



## Antidepressants in the News: The Clinical Perspective

Whether it's business or health care, the slogan, "An informed consumer is the best customer" speaks to our keen desire to educate ourselves so we can make intelligent decisions. With the click of a button, patients can access information online about the latest in treatment and research in psychiatry. For a depressed person seeking information online last January, however, the treatment options may well have seemed confusing and limited due to the flurry of media stories about antidepressants and their effectiveness engendered by the now well-known JAMA study published that month.

It's true, the study itself failed to make any real impact on the field of psychiatric research. However, "The article landed in this ongoing debate over whether people are overmedicated," noted Robert Klitzman, MD, Associate Professor of Clinical Psychiatry and Director of the Master's of Bioethics Program at Columbia University. As a result, the media coverage was heated, leading Dr. Klitzman to comment further that "It's unfortunate that some in the media play up controversy when there's none there." So, what, if any, effect has the media's interpretation had on people with depression?

"Doctors are not fools and neither are their patients," said Patrick McGrath, MD, who stated that the article hasn't changed his patients' view of medications. He believes, though, that the

study and the media response served to trivialize the suffering associated with depression and may make some people reluctant to seek treatment. Heather Schneider, a 33 year old PhD student at Columbia, who was diagnosed with depression in college, expressed similar concerns. "These days, people do a lot of research online and some people postpone as long as possible before seeing a doctor. I know I did." She feels that sensational news reports may have prompted some patients to further delay getting help.

Dr. McGrath is co-director of the Depression Evaluation Service (DES) at the New York State Psychiatric Institute (NYSPI) and Professor of Clinical Psychiatry at Columbia. He was also lead investigator of the STAR\*D study at the NYSPI site. STAR\*D is arguably the most robust, federally-funded study to assess the effectiveness of a variety of medications for depression. That study sought to capture real-world settings and produce findings that were applicable to the population of patients clinicians typically treat. The results provided a much clearer picture for clinicians invested in providing the best possible care to their patients because it recruited the types of patients doctors like McGrath see in the DES at NYSPI.

"People who seek treatment are hurting and typically have recurrent depression," said Dr. McGrath. An experience that the STAR\*D study confirmed. By contrast, the JAMA study, a meta-

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## HIV Center Initiatives in the Middle East and North Africa

Recently, Department Chairman Jeffrey Lieberman, MD, announced his Global Mental Health initiative, which will be closely integrated with those of the University and the School of Public Health. One of the Divisions that continues to actively engage in global collaborations is the HIV Center for Clinical and Behavioral Studies.

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*(pictured l to r:) Rajae El Aouad, MD,  
Anke Ehrhardt, PhD and Jeffrey A. Lieberman, MD*



## Message from the Chairman and Director Jeffrey A. Lieberman, MD

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### The Big Picture About Depression & Antidepressants

The tenor of the public discussion on antidepressant use reached a new low following the publication of a JAMA study\* in January, 2010 examining the benefit of antidepressant medications in treating symptoms of depression.

The research was neither startling or new, it confirmed that antidepressant medications are effective in treating severe depression; it suggested that for the two antidepressants included in the study (paroxetine and imipramine), medication did not have a significantly stronger effect than placebo in treating mild to moderate depression.

But the study provoked polemical responses in the media. “Dramatic new developments in the fight against depression,” promised CNN, to introduce a story that said no more than the synopsis above. Newsweek ran a cover story, “Depressing News About Antidepressants,” suggesting that antidepressant medications are no more effective than placebo and may even be worse for the patient. Acrimonious letters and blogs weighed in, blaming drug companies for reaping in profits for pills that don’t work, blaming psychiatrists for prescribing them. While Louis Menand in the New Yorker and Judith Warner in an Op-Ed to the NY Times wrote more nuanced responses discussing both the difficulties and successes in diagnosing and treating depression, the resounding sound bite from the media coverage was “happy pills don’t work”.

What is the truth about depression and antidepressants? The truth is that major depression is a severe and disabling medically defined condition that affects 5% of people in the United States, is associated with a high suicide rate (90 percent of suicides have a history of depression) and is frequently complicated by drug and alcohol abuse. The World Bank’s Global Burden of Disease study found it to be the one of the leading causes of disability in the United States and other developed countries. Effective treatments exist for this prevalent and costly condition, including antidepressant medications and brain stimulation therapies.

The bigger picture is that most people with depression lack access to adequate care, and face barriers like ignorance, stigma, and poverty. Trained and experienced psychiatrists and other mental health professionals can make educated diagnoses and monitor treatment to ensure effective response. But most patients with depression are treated by general practitioners. Studies have shown that primary care doctors do not effectively screen their patients for depression before prescribing drugs, nor do they closely monitor their care during treatment. And many people with depression go completely undiagnosed and untreated.

Our work at Columbia Psychiatry and NYSPI leads the way forward in providing the best services to those who need help, discovering new treatments, and educating the psychiatrists of tomorrow. We must also help to diminish the confusion about psychiatric diseases, work with the media to disseminate useful information and fight stigma. And while we’re at it, let people know that antidepressant medications save lives by preventing suicides and improving the quality of life for millions of people.

\* Jay C. Fournier; Robert J. DeRubeis; Steven D. Hollon; Sona Dimidjian; Jay D. Amsterdam; Richard C. Shelton; Jan Fawcett. Antidepressant Drug Effects and Depression Severity: A Patient-Level Meta-analysis. JAMA, Jan 6, 2010; 303: 47 - 53.

### Antidepressants in the News: The Clinical Perspective

*(continued from cover)*

analysis of just six clinical trials, likely included patients who were neither the sickest nor the most severely depressed, but rather people whose depression is mild and perhaps brief. Such brief episodes often resolve on their own without the need for medication.

“Nobody’s going to strongly argue that you have to give antidepressants to people with mild depression, who don’t have chronic or recurrent illness, because we know the placebo response is very high in those people,” added Dr. McGrath. Even so, Ms. Schneider believes patients should have a say in how to manage their depression.

As someone who takes medication for severe depression, Ms. Schneider said “It’s really comforting to know that medication exists. I don’t know what I would do without it.”

The take-home message, then, is this: if you are suffering from depression, medication treatment can help significantly even in those individuals with dysthymia, a less severe form of depression that is chronic and associated with high rates of social impairment. Talking with a doctor about your symptoms and learning about the options will ultimately help in developing a treatment plan best suited to your needs.

In the meantime, clinical researchers like Dr. McGrath at NYSPI and Columbia Psychiatry are investigating methods to identify people with mild depression who really need treatment versus those who don’t. As it’s done since its inception in 1977, the Depression Evaluation Service will continue to lead major developments in psychiatry that will improve diagnosis and treatment for depression.







The American Foundation for Suicide Prevention has chosen **Victoria Arango, PhD**, (Molecular Imaging and Neuropathology Division) and her colleague Ghanshyam Pandey, PhD, of the University of Illinois to receive the 2010 Research Award for their collaborative work on psychological autopsies to understand the neurobiological characteristics of suicide. They will receive this award at the Lifesavers Dinner on Thursday, May 13, 2010.



**Erin Callahan** (PGY-II) was accepted into the 2010/2011 Shire Child and Adolescent Fellow of the APA. The APA/Shire Child & Adolescent Psychiatry Fellowship program was established in 2002 to interest general psychiatry residents in considering careers in child and adolescent psychiatry by providing specific educational opportunities unavailable to them otherwise.

A paper co-authored by **Aniruddha Das, PhD**, (Division of Neurobiology and Behavior) and published in the Proceedings of the National Academy of Sciences made Nature's list of favorite papers in Neurobiology published in 2009. The study published in October 2009 showed that "blood volume [as opposed to blood oxygen levels] is more tightly linked to neuronal activity and is thus a better measure to use in brain imaging."



**David Kahn, MD**, Vice Chair for Clinical Affairs, and **Sabrina Cherry, MD**, have both been awarded the American Psychiatric



Association's Irma Bland Award for Excellence in Teaching Residents. Dr. Cherry, a graduate of the residency program, is a Training and Supervising Analyst at the Psychoanalytic Center

**Eric Kandel, MD**, joined researchers from Yale, Rockefeller, the University of Parma and the Simons Foundation on the Charlie Rose Brain Series on Tuesday, January 19, 2010. This episode was the fifth in a series that Dr. Kandel, Director of the Kavli Institute for Brain Sciences, co-hosted.



**Laura Kent, MD**, one of our chief residents, has been selected as a participant to the Fifteenth Annual APA/APIRE Research Colloquium for Junior Investigators scheduled for Sunday, May 23, 2010.

**Dr. Bruce Link's** (Epidemiology) landmark study of New York State's mandatory psychiatric treatment, Kendra's Law, was published in February's Psychiatric Services journal. The study is the first to fully assess the merits of Kendra's Law, enacted in 1999 and due to expire this summer. The researchers found that it "...has lowered risk of violent behaviors, reduced thoughts about suicide and enhanced capacity to function despite problems with mental illness."

In December 2009, **Jeffrey Lieberman, MD**, was elected a Fellow of the American Association for the Advancement of Science (AAAS). Election as a Fellow is an honor bestowed upon AAAS members by their peers.



**Philip Muskin, MD**, (Chief of Service, Consultation-Liaison Psychiatry) received the Alan Stoudemire Award for Innovation & Excellence in

Consultation-Liaison Education from the Academy of Psychosomatic Medicine



**Maria Oquendo, MD**, (Residency Training Director) received the Rafael Tavares, MD, Award from the Association of Hispanic Mental Health Professionals in 2000 for outstanding research and clinical practice with Hispanics.

**Harold Pincus, MD**, Vice Chair for Strategic Initiatives, is part of a team receiving a 2010 National Committee for Quality Assurance (NCQA) Health Quality Award. This honor recognizes the team's collaboration in the wake of Hurricane Katrina to develop and implement a community-based care network focused on primary care and integrated behavioral health in New Orleans. Dr. Pincus helped design the overall payment and quality improvement model and was Co-PI of the Robert Wood Johnson Foundation grant underlying the integrated behavioral health strategy.



**Arielle Stanford, MD**, (Division of Brain Stimulation and Therapeutic Modulation) is now an associate member of the American College of Neuropsychopharmacology (ACNP). She was also accepted into the Irving Institute for Clinical and Translational Research's Reach for the First R01 Award course. The course's main objective is to provide Columbia University faculty a structured environment that will optimize chances of receiving a favorable score on the R01 submission. This award is aimed at those currently holding a NIH K award or equivalent and who are planning to submit an R01.

## Haiti Earthquake Sparks New Research



**Yuval Neria, PhD**, Director of the Trauma and PTSD Program at the New York State Psychiatric Institute, is collaborating with colleagues at Barry University in Miami, Florida on a study looking at the effects of the Haiti earthquake on people in South Florida.

The study now underway is assessing the impact of the disaster on family members and friends in South Florida, particularly in Miami. Dr. Neria and his collaborators will look at complicated risk, PTSD, depression, generalized anxiety disorder (GAD) as related to the degree and magnitude of the losses and devastation witnessed indirectly through family members, friends, and the media in the days and weeks following the earthquake.

## New Study Gives Clues to Schizophrenia's Cause

In what may provide the most compelling evidence to date, researchers at Columbia University Medical Center have illuminated how a genetic variant may lead to schizophrenia by causing a disruption in communication between the hippocampus and prefrontal cortex regions of the brain, areas believed to be responsible for carrying out working memory. Findings are published in the current online edition of *Nature*.

This discovery coincides with the 15th anniversary of the first identification of the link between schizophrenia and a genetic mutation – a microdeletion on human chromosome 22 – known as 22q11 deletion, by Columbia Psychiatry researcher Maria Karayiorgou, MD, a coauthor on the research. Previous studies have shown that approximately 30 percent of patients with this deletion will go on to develop schizophrenia.

“We know that this genetic deficit predisposes us to schizophrenia, and now we have identified a clear pathophysiological mechanism of how this deletion confers this risk for schizophrenia,” said Dr. Karayiorgou. Dr. Karayiorgou discovered the link between the 22q11 mutation and schizophrenia in 1995. Since then, Dr. Karayiorgou and Joseph A. Gogos, MD, PhD, a senior author on the research, have established and pursued research focusing on the neurobiology of this mutation.

Though schizophrenia is best known for its delusions and hallucinations, it is the disease’s impact on such cognitive abilities like working memory – a key element of executive functioning – that best predict how well a person will function in society.

Using a mouse model with the 22q11 deletion, senior authors Joshua Gordon, MD, PhD, and Joseph A. Gogos, MD, PhD, and their teams, recorded the neural activity of the mice while they performed a cognitive task of working memory, and found that their performance was either completely disrupted, or was impaired, compared to that of the healthy mice.

(Dr. Karayiorgou is professor of psychiatry, Dr. Gogos is associate professor of physiology and neuroscience, and Dr. Gordon is assistant professor of psychiatry at Columbia University Medical Center).

In healthy mice, the hippocampus sends spatial information to the prefrontal cortex, but in the mouse model of the 22q11 mutation there is a breakdown in the connection and this communication is either weakened or fails completely.

As part of the cognitive trial, the mice were tested as they navigated a t-shaped maze. In order to successfully complete the task, the mice had to recall the direction in which they traveled, and then choose to go in the opposite direction to receive their next reward. While the healthy mice easily learned the task, mice carrying the schizophrenia mutation took longer to master it, demonstrating a behavioral deficit of the task in the mouse model of schizophrenia.

“We found that successful completion of the task in our healthy mice required the two regions of the brain – the hippocampus and the prefrontal cortex – to work together, and in our mouse model, the information transfer was less efficient, or was unable to take place at all,” said Dr. Gordon.

In addition, the researchers reported that they were able to show the extent of the deficit in individual mice.

“There was a variation in how much of a deficit they showed, and that correlated with the degree of the behavioral deficit, so that for individual mice that have less communication between these structures, there was more of a behavioral deficit,” said Torfi Sigurdsson, PhD, a postdoctoral research scientist in Dr. Gordon’s laboratory at Columbia Psychiatry and a coauthor on the paper.

Recent human imaging studies have suggested the possibility that there may be abnormalities in the functional connectivity between the hippocampus and prefrontal cortex in schizophrenia, however, it remained unclear how such findings related to a cause of the disease, like that of a genetic risk variant, or if they were the result of the disease itself or medications used.

“Here we are really at the level of the individual cells, so our findings extend beyond patient studies by showing how disrupted connectivity can arise at the level of single neurons, as a result of a genetic risk variant,” said Dr. Sigurdsson.

Another strength of the study, according to the researchers, is that the communication can be measured directly between the two regions.

“It unequivocally establishes a deficit in that communication in a way that the early studies could not – not only because we can isolate the genetics of the disease, but we can also measure the connectivity between these structures directly,” said Dr. Gordon.

“The 22q11 deletion mouse model allows us to explore how these mutations alter brain function and the abnormal behavior that we

see in schizophrenia patients. This is exactly what our study and our research program on 22q11, in general, has accomplished,” said Dr. Gogos.

“We now know that one of the consequences of that deletion is to disrupt functional communication between these two brain regions, and we have evidence from the study that the disruption actually has an impact on a cognitive behavior that is disrupted in patients, so it gives us a really strong indication of how the deletion can contribute to the development of schizophrenia,” he added. “It is possible that similar abnormalities in functional connectivity may also account for other symptoms of the disease, and can be used to better assess treatment response, and, most importantly, to develop new medications.”

Next, the researchers plan to test the structural links between the hippocampus and prefrontal cortex, since it appears likely that synchrony between these two regions is mediated through anatomical connections. The researchers will examine how the anatomical and synaptic properties of these connections change in this mouse model and will aim to identify the genes that account for this change.

Authors of the Nature study are Torfi Sigurdsson, Kimberly L. Stark, Maria Karayiorgou, Joseph A. Gogos and Joshua A. Gordon.

This study was supported in part by the Simons Foundation, the National Institute of Mental Health (NIMH), and the Lieber Center of Schizophrenia Research and Treatment.

Contrary to popular belief, schizophrenia is not a split personality; it is a chronic, severe, and disabling brain disorder that affects just over one percent of the adult population and is characterized by loss of contact with reality (psychosis), hallucinations (usually, hearing voices), firmly held false beliefs (delusions), abnormal thinking, a restricted range of emotions (flattened affect) or inappropriate and disorganized behavior, social withdrawal, and diminished motivation.

The disease often strikes in the early adult years, and although many individuals experience some recovery, many others experience substantial and lifelong disability. People with schizophrenia often have problems functioning in society and in relationships and are over-represented on disability rolls and among the homeless and imprisoned.

What precisely causes schizophrenia is not known, but current research suggests a combination of hereditary and environmental factors. Fundamentally, however, it is a biologic problem (involving changes in the brain), not one caused by poor parenting or a mentally unhealthy environment.

## NARSAD Announces 2010 Distinguished Investigators

Columbia Psychiatry has the distinction of being the only institution to have four researchers awarded a NARSAD 2010 Distinguished Investigator Grant. After reviewing 170 proposals from researchers worldwide, NARSAD selected 15 researchers to receive its illustrious award. Each researcher will each receive \$100,000 annually in support of one year of research.

This year’s recipients are pursuing research that will address some of the biggest areas of growth in neuroscience research, including the study of genetic risk factors for mental illness, more effective use of brain stimulation techniques, cognition in schizophrenia, and better approaches to developing pharmacological treatments.



**Jonathan Javitch, MD, PhD**, “Mechanisms of Weight Gain in Patients with Schizophrenia” Dr. Javitch will use animal models to study the biochemical causes of weight gain, metabolic syndrome and diabetes in patients with schizophrenia who take antipsychotic medications.



**Sarah Lisanby, MD**, Columbia University, “New Method of Non-Invasive Brain Stimulation in Depression” Dr. Lisanby plans to refine a non-invasive method of brain stimulation, called Transcranial Magnetic Stimulation (TMS), to become more effective in alleviating symptoms of a broader range of psychiatric illnesses.



**Maria Karayiorgou, MD**, “Detailed Study of Genetic System Related to Schizophrenia” Dr. Karayiorgou recently discovered that alterations in the creation of chemicals called microRNAs arise as a result of a genetic abnormality (22q11.2 microdeletion) that leads to schizophrenia in many people who have the mutation.



**Bradley Peterson, MD**, “Brain Cortical Thinning as a Predictor for Mood Disorders” Dr. Peterson plans to use a novel brain marker to study the effectiveness of treatments in young adults at risk for developing major depressive disorder, and in individuals with depressive disorder.



## New Professorship Reception

Columbia Psychiatry celebrated the establishment of the Lieber Professorship in Experimental Therapeutics (in Psychiatry) with a reception on Tuesday, March 9, 2010 at the The Donald F. Tapley Faculty Club. Pictured, seated and center, is Mrs. Constance Lieber. From left to right, standing, are Lee Goldman, M.D., Dean of the Faculties of Health Sciences and Medicine, Executive Vice President for Health and Biomedical Sciences at Columbia University Medical Center; Mr. Stephen Lieber; Jonathan A. Javitch, M.D., Ph.D., Professor of Psychiatry and Pharmacology, and the professorship's first incumbent; Jeffrey A. Lieberman, M.D., Lawrence C. Kolb Professor and Chairman of the Columbia University Department of Psychiatry.



## Major Gift to Columbia University College of Physicians and Surgeons and Weill Cornell Medical College to Establish The Mortimer D. Sackler, M.D., Prize for Distinguished Achievement in Developmental Psychobiology

\$100,000 Award Will Be Granted Jointly Every Two Years to Honor the Contributions of Mortimer D. Sackler, M.D., to Understanding the Biology of Psychiatric Illness

NEW YORK (March 29, 2010) — Columbia University College of Physicians and Surgeons and Weill Cornell Medical College are pleased to announce a major gift from The Mortimer D. Sackler Foundation to establish an endowed prize in developmental psychobiology.

The Mortimer D. Sackler, M.D. Prize for Distinguished Achievement in Developmental Psychobiology recognizes researchers who have advanced our understanding of how early brain development influences the mind and behavior throughout life. The prize aims to foster international cooperation among scientists and promote public understanding of their work. The prize will be presented jointly every two years by The Sackler Institute for Developmental Psychobiology at Columbia University College of Physicians and Surgeons and The Sackler Institute for Developmental Psychobiology at Weill Cornell Medical College.

The new prize honors the late Mortimer D. Sackler, M.D., who was an innovative scientist in the field of developmental psychobiology. Dr. Sackler began his career as a psychiatrist and pioneer researcher in biological psychiatry in the late 1940s at Creedmoor State Psychiatric Hospital in Queens, New York. During this early period he published a series of papers that emphasized the biology of psychiatric illness. In the late 1950s Dr. Sackler, with his brothers, founded the pharmaceutical company Purdue Pharma, where he served as co-chairman until his recent death in 2010.

Throughout his medical and pharmaceutical career, Dr. Sackler simultaneously engaged in an extraordinary mission of philanthropy. The Mortimer D. Sackler Foundation endowed The Sackler Institutes of Developmental Psychobiology at Weill Cornell and Columbia, as well as The Sackler Institutes at the University of Glasgow, University of Edinburgh, McGill University in Montréal, and most recently at

the University of Sussex, England. His many awards included the first award for scientific research by the Medical Society of New York and the French Legion of Honor, and he was appointed as a knight of the Order of the British Empire.

Born in Brooklyn, New York, Dr. Sackler received his Bachelor of Arts degree from New York University, attended the Anderson College of Medicine in Scotland, and received his medical degree from the Middlesex University School of Medicine in Massachusetts. He completed his internship and residencies at Harlem Hospital in New York City and the Creedmoor State Psychiatric Hospital.

Dr. Sackler died on March 24, 2010 in Gstaad, Switzerland, at the age of 93.

"We are so honored for this generous gift, which will enable The Sackler Prize to become a tradition at Columbia and Weill Cornell for many years to come," said Lee Goldman, M.D., Executive Vice President and Dean of the Faculties of Health Sciences and Medicine at Columbia University Medical Center. "The work that the gift will support promises to establish and build upon the fundamentals for studying psychiatric disorders, and, notably, to expand the library of knowledge about normal development."

"We are enormously grateful to The Mortimer D. Sackler Foundation for their longstanding support of biomedical research, particularly their leadership in the area of developmental psychobiology," said Dr. Antonio M. Gotto Jr., the Stephen and Suzanne Weiss Dean of Weill Cornell Medical College. "The Sackler Prize will recognize and encourage research that builds on Dr. Sackler's pioneering work in this area, with the goal of increasing understanding of the biological mechanisms underlying human development and working toward new treatments for conditions ranging from learning disabilities to autism and substance abuse."

"This award honors the important work Dr. Sackler did in the field of developmental psychobiology, a term he used many years before

it became a recognized field of research in the late 1960s, and before it was realized that so many adult mental illnesses have their origins in early development,” said Myron Hofer, M.D., Director of the Columbia Sackler Institute, and The Sackler Institute Professor of Developmental Psychobiology at Columbia University Medical Center and the New York State Psychiatric Institute. “As the first prize to recognize interdisciplinary research on the developmental processes of brain, behavior and mind as a primary field of research, it will have a major impact on the field.”

“Rarely do we get the wonderful opportunity to acknowledge pioneers in the field of developmental psychobiology,” said B.J. Casey, Ph.D.,

the Sackler Professor of Psychiatry and director of The Sackler Institute for Developmental Psychobiology at Weill Cornell Medical College. “These individuals have paved the road to understanding mental illness and health from a neurodevelopmental perspective. This award will not only recognize these leaders, but also highlight the importance of this perspective and Dr. Sackler’s vision.”

Weill Cornell will give the first presentation of the endowed prize in 2010; the two institutions will alternate in presenting the award biennially. The recipient will give grand rounds at both medical schools, as well as participate in formal workshops at both institutes.

## Gray Matters at Columbia - to Celebrate and Support Fellowships for Young Scientists at Columbia Psychiatry Exhibiting Outstanding Performance in the Genetics of Brain Disorders.

Please join us as we support the science that solves the mystery of Brain Disorders

### GRAY MATTERS AT COLUMBIA SPRING BENEFIT LUNCHEON

TUESDAY, MAY 11, 2010  
THE PLAZA HOTEL

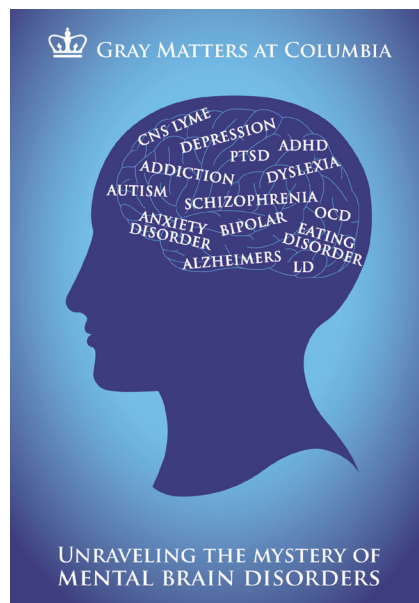
Fifth Avenue at Central Park South, New York City  
11:00 am - Arrivals & Cocktails  
12:00 pm - 2:00 pm - Luncheon and Program

Welcoming Remarks ~ Farah Moinian & Jennifer Weis Monsky

Master of Ceremonies ~ Donna Hanover

**Special Guest Speaker**  
**Paula Zahn**

Keynote Speaker ~ Jeffrey A. Lieberman, M.D.  
Chairman, Department of Psychiatry, Columbia University



Kindly RSVP by April 27th

**Purchase Tickets**  
GRAY MATTERS AT COLUMBIA  
SPRING BENEFIT LUNCHEON

Individual underwriting has been made possible by Dr. Patricia Cayne, Mrs. Patricia Rosenwald and Mrs. Charlotte Ford, who have continued to be most supportive of our efforts since the beginning. Corporate underwriting is being generously provided by Novartis Pharmaceuticals Corporation. We are grateful for this collective support and would like to express heartfelt thanks to our sponsors for their inspired dedication to our cause.

## Lieber Recovery Clinic Benefit Event



(Pictured l to right:) Alice Medalia, PhD, Eric R. Kandel, MD, Mr. Stephen Lieber, Mrs. Constance Lieber, Jeffrey A. Lieberman, MD

On Thursday, March 18, 2010, Columbia Psychiatry Chairman Jeffrey A. Liberman, M.D. hosted a cocktail reception at The Scarsdale Golf Club to benefit the Lieber Recovery Clinic. Dr. Lieberman opened the program and welcomed special guest speaker Eric R. Kandel, M.D., Director of the Kavli Institute for the Brain at Columbia University Medical Center and a distinguished University Professor. Alice Medalia, Ph.D., Director of the Lieber Recovery Clinic, made closing remarks. Dr. Kandel concluded the evening with a book signing for the guests, who also had the opportunity to bid on items in the event’s large silent auction.

The mission of the Lieber Recovery Clinic is to provide highly personalized, state of the art psychiatric treatment for persons with severe and persistent mental illnesses, with the goal of treatment being recovery to optimal functioning and independent living. The Lieber Clinic is an integral part of the well-known Columbia Day Treatment Program, which has been helping patients for over 25 years and, together with all of Columbia Psychiatry, believes that quality clinical care and recovery should be a right for everyone with mental illness.

Columbia Psychiatry extends sincere thanks to The Bowman Family Foundation for generously underwriting the event, which raised more than \$32,000 for the Clinic.



## New Grants



**Jeffrey Miller, MD**, (Molecular Imaging and Neuropathology) received an NIMH K award for his project, "The Neurochemistry of Cognitive Therapy: Predicting Treatment Outcome with PET." The five-year award totals \$930,960.

The purpose of this study is to identify predictors of treatment outcome with cognitive behavioral therapy for depression. PET imaging of the serotonin 1A receptor, as well as neuropsychological assessment of a specific type of learning called reversal learning, will be conducted prior to standardized cognitive behavioral therapy for depression. The long-term goal of this work is to facilitate matching of individual patients to specific treatments that are most likely to be effective.



**Erum Nadeem, PhD**, (Division of Mental Health Services and Policy Research) has been awarded a 5-year K01, "Improving Evidence-Based Trauma Care in Schools through Community Partnerships." The award totals \$617,757. This award will allow Dr. Nadeem to continue to conduct research designed to improve school-based mental health services for ethnic minority children and families.



**Tarique Perera, MD**, (Geriatric Psychiatry) has been awarded a 5-year RO1 NIH grant, "Necessity of Neurogenesis for Antidepressant Efficacy: A Nonhuman Primate Model." The award seeks to determine whether reduced neurogenesis leads to depressive behavior in non-human primates (NHPs) and whether stimulating neurogenesis is necessary for antidepressants to reverse these depressive behaviors in NHPs. The total grant award is \$1,421,923.

A K23 from the National Institute of Mental Health was awarded to **Bret Rutherford, MD**, (Clinical Therapeutics) to support his project,

"Placebo Effects in the Treatment of Depression: Cognitive and Neural Mechanisms." The total award over five years is \$930,960.

Dr. Rutherford's research aim is to investigate the cognitive and neural mechanisms of placebo effects in the treatment of Major Depressive Disorder (MDD). The clinical trial will randomize adult outpatients with MDD to 8 weeks of treatment in high vs. low expectancy conditions and using functional Magnetic Resonance Imaging (fMRI) paradigms to investigate pre- and post-treatment activation differences in brain regions that have been associated with placebo effects and the pathophysiology of MDD.



**Joel Sneed, PhD**, (Geriatric Psychiatry), received a perfect priority score of 10 on an R21 submission to NIMH ("Vascular Depression in African Americans: Phenomenology, Treatment Response, and Course of Illness") to establish the feasibility of conducting mental health research in an inner-city, public hospital (Harlem Hospital) in order to evaluate the clinical profile, course of illness, and characteristic response to antidepressant

treatment among African Americans with vascular depression. Dr. Sneed's total award over two years is \$450,000.

**Robyn Sysko, PhD**, (Clinical Therapeutics) received a K23 award from the National Institutes of Diabetes and Digestive and Kidney Diseases for "Facilitating Health Behavior Change among Morbidly Obese Adolescents." The total grant award is \$930,736 for a five-year period.

Dr. Sysko hopes to determine the prevalence of clinically significant behavioral and psychological problems among seriously overweight adolescents in a bariatric surgery program; to compare presenting psychological symptoms between obese adolescents seeking bariatric surgery and other treatment-seeking obese adolescents; and to develop and test the feasibility, acceptability, and preliminary effectiveness of a psychological intervention to reduce mood and eating disturbances in a bariatric surgery population.

## AlumniNews

Attending the APA in New Orleans? Please join past and present friends and colleagues following the convocation of the 2010 annual meeting of the American Psychiatric Association at the APA Annual Meeting Reception hosted by NewYork-Presbyterian Hospital, Weill Cornell Medical College Department of Psychiatry and Columbia University Department of Psychiatry. The reception will be held on Monday, May 24th from 7:00-9:30 PM at LaTrobe's on Royal at 403

Royal Street in the French Quarter.

Congratulations to **Dr. Steven Hylar**, President of the Columbia Psychiatry Alumni Association for the last 15 years, who will be there in person to receive the 2010 Alumni Award, honoring him for his long and dedicated service.





**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 [morrisd@pi.cpmc.columbia.edu](mailto:morrisd@pi.cpmc.columbia.edu).

## 1970s

**Richard Friedman, MD**, class of 1978, received The Sigourney Award in 2009 from the International Psychoanalytic Association and Sigourney Trust for distinguished contributions to the field of psychoanalysis.

**Philip Muskin, MD**, class of 1978, received a best book award for his book, *How to Use Herbs, Nutrients and Yoga in Mental Health Care*. It was the winner in the "Health: Alternative Medicine category" of the National Best Books 2009 Awards, sponsored by USA Book News.

**John Oldham, MD**, class of 1971, and former Director of the New York State Psychiatric Institute, won the race for president-elect of the American Psychiatric Association (APA). He will assume this role in May and take the post of president in May 2011, leading more than 38,000 APA members worldwide.

## 1990s

**Adele Tuttle, MD, PhD**, class of 1995, is now Assistant Clinical Professor of Psychiatry at Columbia and at Weill Cornell and a faculty member at the New York Psychoanalytic Institute. She was also awarded the 2009 Karl A. Menninger Award of the American Psychoanalytic Association for psychoanalytic writing. The title of the winning paper was "Design as Dream and Self-representation: Philip Johnson and the Glass House of Atreus".

## 2000s

**Claire Holderness, MD**, class of 2000, was promoted to the rank of Associate Clinical Professor of Psychiatry.

**Kelli Harding, MD**, class of 2006, is currently the Assistant Director of Medical Student Education at NYSPI. She writes, "I spend my free time serving on the Board of Directors of the American Association of Medical Colleges (AAMC) and, most importantly, playing with my two boys, Max (2) and Ryan (5 months)."

## HIV Center Initiatives in the Middle East and North Africa

*(continued from cover)*

As part of an effort to enhance the capacity of the Middle East and North Africa (MENA) region to address HIV prevention, care, and treatment, the HIV Center has begun a series of new initiatives over the past three years. "Because HIV seroprevalence is still believed to be relatively low in most of the Middle East and North Africa, we have an opportunity to try to get ahead of the epidemic in a way that has not been possible in other parts of the world," noted HIV Center Director Anke A. Ehrhardt, Ph.D. "However, the region also faces a number of significant challenges, including an exceptionally young population and considerable gender inequality. Our goal is to work with the many excellent behavioral scientists in the region to help improve prevention interventions and to assist with crafting effective public policies."



This area of emphasis reflects the HIV Center's steadily growing international portfolio, which now includes nearly two dozen projects on four continents: North America, South America, Africa and Asia, with current studies in South Africa, Lesotho, Argentina, Brazil, China, Vietnam, and the Dominican Republic. "Our work in the MENA region and elsewhere is closely aligned with NYSPI's overall increasing orientation to global mental health," said Dr. Ehrhardt. "Around the world, we find similar issues in the context of the HIV epidemic: stigma, discrimination, depression, substance use and other mental health problems."

The first major undertaking in the MENA region was the participation of Dr. Ehrhardt in a high-level workshop in Tunis, Tunisia in 2007 which brought together scientists from Morocco, Algeria, Libya, Tunisia, Egypt, Lebanon and Jordan with a focus on multidisciplinary approaches to prevention and management of HIV/AIDS. In April 2008, the HIV Center co-sponsored an international workshop at the American University in Cairo on gender and HIV to define a research agenda. During the Cairo workshop, key opinion leaders and researchers from countries including Morocco, Egypt, Yemen, Jordan, Lebanon, Saudi Arabia and the US worked through the most promising ways to concretely link AIDS, feminism, and the women's movement while expanding notions of masculinity. The Cairo meeting produced action items and concrete recommendations that other prevention researchers, clinicians, and policymakers can use as they plan their work in this area. The resulting papers were published in a July 2009 supplement of the *Journal of AIDS*.

With support from NIMH, the HIV Center next co-sponsored a workshop on stigma and HIV infection, held in Rabat, Morocco in October 2009. The meeting included experts in the behavioral, social, and biomedical sciences from the HIV Center, UCLA, and Morocco, including Rajae El Aouad, M.D., Director of the Moroccan National Institute of Hygiene, who also met with Drs. Lieberman and Ehrhardt at NYSPI in March. The focus of the workshop was on improving existing regional programs and strategies that target stigma reduction and developing programs for the scientific characterization and measurement of HIV/AIDS stigma in the region. Most recently, the HIV Center has received funding from the Office of AIDS Research (OAR) at the National Institutes of Health (NIH) for a one-day follow-up meeting this summer at the International AIDS Conference in Vienna.

## Global Initiatives in Residency Training

As the trend towards globalization continues, both industry and academic medicine are extending their reach in order to remain competitive and relevant. At the same time, it has become increasingly apparent that larger, superbly staffed and equipped educational institutions such as Columbia Psychiatry's Residency Training Program can become even more valuable resources by developing research training programs for trainees from around the world who can benefit from state of the art scholarship in research methodology.

As a result, the Department is piloting an International Program for Research Training in Psychiatry in Colombia beginning in 2011. Despite the lack of a formal infrastructure, the Department has previously built relationships with faculty members in Europe, principally Spain and Italy, to instruct young psychiatrists interested in research. Over the years, a number of these exceptionally talented and driven researchers have gone on to launch promising careers conducting exciting, cutting edge research: **Enrique Baca-Garcia, MD, Fernando Burguillo, MD, Lucas Giner, MD, Juan Jose Carballo, MD, and Mercedes Perez Rodriguez, MD.**

Columbia's reputation and accomplishment in shaping careers are such that the training here has continued to attract stellar candidates interested in availing themselves of the department's research acumen despite the lack of a formal program.

"In developing the careers of energetic, bright, new investigators, this approach of training and mentoring psychiatrists from other countries, especially developing countries, is an excellent strategy for reducing the burden of mental illness and the terrible stigma associated with it," said Maria Oquendo, MD, Vice Chair for Education at the Department of Psychiatry at Columbia University and the New York State Psychiatric Institute (NYSPI). This argument is congruent with knowledge that the World Health Organization (WHO) has compiled through its World Mental Health Survey assessing the effects of mental illness in 30 countries worldwide, and the barriers to effective intervention implementation. Dr. Oquendo's outreach to Latin American trainees acknowledges the idea that, according to Ronald Kessler, PhD, co-director of the WHO's survey initiative, "Human capital investments are of considerable importance." It is anticipated that once fellows graduate from the program they will remain linked to the department, thereby helping to sustain a relationship for future collaborations.

A total of two fellows will be accepted into the program per period, each a minimum of 6 months to a maximum length of a year. Candidates will participate in a rigorous process and face a selection committee comprised of senior researchers. Dr. Oquendo, in consultation with the committee, will match fellows with supervisors from the Molecular Imaging and Neuropathology Division, the Lieber Schizophrenia Research Center, the Substance Abuse and, Child and Adolescent Psychiatry Divisions, and other major research divisions and centers at NYSPI and Columbia University, based on the interests of each fellow.

## The Department of Psychiatry is Pleased to Welcome Our 2010-2011 PGY1 Residents



**MARRA G. ACKERMAN**  
New York University  
School of Medicine



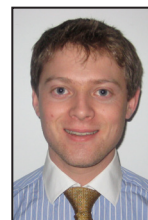
**MOHSIN S. AHMED**  
Columbia University  
College of Physicians  
and Surgeons



**RACHEL A. CARAVELLA**  
Georgetown University  
School of Medicine



**ENRICO G. CASTILLO**  
University of Pittsburgh  
School of Medicine



**Yael HOLOSHITZ**  
Mount Sinai School  
of Medicine of  
New York University



**GARY "SEAN" ESCOLA**  
Columbia University  
College of Physicians  
and Surgeons



**RYAN E. LAWRENCE**  
University of Chicago  
Division of the Biological  
Sciences The Pritzker  
School of Medicine

**ELIZABETH A. HORSTMANN**  
Harvard Medical School



**SARAH L. RICHARDS KIM**  
Columbia University  
College of Physicians  
and Surgeons



**MAYUMI OKUDA BENAIDES**  
Pontificia Universidad  
Javeriana



**SEAN X. LUO**  
Columbia University  
College of Physicians  
and Surgeons



**LARRY U. OZOWARA**  
Stanford University  
School of Medicine

## Update on Outpatient Programs

Columbia Psychiatry's outpatient programs continue to grow. These programs are proud to collaborate with referring providers in primary care, Ob/Gyn and other specialties, and working closely with, as well as referring to, private mental health professionals. Our full-time faculty provide consultation and ongoing care to adults as well as to specialized groups of children and adolescents at both the CUMC campus and midtown Manhattan.

You can reach all programs through one number, 212-305-6001, and you can find more details at [www.columbiapsychiatry.org](http://www.columbiapsychiatry.org). Here are brief descriptions and local phone numbers:

### Adult Psychiatry

**Midtown: Columbia Psychiatry Eastside at 16 East 60th Street (212-326-8441)**

- Expert consultations and second opinions regarding diagnosis and treatment
- Psychopharmacology for mood, anxiety, attention-deficit and psychotic disorders
- Columbia Day Program, providing structured treatment for college-age individuals through older adults, with specialized programs for people with:
  - Eating, addictive, or personality disorders, using evidence-based group psychotherapies including DBT
  - Psychotic disorders, using cognitive remediation, rehabilitation, life-coaching and supportive services

**CUMC: Columbia Psychiatry Clinics, Neurological Institute 12th Floor (212-305-6001)**

- Intensive Outpatient Program for crisis care, urgent evaluations, and short term treatment
- Psychopharmacology, with availability of reduced fees through our training clinic
- Women's Mental Health, with expertise in pregnancy and hormone-related mood disorders
- Specialty Clinics: Brain stimulation (transcranial magnetic stimulation for depression), neuropsychological assessment, light treatment, Lyme Disease, and Buprenorphine treatment of opiate addiction

### Child and Adolescent Psychiatry

**Midtown: CUCARD - Columbia University Center for Anxiety and Related Disorders, on the West Side at 3 Columbus Circle (212-246-5747)**

- Comprehensive evaluation and cognitive-behavior therapy for children and teens with anxiety, phobias, separation problems, obsessive compulsive disorder, depression
- Convenient hours, working closely with parents and schools

**CUMC: Developmental Neuropsychiatry Program for Autism and Related Disorders, Eye Institute, 4th Floor (212-342-1600)**

- Evaluation and treatment of neurodevelopmental disorders that affect socialization and communication, including autism and related autistic spectrum disorders
- All ages: pre-school, children, teens and adults
- Multidisciplinary, including psychiatry, neuropsychology, pediatrics, neurology, and learning specialists



## ResearchStudies

UPTOWN  
Columbia University Medical Center  
1051 Riverside Drive at 168th St.  
A,C or 1 train to 168th Street



# COLUMBIA PSYCHIATRY

[WWW.COLUMBIAPSYCHIATRY.ORG](http://WWW.COLUMBIAPSYCHIATRY.ORG)

MIDTOWN  
1775 BROADWAY AT 58TH STREET  
A,B,C,D,N,R or 1 train  
to 59th Street

### WHAT IS a RESEARCH STUDY for MENTAL ILLNESS?

- Research studies help us to learn about mental illnesses & how to treat them.
- Many studies also provide established or new treatments for depression, anxiety, and other mental illnesses at no-cost.
- Call today and find out if participating in a research study is right for you!

Call **212-305-6001** or one of the numbers below, or go online to [www.columbiapsychiatry.org](http://www.columbiapsychiatry.org) to find out **how to help and get help**.

**Medication Treatment of Depression**  
CALL 212-543-5734

**New, Non-drug Treatments (TMS) for Depression, Anxiety & Schizophrenia**  
CALL 212-543-5767

**Research Study of Depressed Parents and their Children**  
CALL 212-543-6659

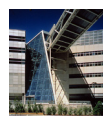
**Low-fee Psychoanalysis - The Columbia University Center for Psychoanalytic Training & Research -**  
CALL 212-927-0112

**Psychotherapy Treatment for Posttraumatic Stress Disorder (PTSD)**  
CALL 212-543-6747

**COPE - Evaluation and Treatment for Socially Isolated Teens Experiencing Unusual Thoughts or Perceptions**  
CALL 212-543-5874

**Healthy volunteers are needed to help find answers about the causes and treatments of mental illnesses.**  
CALL 212-543-6639

**Help end your Opiate Habit (heroin, vicodin, oxycodone)**  
CALL 212-923-3031  
(ask for the VIP Study)



One of the world's pre-eminent centers for psychiatric research and clinical care, **Columbia Psychiatry** carries out studies investigating treatments for illnesses like major depression, anxiety disorders, and schizophrenia. Listed here are details of some of our no-cost studies that are currently seeking participants. Call any of them for further information, or call 212-305-6001 for help in finding the right study for you.

**The Depression Evaluation Service** offers a variety of studies for depression. If you are feeling sad, blue, lack energy, or have had treatment that hasn't helped, you may be eligible for a **medication treatment study**. For a free evaluation call 212-543-5734, and for more information email [desk@pi.cpmc.columbia.edu](mailto:desk@pi.cpmc.columbia.edu) or look online at [www.depression-nyc.org](http://www.depression-nyc.org)

**What happens to children whose parents have been depressed?** One research study is finding out what happens to children when their parents recover from depression. Parents and children (ages 7-17) will be interviewed in this non-treatment study. All participants will be compensated for their time and effort. For more information please call 212-543-6659.

**New, non-drug treatments** are also available through participation in research studies. Columbia's Division of Brain Stimulation offers Transcranial Magnetic Stimulation (TMS) studies for medication resistant depression, anxiety, and schizophrenia. For more information please call the Brain Behavior Clinic at 212-543-5767 or email [depression@columbia.edu](mailto:depression@columbia.edu) or [bbclinic@columbia.edu](mailto:bbclinic@columbia.edu).

**The Psychoanalytic Center for Training and Research** at Columbia offers diagnostic consultations at **low fees for psychoanalysis** to adults and children throughout the metropolitan area. If psychoanalysis is not the best treatment at this time, referrals for other forms of treatment can be arranged. For more information please call the Psychoanalytic Center at 212-927-0112 or visit <http://www.columbiapsychoanalytic.org>.

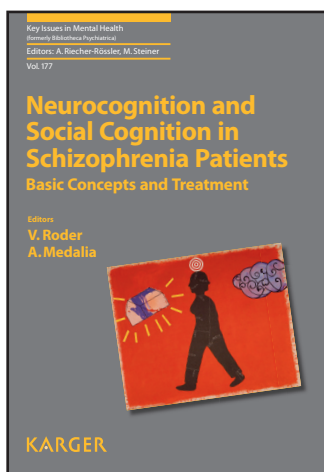
**If you are suffering from Posttraumatic Stress Disorder (PTSD)**, you may be eligible to receive one of three 14-week **psychotherapy treatments** at no-cost in a research study at Columbia's Anxiety Disorders Clinic. For more information, please call the Anxiety Disorders Clinic at 212-543-6747.

Columbia Psychiatry offers help for those who have **problems with opiate addiction: heroin, vicodin, or oxycodone, for people who are on probation or parole**. The **VIP study** is conducting research aimed at helping you end your opiate habit. This is a study to find out if psychosocial treatment and the medication Naltrexone can help people on probation or parole remain free of opiates. All information is kept strictly confidential. Eligible participants are compensated for their time and travel and receive treatment at no cost. For information call 212-923-3031 and ask for the VIP Study.

The **Center of Prevention and Evaluation (COPE)** has research studies offering evaluation and free treatment for **teens and young adults** who are **socially isolated** and experiencing **unusual changes** in thoughts, feelings, or perceptions. Call COPE at 212-543-5874 for more information.

**Columbia Psychiatry is internationally recognized for research and treatment of mental illness.**





## NEUROCOGNITION AND SOCIAL COGNITION IN SCHIZOPHRENIA PATIENTS; BASIC CONCEPTS AND TREATMENT

**Editors:** Volker Roder, PhD, and Alice Medalia, PhD

**Publisher:** Karger Press

**February 2010**

In this publication, world-renowned experts summarize the latest research on approaches to assessing and treating cognition in schizophrenia. The book takes the reader from definitions and assessment of cognition, to research on the relevance of cognition in everyday life, to chapters that focus on treatments for cognitive disorders. The reader will learn about the NIMH MATRICS initiative that has provided clinicians and researchers with the tools to define and assess neuro- and social cognitive functioning in people with schizophrenia. The treatments for neuro- and social cognitive deficits are also discussed in several chapters, giving an overview of cognitive remediation approaches accompanied by concrete treatment examples.

This publication is essential reading for clinicians and researchers in the fields of psychiatry and psychology, as well as for students and other professionals working with people who have schizophrenia.



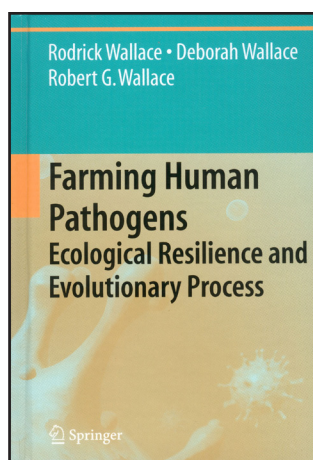
## SMOKE-FREE IN 30 DAYS: THE PAIN-FREE, PERMANENT WAY TO QUIT

**Author:** Daniel Seidman, PhD

**Publisher:** Simon & Schuster

**December 2009**

*Smoke-Free in 30 Days* provides tailored programs for a wide variety of smokers to help them overcome the varying obstacles that they face. It guides smokers through a 30-day program, complete with a day-to-day calendar, offering step-by-step directions on how to become successful nonsmokers. Readers will learn how the reasons given for smoking in early ads and Hollywood movies continue to form a key part of the mythology surrounding smoking addiction. Clear explanations and clarification on the most effective use of Nicotine Replacement Therapies (NRT) and other medications are provided. A big problem for some smokers is that they use NRT incorrectly and have many misconceptions about it. This book provides sound advice on how to get the most mileage from what NRT has to offer; information that is not readily available elsewhere such in a user-friendly format.



## FARMING HUMAN PATHOGENS: ECOLOGICAL RESILIENCE AND EVOLUTIONARY PROCESS

**Authors:** Rodrick Wallace, PhD, Deborah Wallace, PhD, Robert Wallace, PhD

**Publisher:** Springer

**May 2009**

*Farming Human Pathogens* describes how punctuated shifts in ecosystems can entrain patterns of gene expression and organismal evolution. The development is applied to several infectious diseases that have evolved in response to the world as humans have made it. Many pathogens emerging from underneath epidemiological control are 'farmed' in the metaphorical sense, as the evolution of drug resistant HIV makes clear, but some, like influenza, emerge quite literally as the result of new practices in industrial farming. Effective disease control in the 21st century must necessarily involve broad economic and social reform for reasons embedded in the basics of pathogen evolution.