Pennsylvania Hospital has a new Psychiatry inpatient unit – and a lot more besides.

In July 2008, the Psychiatry inpatient unit on Founders 11 at the Hospital of the University of Pennsylvania (HUP) was relocated to Pennsylvania Hospital (PAH). This consolidation, mutually planned and implemented by the Department of Psychiatry and PENN Medicine, created two acute adult inpatient units at PAH totaling 42 beds – a new 18-bed psychiatric inpatient unit on Spruce 6 joining the existing 24-bed unit on Spruce 4.

Dedicated Department clinicians and staff worked diligently to manage the inevitable disruptions that accompanied the move, and the end result has been worth the extraordinary effort. The Spruce 4 unit continues to provide comprehensive, acute, short-term assessment and treatment for adult patients presenting a wide variety of psychiatric symptoms and conditions. The service collaborates closely with many mental health and social service agencies and private providers to meet the medical and social support needs of patients returning to the community.

The new unit on Spruce 6, already busy, expands the scope of these clinical services by extending inpatient product offerings to patients with co-morbid medical/psychiatric illnesses, mood disorders, and to geriatric patients as well.

These clinical services will be accompanied by innovative academic programs which combine clinical, teaching, and research components. The Department’s world-class residency program has shifted its inpatient Psychiatry resident rotations from HUP to PAH, and there will be increased opportunities for medical student rotations. Integrated academic and clinical programs are already being developed and extended to PAH such as the Penn Comprehensive Depression Center, which includes the Women’s Mental Health and Wellness Program, collaboratively planned with the Department of Obstetrics and Gynecology, and the Psychiatric Neuromodulation Program. The Geriatric Psychiatry/Neurodegeneration Program, well-established on the HUP campus, is also being expanded to PAH.

These new and expanded clinical services and academic programs join a vigorous Psychiatry presence at PAH. For a decade, PAH has been Penn’s community psychiatry hub for Center City and South Philadelphia residents needing psychiatric services. PAH’s community mental health center, Hall-Mercer Community Mental Health Center, runs approximately 30 active outpatient programs in infant, child, adult and family care. Specialty programs at PAH include homeless outreach, the Asian Behavioral Health Program, and the Bereavement Program, a collaboration with the Joan Karnell Cancer Center. There is also a 24-hour Crisis Response Center

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Chairman’s Report

A central pillar of President Gutmann’s Penn Compact is the call to the University community to “engage globally...to advance the central values of democracy and to exchange knowledge that improves the quality of life for all.”

It’s a tall order worthy of a great University and one, I believe, we are meeting as a department. In fact, I think that we are truly a “seven continent-plus department”, and I’d like to take you for a quick trip around the world - and beyond! – to tell you why.

Global Leaders – For starters, Department faculty are leaders in the most prestigious international and national organizations representing Psychiatry and its sub-specialties. In the past decade, ten faculty members have served or are serving as President of thirteen of these distinguished bodies.

North America – The Chair Report in the Fall 2007 Penn Psychiatry Perspective listed some of our local community programs, some with national reach. And, of course, since the Department’s home base is the U.S., faculty programs are well-represented throughout North America.

A large number of departmental programs operate in less familiar territory, however, and a few select examples suggest our extra-continental reach.

Asia – The Department has a particularly strong presence in Asia. Edna Foa, PhD and her colleagues in the Center for the Treatment and Study of Anxiety have circled the globe to educate the public and health care professionals about post-traumatic stress disorder resulting from both natural and man-made events. In Asia, they have spoken to groups in Pakistan, Thailand, Indonesia, Israel, Japan, and South Korea, as well as to groups in Europe (Iceland, Norway, Switzerland, and Austria) and the U.S. The psychological aftermath of the tsunami in Southeast Asia has been a major recent focus.

Since 2004, David Metzger, PhD has been the Protocol Chair of a large NIH-funded clinical trial investigating the efficacy of two medication-based approaches for the treatment of heroin injectors in Thailand and China, the first randomized trial of the impact of drug treatment on the acquisition of HIV infection. Dr. Metzger is also involved in other research and education projects in Thailand and Vietnam, and in the African nation of Botswana.

Adrian Raine, PhD and his Center for Neurocriminology are engaged in research studies in China, Singapore, and South Korea, as well as in Africa and the U.S., on the etiology and treatment of antisocial and violent behavior in children and adults.

Africa – John Jemmott III, PhD and his colleagues in the Center for Health Behavior and Communication have NIH research programs to reduce risky sexual behavior among adults and youth in Botswana and the Republic of South Africa in sub-Saharan Africa, Jamaica in the Caribbean, and among African Americans and Latinos in the U.S. His work in Africa has been noteworthy. As just one example, Dr. Jemmott and his wife Loretta Sweet Jemmott, PhD have worked with sixth-grade students in South Africa’s Eastern Cape Province to design a sex education curriculum to limit unsafe sexual behavior which often leads to HIV infection and AIDS.

Europe – Many faculty work closely with colleagues across Europe and lecture there frequently. Four Department faculty are leaders in major on-going programs. George Woody, MD has worked closely with colleagues in Russia on a number of NIH projects related to addiction and HIV. Among other ventures, he has worked with the Medical University of Irkutsk to develop an educational program to better integrate HIV and addiction treatment in Russia, and he is also working with the Post-Graduate Medical Training Institute in Irkutsk to establish programs to screen for HIV and substance use in primary care settings.

Raquel Gur, MD, PhD and Ruben Gur, PhD have established a collaboration with Aachen University that includes a training program in schizophrenia and autism funded by the German Science Foundation. Twenty-four MD and PhD students from around the world are participating. James Coyne, PhD facilitates exchanges of doctoral students, fellows, and junior faculty between Penn and University of Groningen in the Netherlands.

South America and Australia – In recent years, Cory Newman, PhD and the faculty in the Center for Cognitive Therapy have given continuing education lectures in Argentina and Brazil, as well as in the “land down under”, and Peter Bloom, MD, featured in this issue’s Voluntary Faculty Profile, has been an Honorary Member of the Australian Society of Hypnosis since 1984. And now for some really out-of-the-way destinations.

Antarctica – You thought we couldn’t possibly be here, but David Dinges, PhD, as the National Space Biomedical Research Institute Team Leader for neurobehavioral and psychosocial function research in space, is collaborating with team members on sleep and circadian rhythm disorders studies in the Antarctic.

“Plus” – Nor are our faculty’s research efforts constrained by earthly bounds. Dr. Dinges and his colleagues have a NASA-funded study on the International Space Station for the next four years, as well as studies aboard NOAA’s Aquarius underwater laboratory, anchored 60 feet below the Gulf of Mexico off the Florida Keys.

Thus, a “seven-continent-plus department.” It’s a tremendous accomplishment for our world-acclaimed and world-traveled faculty, and one in the best Penn tradition.

Dwight L. Evans, MD
Ruth Meltzer Professor and Chair
Professor of Psychiatry, Medicine and Neuroscience

www.med.upenn.edu/psych
The Department of Psychiatry’s Psychosomatic Medicine section is making a new name for itself at the Hospital of the University of Pennsylvania (HUP), with expanded initiatives in clinical care, research, and teaching.

And all of it starts with, well, a new name.

Until recently, Psychosomatic Medicine (PSM) at HUP had been known as the Consultation/Liaison Psychiatry Service, where psychiatrists work with physicians from other services to evaluate and manage medical and surgical inpatients with psychiatric problems. Under the leadership of James L. Stinnett, MD from 1978 to 2006, the service earned a stellar reputation throughout the Hospital.

The move within the psychiatry discipline to rename Consultation/Liaison Psychiatry as Psychosomatic Medicine gained momentum in 2003 when the American Board of Medical Specialties approved PSM as a psychiatric subspecialty. “There have been a few names for the field over the years and Psychosomatic Medicine is the current name,” says Robert M. Weinrieb, MD, director of the PSM section since 2006. “We are utilizing that name since it reflects the American Board of Psychiatry and Neurology board certification for added qualifications in PSM.”

While the program’s name at HUP may be different, its core mission remains essentially the same, only strengthened.

Continuing Emphasis on Quality Patient Care – The PSM section emphasizes the delivery of quality clinical care, stressing a priority of Dr. Stinnett, who is revered as the consummate physician. Today, the PSM section offers exceptional expertise in treating psychiatric disorders presented by patients with neurological, dermatological, and gastrointestinal disorders, cancer, HIV/AIDS, and reproductive issues, as well as patients undergoing organ transplants. PSM faculty regularly collaborate with physicians from these specialties, and those from other hospital services, including Emergency Medicine, Anesthesiology and Critical Care, and Family Medicine and Community Health. PSM services are also offered in HUP’s Medical-Psychiatry Outpatient Clinic, run by the section’s Deborah Kim, MD.

Patients are seen throughout HUP, including those coming into the Psychiatric Emergency Evaluation Center (PEEC). PSM clinical services are also located at Penn Presbyterian Medical Center, where Charles Dackis, MD is the director, and at Pennsylvania Hospital, although neither service is formally connected with the HUP PSM section.

Each attending psychiatrist in the PSM section has a special area of medical mastery – Dr. Weinrieb in solid organ and composite tissue transplant and addiction psychiatry, Dr. Kim in perinatal psychiatry with an emphasis on mood disorders, Christian Kohler, MD in neurology and schizophrenia, Lisa Rosenthal, MD in somatoform disorders and endocrine disease, and Reuben Kron, MD in emer-
gery psychiatric evaluation. Additionally, Dr. Stinnett, who attends the service on a weekly basis, is expert in psycho-cutaneous illnesses as well as the entire PSM field. Attendings offer the very latest treatments to patients depending on their individual needs, including supportive therapy, cognitive behavioral therapy, crisis management, motivational enhancement therapy, and drug therapy.

Dr. Weinrieb acknowledges that the term "psychosomatic medicine" sometimes has a pejorative connotation for patients. "I personally am a bit uncomfortable using the term 'psychosomatic' with patients for that reason," he says. "I know a lot of thought went into the decision to call it PSM, and the intention was to more clearly embed the notion of the mind-body connection in our medical and surgical colleagues, but imagine seeing a depressed patient with widespread metastatic cancer and introducing yourself as the doctor from Psychosomatic Medicine. I believe it will be misunderstood by many patients to mean 'it's all in your head' despite our good intentions. So, for this patient, I would introduce myself as the consulting psychiatrist working with the oncology team."

Increased Attention to Research — The PSM section’s strong clinical focus is simultaneously fostering a growing focus on scientific investigation, with several major studies on-going. For example, Dr. Weinrieb is directing the section’s participation in a nine-site study of psychiatric complications for living donors who donate 60 percent of their livers to emotionally related individuals. Published preliminary evidence shows that psychiatric problems are the most common complication of this procedure. Dr. Weinrieb is also heading up a re-evaluation of a previously published study of medical and psychiatric complications of liver transplantation in methadone-maintained opioid dependents.

Other research projects are also underway. Dr. Kim has initiated the only known pilot study examining the safety and feasibility of repetitive transcranial magnetic stimulation (rTMS) in pregnant women with major depressive disorder. The use of rTMS, a depression treatment recently approved by the FDA, is particularly interesting in pregnant women because it has the potential to reduce exposure of pregnant women to psychotropic medications. In addition, Dr. Rosenthal is collaborating with faculty in the Endocrinology, Diabetes, and Metabolism Division in the Department of Medicine to look at whether patients with symptoms of hypothyroidism, but normal thyroid function, are manifesting a somatoform disorder, a psychiatric condition characterized by medically unexplained physical symptoms. The PSM section has also begun a suicide prevention study in collaboration with Centers for the Prevention of Suicide throughout the United States, including the one at Penn led by Aaron T. Beck, MD.

Renewed Commitment to Teaching — The PSM section’s solid clinical and research base nourishes its vigorous commitment to education and training, long a priority of the program under Dr. Stinnett’s stewardship. Each of the attending physicians on the PSM Service has won at least one major teaching award, and they carry broad educational responsibilities. They teach Penn medical students, students doing electives from other medical schools from around the United States, and Penn Psychiatry residents, Emergency Medicine interns, Neurology and Family Medicine and Community Health residents, and Anesthesiology and Critical Care (Pain Medicine) fellows. The section is also launching regular case presentations with its medical and surgical colleagues, especially with Neurology, as well as weekly evidence-based medicine seminars.

An exciting new initiative is the section’s ACGME-accredited Psychosomatic Medicine Fellowship Training Program. The first fellow began the program in August 2007 and two new fellows are currently enrolled. PSM fellows receive training at HUP and the Philadelphia VA Medical Center, where Henry R. Bleier, MD provides programmatic leadership. Training is provided in the administra-
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tive and clinical aspects of general hospital consultation and in the wide range of specialty hospital services interacting with the PSM section. Fellows interested in an academic medicine track are also offered a second year for research training.

The PSM section’s Psychosomatic Interest Group provides another important teaching opportunity. This group of psychiatrists, with vast experience in Psychosomatic Medicine, meets monthly at HUP to discuss difficult PSM cases and to share insights about clinical and research developments in the field. Regular participants include the PSM fellows and 15 to 20 attending psychiatrists from the region affiliated with or working in other parts of the Health System.

On the Horizon – Looking ahead, Dr. Weinrieb says that the field of Psychosomatic Medicine may be “heading toward more preventative treatments, such as those suggested by a recently completed randomized, controlled study showing that prophylactic olanzapine reduced the incidence of post-operative delirium in elderly patients undergoing elective hip and knee replacement.”

Dr. Weinrieb also emphasizes the need to do more outcome research in the field “so we can be guided by protocols and hard data. This will require time and money, something most PSM programs don’t have.” He adds, however, that few in the PSM field are trained to do research or write grants, and expressed the hope that more psychiatry residents will do PSM fellowships and learn how to conduct clinical research. Dr. Weinrieb feels the time has come to develop young faculty who can obtain independent NIH funding in this discipline. The Department’s Psychosomatic Medicine section, with outstanding clinical, research, and teaching programs, is in a superb position to train the next generation of PSM clinicians, investigators, and educators to lead the discipline in the 21st century.

For additional information on the Psychosomatic Medicine Clinical Service or Fellowship, please contact: Robert M. Weinrieb, MD, program director (tel: 215-662-2858; e-mail: Weinrieb_B@mail.trc.upenn.edu; PSM’s website: http://www.med.upenn.edu/psych/psm_fellowship.html).

NEW PSYCHIATRY INPATIENT UNIT AT PENNSYLVANIA HOSPITAL

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(CRC), a hospital-based consultation-liaison service, and a high school for adolescents with mental health needs. PAH also has an outpatient psychology training clinic for its Clinical Psychology Training Program, a unique program for a department of psychiatry.

The Department of Psychiatry and University of Pennsylvania Health System will continue to provide quality clinical and consultative services for patients and Health System physicians at HUP, where the Psychiatric Emergency Evaluation Center (PEEC) and Psychosomatic Medicine section (formerly the Consultation/Liaison service) continue to operate and grow to meet the complex psychiatric needs of the medically ill. (Please see the article earlier in this issue on HUP’s expanded Psychosomatic Medicine section.)

The strengthened relationship between the Department of Psychiatry and PAH features two historic entities, and an intriguing early connection. Pennsylvania Hospital, founded in 1751, was the first hospital in the American colonies. In turn, Penn’s Psychiatry Department, home to Benjamin Rush, the “Father of American Psychiatry”, can rightfully be called the “Birthplace of American Psychiatry.” In the late eighteenth and early nineteenth centuries, Rush treated and studied mentally ill patients at Pennsylvania Hospital, and was instrumental in establishing a separate inpatient unit at the hospital to care for them.

Today, that history has truly come full circle as an exciting new era in Penn Psychiatry opens at Pennsylvania Hospital. The Department deeply appreciates the many contributions of the faculty, nurses, and staff who made it all possible, and who will continue to serve in the future.
The annual publication of the National Center for Health Statistics (Health, United States, 2007) states the situation simply: “Significant racial and ethnic disparities exist across a wide range of health measures. The gap in life expectancy between the black and white populations has narrowed, but persists. Disparities in risk factors and morbidity also exist.” A white baby born in 2005 can expect to live 78.3 years; an African American child born the same year can expect to live 73.2 years, a seven percent differential.

Chanita Hughes-Halbert, PhD, Associate Professor of Psychology in Psychiatry, created the Center for Community-Based Research and Health Disparities in 2007 to address this health gap. The Center seeks to understand why racial and ethnic health disparities exist and to develop ways to improve the health of medically underserved populations.

While interested in all aspects of health, Dr. Hughes-Halbert targets differences in cancer awareness, prevention, detection, and treatment. “I decided to focus on cancer because so many people are touched by this disease,” she says. “The American Cancer Society (ACS) estimates that more than one million people will be diagnosed with cancer this year. In addition to having serious implications to individuals who are diagnosed, the entire family is affected.” ACS statistics (Cancer Facts and Figures, 2008) establish that African Americans are more likely to develop cancer and are more likely to die from most of the major forms of cancer (e.g., breast, prostate) compared to individuals from other ethnic and racial groups.

Dr. Hughes-Halbert’s interest in cancer emerged after her doctoral training at Howard University, where she earned a PhD in Personality Psychology in 1997. “I first became interested in cancer disparities as a post-doctoral fellow while at George-town University, because there was limited empirical data on factors that contributed to racial differences in African American and white women, and even less was known about how to address these factors to improve cancer outcomes in African American women.”

The reasons for racial and ethnic health disparities are not simple. Dr. Hughes-Halbert explains that access to health care, the quality of care provided, psychological variables such as the self-confidence required to make changes and personal views about health, and cultural beliefs and values all play a role. The relatively low level of trust that African Americans hold for health care providers contributes as well.

The Center is conducting research designed to understand and address many of these factors. The research is supported by grants from the National Cancer Institute, National Center on Minority Health and Health Disparities, and the National Human Genome Research Institute. Investigation converges on three lines of inquiry: 1) enhancing minority participation in clinical cancer prevention and control research; 2) developing culturally tailored assessments and interventions to improve health outcomes in minorities; and 3) developing a sustainable infrastructure for cancer prevention and control through community-based participatory research methods.

One significant research effort is run through the West Philadelphia Consortium to Address Disparities. “We are conducting research to identify the most effective methods of communicating information about disease risk to African Americans who live in West or Southwest Philadelphia,” says Dr. Hughes-Halbert. “We are also interested in understanding the effects of risk communication on psy-
The scientific findings were equally significant, though complex. Dr. Hughes-Halbert says that the study showed that “culturally tailored genetic counseling may not significantly increase acceptance rates for BRCA1/2 testing. However, the majority of African American women are satisfied with genetic counseling, and women who receive culturally tailored counseling may experience greater satisfaction with some aspects of counseling.” While counseling has benefits, particularly racially sensitive instruction, it appears to have limitations in encouraging African American women to undergo genetic testing.

The Center’s work in genetic counseling and testing for BRCA1/2 mutations has identified several important, yet unexplored, issues in cancer risk counseling for African American women. The majority of women in the counseling program were overweight or obese, and many underestimated their risk for developing breast cancer. For this reason, the Center expanded the cancer risk counseling program to address diet and physical activity behaviors among women who have a family history of breast cancer in a first-degree relative. This program also sought to improve how this group of women understand risk.

The Center’s research depends heavily upon the willingness of African Americans to participate in clinical studies, not an easy sell given the discrimination that African Americans have sometimes confronted in experimental settings. “Fortunately, we have had positive experiences recruiting African Americans to participate in our research,” says Dr. Hughes-Halbert. “For example, the majority of African American women who were referred for participation in a genetic counseling research study enrolled in the research, and more than 50 percent participated in genetic counseling. Enrollment rates in the African American Risk Counseling Program have been comparable. However, we’ve experienced some challenges recruiting sub-groups of African Americans to participate in research - breast

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tological functioning and health behaviors.” Importantly, this research is based on the results of a comprehensive needs assessment of African American residents in West and Southwest Philadelphia that was completed by Dr. Hughes-Halbert’s team. The survey revealed that many residents are concerned about cancer and cardiovascular disease, but may not engage in healthy behaviors to address these factors. Based on these results and recommendations from community stakeholders, the Center has initiated research to develop and evaluate an integrated risk counseling program for African American men and women who live in this community. This program is called the African American Risk Counseling Program and is designed to provide information about risk factors for cancer and cardiovascular disease and strategies for eating a healthy diet and being more physically active.

Dr. Hughes-Halbert says that “our experience suggests that many African Americans are interested in improving their health, but may lack sufficient motivation to make changes to their behavior to prevent and control cancer. Moreover, since making these changes may be difficult, some individuals lack confidence in their ability to change their lifestyle.” The African American Risk Counseling Program focuses on enhancing the individual’s self-efficacy, or perceived confidence to make these changes, and provides information about cancer risk factors in order to motivate lifestyle changes.

The Center also recently completed a clinical trial to evaluate the effects of culturally tailored versus standard genetic counseling on the decisions of African American women to have genetic testing for BRCA1 and BRCA2 mutations, abnormalities which have been linked to breast cancer. The study enrolled the largest number of African American women in a prospective randomized trial, and was the first to demonstrate that the majority of African American women identified for participation were willing to enroll in a clinical genetic counseling research program.

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cancer survivors, for example. For this reason, we are now conducting research to identify barriers to African American participation in cancer genetics research.”

The Center works with a multi-disciplinary group of investigators from Penn, including psychologists, internists, oncologists, obesity experts, epidemiologists, biostatisticians, communications scientists, anthropologists, and public health professionals. It has established important University- and School of Medicine-wide collaborations with James C. Coyne, PhD in the Department of Psychiatry; Katrina Armstrong, MD and Judy Shea, PhD in the Division of General Internal Medicine in the Department of Medicine; Susan Domchek, MD in the Division of Hematology and Oncology in the Department of Medicine; Jerry C. Johnson, MD in the Division of Geriatric Medicine in the Department of Medicine; Marjorie Bowman, MD in the Department of Family Medicine and Community Health and the Center for Public Health Initiatives; Scarlett Bellamy, ScD, Shiriki Kumanyika, PhD, and Andrea Troxel, ScD in the Center for Clinical Epidemiology and Biostatistics; as well as with additional faculty in the Leonard Davis Institute of Health Economics and the Institute for Translational Medicine and Therapeutics.

Designing and implementing research protocols that actively involve community residents is also a key to success, and the Center’s community partners are equally diverse, including the Philadelphia Chapter of the National Black Leadership Initiative on Cancer, the Health Promotion Council of Southeastern Pennsylvania, the Southwest Community Action Coalition, and the Christ of Calvary Community Development Corporation.

An important strength of the Center is its emphasis on the translation and dissemination of its research findings into solutions that benefit people. “That is,” says Dr. Hughes-Halbert, “we work to enhance the translation of our findings and programs to settings and individuals who are most likely to be in need of preventive efforts to improve health outcomes.”

The Center for Community-Based Research and Health Disparities is still young, but it has already made an impact in the local community and has contributed a body of research to help begin to narrow the health disparities gap separating Americans. There is much more to do, but the Center, under Dr. Hughes-Halbert’s leadership, is off to a very productive start.

For further information about the Center for Community-Based Research and Health Disparities, please contact Chanita Hughes-Halbert, PhD at chanita@mail.med.upenn.edu.
PENN BEHAVIORAL HEALTH CORPORATE SERVICES
IN ACTION

Penn Behavioral Health (PBH) is the official name for the Department of Psychiatry’s patient care and behavioral health programs. Most familiar are PBH’s patient care programs, which cross all age groups and subspecialty areas of psychiatry and behavioral health. In recent years, these clinical programs have expanded to meet the needs of the marketplace, with the introduction of the innovative Charles O’Brien Center for Addiction Treatment, the Albert J. Stunkard Weight Management Program, and the Mood Disorders Comprehensive Consultation Service.

Penn Behavioral Health Corporate Services (PBHCS), a major PBH component, has been equally active in working with Philadelphia-area organizations to implement creative behavioral health programs aimed at building a productive work environment. PBHCS offers a wide range of corporate and management tools, training, and educational resources to help employers, managers, employees, and families handle behavioral health issues that can impact workplace performance and cohesion. Several signature programs are especially noteworthy.

PBHCS’ Employee Assistance Program (EAP) helps managers and employees resolve workplace issues and provides information to help them develop their own solutions to professional and personal problems. The goal is to boost workplace morale and safety, improve employee retention, increase productivity, and strengthen the organization’s bottom line. The EAP now serves about 40,000 University and Health System employees and their dependents, as well as employees and dependents in about 50 other companies and organizations.

PBHCS’s Management and Corporate Assistance Programs help managers cultivate healthy and productive working relationships to enhance organizational and employee performance. Training modules cover such topics as Navigating Change, Dealing with Difficult People, Cultivating Resilience, Teambuilding, and Developing Exemplary Customer Service. PBHCS staff also work with managers to provide resources for early intervention with troubled employees, and they offer support to senior managers through executive coaching, training, consultation, and critical incident debriefings.

During the last two years, PBHCS staff have made presentations for employees and managers at several regional and statewide conferences for education and industry, including the Pennsylvania Association of School Personnel Administrators and the Pennsylvania Council of Administrators of Special Education. This summer, PBHCS provided violence-in-the-workplace prevention training for over 200 senior management and human resources staff of major industries and public services attending the U.S. Equal Employment Opportunity Commission regional conference in Baltimore. PBHCS staff presented two workshops this fall on workplace violence and substance abuse for the Mental Health Association in the Southwestern New Jersey EAP Conference titled “Mental Health Makes Cents.”

PBHCS is also providing employee and management assistance programs for several regional school districts – Colonial, Wissahickon, Upper Merion, Morrisville, and Bucks County Intermediate Unit. Beyond this, PBHCS is helping to form a consortium of Bucks County school districts who will utilize its management services.

Critical incident debriefings are also an important feature of PBHCS’ management and corporate assistance programs. PBHCS staff have assisted a wide range of organizations through these immediate interventions, including schools and surrounding communities where violence and suicides have occurred, prominent organizations experiencing the death of a top executive, and police commanders, officers, and their families in response to the deaths of officers killed in the line of duty.

Penn Behavioral Health Corporate Services will continue to work with Philadelphia area schools, businesses, and governmental entities to make their workplace environments more congenial, productive, and safer, and PBHCS plans to expand its growing network. In January 2009, PBH began providing EAP services for the Greater Philadelphia Chamber of Commerce and is forming an affinity relationship with the Chamber to provide additional programs and services to other local businesses and organizations in the Philadelphia region.

It is anticipated that this new collaboration will help bring PBHCS’ management tools and educational resources to more Delaware Valley communities and organizations to address the ongoing behavioral health needs of employees, families, managers, and employers.

For additional information about Penn Behavioral Health Corporate Services (PBHCS), please visit our website (www.pennbehavioralhealth.org/) or call 1-888-321-4433.
Our Distinguished Faculty

Awards & Honors

Penn Honors

The Albert Stunkard Faculty Recognition Award is given annually to faculty members who are outstanding teachers and mentors. The graduating resident class selects award winners who have significantly influenced their education and training. Named for Albert J. Stunkard, MD, Emeritus Professor of Psychiatry and former Chair of the Department, this award recognizes Dr. Stunkard’s enormous contribution to the education, training, and support of Department housestaff. Sarah DeMichele, MD, Jody Foster, MD, MBA, Alexandra McLean, MD, John P. O’Reardon, MD, and David Weiss, MD received this honor in 2008.

The 2008 PGY-3 & 4 Teaching Award was awarded to Richard F. Summers, MD and the 2008 PGY-1 & 2 Teaching Award was awarded to Jody Foster, MD, MBA. These awards honor those individuals whom the residents believe were the most effective teachers of the academic year and exemplary in shaping their overall education.

Deborah Kim, MD was the 2008 recipient of the Earl Bond Award. Initiated by the efforts of Dr. William Peltz, this annual award is given to a Department member who has distinguished himself/herself for teaching at the medical student, resident and/or graduate levels.

J. Russell Ramsay, PhD was awarded the 2008 Martin P. Szuba Award for Excellence in Clinical Teaching and Research. This award is presented annually to a Department faculty member with outstanding teaching abilities, ongoing clinical research, and a focus on translating research concepts into clinically useful teaching, all of which Dr. Szuba embodied in his work.

Peter B. Bloom, MD received the 2008 Annual Award for Clinical Faculty. This award, funded by a clinical faculty member, is given to a volunteer clinical faculty member who has demonstrated long-term loyalty to the Department and excellence in teaching and/or supervising. Dr. Bloom was honored for his “clear thinking and personal warmth,” his “many contributions to the Department,” and for having served as “a skilled clinician and a teacher of excellence...[and] as an outstanding role model for a generation of students and colleagues.”

Aaron T. Beck, MD received the 2008 Chief Residents’ Award in its inaugural year. The award recognizes a teacher who has expanded frontiers for residents’ thinking about the role of psychiatry in medicine and society, and who also promotes the development of leadership for such reflective thought in the field of mental health.

The Psychodynamic Psychotherapy Award is given by the Psychoanalytic Cluster Steering Committee to a graduating resident in recognition of his/her excellence in providing psychodynamic psychotherapy. Michelle Goldsmith, MD (PGY-4) and Glenda Wrenn, MD (PGY-4) were the 2008 recipients.

Caryn Lerman, PhD received the 2008 Arthur K. Asbury Outstanding Faculty Mentor Award from the School of Medicine for “foster[ing] the professional development of other faculty members by providing inspiring and effective counsel and opportunities for achievement.”

Marion Lindblad-Goldberg, PhD received a Child and Adolescent Psychiatry Teaching Award from the Child and Adolescent Psychiatry Fellows (Class of 2008) at Children’s Hospital of Philadelphia in June 2008 in appreciation for her outstanding contributions as a teacher and mentor.

Karl Rickels, MD received the 2008 William Osler Patient-Oriented Research Award from the School of Medicine in recognition of his “achievement in research conducted with human subjects...for which an investigator...directly interacts with human subjects.”

Regional, National & International Honors

Siobhan Banks, PhD is the Vice-Chair of the Sleep Deprivation Section of the American Academy of Sleep Medicine.

Tami Benton, MD has been elected as Councilor at Large for the American Academy of Child and Adolescent Psychiatry to serve a three-year term. She has also been appointed as Co-Chair of the recruitment committee for the Association of Directors of Psychiatric Residency Training to serve a three-year term.

Monica E. Calkins, PhD received an Early Career Development Award in 2008 from the American College of Neuropsychopharmacology.

Delane Casiano, MD began a three-year appointment in May 2008 to the American Psychiatric Association (APA) Corresponding Committee on Research Training, a subcommittee of the Council on Research. The Corresponding Committee is responsible for the topic selection for the Research Colloquium for Junior Investigators that is held at each annual APA meetings. The committee is also responsible for the selection of mentors that serve as faculty for the research colloquium. In June 2008, she was awarded a second year of postdoctoral fellowship funding through the Program for Minority Research Training in Psychiatry (PMRTP). PMRTP is a fellowship funded by the National Institute on Mental Health designed to increase the number of under-represented minority men and women in the field of psychiatric research and is administered by the American Psychiatric Institute for Research and Education (APIRE).

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James C. Coyne, PhD was appointed External Scientific Advisor to the European Commission’s program “Optimised Suicide Prevention Programs and Their Implementation in Europe”, a 14-nation project coordinated by Leipzig University.

David F. Dinges, PhD is a member of the Institute of Medicine’s Committee on Optimizing Graduate Medical Trainee (Resident) Hours and Work Schedules to Improve Patient Safety. The report of the Committee was released in December 2008.

Dwight L. Evans, MD received the Research Mentorship Award from the American Psychiatric Association at its Annual Meeting in May 2008. The award is given in recognition of a psychiatrist’s substantial and formative contributions to the mentoring of students and residents throughout a distinguished career in psychiatric research.

Namni Goel, PhD became President of the Society for Light Treatment and Biological Rhythms, an international organization, in June 2008. In September, she was appointed to the Editorial Board of the Journal of Circadian Rhythms.

Michelle Goldsmith, MD and Glenda Wrenn, MD were recipients of the Dr. Henry P. and M. Page Durkee Laughlin Foundation Award. The award is given to a resident upon recommendation of the program as recognition of his/her professional achievement, dedication, and scholarship throughout residency training. Founded in 1964 through the generosity of Hank and Page Laughlin, the Dr. Henry P. and M. Page Durkee Laughlin Foundation is based in Frederick, Maryland. For more than thirty years, the Laughlin Foundation has honored outstanding residents in psychiatric training programs throughout the United States and the United Kingdom. Award recipients are selected by the senior faculty at their university.

John B. Jemmott III, PhD was cited in the July 25 issue of Science Magazine as one of the top 10 NIH-funded researchers in the area of HIV/AIDS research for FY2007. [http://www.sciencemag.org/cgi/content/full/321/5888/520/F2] In August 2008, Dr. Jemmott received The Haven Hero Award from the Haven Youth Center in Philadelphia for his “significant contribution in the fight against HIV/AIDS.”

David S. Mandell, ScD was named Associate Director of the new Center for Autism Research (CAR). The CAR is a center of emphasis at the Joseph Stokes Jr. Research Institute at the Children’s Hospital of Philadelphia and is a collaboration between CHOP and the University of Pennsylvania.

Charles P. O’Brien, MD, PhD and Thomas McLellan, PhD were recognized by ISI (Thomson Scientific) as among the “most highly cited psychiatrists and psychologists in America.”

Christopher Pierce, PhD received the 2008 Jacob P. Waletzky Memorial Award for Innovative Research in Drug Addiction and Alcoholism from the Society for Neuroscience at its Annual Meeting in Washington, DC in November 2008. The award honors a scientist “who has conducted research or plans to conduct research in the area of substance abuse and the nervous system.”

Jennifer G. Plebani, PhD received a National Institute on Drug Abuse (NIDA) Women & Sex/Gender Junior Investigator Travel Award to attend the 70th Annual Scientific Meeting of the College on Problems of Drug Dependence in San Juan, Puerto Rico in June 2008.

David B. Sarwer, PhD was named Associate Editor of the journal Surgery for Obesity and Related Diseases.

Robert A. Schnoll, PhD will serve as Co-Chair of the 2009 Annual Meeting of the Society for Research on Nicotine and Tobacco.

Richard F. Summers, MD was honored as the Teacher of the Year by the Psychoanalytic Center of Philadelphia in May 2008. He currently serves as Program Chair for the Annual Meeting of the American Association of Directors of Psychiatry Residency Training. He was appointed a Member of the Clinical Skills Assessment Curriculum Task Force of the American Board of Psychiatry and Neurology and a Member of the Psychotherapy Standards Committee of The Psychoanalytic Consortium.

Siobhan Banks, PhD presented on the “The Effects of Apnea on Fatigue and Performance” and on “Probing Neurobehavioral Performance in Space Flight: Validity, Feasibility and Utility of the Psychomotor Vigilance Test (PVT)” at the 79th Annual Scientific Meeting of the Aerospace Medical Association in Boston in May. In September, she spoke on “Recovery Sleep Stage Dynamics Following Chronic Sleep Restriction” at the 97th Annual Convention of the European Sleep Research Society in Glasgow, United Kingdom.

Jacques P. Barber, PhD, ABPP delivered the Presidential Address on “Working Through Core Conflicts in Psychotherapy Research” at the Meeting of the Society for Psychotherapy Research in Barcelona, Spain in June 2008.

Marna S. Barrett, PhD, along with colleagues from the Center for Psychotherapy Research, presented a paper in a panel on academic-community partnerships in research at the international meeting of the Society for Psychotherapy Research in Barcelona, Spain in June 2008. The paper was titled “Factors Influencing Engagement in Community-Based Mental Health Treatment of Depression.” In July, Dr. Barrett gave an invited address at the University of Freiburg (Germany) titled “Interpersonal Patterns in Major Depressive Disorder and Depressive Subtypes.” She also lectured on “Ethical Decision Making in Mental Health” at the Scattergood Ethics Summer Institute for Applied Ethics in Behavioral Health in Philadelphia in July.


Wade H. Berrettini, MD, PhD was moderator and speaker at a NARSAD public education symposium at the University of Pennsylvania in September 2008. The symposium, “Healthy Minds Across America,” was part of a national day of free public forums on the progress and promise of mental health research.

Peter B. Bloom, MD presented on several topics at the 11th Congress of the European Society of Hypnosis in Vienna, Austria in September 2008. These included several panels on “Teaching Issues in Hypnosis,” “Ethical Issues,” and “What I Have Learned in Doing Psychotherapy.” He also held a “Meet the Expert” session. At the Congress, Dr. Bloom became an Honorary Member of the European Society of Hypnosis. In November in Melbourne, Australia, he was one of five speakers from around the world lecturing in a day-long conference celebrating the retirement of his close friend and colleague, Professor Graham Burrows of the University of Melbourne. Dr. Bloom’s invited lecture was titled “Clinical Hypnosis: Creativity or Neuroscience?”

Monica E. Calkins, PhD was an Invited Symposium Speaker in July at the International Congress of Psychology in Berlin, Germany and spoke on “Neurocognitive Impairments as Candidate Endophenotypes of Schizophrenia.”

Karla Campanella, MD, a PGY-2 resident, wrote “The Green Bike,” which appeared in the “Introspections” section of the *American Journal of Psychiatry* (September 2008, Vol 165, No 9, p. 1110). The article recounted Dr. Campanella’s experience with a female patient, “a cross-cultural detour through the pain of poverty, racial tension, and sexual aggression.”

Gregory C. Carlson, PhD spoke on “Imaging Epilepsy and Hypereexcitability in Developmental Disorders” at the “Mechanisms of Epilepsy & Neuronal Synchronization” Gordon Conference held in August 2008. He also spoke on “Cortical Hypereexcitability in Mouse Model of Rett Syndrome” at the June 2008 annual International Rett Syndrome Foundation scientific meeting. In the Department of Psychiatry this past summer, Dr. Carlson, Olivier Berton, PhD, and Sangwon Kim, PhD co-founded the Center for Neurobiology and Behavior “Work-in-Progress Seminar” as a campus-wide monthly seminar series for post-doctoral fellows and graduate students.


Delane Casiano, MD gave a lecture in April 2008 at the Dartmouth Psychiatric Research Center titled “Considering Cultural Factors in Depression.” The lecture focused on quantitative and qualitative research methods in the evaluation of cultural explanations of illness. In May, Dr. Casiano co-hosted an open group discussion for residents and early career psychiatrists at the American Psychiatric Association (APA) Annual Meeting held in Washington, DC titled “Brown Bag Lunch for African American Psychiatry Residents and Early Career Psychiatrists.” The event was sponsored by the APA Minority Fellowship Program. Approximately 20 medical students, residents, and early career psychiatrists attended the luncheon, as well as five mentors from the Black Psychiatrists of America (BPA). Attendees engaged in a spirited discussion of personal and professional experiences, culminating in a request for similar future events. In June, Dr. Casiano presented a lecture titled “Is Depression the Same for Everyone? Cultural Factors Influencing Mental Health Perceptions and Service Utilization” at the International Meeting of the Society for Psychotherapy Research held in Barcelona, Spain. The lecture focused on preliminary data from her current study that evaluates cultural explanations of depression among African Americans currently in therapy at a community mental health center.
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health center. Co-presenters included Marna Barrett, PhD and Liz Goldstein from the Center for Psychotherapy Research and Patricia Green from Northwestern Human Services of Philadelphia. Paul Crits-Christoph, PhD chaired the lecture. In November 2008, Dr. Casiano presented a lecture titled “Sociocultural Influences on Interpersonal Style in Depressed African Americans” at the Black Psychiatrists of America (BPA) Transcultural Meeting held in St. Croix, Virgin Islands.

James C. Coyne, PhD gave a workshop at the European Health Psychology Conference in Bath, England in September 2008 titled “How to Write Highly Cited Papers and What to do When Your Paper is Rejected.” He also presented a paper at that conference titled “Is Health Psychology Ready for Meta-Analysis? Using Clinical Connoisseurship to Decide.” Also, Dr. Coyne gave a talk in June titled “Positive Psychology in Cancer Care: Is There Benefit to be Found for Patients or Science?” at the University of Groningen, the Netherlands, and another in September at the same institution titled “Exploring the Depression-Mortality Connection: Well Worn Paths, Famous Wrong Turns, and Dead Ends.”


David F. Dinges, PhD gave several presentations in the spring of 2008, including: “Phenotypes for Differential Vulnerability to Sleep Deprivation (NIH Gene Workshop, Bethesda, Maryland); “Countermeasures to Neurobehavioral Deficits from Cumulative Sleep Deprivation During Space Flight: Dose-response Effects of Recovery Sleep Opportunities” (79th Aerospace Medical Association, Boston); and “Fatigue: Where Biology Meets Technology” (Plenary Talk, Federal Aviation Administration Fatigue Symposium, Washington, DC). Namni Goel, PhD spoke at a number of local, national, and international meetings on various topics, including: “Characterization of Neurobehavioral Phenotypes to Sleep Restriction” (Center for Sleep and Respiratory Neurobiology, University of Pennsylvania, Philadelphia); “Sex Differences in Objective and Subjective Sleep Measures in Healthy Adults” (Organization for the Study of Sex Differences, New Orleans); “Phenotypic Neurobehavioral Responses to Sleep Restriction: Relationship to Cognitive and Subjective Measures” (Associated Professional Sleep Societies, Baltimore); and “Shedding Light on the Future by Examining the Present: Highlights of the 2008 Meeting” and “Introduction and Overview: Preventative Strategies for Managing Seasonal Major Depressive Disorder” (Society for Light Therapy and Biological Rhythms, Vancouver, Canada).

Cordula T. Holzer, MD and Trevor H. Hadley, PhD are co-directors of a new fellowship in public psychiatry funded by the Commonwealth of Pennsylvania. The fellowship will prepare psychiatrists for a career in the public sector. Also, Dr. Holzer was an invited speaker in July 2008 at the Scattergood Program Summer Institute for the Applied Ethics of Behavioral Health. The conference was titled “Access to Behavioral Healthcare.” In May, she gave a workshop on “Documenting Disability for Medical Providers” for Philadelphia psychiatrists for the National Health Care for the Homeless Council.

John B. Jemmott III, PhD testified on September 18, 2008 at a hearing of the U.S. House of Representatives Science and Technology Subcommittee on Research and Science Education. The hearing topic was the “Role of Social Sciences in Public Health,” and Dr. Jemmott addressed the issue of AIDS prevention.

Caryn Lerman, PhD joined Dr. Nora Volkow, Director of the National Institute on Drug Addiction (NIDA), for a Congressional Briefing in April 2008, presenting on “Personalized Medicine for Nicotine Dependence.”

Stephen E. Levick, MD led a discussion on the topic: “We’ and ‘They’ Imagine the Early Human Embryo: Some Psychological Considerations in the Stem Cell ‘Wars’” at the 2008 World Stem Cell Summit in Madison, Wisconsin in September 2008.

Marion Lindblad-Goldberg, PhD spoke on the “Use of Adherence Scales in Clinical Supervision to Create Therapeutic Focus” at the American Family Therapy Academy in Philadelphia in June 2008.


Cory F. Newman, PhD presented four half-day lectures to CEKTOS (Center for Cognitive Therapy and Supervision) in Copenhagen, Denmark in September, 2008. The topics were “Cognitive Therapy of Substance Abuse,” “Cognitive Therapy with Medically Ill Patients,” “The Concept and Management of Resistance in Cognitive Therapy,” and “Power Supervision: Training the Next Generation of CBT Therapists to Deliver Effective, Memorable Therapy.”

In February 2008, Charles F. O’Brien, MD, PhD made a presentation on “The Neurobiology of Addiction” at the Royal Society in London. In July 2008, he chaired a symposium at the Annual Meeting of the International Congress of Neuropsychopharmacology, and also presented research on “The Pharmacogenetics of Alcoholism” at this meeting. Also in July, Dr. O’Brien made a presentation to the faculty of the Institute of Psychiatry at the Maudsley Hospital in London on the treatment of alcoholism. In August 2008, Dr. O’Brien made a presentation on “Penn Addiction Research” to the International AIDS Conference held in Mexico City.

Helen M. Pettinati, PhD, Michael P. Bogenschutz, MD, and J.Scott Tonigan, PhD presented on “Alcohol Subtypes and Differential Treatment Outcomes from the COMBINE Study” at the 2008 Joint Scientific Meeting of the Research Society on Alcoholism and the International Society for Biomedical Research on Alcoholism in Washington, DC. The lecture was given in a symposium organized to honor the work of Dr. Jack Mendelson.

Robert L. Sadoff, MD gave lectures titled “First Do No Harm: Minimizing the Inherent Harm in Forensic Psychiatric Practice” at Harvard University in September 2008.
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and at the Annual Meeting of the American Academy of Psychiatry and the Law in Seattle in October. A short biography of Dr. Sadoff titled “Robert L. Sadoff, MD: Renaissance Man of Forensic Psychiatry,” written by Frank M. Dattilio, PhD and Thomas G. Gutheil, MD, appeared in the Journal of the American Academy of Psychiatry and the Law (Volume 36, pages 286-289, 2008). Dr. Sadoff and Dr. Dattilio published a new book in November 2008 titled Crime and Mental Illness, published by the Pennsylvania Bar Institute. In addition, Dr. Sadoff started the new section on Medicine, Ethics and the Law at the College of Physicians of Philadelphia. The kickoff program on Neurolaw is scheduled in March with three speakers from Penn – Arthur Caplan, PhD, Ruben C. Gur, PhD, and Stephen J. Morse, JD, PhD. Dr. Sadoff is also the Program Director of the Department of Psychiatry’s newly approved Forensic Psychiatry Fellowship Training Program, which is scheduled to begin in July 2009.

Mark S. Salzer, PhD led a session at the National Disability Rights conference held in New Orleans in June 2008 on strategies for promoting employment of individuals with psychiatric disabilities.

David B. Sarwer, PhD spoke in the spring and summer on a number of topics at various venues, including: “Psychiatric Aspects of Cosmetic Surgery” and “Psychiatric Aspects of Bariatric Surgery” (Psychiatry Grand Rounds, Cooper Health System, Camden, New Jersey); “The Psychology of Body Image Enhancement” (The Aesthetic Show, Las Vegas, Nevada); “The Preoperative Psychological Evaluation: Issues and Controversies,” “Behavioral Modification for the Success of the Banding Patient,” and “Psychiatric Preparation” (American Society of Bariatric and Bariatric Surgery, Washington, DC); and “Motivating Patient Compliance Improves Obesity Management Outcomes from Wellness to Surgery” (Case Management Society of America, Orlando, Florida).

Robert A. Schnoll, PhD gave invited talks at various forums in 2008, including the 7th Annual International Conference on Head and Neck Cancer in San Francisco where he spoke on “Treating Tobacco Dependence in the Oncologic Context,” and at the University of the Sciences of Philadelphia where he lectured on “Treating Nicotine Dependence.”

Eyal Shemesh, MD spoke on the “Psychosocial Correlates of Non-adherence” at a task force meeting of the National Institute of Diabetes and Digestive and Kidney Diseases in Bethesda, Maryland in September 2008. In October, he gave the Simon Wile seminar on “Post-traumatic Stress Disorder and Non-adherence” at the Annual Meeting of the American Academy of Child and Adolescent Psychiatry in Chicago, and was an invited speaker at the Annual Meeting in St. Louis of Studies in Pediatric Liver Transplantation (SPLIT), an NIH-funded national registry of liver transplant outcomes, where he spoke on the “Psychosocial Assessment of Children Who Had a Transplant.”

Elizabeth B. Weller, MD was an invited speaker this past summer on “Treating Youth Psychiatric Disorders – Connecting Clinical Knowledge and Community Application” at the 2008 National Medical Association Annual Convention and Scientific Assembly in Atlanta. She lectured about the medical and psychiatric differential diagnoses of bipolar disorder in children and adolescents. In September, she gave Grand Rounds at The Reading Hospital and Medical Center in Reading, Pennsylvania on “An Update on Bipolar Disorder in Children and Adolescents.” Dr. Weller also led an examination team for the American Board of Psychiatry and Neurology in St. Louis in September. ❖

American Psychiatric Association 161st Annual Meeting
May 3-8, 2008 – Washington, DC

Aaron T. Beck, MD receives 2008 Distinguished Service Award
“in recognition of your extraordinary contributions as a prominent leader in the areas of cognitive therapy and depression research, and for your dedicated commitment and work, which has improved the care of patients and ennobled the profession of psychiatry.”
RESEARCH NEWS

Siobhan Banks, PhD is Co-Investigator on two NASA Cooperative Agreements with the National Space Biomedical Research Institute titled “Countermeasures for Performance Deficits from Sleep Loss and Workload in Spaceflight” and “Optical Computer Recognition of Stress, Affect and Fatigue During Performance in Spaceflight.” Both projects are funded into 2011.

Hadas Wiseman and Jacques P. Barber, PhD, ABPP published a book titled Echoes of the Trauma: Relationship Themes and Emotions in the Narratives of the Children of Holocaust Survivors (Cambridge University Press, 2008).

Wade H. Berrettini, MD, PhD received a 4-year $3.5 million P20 center grant from the National Institute on Drug Abuse (NIDA) to investigate a novel function of the mu opioid receptor, the receptor to which morphine binds in the brain to produce its addicting and pain-relieving properties. The grant is titled “The mu Opioid Receptor in Addiction.” Dr. Berrettini also conducted a genetic study of nicotine addiction in 15,000 persons, establishing with high statistical significance that variations in the alpha3-alpha5 nicotinic receptor subunit genes increase risk for nicotine addiction (Berrettini WH, Yuan X, Tozzi F, Song K, Chilcoat H, Francks C, Waterworth D, Muglia P, Mooser V: Alpha-5/Alpha-3 Nicotinic Receptor Subunit Alleles Increase Risk for Heavy Smoking. Molecular Psychiatry 13:568-73, 2008.).

Olivier Berton, PhD received a 2008 Young investigator Award from NARSAD, a private, not-for-profit organization that raises funds for scientific research into the causes, cures, treatments, and prevention of severe psychiatric brain and behavior disorders, such as schizophrenia and depression. Dr. Berton’s research is on the “Neuroplasticity of Serotonin Systems in a Murine Model of Affective Disorder: Role of HDAC6.” Using a mouse model, the study seeks to provide a better understanding of the basic mechanisms underlying the therapeutic activity of antidepressants, which are still largely unknown.

James C. Coyne, PhD received R01 funding from the National Institute of Mental Health (NIMH) for a five-year study titled “Detection and Care for Depression During Pregnancy and the Postpartum Period.” The study will examine whether women who become depressed are detected in medical care during pregnancy and in the postpartum period, and the kinds and quality of care for depression they receive.

Guy S. Diamond, PhD, Director of the Center for Family Intervention Science (CFIS), is involved in youth suicide prevention research at Penn and Children’s Hospital of Philadelphia. With a recent grant from the Centers for Disease Control and Prevention (CDC), the CFIS completed its first trial of Attachment Based Family Therapy (ABFT) for youth suicide prevention in primary care. The results of that trial suggest that family treatment was more effective than community care for decreasing suicidal ideation and depression. The CFIS has received new grants to extend this work in new directions. Two are from the American Foundation for Suicide Prevention and the third is a Garret Lee Smith Suicide Prevention grant to fund a collaboration between CFIS and the Pennsylvania Office of Mental Health and Substance Abuse Service aimed at reducing suicide rates in three counties in northern Pennsylvania.

David F. Dinges, PhD and his laboratory team completed genetic analyses on their database on human differential vulnerability to the neurobehavioral effects of sleep deprivation. The laboratory is supported by the Penn Genomics Institute (PGI) and the Institute for Translational Medicine (ITMAT). Hakon Hakonarson, MD (Children’s Hospital of Philadelphia) completed the genomic analyses and Emmanuel Mignot, MD, PhD (Stanford) analyzed the candidate genes. The results of these analyses are being written up for publication and will be the basis of a planned NIH grant application. In addition, Dr. Dinges’ laboratory received several new grants, including: “Countermeasures for Performance Deficits from Sleep Loss and Workload in Space Flight,” “Optical Computer Recognition of Stress, Affect and Fatigue During Space Flight,” and “Team Leader – Neurobehavioral and Psychosocial Factors” (NASA Cooperative Agreements with National Space Biomedical Research Institute); “Psychomotor Vigilance Testing on the International Space Station” (National Space Biomedical Research Institute) – this project places cognitive testing technology developed by Dr. Dinges on the International Space Station (ISS) for the study of astronaut behavioral readiness; and “Prediction of Fatigue and its Effects on Vigilance and Target Detection (Department of Homeland Security’s Transportation Security Laboratory).

Kyle M. Kampman, MD is directing the Philadelphia Treatment Site as part of a “Multi-site Controlled Trial of Cocaine Vaccine” funded by the National Institute on Drug Abuse (NIDA).

Caryn Lerman, PhD is the Principal Investigator of a new five-year National Cancer Institute grant titled “Effects of Smoking Cues in Anti-Tobacco Public Service Announcements (PSAs),” with Joseph N. Cappella, PhD in the Annenberg School for Communication and Andrew A. Strasser, PhD in the Department of Psychiatry. She is also the Co-Principal Investigator of the National Cancer Institute PS50 Center of Excellence in Cancer Communication Research, which was competitively renewed in September 2008 (Robert C. Hornik, PhD, Annenberg School for Communication, PJ). Recent key scientific advances from Dr. Lerman’s laboratory include the first genome-wide association study of smoking cessation demonstrating convergent findings across multiple clinical trials. As published in the Archives of General Psychiatry (June 2008), this study identifies several novel genes including cell adhesion molecules and genes involved in memory. In addition, the results of the first systems-based can-

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didate gene study of smoking cessation by Dr. Lerman and colleagues implicates the nicotinic acetylcholine receptor beta2 subunit gene in smoking cessation, as published in Human Molecular Genetics (September 2008). Dr. Lerman also published a seminal paper on personalized therapy for smoking cessation, based on a randomized placebo-controlled trial of bupropion. As published in Clinical Pharmacology and Therapeutics (September, 2008), these data suggest that targeted therapy based on genetic variation in nicotine metabolizing enzymes could improve the overall effectiveness of treatment for nicotine dependence.

David S. Mandell, ScD is Principal Investigator on three new grants: 1) “Autism and Associated Neuro-Behavioral Functioning among Patients in a Psychiatric Hospital” (Department of Defense) – this study seeks to determine the prevalence of autism among psychiatric inpatients; validate a screening instrument for autism in an adult, psychically impaired sample; and identify clinical and neurobehavioral characteristics that discriminate between adults with autism and other psychiatric disorders; 2) “A Randomized Trial of the STAR Program for Children with Autism Spectrum Disorder (ASD)” (National Institute of Mental Health) – this field trial of STAR (Strategies for Teaching Based on Autism Research) examines the effects of this classroom-based program for children with ASD on school readiness; 3) “Efficacy and Sustainability of the STAR Program” (Department of Education) – this study examines fidelity of implementation, child outcomes, factors associated with subgroup variation in outcomes, and sustainability of the program model in a group of kindergarten-through-second grade students.

James R. McKay, PhD was awarded a five-year P30 grant from the National Institute on Alcohol Abuse and Alcoholism (NIAAA) in September 2008, which is titled “Center on Adaptive Treatments for Alcoholism.” The new Center provides funding to support work on the development and evaluation of adaptive algorithms, which specify when and how to modify treatment for addiction in response to changes in patients’ symptoms and status over time.

In 2007, David S. Metzger, PhD and members of his research group were active participants in the successful efforts to secure a four-year award from the National Institute for Child Health and Human Development (NICHD) to the University of Botswana and the University of Pennsylvania. The goal is to establish a collaboration to develop a research infrastructure in Botswana capable of designing, implementing, and reporting on interventions to reduce HIV transmission among adolescents.

Jennifer G. Pileggi, PhD started two pilot studies – a “Phase II, Randomized, Double-Blind Pilot Trial of Varenicline for the Treatment of Cocaine Dependence” and a “Phase II, Randomized, Double-Blind Pilot Trial of Varenicline for the Treatment of Alcohol Dependence.” Pfizer is generously providing medication for the alcohol trial.

Daniel Rodriguez, PhD received an R01 grant from the National Cancer Institute titled “The Effect of Antismoking Parenting Practices on Adolescent Smoking.” Funding began in August 2008 and will run through July 2010.

Mark S. Salzer, PhD is the Principal Investigator and Director of a new five-year Rehabilitation Research and Training Center funded by the National Institute on Disability and Rehabilitation Research. The mission of the $4.25 million Center is to conduct research to advance theory, measures, methods, and intervention knowledge aimed at promoting full community participation (e.g., going to work, school, friendships, parenting, self-determination, leisure/recreation, citizenship) and independent living of adults with psychiatric disabilities and ensuring that research in this area is effectively translated in order to change practice and policy at the national, state, county, and agency levels. The Center involves a strong multidisciplinary group of collaborators from Penn, investigators from nine universities around the country, and significant involvement with the National Mental Health Consumers’ Self-Help Clearinghouse at the Mental Health Association of Southeastern Pennsylvania and Horizon House, both based in Philadelphia. More information about the Center can be found at www.upennrrtc.org. Dr. Salzer is also the lead investigator on a study examining the employment experiences of individuals with mental illnesses who are newly released from jails, as part of a new Center funded by the National Institute on Mental Health. Dr. Salzer also received pilot funding in July 2008 from the Leonard Davis Institute of Health Economics at Penn to examine the recruitment and retention of the entry-level behavioral health workforce and the relationship between these factors and the delivery of quality services and supports.

David B. Sarwer, PhD received an R01 grant from the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) titled “Dietary Intake and Eating Behavior in Adolescents who Undergo Bariatric Surgery.” The study will focus on changes in these domains in adolescents who undergo bariatric surgery as part of the nationwide TeenLABS bariatric surgery consortium. Dr. Sarwer also received a grant from the American Society of Metabolic and Bariatric Surgery (along with Kelly C. Allison, PhD) to investigate improvements in reproductive functioning in women who undergo bariatric surgery for extreme obesity.

Robert A. Schnoll, PhD received an R01 grant from the National Cancer Institute titled “Assessment of a Teachable Moment for Smoking Cessation, Administrative Supplement for Economic Studies of Interventions for Cancer Survivors and Their Families.” Funding will run into 2009.

Andrew A. Strasser, PhD received the Pfizer Global Research Award on Nicotine Dependence (GRAND) Award, one of six awardees worldwide. The funded project will investigate the extinction of smoking behaviors in response to treatment with varenicline.

Elizabeth B. Weller, MD is the Principal Investigator of a new grant from GlaxoSmithKline titled “The Evaluation of LAMICTAL as an Add-on Treatment for Bipolar I Disorder in Children and Adolescents, 10 to 17 Years of Age.”
The following sponsored research funding was received by the Department during the period April 1, 2008 through November 30, 2008
(*Sponsored research funding during the period 10/1/07 through 3/31/08. Awards were received after publication of last newsletter.)

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Wade H. Berrettini, MD was quoted in a July 28, 2008 article in the Milwaukee Journal Sentinel regarding a study which found that teenagers may start smoking because of peer pressure, but they become addicted to nicotine in part because of their genes. [http://www.jouonline.com/features/29557579.html] He also appeared on a June 8, 2008 segment on WPIX-TV in New York as part of a story investigating health care insurance coverage for people diagnosed with anorexia nervosa. Dr. Berrettini said that to deny care for anorexia nervosa because it is “not a biologically-based illness” is to make a grievous error that puts people with a serious illness at risk. A New Jersey health insurance company recently overturned its decision and provided a $250,000 settlement to a woman with anorexia nervosa. [http://media.vmsnews.com/MonitoringReports/062908/882804/1001432114/] Dr. Berrettini was also quoted in a May 6, 2008 New York Times article about the growing trend toward reclassifying diseases based on their genetic underpinnings. [http://www.nytimes.com/2008/05/06/health/research/06dise.html?pagewanted=2&_r=3&sq=&st=nyt%22&scp=1%22university%20of%20pennsylvania]

James C. Coyne, PhD was interviewed by Senior Writer Jeanna Bryne for an article appearing on the Live Science webpage on May 26, 2008, “Can ‘Fighters’ Like Ted Kennedy Beat Disease?” [http://www.livescience.com/health/080522-positive-thinking.html]. The interview was widely quoted in newspapers and blogs. In addition, Maggie Koerth-Baker interviewed Dr. Coyne in Amsterdam, the Netherlands in May 2008 concerning Dutch Olympic gold medal winner Maarten Van der Weijden’s anti-positive psychology approach to fighting leukemia. The interview has been quoted in international newspapers and magazines, including those in the uk, Ukraine, Hungary, Romania, and China.

The research of David F. Dinges, PhD on the effects of chronic sleep deprivation was featured on CBS’s 60 Minutes in a program on “The Science of Sleep.” The program aired March 16, 2008, and was the sixth most watched show during the week of March 12-18 among those aged 50 years and older, with 8.8 million viewers. The large viewer response resulted in the program being aired again on May 25, 2008. In a September 13, 2008 article in Science News, Dr. Dinges explained that Dopamine may naturally increase when a person is sleep-deprived as a way to counteract a revved-up drive to sleep. Sleep deprivation affects some people profoundly, impairing their ability to pay attention and lengthening their reaction times. [http://www.sciencenews.org/view/generic/id/35529/title/Dopamine_fends_off_zzzzs] Also, Dr. Dinges’ research published in the Journal of Neuroscience – reporting that being deprived of sleep, even for just one night, can it make the brain unstable and prone to sudden shutdowns – was cited by an additional 15 national and local outlets, including The Osgood File, KCBS-TV in Los Angeles, and WBZ-AM (CBS) in Boston. Dr. Dinges was also quoted in a May 21, 2008 article by Reuters and posted by 30 outlets, including MSNBC.com and The Australian. He discussed a study, published in the Journal of Neurology, in which researchers suggest that people who are sleep-deprived alternate between periods of near-normal brain function and dramatic lapses in attention and visual processing, making it clear how dangerous sleep deprivation can be while driving on the highway, when even a four-second lapse could lead to a major accident. [http://uk.reuters.com/article/UKNews14/PROF/20080521/sp=true]

In a June 22, 2008 Baltimore Sun article about a 3-D simulator in which soldiers see, hear and smell the rigors of combat to help ease war-induced stress, Edna B. Foa, PhD notes that more empirical evidence is needed to determine the efficacy and account for the cost of this type of exposure therapy. Dr. Foa, who works with PTSD patients – including soldiers – in both the U.S. and Israel, said the images in virtual therapy might be too generic to effectively elicit patients’ own memories. [http://pqasb.pqarchiver.com/baltsun/access/1498721891.html?dids=14987218911498721891149872189114987218911498721891&FMT=ABS&FMTS=ABS%3FT&item=current&date=Jun22,2008&author=David+Kohn&pub=The+Sun&desc=FACING+DEMONS+IN+-%27VIRTUAL+IRAQ%27]

Teresa Franklin, PhD was interviewed on September 10, 2008 by Tina Adler from MSNBC News on the topic of “Predicting Addiction: Why Some People Go from Trying to Requiring.” [http://health.msn.com/health-toxics/addiction/article.aspx?cp-documentid=100214619]

Namni Goel, PhD was interviewed for an article by Abigail Cuffey and Judy Kirkwood in the August 2008 Ladies’ Home Journal Magazine on the efficacy of negative air ions for major depression. She was also interviewed for a story by Jolene Edgar in the October 2008 issue of Glamour on the effects of olfactory stimuli on polysomnographic sleep.

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Ruben C. Gur, PhD discussed the role functional MRIs can play in examining behaviors such as deception with Advanced Imaging Magazine in a September 8, 2008 article. [http://www.advancedimagingpro.com/publication/article.jsp?pubId=1&id=5420&pageNum=2]

John B. Jemmott III, PhD appeared on NPR’s Weekend Edition on May 18, 2008 to discuss ways to prevent HIV transmission. [http://media.vmsnews.com/monitoringreports/051908/879374/1001413365/]

Daniel D. Langleben, MD spoke on St. Louis radio station KMOX’s “Reality Check” show and discussed new brain imaging technology that may be able to tell when someone is lying, although it may not be ready for use in uncontrolled or incomparable settings (i.e., court cases). [http://www.kmox.com/topic/play_window.php?auditType=Episode&auditId=2951492&topic=true] In a September 28, 2008 Cleveland Plain Dealer article, he discussed the potential for the utilization of fMRI scanners in lie detection. [http://blog.cleveland.com/medical/2008/09/can_mri_scanner_be_a_lie detector.html]

Caryn Lerman, PhD was on WHYY-FM on June 11, 2008 discussing her latest research which helps reveal why it is easier for some people to quit smoking than others. Dr. Lerman and colleagues discovered how to identify several novel gene variants that provide clues to the basic biology underlying nicotine dependence and the ability to cease smoking. [http://media.vmsnews.com/monitoringreports/061308/873697/1001437895/]

Helen Luu, MSW, social worker and team leader of the Southeast Asian Mental Health Program at the Hall-Mercer Community Mental Health Center at Pennsylvania Hospital, was quoted in the Philadelphia Inquirer on September 29, 2008 regarding gambling addiction among the Asian community, in light of the city’s plan to build a casino on the edge of Chinatown. [http://www.philly.com/philly/news/homepage/29874444.html]

David S. Metzger, PhD was quoted in an article in the Philadelphia Inquirer on his efforts in combating AIDS in China. Dr. Metzger will test “whether a drug that reduces the craving for heroin can also reduce the spread of HIV infection among addicts who share dirty needles.”

Charles P. O’Brien, MD, PhD was quoted in a June 17, 2008 Washington Post article discussing new guidelines for “Helping Patients Who Drink Too Much” proposed by the National Institute on Alcohol Abuse and Alcoholism. Dr. O’Brien said that “most doctors don’t know how to make the diagnosis [of alcoholism] and don’t really try to do anything about it until it is so easy to diagnose that all you have to do is glance at the patient.” [http://www.washingtonpost.com/wp dyn/content/article/2008/06/13/AR2008061303173.html?sid=ST2008061601500]

John P. O’Reardon, MD spoke with WHYY and discussed how TMS (transcranial magnetic stimulation) delivers pulses to the brain to activate circuits that are not functioning properly in people with certain mood disorders, including depression. Penn researchers are investigating this technique, along with other techniques including DBS and VNS. [http://www.why.org/news/healthsciencespages/_audio_files/sci2008062depression.mp3] Dr. O’Reardon also appeared on WHYY’s “Voices in the Family” program to discuss the standard treatments for depression, as well as cutting-edge new methods.

J. Russell Ramsay, PhD was quoted in a Philadelphia Inquirer article discussing the association between elite male gymnasts and childhood hyperactivity. Dr. Ramsay notes “there are a lot of parents of children with this disorder who see gymnastics, or athletics in general, as a positive way to channel their child’s attention.”

Anthony L. Rostain, MD, MA discussed the characteristics and scientific research regarding adult ADD and ADHD in a segment on Univision’s Aquí y Ahora newsmagazine television show. Dr. Rostain’s patient, Jaime Monteagleve, a Penn student, was also interviewed and spoke about his current treatment for ADD. [http://www.univision.com/content/video/s30.html?cid=1682879&channelName=Video&s_requestid=26789]

Robert L. Sadoff, MD testified in May 2008 that a woman charged with helping plot an elaborate bank robbery ending with the death of a pizza deliveryman “absolutely” has bipolar disorder. A federal judge subsequently ruled that Marjorie Diehl-Armstrong was not mentally competent to stand trial. Dr. Sadoff had known the Erie, Pennsylvania woman since the 1980s and said she has had the condition for a number of years. [http://www.goerie.com/apps/pbcs.dll/article?AID=/20080522/NEWS/ WS02/805220420/0/news30] The story was reported nationally by the Associated Press, The New York Times, and The Washington Post, among other outlets.

Mark S. Salzer, PhD was interviewed in November 2008 by Taunya English of WHYY radio for a segment titled “Mental Disability and Voting Access.” Dr. Salzer spoke about the difficulties and barriers that citizens with serious mental illnesses face in voting. [http://whyy.org/blogs/health-science/2008/11/04/mental-disability-and-voting-access/]

David B. Sarwer, PhD contributed to a discussion of bariatric surgery as a treatment for obesity which appeared in Inside Magazine in the Fall of 2008. On June 30, 2008, he participated in a Barimd.com webcast for professionals who work in the area of bariatric surgery titled “Eating Behaviors Affecting Bariatric Surgical Outcomes.”

Albert J. Stunkard, MD was interviewed for an oral history, which
Sangwon F. Kim, PhD joined the Department faculty in April 2008 as an Assistant Professor in the Tenure Track. He is a member of the Center for Neurobiology and Behavior and his laboratory is located in the Translational Research Laboratories (TRL).

Dr. Kim’s laboratory is interested in cellular signaling cascades in the brain – the process in which an initial stimulus or signal at the cellular level is sequentially converted into other stimuli or signals through a series of “cascading” molecular events. Working at the fundamental level of science, Dr. Kim has honed in on two areas of study that ultimately may have a clinical impact. The first is oxidative stress-mediated neurodegeneration. Dr. Kim explains that “many neurodegenerative diseases are associated with iron accumulation, which will lead to the oxidative stress in the brain. We hope that we can provide new strategies for the treatment of patients with various neurodegenerative diseases such as Alzheimer’s disease and Parkinson’s disease by studying brain iron homeostasis.”

The second area of attention concerns nutrient sensing mechanisms in the hypothalamus. “We are interested in the fundamental mechanisms of nutrient sensing and appetite control,” says Dr. Kim. “Recently, we have been investigating the molecular mechanisms of the second generation antipsychotic drugs-mediated adverse metabolic effects such as obesity or diabetes. Our lab utilizes molecular, cellular, and biochemical techniques in tissue culture, primary neuronal cell and animal models to address these issues.”

A native of Korea, Dr. Kim received a BSc in Biophysics from Iowa State University in 1996 and earned a PhD in Experimental Medicine from McGill University in Montreal in 2001. His thesis earned recognition as the “Best PhD Thesis of the Year” at McGill. He trained for a year as a post-doctoral fellow in Dr. Prem Ponka’s laboratory in the Department of Physiology at McGill, and followed this with three and a half years of post-doctoral training with Dr. Solomon Snyder in the Department of Neuroscience at Johns Hopkins University. In April 2006, Dr. Kim was appointed a Research Associate at Johns Hopkins, where he received an NIH K99/R00 Pathway to Independence award to study the link between NMDA-mediated iron uptake and neurotoxicity. He transferred the grant to Penn when he arrived two years later.

Dr. Kim eagerly anticipates working with his new colleagues at the University. He has joined the Mahoney Institute of Neurological Sciences and the Institute for Diabetes, Obesity and Metabolism as initial steps in developing new relationships on campus, and says that he is “very much looking forward to collaborating with many other researchers in the Department and at Penn.”

Dr. Thomas A. Wadden, PhD commented in a May 20, 2008 Washington Post article about a boarding school for overweight kids. [http://www.washingtonpost.com/wp-dyn/content/article/2008/05/16/AR2008051603581.html]

Dr. Daniel Weintraub, MD was quoted in the Chicago Tribune on July 14, 2008 regarding a recent study which found that more than 13 percent of patients taking a particular class of drug called dopamine agonists to treat Parkinson’s disease, sold under brand names including Mirapex and Requip, experienced dramatic changes in behavior. Some developed gambling problems, heightened sexual interest or compulsive spending and eating habits where there had previously been no sign of such disorders. [http://pqasb.pqarchive.com/chicagotribune/access/1509722771.html?dids=1509722771%3A1509722771&FMT=ABS&FMTS=ABS%3AFT&type=current&date=Jul+14,+2008&author=Robert+Mitchum&pub=Chicago+Tribune&editon=&startpage=1&desc=Drugs+calm+Parkinson%27s+but+ignite+odd+actions] Dr. Weintraub also spoke with HealthDay/Washington Post for a June 25, 2008 article about this new study which was presented in June at the Movement Disorder Society’s 12th International Congress of Parkinson’s Disease and Movement Disorders. [http://www.washingtonpost.com/wp-dyn/content/article/2008/06/25/ AR2008062501802.html]
Recognizing the significant achievements of our faculty and staff

“...never thought that I was going to be a bench scientist when I was training,” says Steven E. Arnold, MD, Professor of Psychiatry and Neurology and a member of the Psychiatry Department for almost two decades. “I always thought I would be doing some kind of clinical research. But then one question led to another, and the next thing you know you’re using biochemistry and molecular neuropathology.”

It’s been that way for Dr. Arnold throughout his career, one investigative path opening to the next. It has spurred him to develop expertise across the full research spectrum, from clinical to basic to translational research and back again. And it has encouraged him to adopt multiple scientific disciplines and methodological approaches to further his study of the biological bases of severe psychiatric illnesses.

It’s an eclectic perspective that began early in his education.

Born in Worcester, Massachusetts, Dr. Arnold says that he had “been interested in becoming a physician as long as I can remember,” a goal stemming from his love of science and desire to help people. He completed an accelerated combined BA/MD program at Boston University in 1983, graduating with dual majors in medical science and philosophy. There his interest in psychiatry and neurology emerged, with a specific focus on the relationship between brain and behavior.

“The mind-body problem in philosophy is a big one, and that is what actually sparked my interest,” Dr. Arnold recalls. “I wasn’t sure whether I wanted to specialize in neurology or psychiatry. I had done a rotation in behavioral neurology as a medical student, and that actually seemed to be exactly what I was interested in, as it addressed the mind-body problem. At the time, there was a lot of talk about personality changes associated with temporal lobe epilepsy, and that notion just entranced me.”

Neurology would have to wait, though. “A lot of the other neurology I was exposed to at the time was more of the knee-tapping variety – motor functioning and sensory functioning as opposed to mental functioning,” Dr. Arnold says, “so I went into psychiatry.” He completed a psychiatry residency at the New York State Psychiatric Institute/Columbia Presbyterian Medical Center in New York, where he received “outstanding” training in psychiatric diagnosis, psychotherapy, and psychopharmacology.

His psychiatry residency led him back to earlier questions. “I still felt that the neural systems approach to thinking about the mind and the brain was lacking, so I ended up in neurology, too,” Dr. Arnold says. He completed a neurology residency at the University of Iowa Hospitals and Clinics “where they had probably the best program in cognitive neurology in the country at the time.” There he also completed fellowship training in Behavioral Neurology/Cognitive Neuroscience and was a post-doctoral associate in neuroanatomy. At Iowa, his research career began to blossom, and he received the Iowa Midwest Neurology Association Residents’ Day Research Award for each of his three years there.

Following his training in 1990, Dr. Arnold returned east to accept an Assistant Professor position in Penn’s Department of Psychiatry, with a secondary appointment in the Department of Neurology. He was promoted to Associate Professor in 1999 and to Professor in 2006. “I liked the people here,” he says, “and Penn offered the best opportunity to grow and do the kind of integrative science and medicine that I wanted to do.”

Dr. Arnold’s commitment to research has always been driven by his clinical work. “Treating patients is very gratifying on an immediate basis,” he says, “but when you’re fascinated by...
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the problems that people are experiencing, you get intellectually curious. The only way to really satisfy that is through asking questions and seeking answers, and that’s what research is.”

“I didn’t have PhD training,” Dr. Arnold notes, “but I learned to define the question, and the scientific approaches and technologies required to best answer that question. Luckily, Penn has such a depth and breadth of expertise and a remarkable degree of collaboration from scientist to scientist. There has always been the opportunity to learn new methodologies and techniques from people such as John Trojanowski [MD, PhD], Virginia Lee [PhD], James Eberwine [PhD], and Irwin Lucki [PhD] – real pioneers of basic science approaches.”

Dr. Arnold credits these and other Penn faculty with major influences on his work. “When I came to Penn as a junior faculty member,” he remembers, “I had wonderful mentoring from two people – Raquel Gur [MD, PhD] and John Trojanowski. With Raquel, I saw the importance of integrating phenomenological, neuropsychological, and diverse neuroimaging methods to understanding brain and behavior in complex psychiatric illnesses like schizophrenia. With John, I developed an appreciation for the power of molecular neuroscience and neuropathology, and how that can be applied in psychiatric illness.” Dr. Arnold also credits former Department Chair Peter C. Whybrow, MD and current Chair Dwight L. Evans, MD for strongly supporting his career at Penn.

Dr. Arnold’s two principal scientific mentors have been instrumental in determining his research areas – Dr. Gur in schizophrenia and Dr. Trojanowski in aging and neurodegenerative dementias. His use of human post-mortem tissues and mouse models of neurobehavioral dysfunction in his studies has greatly benefited from their insights, and those of others.

Currently, Dr. Arnold is emphasizing two main lines of investigation. “We have a major effort to understand how the gene dysbindin works in schizophrenia,” he explains. “We are looking at its protein in post-mortem brain tissue from people with schizophrenia who have died, as well as in mice who have mutations of the dysbindin gene. We are also looking at other candidate proteins.” Dr. Arnold’s work in the schizophrenia field has produced a number of research contributions, including studies of neural architecture in schizophrenia and the discovery that dysbindin protein is abnormal in schizophrenia.

Dr. Arnold’s laboratory is also exploring the relationship of psychological distress to risk for dementia in studies of Alzheimer’s disease, other dementias, schizophrenia, and healthy aging. “I’ve been very interested in aging and the cognitive and emotional changes that occur with aging, and started to do more laboratory research in aging,” he says.

“I am working closely with collaborators in Chicago who direct a large longitudinal study of aging and cognition in older people who have agreed to brain donation after they die,” Dr. Arnold says. “We have been examining the relationships of psychological distress to neuropathological changes in brain tissue. This is a major avenue of research for us now – to understand how both the biology and phenomenology of stress increases a person’s risk for Alzheimer’s disease or their thinking difficulties in later life.” The specific focus is on how aging and stress cause the degeneration of synapses, by looking at synaptic apoptosis in animal models, as well as in human brain tissue.

“‘I never thought that I was going to be a bench scientist when I was training. I always thought I would be doing some kind of clinical research. But then one question led to another, and the next thing you know you’re using biochemistry and molecular neuropathology.’

“And we are looking at that in patients too, using clinical research tools,” Dr. Arnold adds. Biomarker studies are planned to look at how chronic psychological distress makes people vulnerable to cognitive decline.

Dr. Arnold’s time with patients, about a day a week, helps shape his research. “Over the last few years, I’ve wanted to take some of the ideas that have been developing in the laboratory and apply them in clinical populations,” he says. “That was my motivation to expand from the laboratory to assume the Directorship of the Geriatric Psychiatry Section and later the Directorship of the Penn Memory Center, an interdisciplinary center for aging, cognition and Alzheimer’s disease research and clinical care.” Dr. Arnold is also Associate Director of the Institute on Aging, Associate Director of the Alzheimer’s Disease Center (ADC), and leader of the ADC Clinical Core. While he wears these various hats, he continues to direct the Cellular and Molecular Neuropathology Program in the Department of Psychiatry, providing the basic science foundation for his work. These positions have given him the opportunity and resources to apply some of the ideas growing in the laboratory to clinical populations. It’s the very epitome of translational medicine.

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Dr. Arnold also devotes time to teaching. He directed the School of Medicine’s Clinical Neuroscience Track for seven years and lectures and conducts seminars at the University, School of Medicine, and School of Nursing. “We have undergraduate students, graduate students, fellows, and residents whom we teach in the lab, as well as in the Penn Memory Center,” he says. “Why teach? I like it. It’s nice to work with people who are interested in the same things you are. It makes the job much more stimulating.”

Dr. Arnold’s work has impacted that of others at Penn. “I think it has helped guide some of the direction of Dr. Gur’s Schizophrenia Research Center and her Conte Center in Schizophrenia,” he says. “I hope it has helped to prompt and stimulate the interest of faculty in other departments and divisions such as Pathology and Laboratory Medicine, Geriatric Medicine, and Neurology in complex mental and emotional behaviors,” he adds.

Outside of his busy work schedule, Dr. Arnold likes to spend time with his four sons and wife. “I like to cook and, hopefully, not bother my family too much with my grant writing,” he says. Does he have any culinary specialties? “No special cuisines,” he says, “but I like to do gourmet cooking and brew beer, when I have the time.”

Dr. Arnold has been honored with several research awards from NARSAD, a leading charity dedicated to mental health research. He has also received the Theodore & Vada Stanley Foundation Research Award, the New York State Psychiatric Institute Centennial Award – Alumnus of the Decade 1980-1989, and the Alzheimer’s Association T.L.L. Temple Foundation Discovery Award.

“I started off more clinically oriented,” Dr. Arnold observes, “and then I began to appreciate where my work was leading me, and I go into the lab, and then you want to start applying what you’ve learned, and you go back into clinical. So there’s now a nice mix of both clinical and basic research in my career.” It’s been a successful blend, one likely to mold his future scientific journey. If the past is any guide, we can be sure that Dr. Arnold will follow wherever his curiosity and imagination take him. 

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Department of Psychiatry
Annual Family Picnic

July 12, 2008
The brain is the source of who and what we are," says Peter B. Bloom, MD, Clinical Professor of Psychiatry at Penn. It is the trigger for the incredibly complex interactions that link mind and body.

Focus on this intricate nexus is in fashion today, but almost from the beginning it has occupied the core of Dr. Bloom's intellectual journey as a physician and psychiatrist.

Born in Philadelphia, Dr. Bloom first showed interest in medicine in high school in suburban Swarthmore, his lifelong home base. "It was an evolving sense that because I liked science and people, it was a career that would be very satisfying," he remembers. His fascination was encouraged by his weekend visits to the laboratory of Samuel Gurin, PhD, father of a high school friend and a Penn Professor of Biological Chemistry who later served as Dean of the medical school.

Dr. Bloom went on to earn a BA in Chemistry from Cornell University in 1958, and next attended medical school at Penn, where his interest in the brain, mind, and body first blossomed. "Francis Wood, MD was my Chief of Medicine and he exemplified treating the whole patient," Dr. Bloom says. "My own abilities and interest in the psychological side of things began to ripen in my senior year of medical school and throughout my career earning progressively higher faculty positions in Penn's Department of Psychiatry.

After his military service, he completed his medical residency and gastroenterology fellowship at HUP. "I really liked internal medicine and psychiatry," Dr. Bloom recalls, "but after my GI fellowship, which involved so many patients psychologically presenting as medical illnesses, I finally decided to become a psychiatrist and to emphasize what I thought was my best contribution to patient care."

Dr. Bloom's path to psychiatry included his hypnosis training sponsored by Penn's Graduate School of Medicine. Several patient experiences during his medical residency helped him realize that suggestions given by the physician within the doctor-patient relationship could be powerful. In one episode, a patient expressed to him his fear of impending death during imminent open-heart surgery, using the metaphor of being enclosed by a fence. Dr. Bloom countered that the surgery would "put a gate in that fence," permitting his escape. Post-operatively, the patient credited the conception of the "gate" with helping him handle the surgery. "I thought," says Dr. Bloom, "wow, what can images do to create security and comfort in our patients and how do they change one's thinking, feeling, and behavior?" It is fascinating to him today that current fMRI studies illustrate the physiological changes in the brain's blood flow consequent to suggestions especially under hypnosis.

As a practicing psychiatrist, Dr. Bloom greatly values his medical training. He remembers the admonition of Chairman of Medicine James Wyngaarden, MD, who intersected with Dr. Bloom briefly during his medical training at Penn. Wyngaarden advised him as he began psychiatric training not to forget that "all thought is laid down in lipid." "I never forgot his emphasis on the biological side of who we are," Dr. Bloom says. "It complemented the psychological side to which I was already devoted.

Dr. Bloom began his psychiatry residency at Penn, completed it at the Institute of Pennsylvania Hospital in 1971, and immediately started a private practice at the Institute. When the Institute closed in 1997, he continued his hospital affiliation at Pennsylvania Hospital and shifted his private practice to his Bryn Mawr office. He preceptored and taught at Penn throughout his career earning progressively higher faculty positions in Penn's Department of Psychiatry.

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becoming Clinical Professor of Psychiatry in 1992.

Dr. Bloom’s practice of psychiatry is broadly based. He remembers using lithium carbonate in clinical trials at the Institute, and currently uses medications throughout his practice. He emphasizes accurate diagnosis and treatment planning for his patients. He has taught these principles to psychiatrists taking their certifying examinations and to Penn residents today. Dr. Bloom works with patients with mood disorders, chronic pain, and those who are stumbling in achieving desired goals in careers, families, marriage, and their own individual lives. He chooses his treatment modality based on the needs of his patient at any given time and that may include elements of interpersonal psychotherapy, behavioral interventions, and psychodynamic psychotherapy.

Of special interest is his occasional use of medical hypnosis for which he has gained international prominence. Dr. Bloom comments that “hypnosis is a useful adjunct to nearly all psychotherapies.”

“While hypnosis is only one ‘arrow’ in my therapeutic quiver,” he insists, “its attraction to me was its unique ability to treat the mind-body interface. Major surgery without anesthesia is an example of the use of surgical hypnosis, which challenges our thinking on how complex the mind-body interface can be. In addition, hypnosis helps people get into a creative mode or ‘zone’ enabling them to accomplish difficult goals in therapy, the arts, and sports.” He believes every clinician should use it more often.

In describing his work, Dr. Bloom notes that success in healing is not up to the therapist alone. “It is clearly an interaction between therapist and patient,” he says. “Sometimes I have to take charge, and sometimes the patient takes charge and tells me what we’re going to do.” The therapist must be flexible and willing to learn from the patient when the situation presents itself, and to establish a “collegial relationship,” even a position of equality.

A dramatic example of this equality is found in Dr. Bloom’s published case history of a 12-year-old girl suffering from a conversion disorder causing paralysis of her entire body (1). Using both hypnosis and conscious suggestion, Dr. Bloom helped her recover completely from her paralysis. “She was creative and precious,” he recalls. “We were equal partners in her care, and both of us contributed the interventions that we used. Whatever age your patient is, you need to find out what their resources are and find a way to resonate with them at that age.”

Central to the psychiatrist’s craft is creativity, a theme Dr. Bloom explores in his writings (2). He states that “creativity is the willingness of the therapist or patient to experience something new and unexpected in the treatment process. When it happens - an idea, an image, or humorous comment - it usually is not a part of an established theory of therapy or a technique the therapist has used before. Most often, it springs out of the therapeutic relationship and the interactions surrounding the issue for which the patient is seeking care.”

“Sometimes hypnosis facilitates this process,” Dr. Bloom notes, “but almost always these are mutative experiences in the patient’s growth.” “These moments,” he underscores, “are not coming out of nowhere and we are not ‘winging it’.” They originate in the context of a full amount of training, a thorough understanding of the patient’s history, and acceptance by the patient. Like all art, it cannot be forced or called upon at will.” He says, “I don’t worry when it’s not happening; I just have to trust the process.”

To some extent, creativity can be enhanced through training. “You listen for it very carefully [with trainees], and when you hear it, you underline it,” he emphasizes. “That’s so critical. I point it out. I encourage it, and then we spend a lot of time talking about the context. How did the patient receive this? How do you understand it? How do you bring creative moments into the office? These moments can come from the patient. They can come from the therapist.” For Dr. Bloom, it is important for each resident to learn as many kinds of psychotherapy as possible so that therapy does not become ritualized or wedded to one or two theories. Most importantly, residents must find their own voices as therapists. Identifying their own creative moments with patients is the best way to do that.

“All therapy can change the way the brain works,” Dr. Bloom says. “The advances in neuroscience are clearly revolutionary in showing the brain’s plasticity and giving an idea on how our psychotherapies affect our very physiology. Who knows when and how we will use future technology in discovering how authentic, empathic, and resonating interactions with our patients result in growth and maturity. Won’t that be the day!”

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Looking back on almost twenty-five years in nursing, Michelle E. Conley, RN, BSN, MBA says that she “can’t imagine doing anything else.” But it wasn’t always that way.

A native Philadelphian and now Clinical Director of Women’s Health Services and Psychiatry at Pennsylvania Hospital, Ms. Conley says that she “went to nursing school right out of high school because I didn’t really know what I was interested in.” That soon changed at the Frankford Hospital School of Nursing, where she became enamored with nursing in general, and psychiatric nursing in particular.

“When I was in school, I thought I wanted to be an operating room nurse,” she recalls, “but when I did my psychiatry rotation my junior year, I was fascinated and hooked ever since.” In May 1984, she received her RN diploma, and the same month earned her Associates Degree in Arts, Letters and Sciences from Pennsylvania State University. That summer she was hired as a Staff Nurse in Inpatient Psychiatry at Friends Hospital in Philadelphia, her first nursing position.

After six years at Friends Hospital, Ms. Conley moved to The Institute of Pennsylvania Hospital, a psychiatric facility affiliated with Pennsylvania Hospital. There she achieved a series of positions with increasing levels of responsibility, first as a Staff Nurse in the Brief Intensive Treatment Program, then Assistant Nursing Director of the Dissociative Disorders Program as well as Assistant Nursing Director of the Brief Intensive Treatment Program.

Ms. Conley’s last position at The Institute was as Program Director of the Kirkbride Apartment Program. In this role, she was responsible for all clinical, operational, and fiscal aspects of a 12-bed community-based program. She also had the opportunity to serve as a liaison with community agencies, landlords, local businesses, and care providers, to develop and facilitate therapeutic groups and health maintenance programs with clients, and to conduct psychoeducation programs with clients and families.

The position tested and strengthened her administrative and leadership abilities, but it lasted less than two years because The Institute of Pennsylvania Hospital closed in 1997. Ms. Conley joined Pennsylvania Hospital as a Staff Nurse in Acute Inpatient Psychiatry immediately following. After a year, she returned to school while working as the Nursing Director of the Crisis Response Center and Inpatient Psychiatric unit to pursue a BS in Nursing degree from Thomas Jefferson University, which she earned in 2000. She worked in that capacity until 2004 when she accepted a position as the Nursing Director of the Labor & Delivery/Perinatal Evaluation and Treatment Unit/Antepartum Unit/Birthing Suite. In April 2005 she attained her current position as Clinical Director of Women’s Health Services and Psychiatry. Along the way, Ms. Conley supplemented her formal nursing education by earning an MBA from Rosemont College in May 2005.

Ms. Conley has forged a career of progressively higher levels of education, training, and levels of responsibility. As with her initial decision to enter nursing, she didn’t design her career that way. “It has certainly not been planned,” she says. “I believe the trajectory of my career can be directly attributed to not planning. If you had asked me five years ago to plan where I would be now, I couldn’t have even imagined it, let alone planned to attain it. I believe you need to be open to all things and in doing so opportunities will present themselves. It may sound foolish but it has worked for me for the last 24 years.”

Initiating positive changes in her career and responding proactively to changes she could not control, such as the closing of The Institute of Pennsylvania Hospital and Penn’s acquisition of Pennsylvania Hospital in 1997, have been hallmarks of Ms. Conley’s career, and make her an ideal person to advise others. “Times of change afford us innumerable opportunities,” she says, “and we all can control how we deal with and manage change. If you view change in terms of the possibilities, it feels different.”

It’s an attitude that serves her well in her current position as Clinical Director. Ms. Conley oversees inpatient psychiatry and the Crisis Response Center and supervises seven nurse managers and all nurse practitioners and physician assistants at Pennsylvania Hospital. She also oversees all of the operations in women’s health services at Pennsylvania Hospital, including the Labor & Delivery Unit, Perinatal Evaluation and Treatment Unit, Antepartum Unit, Postpartum Units, Intensive Care Nursery, Family Education, Solutions for Women Boutique, and Lactation Services.

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Recently, Ms. Conley capitalized on her ability to accept and manage change by playing an integral role in the relocation of the inpatient psychiatric unit from the Hospital of the University of Pennsylvania to Pennsylvania Hospital. Thinking about it, she says that “it has been a tremendous amount of work and effort, but also a tremendous opportunity to move inpatient psychiatry at Pennsylvania Hospital to new levels of visibility and accomplishment.”

Over the course of her career, Ms. Conley cites “looking for and appealing to what is best in people” as among the traits she considers most important. “Success and a sense of accomplishment is less about intellect and more about diligence, humility, integrity, respect for others, and a willingness to fail and try again,” she emphasizes. “We are all replaceable, but that does not mean you cannot bring true meaningfulness to everything you do and every interaction you have no matter how mundane. You can have fun and still get the job done well.”

Not surprising, Ms. Conley’s special memories of her career mostly involve people. “The clinicians and patients throughout the years,” she says, “have taught me more than any formal schooling ever could. I have been afforded an opportunity to work with some incredible people and I cannot thank them enough for all the wisdom they have generously shared with me throughout the years.”

Outside of work, Ms. Conley spends time with her partner of eleven years and their two children, seven-year-old Tommy and six-year old Grace. But when she comes to work at Pennsylvania Hospital, it’s all about nursing. “I love nursing and I really respect and appreciate nurses,” she says emphatically. “I believe nurses are the backbone of hospital care. It is the nurse who spends the most time with patients and has the opportunity to bring so much to the experience of being in a hospital. Aside from the obvious technical care needed, nurses are usually the caregivers who are able to tap into the more subtle or humanistic needs of patients. That really appeals to me and my interests.”

Voluntary Faculty Profile – Peter B. Bloom, MD

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gram for the Department of Psychiatry in collaboration with the Institute of Pennsylvania Hospital. Today, he gains more satisfaction from individual instruction. “I think being a mentor is the most fun, and I am deeply grateful to those who mentored me,” he says. “With each decade, I have more experience and possibly wisdom to impart. It is enjoyable to be with so many talented and outstanding doctors in the making.”

Dr. Bloom has been affiliated with Penn for most of the last 50 years. “Penn has provided a rich context and a supporting environment for me to explore my interests in teaching, and in therapy,” he says. “Each Chairman has been a good friend and has offered great encouragement. I have traveled proudly waving Penn’s flag around the world as I have lectured extensively over many years.”

Outside of Penn, Dr. Bloom is a Distinguished Life Fellow of the American Psychiatric Association. He has served as President of the International Society of Hypnosis (ISH) and President of the American Board of Medical Hypnosis, and is a member of other boards and societies in the field, both here and abroad. He has received many honors over the years, among them the 2001 ISH Pierre Janet Award for Clinical Excellence, 2004 ISH Benjamin Franklin Gold Medal, and the 2007 Presidential Award from the American Society of Clinical Hypnosis. In June 2008, he received the Annual Award for Clinical Faculty from the Department of Psychiatry, in part for having “served as an outstanding role model for a generation of students and colleagues.”

Outside of his professional interests, Dr. Bloom says, “I love music and still sing with the twelve-man acappella group we founded at Cornell in 1956.” Another interest stems from his involvement with a “woody” camp for boys as a child and teenager. “It was there I learned to love camping and canoeing, heading the canoeing department during my college summers. I still love canoeing and now enjoy teaching the skills to my grandchildren,” he says.

“Finally, my greatest achievement is my marriage and family. In 2008, Marcia and I celebrated our 50th anniversary with our children and grandchildren.”

Summing up over a half century in medicine and psychiatry, Dr. Bloom puts it simply, “As a psychiatrist, I feel I have chosen a most exciting career and, on looking back and into the future, I feel fortunate indeed.” Myriad colleagues, friends, and students whose lives and careers he has impacted over the years would no doubt convey their own good fortune at knowing him.

The new 2008-2009 academic year has already proven to be an exciting year for the Department of Psychiatry Residency Program. We have experienced multiple structural changes that presented new opportunities for expansion of our inpatient and outpatient clinical and educational experiences.

The inpatient services have welcomed the new class of 2012, who have been showing fine clinical skills and academic ambition in the finest tradition of the University of Pennsylvania. As the class of 2011 continues to develop, they have welcomed two new additions to their already strong class, Nancy Warden, MD from the University of California, Davis, and Karla Campanella, MD from Penn State. David Danish, MD has begun a research project with the psychosomatic medicine faculty on the management of delirium. Holly Valerio, MD will be spending elective time obtaining training in the treatment of eating disorders, and Rebecca Aspden, MD will be training at Devereux Community Services to deepen her child psychiatry experience. Christopher Tjoa, MD, Donovan Maust, MD, and Andrea Bowen, MD continue to devote time to independent research in the Clinical Research Scholars Program. Finally, Ryan Connolly, MD is developing a new combined psychiatry-neurology conference series.

One of the biggest changes of the year was the move of our inpatient psychiatry unit from Founders 11 at HUP to its new home on the 6th floor of the Spruce Building at Pennsylvania Hospital. In addition to having more clinical space, we also now have space for didactics of all kinds. 6 Spruce has already become a busy inpatient unit, serving patients with mood disorders, geriatric patients, and “med/psych” patients. With the move, the residency program took the opportunity to greatly expand the didactics offered on the unit. Ben Pumphrey, MD organized many new didactic programs to broaden residents’ exposure to various important topics in psychiatry. These mostly resident-led didactics include: Med-Psych Report, Women’s Mental Health Report, Individual Inpatient Psychotherapy, Professionalism, Chief Process Group, Evidence-Based Psychiatry, Practical Psychopharmacology, Psychiatry in Context, and Inpatient Interviewing. We plan to add several more, including Family Assessment didactics.

This year a new chief resident role was created to further promote the educational goals within the residency and medical school. Melissa De Jesus, MD, Chief Resident for Medical Student Education, and Benoit Dubé, MD, Associate Director for Medical Student Education in Psychiatry, provide clinical teaching skills to residents as they are developing into better educators on their inpatient psychiatry rotation through their “Teach the Teacher” didactics. This is an exciting process as residents balance their own dual roles as teachers of junior residents and medical students and further develop their own teaching styles. Dr. De Jesus also has the opportunity to work with each student from the first day of the rotation (orientation, introductory didactics) until the last day of the rotation (observation and clinical assessment of the final patient interview and write-up) and strongly believes that this helps to reinforce the Department’s dedication to education.

Outpatient rotations continue in general and specialized psychopharmacology clinics, and the Resident Psychotherapy Practice flourishes with training in cognitive, behavioral, psychodynamic, group, and couples psychotherapy. With increased elective time, senior residents also pursue their areas of interest. Examples include Dr. Karen Berlin’s participation in the Oncology Clinic at Pennsylvania Hospital and Dr. Regina...
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Szucs’ pursuit of substance abuse research at the Treatment Research Center. Dr. Connolly and Samar Jasser, MD participate in Comprehensive Consultation Service cases with the Mood Disorders faculty. Donald Tavakoli, MD organized a specialty clinic in the Department of Dermatology providing consultation for psychocutaneous diseases. Jenny Kim, MD is working with Anthony Rostain, MD seeing patients with adult developmental disorders, and Sarah Mathews, MD spends time at the college counseling service at Penn. In addition, a number of residents will attend training conferences in Prolonged Exposure for Post-Traumatic Stress Disorder (PTSD) and Exposure/Ritual Prevention for Obsessive Compulsive Disorder (OCD).

All of this has occurred before the end of the summer! We do feel a sense of momentum in the residency and are excited to see what the rest of the year holds. Of course, none of these achievements would have been possible without the optimism and energy of everyone in the Department. We (the four chiefs) would like to thank everyone involved for their contributions and support.

INTRODUCING THE RESIDENT CLASS OF 2012

The Department of Psychiatry welcomes the class of 2012 (pictured below) to the residency-training program. The current class of interns in psychiatry was chosen from 619 applicants of whom 74 were actually ranked. These 10 individuals are extremely talented young doctors who were at the top of their medical school classes and who demonstrated a strong commitment to the field, as well as great leadership potential. They have shown themselves to be very fine house officers, eager to learn and dedicated to providing outstanding clinical care to their patients. This year’s recruitment efforts began on September 1st and will continue until January 31, 2009.

Front Row, from left to right:
Abraham Pachikara, MD (University of Pennsylvania)
Michelle Moyer, MD (University of Pittsburgh)
Laurie Gray, MD (University of Pennsylvania)
Mario Cristancho, MD (Universidad Industrial de Santander)

Back Row, from left to right:
John Northrop, MD, PhD (University of Pennsylvania)
Rachel Bennett, MD (Drexel University)
Bianca Previdi, MD (Jefferson Medical College)
Mia Everett, MD (Harvard Medical School)
Adam Meadows, MD (Washington University)

Inset: Eleanor Ainslie, MD (Jefferson Medical College)
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- Obsessive Compulsive Disorder
- Schizophrenia
- Schizoaffective Disorders
- Cancer Counseling
- Women’s Mental Health
- Geriatric Disorders
- Memory Disorders & Dementia
- Marital, Family & Relational issues
- Substance Abuse
- Psychosomatic Disorders
- ADD & ADHD
- Social Learning Disorder
- Weight & Eating Disorders
- Pain Management

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