mission. The name is inspired by the brain itself – one of the last true frontiers of exploration and discovery, and the focus of our vital research at Columbia Psychiatry. The four supporting opportunities within the Frontier Fund are the Young Investigators, Clinical Research and Treatment, Education and Outreach, and Chairman's Initiatives. Columbia Psychiatry is proud to be an international leader in the field of psychiatric medicine, and gifts to the Frontier Fund make a significant difference in our work. We are extremely grateful to our dedicated supporters for their generosity.

To learn more about the Frontier Fund or to make a gift, please contact Emily Carey at 212-543-5942 or eac2149@columbia.edu. Thank you for your support of Columbia Psychiatry!

Residents' Corner – Judith Joseph



Judith Joseph, MD, MBA, is a third year resident in psychiatry with ambitions of becoming a leader in global mental health. In the beginning of September she joined four other fellows, who like her were recipients of the APA/SAMHSA Minority Research Fellowship, at the World Psychiatric Association's International Congress meeting in Beijing. Originally from Trinidad, Dr. Joseph and her colleagues, who hailed from or have roots in Africa, Mexico, China and India, presented a workshop on cultural competency. Dr. Joseph's focus was on identifying tools that psychiatrists can use to provide culturally competent care. The title of her talk was "Adventures in Cultural Competency-Providing Mental Health Care to Global Populations."

One might ask what can an American-trained psychiatric resident hope to teach Beijing professionals about developing an effective working relationship with their Chinese patients. Unlike cities such as New York with an ethnically-diverse population, Beijing, China is a homogenous city with more than 95% of the population in the Han ethnic group. But, as Dr. Joseph learned, many psychiatrists who travel

to rural China encounter ethnic minority populations that may be hesitant about speaking with a professional of a different ethnic group. Most literature, Dr. Joseph noted, demonstrates that patients are more satisfied with care from someone who shares their race or ethnicity. On the other hand, psychiatrists and other professionals are fully aware of the challenges faced by underrepresented minorities in regions across the US – including New York State – where there is little diversity in medical school enrollment and, thus, a lack of diversity among physicians.

She has been working with Roberto Lewis-Fernández, MD, Director of the New York State Center of Excellence for Cultural Competence, whose experience has provided a thorough scientific basis on issues related to cultural competency and whose work has augmented her own. This trove of knowledge, along with those of her fellow SAMHSA colleagues, helped to inform her Beijing presentation.

"Physicians from both China and Australia attended our Beijing Cultural Competency work shop and thanked us, expressing that they would begin to use Cultural Formulations and other strategies from our workshop when treating ethnic minorities in China and Australia," said Dr. Joseph.

Now back in New York, Dr. Joseph, who enrolled in Columbia's MBA program after her third year of medical school to help further her ambitions as a global healthcare expert, is throwing her energies into not only the research and academic responsibilities of her residency, but into organizing events

like the "Global and Public Mental Health Symposium" that are concordant with her interests. The Symposium, which took place on November 12 in the Hammer Health Sciences building at CUMC, is a product of the Columbia University Global and Public Psychiatry Resident Interest Group of which Dr. Joseph is a member. The event was funded by her SAMHSA-APA award and included a panel discussion with experts in global and public mental health along with live music, refreshments and performances.

In addition to the Symposium, Dr. Joseph's SAMHSA award has helped to fund a number of other initiatives: creation of a course for Medical Spanish for Psychiatry Residents; development of a Cultural Formulation workshop for Cultural Formulation Resident Supervisors – Drs. Lewis-Fernández and Tresha Gibbs (PGY-3) were instrumental in this effort; production of a documentary on mental illness and pregnancy; research with Carlos Blanco, MD, on treatment delays in bipolar disorder; development of a mental awareness website for adolescent populations; and teaching a cultural competency course for psychiatry residents and medical students at a university hospital in Australia.

SAMHSA-APA

Substance Abuse and Mental Health Services Administration fellows are selected on the basis of their commitment to serve ethnic minority populations, their awareness of the importance of culture in mental health, their interest in the interrelationship between mental health/illness and transcultural factors, and their demonstrated leadership abilities.

ClinicalServices Columbia Concussion Clinic Added to Roster of Clinical Programs

Columbia Concussion Clinic offers a team approach to concussion assessment and management. Staffed by Columbia University clinicians who are specialists in neuropsychology, neurology and neuropsychiatry, the Clinic provides evaluations, treatment, and follow-up recommendations and referrals. For more information call **212-342-1589**, or visit our website at <http://ColumbiaConcussionClinic.com>.



For information on any of Columbia Psychiatry's Clinical Services call 212-305-6001, or visit online at www.columbiapsychiatry.org.

Participating in a Research Study / Conducting a Research Study: The View from Both Sides

Research participation is an important source of treatment for New Yorkers seeking an option for low or no-cost, high quality care. Research opportunities at the New York State Psychiatric Institute/ Columbia Psychiatry provide participants with the expertise of experienced clinician-researchers at a world-renowned medical center along with the satisfaction that comes from helping in research to improve treatment and find the causes of mental illnesses.

In the story below, a participant in a research study of “Improving Compliance Among Hispanic Patients With Depression” talks about her experience with research, and we hear also from Dr. Carlos Blanco, the principal investigator of this study.

A Participant's Story

Sory (not her real name) is a 47 year old Hispanic New Yorker who works in a mental health clinic in the Bronx. Battling depression since she was about 12 years old, Sory said she finally relented and sought help after her decades-long marriage failed and family members, including her children, told her that her depression would not resolve on its own.

But relief was slow to come until she learned of a depression research study through her boss, who knew of the Institute's reputation. She was given a flyer advertising Dr. Carlos Blanco's study “Improving Effectiveness of the Treatment of Depression in Hispanics” in February 2010 and followed up with a phone call. The study's aim is to investigate whether allowing patients to choose the treatment they prefer (psychotherapy, medication or both) helps them stay in treatment.

In the study, participants get to choose whether they'd like to receive interpersonal psychotherapy (IPT) or medication or both. Sory decided that she would try medication even though she was opposed to it for years. Her experience thus far has been positive. The medication has been helpful and the side effects tolerable. Of her interaction with the staff, Sory says “It's a very nice clinic and the people are really beautiful.” She's particularly grateful for the attention when she's feeling down as she was recently after her parents died. “When I'm feeling kind of strange or start crying, I usually call them [the clinic].”

Prior to enrolling in Dr. Blanco's study, Sory saw a therapist for five months, the longest she had ever had treatment. But, as a single mother of two children and with a small income, she said it was difficult to continue the therapy, which cost \$45 per week and sometimes more if she needed to see her doctor more than once a week, so she stopped treatment. She liked talk therapy she said because “it feels good when you talk to a person. They understand what you're feeling.” As a research participant in Dr. Blanco's study, she not only receives medication, but regular phone calls from study staff to assess her progress and mood. She also goes to the Institute once a month for a face-to-face meeting.

Now in her 35th week of participation, Sory says she spends more time with her family. Her children have noticed a change for the better, too. She's come a long way – from isolating herself in her room with the lights off and her hospitalization at age 12 after a suicide attempt, to where she is now – making plans to see relatives in Florida.

Her experience in the study has turned her into an ambassador of sorts; she has told clients of the mental health clinic where she works about Dr. Blanco's research study. Two of them have even followed up with the study staff. Her message for others still in denial about their depression is this: “Life is too short and you're suffering. Don't feel embarrassed. Everybody gets depressed, some more than others. Get all the help you can get.”

A Researcher's Perspective



Dr. Carlos Blanco knows very well the difficulty researchers face in maintaining compliance among research participants. Many factors play a role in high drop-out rates or even failure to seek treatment. Stigma is one such factor. He maintains that while successful

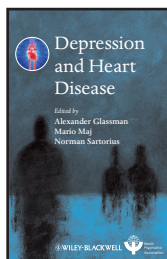
campaigns to increase awareness about treatment have been launched targeting Caucasians, there has been far less effort made to engage underserved populations. That's why studies like the one he now leads are critical for helping engage Hispanics in the process and providing much-needed care in a way that mirrors real-life clinical settings.

The study is designed to give patients choice in their therapy rather than have it be dictated by the study investigators. Participants who opt for IPT also have the option of sessions by phone or in person. This was built-in to address one of the barriers that many patients face in seeking treatment – lack of close proximity to their clinic. “We try to provide flexibility - tailoring the treatment to the patient rather than forcing the patient to adapt to the treatment,” noted Dr. Blanco. One other broad benefit of the study is that “we take patients where they are” meaning whether a patient is taking medications or not or has a co-existing medical condition (something that other researchers would not normally allow). “We're really taking patients that you would see in a typical clinic,” Dr. Blanco added. In research parlance, that means the study is generalizable. That's a good thing.

Dr. Blanco's study would appear to be very appealing to patients; it balances proven scientific methods with an equal degree of patient-friendly options. The feedback from study enrollees seems to reflect as much. Recruitment has been aided by referrals of friends and relatives. Some have even reached out to members of their church, according to Dr. Blanco, who said the study gets a broad range of patients from the community. Patients like Sory, who were initially opposed to taking medications may be happy to know that research study staff isn't invested in their taking medication as opposed to getting talk therapy. “We don't have a hidden agenda,” stresses Dr. Blanco. “We're trying to find a way to help patients by giving them options that are scientifically valid.”

To learn more about participating in this study, contact Mariela Castellanos at 212-543-6620.

For more information about participating in our research studies, visit our website at www.ColumbiaPsychiatry.org, or call 212-305-6001.



Depression and Heart Disease

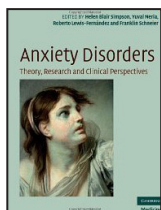
Editors: Alexander Glassman, Mario Maj, Norman Sartorius

Publisher: John Wiley and Sons

November 2010

Many patients with cardiovascular disease also experience psychiatric symptoms and distress. Patients with psychiatric problems, particularly depression, may be more susceptible to cardiovascular disorders. The presence of depression aggravates the course of the disease and is associated with reduced compliance to prescribed medications and secondary prevention measures. Cardiologists and psychiatrists therefore need an awareness of these problems and to know how to assess their effect in a given patient, how to treat one disorder in the context of another and how to manage the whole patient, not isolated symptoms.

Depression and Heart Disease is the first book devoted to the interaction between these common disorders.



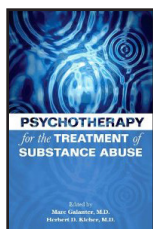
Anxiety Disorders: Theory, Research and Clinical Perspectives

Editors: Blair Simpson, MD, PhD; Yuval Neria, PhD; Roberto Lewis-Fernandez, MD; Franklin Schneier, MD

Publisher: Cambridge University

October 2010

Anxiety disorders are amongst the most common of all mental health problems. This book offers a variety of perspectives on new developments and important controversies relevant to the theory, research, and clinical treatment of this class of disorders and illustrates the advances that have occurred in anxiety research.



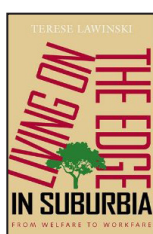
Psychotherapy for the Treatment of Substance Abuse

Editors: Marc Galanter, MD and Herbert D. Kleber, MD

Publisher: American Psychiatric Publishing Inc.

September 2010

In Psychotherapy for the Treatment of Substance Abuse, leading authorities on substance abuse treatment techniques review and illustrate the most common interventions for opioid-related and alcohol-related substance abuse disorders, as well as crucial methodologies for testing and patient placement. Methods reviewed include self-help fellowships such as Alcoholics Anonymous, cognitive-behavioral and psychodynamic treatments, motivational enhancement, group and family therapy, contingency management, and the multimodal approach called Network Therapy, which recruits the support of friends and family to prompt abstinence and prevent relapse. Each chapter includes vivid case studies to illustrate the approach described, as well as a review of the key clinical concepts and a list of essential readings.



Living On the Edge in Suburbia: From Welfare to Workfare

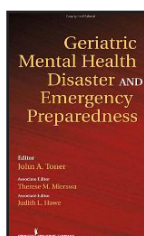
Author: Terese Lawinski

Publisher: Vanderbilt University Press

June 2010

Westchester County, New York, is thought of as suburban and affluent, but welfare reform hit hard here, too. The radical 1996 legislation created a temporary assistance program for poor families with harsher provisions than the program it replaced. It mandates "workfare," meaning that recipients must work as a condition of benefit receipt. But the work parents obtain in the so-called flexible labor market--jobs like home health care aide--are inflexible for them. One sick child can mean the loss of a job.

In this tale of people and policies, the author shows how the interests of governments are often at variance with those of vulnerable families, and how some government actions place more pressure on lives replete with stress.



Geriatric Mental Health Disaster and Emergency Preparedness

Editors: John Toner, PhD, Therse Mierswa, Judith Howe, PhD

Publisher: Springer Publishing Company

April 2010

This book provides a comprehensive overview of the essential information that everyone working, or hoping to work in the field of aging, should know about disasters, emergencies, and their effects on the mental health and well-being of older persons. It provides the reader with evidence-based approaches for identifying and classifying mental health problems, such as Post-Traumatic Stress Disorder (PTSD), depression, and substance use disorders in older adults, which may occur during and post disasters/emergencies.

Specific attention is given to the special needs and approaches to the care of at-risk groups of older persons such as veterans and holocaust survivors; older adults who are isolated, dependent, have mobility problems, communication deficits, are cognitively impaired, or have other co-morbidities; elders who use meals-on-wheels, vital medications, or home care; or older persons who are in senior centers, nursing homes, or assisted living settings.