

# PENN Psychiatry Perspective



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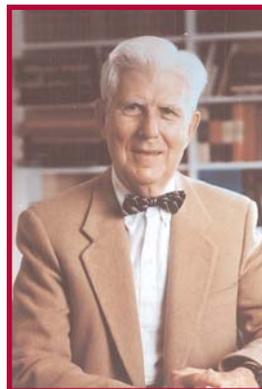


Department of Psychiatry  
and  
PENN Behavioral Health  
University of Pennsylvania

## Aaron T. Beck, MD

### 2006 Albert Lasker Clinical Medical Research Award

**A**aron T. Beck, MD, University Professor Emeritus of Psychiatry, is the recipient of the 2006 Albert Lasker Clinical Medical Research Award, considered the most prestigious honor bestowed in American science. Called "America's Nobel," the Lasker Award is often a precursor of a Nobel Prize. Since the first Lasker Award was conferred in 1962, 71 awardees have later won a Nobel.



In a stellar career stretching over five decades, Dr. Beck revolutionized the psychological understanding and treatment of depression and other psychiatric disorders, pioneered the development of Cognitive Therapy to treat these maladies, developed sophisticated instruments for assessing the severity of specific psychiatric syndromes, and continues to make seminal additions to our understanding of suicide classification, assessment, prediction, and prevention.

Dr. Beck, featured in the Faculty Spotlight column in the Winter 2006 issue of *Penn Psychiatry Perspective*, is widely known as the "Father of Cognitive Therapy," the

fastest growing short-term psychotherapy in the world.

Since 1954, Dr. Beck has been a faculty member in Penn's Department of Psychiatry, an association that has proved beneficial to his path-breaking research. "I have been particularly helped by the warm atmosphere in the Department toward clinical research dating back many decades to the chairmanships of Dr. Kenneth Appel (1953-1962) and Dr.

Albert Stunkard (1962-1973)," he says.

Dr. Beck views the Lasker Award as more than personal recognition. "This award acknowledges that psychological approaches to the understanding and treatment of mental illness presents a scientifically valid form of investigation," Dr. Beck emphasizes. "Specifically, it recognizes the value of Cognitive Therapy in clarifying and ameliorating various problems."

The School of Medicine is holding a reception to honor Dr. Beck on November 6 at the Union League, 5:00-7:00 pm. All Department faculty and staff are invited to attend. Please contact Tina Callaghan at (215) 662-2818 for details. ❖

## Communicating better...

**P***enn Psychiatry Perspective* has a new look. We have created distinct sections within the newsletter and have utilized a two- or three-column page structure to make it easier to locate our features and read our stories. We have also added the portrait of Benjamin Rush to our cover page. Rush, the first Chair of Chemistry in America and one of the earliest teachers in Penn's medical school, was the world's leading expert on mental diseases in the late 18th and early 19th centuries. In 1812, Rush published *Medical Inquiries and Observations Upon Diseases of the Mind*, the first American textbook of psychiatry. Rush is recognized as the "Father of American Psychiatry."

We have also redesigned the Department web site to improve ease of use and to expand the information available to users. Starting in November, the new web site address will be: [www.med.upenn.edu/psych](http://www.med.upenn.edu/psych). This and future issues of *Penn Psychiatry Perspective* will be posted on the web site. Also, we are developing a new web site for the Department's residency program, to be launched in November ([www.med.upenn.edu/psychres](http://www.med.upenn.edu/psychres)). ❖

## Chairman's Report

About a decade ago, biomedical researchers began to use a term which succinctly describes what we do. According to the NIH, *translational research* is the process by which "scientific discoveries [are] translated into practical applications."

Translational research is the place where science and medicine meet to conquer disease.

Conducting research to improve patient care is one of the fundamental reasons why academic medical centers and departments such as ours exist. How well we create knowledge to improve the public health largely determines our value to society and our reputation among our peer departments.

Translational medicine takes many forms, from laboratory or "bench" research to studies of human subjects, and vice versa, with the same goal – improved drugs, therapies, and other treatments.

While the boundaries are somewhat blurred, I like to view the translational research efforts in our Department in three categories: 1) basic research; 2) behavioral medicine research; and 3) clinical research.

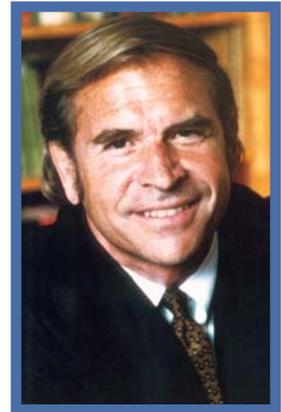
*Basic Research* – The path from basic investigation to the bedside is not always straightforward. Basic science investigators may pursue questions without immediate clinical significance, though their efforts may produce findings that ultimately unlock medical puzzles to improve patient care. Other basic researchers stick closer to clinical applications, such as identifying genes that cause or exacerbate disease.

The Center for Neurobiology and Behavior is the focal point for our basic translational work. Here, scientists study the neurobiology of disease, working at cellular or molecular levels to understand how the essential building blocks of the neural system develop and change. They search for genes that may predispose individuals to certain disorders, including mood and anxiety disorders and schizophrenia. Others seek the genetic basis for human obesity or examine how anti-depressant, anti-anxiety, and anti-psychotic drugs work in the human body.

*Behavioral Medicine Research* – Behavioral medicine examines the role of behavioral and cognitive factors in the etiology, prevention, treatment, and outcomes of major medical illnesses. The Center for Studies of Addiction and the Treatment Research Center focus on addictive illness. The Division of Sleep and Chronobiology investigates the basis for sleep disorders, the Weight and Eating Disorders Program focuses on the prevention and treatment of obesity, the Transdisciplinary Tobacco Use Research Center studies tobacco use and nicotine addiction, and the HIV Prevention Research Division tests HIV/AIDS prevention interventions.

In this issue, we pay tribute to Aaron T. Beck, MD, founder and director of the Psychopathology Research Unit, who is

the recipient of the prestigious 2006 Albert Lasker Clinical Medical Research Award. Over five decades, all spent in our Department, Dr. Beck developed the theory and practice of cognitive therapy, used world-wide to treat patients suffering from a wide range of mental and medical disorders.



*Clinical Research* – At the clinical research end of the investigative spectrum, faculty in the Neuropsychiatry Section, including the newly established Center for Translational Research in Psychiatry and the Center for Neuroimaging in Psychiatry, study brain-related disorders associated with complex behavior change, particularly schizophrenia. The Center for the Treatment and Study of Anxiety explores new psychotherapeutic approaches to treat posttraumatic stress disorder and other anxiety disorders, and the Mood and Anxiety Disorders Program gives special attention to drug therapies for mood and anxiety disorders. The Center for Cognitive Therapy develops treatments for depression and borderline personality disorder, the Depression Research Unit conducts studies in bipolar disorder and depression, and the Center for Psychotherapy Research identifies the appropriate therapies for specific disorders. The Center for Mental Healthy Policy and Services Research seeks to improve the delivery of care to people with serious mental illness and the Section on Geriatric Psychiatry studies the mental disorders that most afflict the elderly.

To answer their questions, Department researchers integrate scientific disciplines and methodologies and tap the expertise of researchers across Penn's departments and schools and at other universities and research institutions. Through formal training programs – such as the highly regarded Clinical Research Scholars Program – and informal mentorship, Department faculty pass on their research expertise to residents and other trainees, transferring to future generations the necessary tools to conduct translational research.

The ultimate goal of this interdisciplinary and interinstitutional effort is to translate science into improved clinical care. It's a responsibility our faculty take seriously and, as the results show, fulfill expertly.

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

## Program Highlights

# UNDERSTANDING AND TREATING THE NATION'S SILENT EPIDEMIC: The Center for Pain Medicine, Research and Policy Begins Its Work

If you experience pain on a frequent basis, the numbers suggest that you have company.

- Over 50 million Americans suffer from chronic pain, one-fifth of whom are severely affected. This number is rapidly increasing as our population ages, accruing risk for pain-causing disease and injury.
- 80 percent of physician visits are tied to complaints about chronic pain.
- Over \$100 billion is spent annually on medical costs, disability payments, worker retraining, and lost productivity resulting from pain.

Pain affects personal relationships, the ability to work productively, to enjoy life, to carry out every day activities. It has psychological consequences – causing fear, anger, worry, and loss of sleep, and eroding self-esteem. Pain can exacerbate medical conditions – reducing the body's capacity to ward off disease, generating side effects from pain-killing medications, and inducing clinical depression.

The direct cause of acute pain is usually identifiable and remediable, but chronic pain presents a different challenge. Often, its underlying cause cannot be eliminated, and comprehensive pain management is needed to relieve suffering.

Ministering to patients who suffer with chronic pain is the primary mission of the Center for Pain Medicine, Research and Policy, launched in September 2005 by

PENN Behavioral Health. The Center complements the work of the Penn Pain Medicine Center in the Department of Anesthesiology and Critical Care, under the leadership of Lee A. Fleisher, MD, chair of the department. It draws upon the expertise of clinicians throughout the University of Pennsylvania Health System to care for patients suffering from persistent pain caused by injuries, diseases, and other conditions, including cancer.

The ultimate goal of treatment is to improve quality of life and function.

The Center for Pain Medicine became a reality thanks to the vision and commitment of two grateful patients, who worked with Director Rollin Gallagher, MD, MPH to develop the original concept for the Center. They have continued to nourish it with generous financial support and adept guidance.

Dr. Gallagher, Clinical Professor of Psychiatry at Penn, has been critically involved in the development of the new specialty of Pain Medicine, which he characterizes as "a convergence of neuroscience, psychology, and clinical medicine." His interest in the causes and pervasive effects of chronic pain came early in his career, when he provided consultation/liaison psychiatry services on an inpatient

orthopaedic trauma ward at the University of Vermont. He cared for the same patients in follow-up



Director Rollin Gallagher, MD, MPH and  
Clinical Coordinator Maripat Welz-Bosna, MSN, CRNP

at a family practice center, while running an NIH-funded training program for primary care physicians and psychiatrists in biopsychosocial medicine. He recalls that "about half the difficult chronic disease management problems I saw at Vermont were patients with intractable pain."

With a background in family practice, medical psychiatry, epidemiology, and academic medical administration, he established a multi-disciplinary pain program at Vermont, featuring an outpatient clinic and inpatient beds. He became attracted to the research and training aspects of Pain Medicine, and went on to develop pain centers and fellowship training programs at SUNY Stony Brook and MCP Hahnemann University, before coming to Penn and the Veterans Administration Medical Center in 2004.

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Pain is serious, and real, yet it is neither well understood nor appreciated, even by many physicians and health care providers. Dr. Gallagher explains that the major reason for this is “inadequate education in medical school and training in residencies, perpetuated until now by the relatively few medical departments dedicated to the mission of pain research, education, and training. Pain is often the poor step child of one or more departments, and rarely a priority.” Chronic pain represents a “silent epidemic” in America, its victims the “walking wounded.”

Dr. Gallagher has sought to correct this imbalance at every institution he has worked, as well as at a national level. He has been an active leader in major national pain medicine organizations, including the American Academy of Pain Medicine (AAPM), the American Board of Pain Medicine (ABPM), and the National Pain Foundation. Among his many contributions to the field, he is the founding, and current, editor-in-chief of AAPM’s academic journal, *Pain Medicine*.

Heightened attention at the institutional and national levels is achieving results. Over the last four decades, there has been a large increase in the number of research publications dedicated to the science of pain, as indicated by a medline search using the key word “nociception” (the activation of pain) – from 45 in the 1970’s, 532 in the 1980’s, 1391 in the 1990’s, to 1708 in the half decade

from 2000 to 2005.

“The biggest breakthroughs,” says Dr. Gallagher, “have come about because of advances in the disciplines of epidemiology and the neurosciences. Epidemiologic studies have established that chronic pain is not a psychiatric

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*The Center for Pain Medicine draws upon the newest research advances in treating patients with a multi-disciplinary approach...Treatment regimens are carefully tailored to fit the special goals, needs, and circumstances of each patient.*

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condition, but rather that many different injuries and diseases initiate the chronic pain process in the peripheral and central nervous system, with negative psychological and social consequences such as psychiatric morbidity. Specific pain conditions are each uniquely affected and complicated by psychological and social factors, including higher rates of co-occurring psychiatric disorders than in other chronic diseases.” This complexity suggests why chronic pain is so little understood, says Dr. Gallagher.

But there is cause for optimism. “The rapid development of the neurosciences, including neuroimaging,” says Dr. Gallagher, “has increased our understanding of the anatomy, molecular biology, and pathophysiology of different pain disorders, demonstrating the neuroplastic changes in the spinal cord and brain that cause, perpetuate, and worsen pain conditions and diseases. The proliferation of available treatments for pain has greatly expanded the toolbox of

the pain medicine specialist for what is still considered the clinical art of selectively integrating these treatments for each individual patient with chronic pain.”

The Center for Pain Medicine draws upon the newest research advances in treating patients with a multi-disciplinary approach. It is not tied to any specific therapy or class of therapies, and clinical recommendations are chosen from among traditional and complementary, non-invasive and invasive treatments. Treatment regimens are carefully tailored to fit the special goals, needs, and circumstances of each patient.

The patient’s care is personally managed by a pain medicine specialist who is expert at coordinating and orchestrating diverse treatments. Maripat Welz-Bosna, MSN, CRNP, the Center’s Clinical Coordinator and a pain management nurse practitioner highly experienced in both palliative care and pain medicine, plays a key role in assuring personalized attention to every patient’s individualized treatment program.

Complementing its clinical focus, the Center is also actively engaged at the national and regional levels in educating health care professionals about how to treat pain, conducting pain research, formulating and advocating public policy to improve the access of patients to pain treatment and health care in general, and promoting greater awareness of pain treatment and research among the general public and health care professionals. For example, on

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June 13, Dr. Gallagher presented the public health challenge of chronic pain and the need for better education and more research at a Congressional Briefing: "The Epidemic of Pain in America". (For his testimony, please access [www.nationalpainfoundation.org](http://www.nationalpainfoundation.org) and follow the links.) Dr. Gallagher recently was awarded a grant from the Department of Veterans Affairs, working with a team from Walter Reed Army Medical Center and the University of Pennsylvania, to study the course and outcomes of soldiers with combat-related limb injuries.

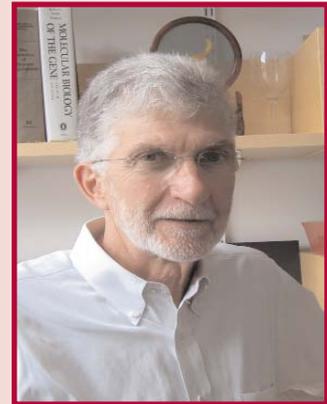
"Chronic pain used to be thought of as psychosomatic," says Dr. Gallagher, "but we can now demonstrate the pathophysiology of chronic pain in the central nervous system. We know much more about how and where in the CNS emotions interact with pain disease and ways that treatments – from neurostimulation to pharmaceuticals to psychotherapy – bring relief." The Center for Pain Medicine, Research and Policy is playing a continuing role in advancing and disseminating knowledge about pain and using the latest research findings to assist those afflicted with pain's devastating effects.

To schedule an appointment or find out more about the Center for Pain Medicine, please call the PENN Behavioral Health Contact Center (Mon. – Fri. 8:00 am to 6:00 pm) at 1-866-301-4PBH, or access the Center for Pain Medicine Website at <http://www.med.upenn.edu/painmedicine/> ❖

## SEARCHING FOR THE GENETIC CAUSES OF OBESITY: The Behavioral Genetics Laboratory in the Center for Neurobiology and Behavior

Experts disagree on the precise numbers, but the danger is clear – obesity represents a major public health risk in the United States and the world, and the trends are not favorable.

Researchers in the Department of Psychiatry are taking on obesity from several directions. They are playing leadership roles in the School of Medicine's Institute for Diabetes, Obesity and Metabolism, established in 2005 to support the efforts of Penn faculty to better understand the serious disorders cited in its name. Closer to home, the Department's widely recognized Weight and Eating Disorders Program is participating in multiple clinical trials focused on preventing and treating obesity.



*Director R. Arlen Price, PhD*

Meanwhile, in the new Translational Research Laboratories, the Behavioral Genetics Laboratory (BGL) is seeking to discover the genetic basis for human obesity. Established in 1987, the BGL is one of the component laboratories of the Center for Neurobiology and Behavior, the focal point for the Department's basic science research programs.

Prior research indicates that genes may account for up to two-thirds of individual differences in obesity, and Director and Professor of Psychology in Psychiatry R. Arlen Price, PhD and his team are trying to identify the precise genes that account for these differences.

Dr. Price acknowledges that the task he and his colleagues face is challenging. "As with all behaviorally mediated traits," he explains, "the inheritance of obesity is complex, involving genes, the environment, and their interactions." Just as no unique diet or product has been found to control weight gain, no single causal factor is likely either.

The work begins with genetic material drawn from members of over 500 families who have volunteered to participate in BGL's studies. This unique sample allows BGL researchers to compare the genetic material of family members with normal weight to that of their overweight relatives. The BGL has also developed a comparison sample of over 500 "controls" from a diminishing minority of the population, those who have never been overweight.

Using specialized areas of expertise, such as molecular epidemiology

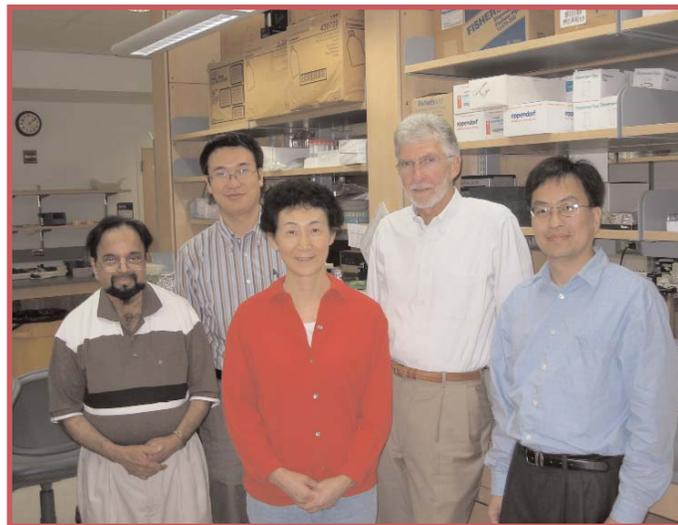
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and quantitative and molecular genetics, BGL investigators analyze the genetic material to tease out meaningful genetic dissimilarities that may account for obesity susceptibility and resistance.

The BGL is carefully building the scientific platform from which to launch a targeted search for obesity-related genes. In two studies, Dr. Price's group demonstrated that some gene effects depend on the presence of variation in other parts of the genome. Of particular interest are findings that indicate effects for genes on chromosome 20 occur primarily in the presence of variations on chromosome 10. This interaction may be an important clue to help locate genes that influence obesity.

Another hint to solving the puzzle may lie in the BGL's explorations in the emerging area of genomic imprinting. Studies in this area identify and investigate those genes which express themselves differently – i.e., how they act within the body – depending upon whether they are inherited from the male or female parent. Genomic imprinting is known to affect body size and composition in animals, such as mice and pigs. BGL researchers recently found three chromosome regions that have genes with strong parental effects, two maternal and one paternal, suggesting that imprinting may be common in humans as well. A BGL paper describing evidence for genomic imprinting effects on human obesity was published last year (Dong, C, Li, W-D, Geller, F, Lei, L, Li, D, Gorlova, OY, Hebebrand, J, Amos, CI, Nicholls, RD, Price, RA. Possible genomic imprinting of three human obesity-related genetic loci. *American Journal of Human Genetics* 2005, 76: 427-437).



*The BGL Research Team: (from left) Sahib Shinde, PhD; Wei-Dong Li, MD, PhD; Guang Ming Yuan, BS; Director R. Arlen Price, PhD; and Chuanhui Dong, PhD*

In carrying out these basic science inquiries, Dr. Price works with a talented research group. The complex analyses for the studies on gene interaction and imprinting were completed by Research Associate Chuanhui Dong, PhD, who has expertise in quantitative genetics and molecular epidemiology. Research Assistant Professor Wei-dong Li, MD, PhD mainly focuses on molecular genetics. Dr. Price also collaborates with mathematical geneticist Hongyu Zhao, PhD, of Yale University.

The BGL is also conducting more clinically oriented research. The drug Olanzapine is effective in treating schizophrenia and bipolar disorder. However, it causes significant weight gain in many individuals. The Laboratory has been working with scientists at Eli Lilly and Perlegen Sciences to determine whether the same genes that influence obesity account for the drug-associated weight gain. This study is one of the

first to scan the entire human genome by testing more than 1.3 million genetic markers in weight gain-susceptible and resistant individuals. BGL investigators have replicated several of these gene effects in their family samples, finding a previously unknown genetic pathway influencing weight gain and obesity.

The BGL's work is about establishing relationships among genes and their impact on human behavior and physiology. Understanding these relationships has required the BGL to develop bonds of a different sort – collaborations among scientists, bridges between scientific disciplines, and connections between clinically-inspired questions about obesity and basic research at the molecular level. ❖

## Our Distinguished Faculty

### AWARDS & HONORS

#### Departmental 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. **James Stinnett, MD, Joseph DiGiacomo, MD, Jody Foster, MD, MBA, Alexandra McLean, MD, and John O' Reardon, MD** received this honor in 2006.

The 2006 *PGY-3 & 4 Teaching Award* was awarded to **Claudia Baldassano, MD** and the 2006 *PGY-1 & 2 Teaching Award* was awarded to **Christos Ballas, MD**. These awards honor those individuals whom the residents consider the most effective teachers of the academic year and exemplary in shaping their overall education.

**Moira Rynn, MD** was the 2006 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 level.



**Christian Kohler, MD** was awarded the 2006 *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.

Teaching by the residents is an invaluable part of medical student education. The *Medical Student Teaching Award* is given to residents who have been consistently outstanding in their ability to teach. **Juliette Galbraith, MD and John Mitchell, MD** received this award in 2006.

The *Psychodynamic Psychotherapy Award* is given annually by the Psychoanalytic Cluster Steering Committee to graduating residents in recognition of their excellence in providing psychodynamic psychotherapy. **C. Pace Duckett, MD and Geoffrey Neimark, MD** received this award in 2006.

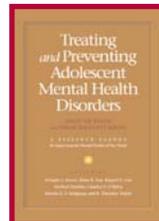
**Joseph DiGiacomo, MD** was the second recipient of the *Annual Award for Clinical Faculty*. This award, funded by a clinical faculty member, is given to a volunteer clinical faculty member who has demonstrated long-term loyalty to the Department and excellence in teaching and/or supervising.

**Cory F. Newman, PhD** was the recipient of the *Fifth Penn Psychotherapy Professorship*, which entails a special invitation to lecture to the Psychiatry residents on advanced clinical issues. Dr. Newman presented the lecture in June.

#### School of Medicine & University Honors

**Robert M. Weinrieb, MD** received a 2006 *Penn Pearls Teaching Award*. This award is given by the medical students to honor their best clinical teachers, both faculty and residents. In addition, he was appointed Director of the Consultation/Liaison Psychiatry Service at HUP.

#### Regional, National & International Honors



*Treating and Preventing Adolescent Mental Health Disorders, What We Know and What We Don't Know* received the 2005 *Best Book in Clinical Medicine Award* from the Association of American Publishers, the principal trade association of the book publishing industry. The volume is edited by **Dwight L. Evans, MD,**

**Edna B. Foa, PhD, Raquel E. Gur, MD, PhD, Herbert Hendin, MD, Charles P. O'Brien, MD, PhD, Martin E. P. Seligman, PhD, and B. Timothy Walsh, MD.** The book, designed for both mental health professionals and the lay public, is a product of the Adolescent Mental Health Initiative, supported by the Annenberg Foundation Trust at Sunnylands and the Annenberg Public Policy Center at Penn. Oxford University Press is the publisher.

Two Department of Psychiatry faculty were listed in the "Top Doctors" issue of Philadelphia Magazine (May 2006): **Anthony L. Rostain, MD** (Child & Adolescent Psychiatry ADD/ADHD, autism) and **Edward S. Brodtkin, MD** (autism, learning disorders – social).

**Aaron T. Beck, MD** was the recipient of the 2006 *Albert Lasker Clinical Medical Research Award* from the Albert and Mary Lasker Foundation – please see this issue's Cover Story for more details about this major honor. Dr. Beck was also the recipient of the *Gustav O. Lienhard Award*

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from the Institute of Medicine for outstanding achievement in improving health care services in the United States. Dr. Beck also received the *Lifetime Achievement Award* from the American Foundation for Suicide Prevention for "his 50 years of pioneering research into suicide." Foundation President Dwight L. Evans, MD presented the award to Dr. Beck at the AFSP's 18th Annual Lifesavers Dinner in May.



**Stanley N. Caroff, MD** was appointed a member of the Pennsylvania Psychiatric Society Committee on Veterans Affairs and State Hospital Issues in 2006.

**Judith A. Coche, PhD** was appointed to the Certification Board of the American Group Psychotherapy Association. In February 2007, she is scheduled to teach the certification course required for national certification in group psychotherapy.



In June, **Charles Dackis, MD** received a *Research Award* from The Caron Foundation, a non-profit addiction treatment organization. Dr. Dackis was cited as an individual who has made an "outstanding contribution towards the on-going battle against addiction and chemical dependency."

**Joseph DiGiacomo, MD** received the *Lifetime Achievement Award* from the Philadelphia Psychiatric Society. Dr. DiGiacomo was also one of the recipients of the second annual *Irma Bland Award for Teaching Residents* from the American Psychiatric Association and its Council on Medical Education and Lifelong Learning. The award was established to honor Irma Bland, MD in tribute to her unique and creative contributions to psychiatric education.



**David F. Dinges, PhD** was named Editor-in-Chief of *Sleep*, the leading journal for sleep research and sleep medicine. *Sleep* is the official publication of the Associated Professional Sleep Societies, LLC, a joint venture of the American Academy of Sleep Medicine and the Sleep Research Society.

**Ruth S. Fischer, MD** was elected by The COPE Committee on Women's Issues in Psychoanalytic Education of the American Psychoanalytic Association to be *The National Women's Scholar for 2007-2008*. She will visit several institutions around the country to talk and teach about female psychology and educational issues.

**Edna B. Foa, PhD** received a *Fulbright Senior Specialist Award*. In June, Dr. Foa worked closely with the faculty of the School of Social Work at Haifa University, teaching graduate students and consulting on research projects which examine issues related to psychological reactions to traumatic experiences and their treatment.

**Michael P. Kowitt, PhD** was elected Chairman of the Education Committee of the Psychoanalytic Center of Philadelphia in 2005.

**Paul J. Moberg, PhD** was elected to the Board of Directors of the American Academy of Clinical Neuropsychology. He was also the recipient of the award for *Distinguished Contributions to the Science and Profession of Psychology* from the Pennsylvania Psychological Association.

Since October 2005, **David W. Oslin, MD** has been the National Director of the Center of Excellence in Substance Abuse Treatment and Education (CESTATE) of the Department for Veterans Affairs.

**Robert L. Sadoff, MD** received the 2006 *Isaac Ray Award* from the American Psychiatric Association, the highest national award in forensic psychiatry. Isaac Ray, MD was one of the founders of the APA in 1844 and is considered the "Father of Forensic Psychiatry" in the United States.

**David B. Sarwer, PhD** was named Chair of the Bariatric Surgery Section of the North American Society for the Study of Obesity.

**Jeffrey P. Staab, MD** was elected to membership in the American Neurotology Society and the international Bárány Society for his research on psychiatric and neurotologic morbidity in patients with chronic dizziness.

**Albert J. Stunkard, MD** was awarded a Doctorate of Honoris Causa from Louisiana State University in May.

**Richard F. Summers, MD** was one of the recipients of the second annual *Irma Bland Award for Teaching Residents* from the American Psychiatric Association and its Council on Medical Education and Lifelong Learning. He was also selected as Chair of the American Psychoanalytic Association's Committee for University and Medical Education.



**Paul Root Wolpe, PhD** will assume the role of President of the American Society for Bioethics and Humanities (ASBH) in October. The ASBH is the national professional organization for scholars in bioethics and the medical humanities. It has over 1,600 members, including physicians, nurses, social scientists, legal scholars, historians, philosophers, and others who study the ethical, social, legal, and historical issues in medical ethics.



**George E. Woody, MD** and Dr. Edwin Zvartau received the 2006 *National Institute on Drug Abuse International Program Award of Excellence in Collaborative Research*. Dr. Zvartau is the Vice Rector for Science at Pavlov State Medical University in St. Petersburg, Russia. The award was presented at the June meeting of The College on Problems of Drug Dependence. ❖

## NEWS & GOINGS ON

### **Aaron T. Beck, MD** **Lasker Award Reception** **November 6, 2006**

The School of Medicine is holding a reception to honor Dr. Beck, recipient of the 2006 Lasker Clinical Medical Research Award, on November 6 at the Union League, 5:00-7:00 pm. All Department faculty and staff are invited to attend. Please contact Tina Callaghan at (215) 662-2818 for details.

### **James L. Stinnett, MD** **Portrait Unveiling** **November 9, 2006**

Please join us on November 9 at 1:00 pm in the BRB II/III Lobby for the unveiling of Dr. Stinnett's portrait. The portrait unveiling ceremony and reception will follow Dr. Stinnett's Grand Rounds lecture in the BRB II/III Auditorium at 12:00 pm.

**Jay D. Amsterdam, MD** was selected to serve as Advisory Board Member and lecturer in the "Insight into Depression" Penn CME Lecture Series. In addition, he serves as a Fellow and Advisory Board member of Penn's Center for Spirituality and the Mind, which examines the interface between our social and cultural beliefs and neuroscience.

**Howard Scott Baker, MD** gave a talk in October 2005 in Baltimore at the 28th Annual International Conference on The Psychology of the Self, sponsored by The International Association for Psychoanalytic Self Psychology. The presentation focused on the relationship between religion and psychoanalysis, specifically exploring how self psychology offers a paradigm that can make sense of a patient's spiritual experience.

**Stanley N. Caroff, MD** delivered a lecture on "Neuroleptic Malignant Syndrome, Catatonia, and Related Conditions" to the Northeastern Pennsylvania Psychiatric Society in May.

In Basel, Switzerland in May, **David F. Dinges, PhD** delivered a Keynote Address at an International Conference of the European Union 6th Framework Integrated Project SENSATION. The SENSATION project focuses on the technology and physiology of monitoring sleep and sleepiness. Dr. Dinges spoke on "Fatigue Management Technologies: What Technologies, Deployed in What Ways,

for What Purposes?" In April, he gave a lecture in Laurel, Maryland on "Sleep, Fatigue and Stress: Monitoring Human Behavioral Capability" at a colloquium sponsored by the Johns Hopkins University Applied Physics Laboratory.

In 2005 and 2006, **Edna B. Foa, PhD** conducted intensive workshops on "Prolonged Exposure Therapy: A Cognitive Behavioral Treatment for Posttraumatic Stress Disorder" for mental health professionals for several Veterans Affairs medical centers and other sites in the U.S. and abroad, including Switzerland, Korea, and Israel. In February, she presented "Success and Challenges in Disseminating Evidence-Based Treatment: The Case of PTSD" at The Community Stress Prevention Center in Haifa, Israel.

This year, **Michael P. Kowitt, PhD** chaired a panel on relational theories in psychoanalysis at a faculty symposium at the Psychoanalytic Center of Philadelphia.



**Caryn Lerman, PhD** delivered the Clinical Research Keynote Lecture in February at the annual meeting of the Society for Research on Nicotine and Tobacco. The lecture was entitled "Pharmacogenetic Approaches to Nicotine Dependence Treatment." In July, she presented a

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lecture on "The Role of the Endogeneous Opioid System in Nicotine Reward" at Oxford University at a meeting of the British Association for Psychopharmacology.

**Marion Lindblad-Goldberg, PhD** delivered a Plenary Address on "Our Sacred Models of Relational Therapy: Relevant or Passé" and conducted a Workshop on "Effective In-Home Therapy" at the 63rd Annual Conference of the American Association for Marriage and Family Therapy in Kansas City, Kansas in October 2005. In May, she spoke on "Effective In-Home Therapy" and "A Model of Couples Therapy" at the Wheeler Clinic in Hartford, Connecticut.



**Cory F. Newman, PhD** presented a clinical workshop and research paper on "Cognitive Therapy for Borderline Personality Disorder" at the VI Congreso Latinoamericano de Psicoterapias Cognitivas in Buenos Aires, Argentina in May. Displaying other talents, Dr. Newman played an all-Chopin and Beethoven program in Dunlop Auditorium for his 11th annual piano recital in July

**Robert L. Sadoff, MD** was named the Albert Biele, MD lecturer for 2006 at Jefferson Medical School.



**David B. Sarwer, PhD** gave lectures on several topics in the winter and spring, including the "Behavioral, Pharmacologic, and Surgical Treatment of Obesity" (Linden Oaks Hospital, Naperville, Illinois), the "Psychological Aspects of Bariatric Surgery and Body Contouring after Massive Weight Loss" (ASPS/PSEF/ASAPS Body Contouring after Massive Weight Loss Symposium, Dallas, Texas), the "Management of Late Diabetes" and "Managing Patients with Difficult-to-Treat Hypertension" (Diabetes Xchange: Effectively Managing the Metabolic Syndrome, Foundation for Better Health Care, Philadelphia).

**Albert J. Stunkard, MD** delivered lectures at the Karolinska Institute in Stockholm and the Penning-

ton Biomedical Research Institute in Baton Rouge. In June, he spoke before the Society of Bariatric Surgeons in San Francisco. In August, he lectured on eating disorders at the Eating Disorders Research Society Meeting in Port Douglas, Australia and in September he spoke at the International Congress on Obesity in Sydney, Australia.

**Richard F. Summers, MD** is Co-Chair of the collaborative effort between Penn and the Psychoanalytic Center of Philadelphia to develop interdisciplinary educational and research programs.

In March, **Elizabeth B. Weller, MD** presented Grand Rounds at the Penn State University College of Medicine on "Depression and Its Treatment in Children and Adolescents: The SSRI Saga." In August, she gave Grand Rounds at Cooper Hospital in New Jersey on "Diagnosis and Treatment of Depression in Children and Adolescents." Dr. Weller presented the Samuel and Audrey Lang Memorial Lectureship at William Beaumont Hospital in Berkley, Michigan on "Phenomenology, Diagnosis, and Medical Treatment of Childhood Bipolar Disorder" in September and Grand Rounds at Reading Hospital in Reading, Pennsylvania on "Evidence-Based Treatment of Depression in Children and Adolescents."

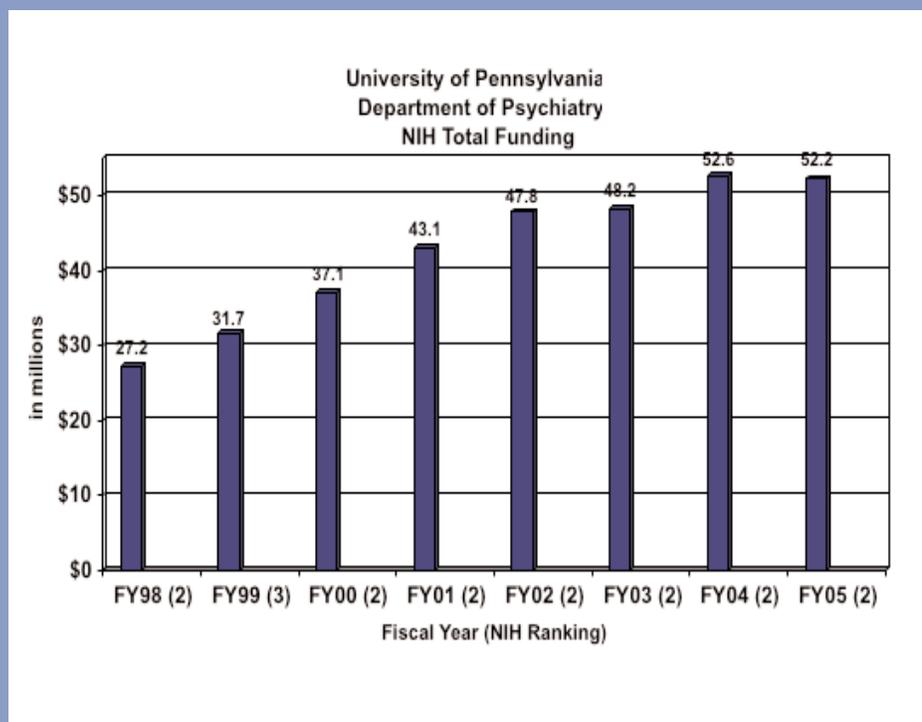
**Paul Root Wolpe, PhD** authored the first article on bioethics ever published in *Cell*, "Reasons Scientists Avoid Thinking About Ethics" (125: 1023-1025, 2006), and wrote an editorial in the *Philadelphia Inquirer* on the Terry Schiavo case, "Technology Alters Dying in America" (April 30).

**George E. Woody, MD** delivered a lecture, "Treatment Approaches for Opioid and Alcohol Dependence: Medication Development and Emerging Interest from the Pharmaceutical Industry," at the annual meeting of the American College of Physicians in Philadelphia in April. In June, Dr. Woody presented at the annual meeting of The College on Problems of Drug Dependence on "HIV Risk Reduction Through Treatment: An Overview of Experience with Opioid Agonist Therapies in Russia and Former Soviet States" and "Emergency Department Visits Involving Buprenorphine Abuse: 2003-2005." He also co-chaired a session on "Progress in Buprenorphine Treatment." ❖

## RESEARCH NEWS

### *The News Is In -- Psychiatry Again Ranked #2!*

**F**or the sixth straight year, the Department of Psychiatry is ranked #2 among all psychiatry departments nationwide in its level of funding from the National Institutes of Health. For FY2005 (the most recent year for which data are available), faculty in the Department received \$52.2 million in total NIH funding, second only to the University of Pittsburgh and ahead of the psychiatry departments at Yale, Duke, and the University of California, San Diego. While NIH ranking is only one indicator of the quality of the Department's investigative studies, the peer-review process which governs all NIH awards ensures that scientific quality is the major criterion for successful applications. The Department's elite standing among its peers speaks volumes about the depth and breadth of the scientific expertise of our faculty and staff.



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**Jay D. Amsterdam, MD** has launched new research initiatives in the field of Complementary and Alternative Medicine for mood and anxiety disorders. He will study the use of Chamomile to treat Generalized Anxiety Disorder and Black Cohosh to treat menopause-related anxiety symptoms. Dr. Amsterdam has also begun a new research project to explore dopamine transporter binding affinity using SPECT brain imaging in patients with depression, and how these brain images may visually portray the impact of psychotherapy and pharmacotherapy in treating depression. Finally, Dr. Amsterdam has recently been involved in the development of the first transdermal antidepressant patch, and has authored the leading publications on the initial pivotal trials with this drug.



**Edward S. Brodtkin, MD** helped organize the March 2006 Penn/CHOP research retreat entitled, "Research Perspectives in Autism." He delivered a lecture at the retreat on "A Mouse Model System for Genetic Analysis of Sociability, An Autism Endophenotype." Dr. Brodtkin also helped organize a Penn session in March on "High Functioning Autism and Asperger Syndrome: Promoting Successful Outcomes Across the Life Cycle."

**Stanley N. Caroff, MD** is the Site Director for an National Institute of Mental Health-funded Schizophrenia Trials Network study to examine the effectiveness of switching antipsychotic medications. He is also Site Director for a Department of Veterans Affairs Cooperative Studies Program investigation of the use of long-acting injectable risperidone to treat schizophrenia.

**Edna B. Foa, PhD** and her team have received a three-year grant from the National Institute on Alcohol Abuse and Alcoholism to continue their study "Naltrexone and CBT (Cognitive Behavioral Therapy) in Patients with Alcoholism & Posttraumatic Stress Disorder." Investigators are exploring treatments for patients suffering from both alcohol dependence and PTSD. The project evaluates the relative efficacy of naltrexone, prolonged exposure therapy, and their combination in treating symptoms of both disorders.

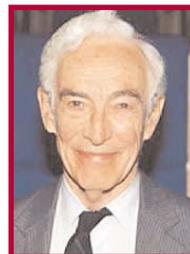
**Ellen W. Freeman, PhD** published an article in the *Archives of General Psychiatry* in April entitled, "Associations of Hormones and Menopausal Status with Depressed Mood in Women with No History of Depression" (Freeman EW, Sammel MD, Lin H, Nelson DB. 2006; 63:375-382).



**Paul J. Moberg, PhD** received an Independent Investigator Award grant from the National Alliance for Research on Schizophrenia and Depression entitled, "Olfactory Dysfunction in Schizophrenia: A Model System to Investigate Aberrant Neurodevelopment."

**Richard J. Ross, MD, PhD, and Joan M. Cook, PhD**, have continued work on a grant funded by the Department of Veterans Affairs pertaining to the treatment of sleep and nightmare disturbances in Vietnam combat veterans with posttraumatic stress disorder.

**David B. Sarwer, PhD** was the lead editor on Sarwer DB, Pruzinsky T, Cash TF, Goldwyn RM, Persing JA, Whitaker LA (eds.), *The Psychology of Reconstructive and Cosmetic Plastic Surgery: Clinical, Empirical, and Ethical Perspectives*, Lippincott, Williams, & Wilkins, 2006. Dr. Sarwer, **Thomas A. Wadden, PhD**, and Noel Williams, MD (Department of Surgery) were co-editors for a supplemental issue of the journal *Obesity*. In addition, Dr. Sarwer received a grant from the American Society of Plastic Surgeons to continue his study entitled, "Psychological Status Following Cosmetic Breast Augmentation."



A paper by **Albert J. Stunkard, MD** has recently been accepted for publication in the *Journal of Clinical Psychiatry*. The paper, "A Paradigm for Facilitating Pharmacotherapy at a Distance: Treatment of the Night Eating Syndrome," describes a novel method of psychopharmacology.

**Richard F. Summers, MD** was the Templeton Foundation Senior Fellow at the Positive Psychology Center in May and June, 2006, studying the integration of psychodynamic psychotherapy theory and technique with principles of positive psychology. ❖

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## At the Treatment Research Center ...

**N**altrexone, discovered by the Addictions Research Center at the Philadelphia VA in the 1980s as a new treatment for alcoholism, was approved by the FDA in depot (injectable) form (Vivitrol®). In June, the drug went on sale in a depot form that will prevent relapse for 30 days after a single injection. This new treatment is expected to have a major impact on the treatment of alcoholism. Related to this, **Charles P. O'Brien, MD, PhD** received a Dana Foundation Grant to coordinate a national study of depot naltrexone to prevent relapse in probationers and parolees with a history of heroin addiction.

Investigators at the TRC are playing leading roles in clinical trials designed to appraise the effects of specific drugs on cocaine and alcohol dependence.

**Kyle M. Kampman, MD, Charles Dackis, MD, Kevin G. Lynch, PhD, Helen Pettinati, PhD, Carlos F. Tirado, MD, Peter W. Gariti, PhD, Thorne Sparkman, MD, Michal Atzram, and Charles P. O'Brien, MD, PhD** participated in a trial to evaluate the efficacy of amantadine, propranolol, and their combination in cocaine dependent patients with severe cocaine withdrawal symptoms.

Under the direction of **Dr. Pettinati**, the TRC participated in the COMBINE trial, the largest government-sponsored pharmacotherapy study of alcohol dependence done to-date. The results demonstrate that naltrexone treatments with structured medical management or in combination with specialized alcohol counseling by a behavioral specialist are equally effective in treating alcohol dependence. This finding was published in the *Journal of the American Medical Association* [Anton RF, O'Malley SS, Ciraulo DA, Couper D, Donovan DM, Gastfriend DR, Hosking JD, Johnson BA, Locastro JS, Longabaugh R, Mason BJ, Mattson ME, Miller WR, Pettinati HM, Randall CL, Swift RM, Weiss RD, Williams LD, Zweben A: Combined Pharmacotherapies and Behavioral Interventions for Alcohol Dependence. The COMBINE study: a randomized controlled trial. *JAMA* 2006;295(17):2003-17].

Also under **Dr. Pettinati's** direction, TRC investigators conducted a pilot trial of the atypical antipsychotic medication, quetiapine (trade name Seroquel®), for the treatment of alcohol dependence. The results demonstrate that quetiapine significantly increased the rate of complete abstinence as compared with placebo treatment. Findings have been presented at the annual meeting of the American Psychiatric Association in May 2006, and also at the annual New Clinical Drug Evaluation Unit Meeting in June 2006.

In addition, under the direction of **David W. Oslin, MD**, the Philadelphia Veterans Affairs Medical Center developed a telephone-based systematic assessment service called the Behavioral Health Lab (BHL). The utility of this system was assessed, and the results were published [Oslin DW, Ross J, Sayers SL, Murphy J, Kane V, Katz IR. Screening, assessment, and management of depression in VA primary care clinics: The Behavioral Health Laboratory. *J Gen Intern Med* 21:46-50, 2006]. The introduction of the BHL into primary care resulted in the identification of mental health and substance misuse problems in more patients.

**Dr. Dackis and David S. Metzger, PhD** are starting a new study entitled, "Community-based Modafinil Treatment of Women with Cocaine Dependence and HIV High-Risk Behavior." ❖

## RESEARCH GRANTS

The following sponsored research funding was received by the Department during the period January 1, 2006 through August 31, 2006.

<b>New NIH Awards (includes New and Competing Renewals)</b>		
Name	Sponsor	Project Title
Arnold, Steven	NIH / Rush-Presbyterian-St. Luke's Medical Center	Neurobiologic Study of Psychological Distress and Dementia
Crits-Christoph, Paul F.	NIH	Patient Feedback Effectiveness Study
Crits-Christoph, Paul F.	NIH	Psychotherapy for Major Depression in the Community
Foa, Edna	NIH	Naltrexone and CBT for Patients with Alcoholism and PTSD
Foa, Edna	NIH	Treating Adolescents with CSA-related PTSD
Gur, Ruben	NIH	The Neurobiology of Affective Dysfunction in Schizophrenia
Lucki, Irwin	NIH	Training Program in Neuropsychopharmacology
Sarwer, David	NIH / Drexel University	Prevention of Obesity at Universities: A Randomized Trial
Schnoll, Robert A.	NIH	Smoking Cessation for Head and Neck Cancer Patients
Wadden, Thomas A.	NIH	Look Ahead: Action for Health in Diabetes
Wadden, Thomas A.	NIH / Temple University	The Safety and Efficacy of Low and High Carbohydrate Diets
Woody, George E.	NIH / UCLA	Delaware Valley Node of the National Drug Abuse Clinical Trials Network -- Protocol 0027 Start
Zubritsky, Cynthia	NIH / Indiana University	Simulation Model for Mental Health Systems Planning

<b>Other Federal Agencies</b>		
Name	Sponsor	Project Title
Brennan, Francis	Department of Veterans Affairs	Biomedical Markers and Treatment for Impaired Avoidance Learning in FMR1 KO Mice
Caroff, Stanley N.	Department of Veterans Affairs	Long-Acting Injectable Risperidone in the Treatment of Schizophrenia
Dinges, David F.	National Space Biomedical Research	Minicog: A Portable and Fast Assessment of Cognitive Functions
Dinges, David F.	DHHS / Washington State University	Individualized Biomathematical Modeling of Fatigue and Performance
Ehrman, Ronald	Department of Veterans Affairs	Integrating Practice Guidelines for Smoking Cessation into Mental Health Care for PTSD
Oslin, David	Department of Veterans Affairs	Improving Behavioral Health Care: Implementation of the BHL-SP
Ross, Richard	Department of Veterans Affairs	Randomized Controlled Psychotherapy Trial for Combat-Related Nightmares in Vietnam Veterans with PTSD

<b>Other Agencies and Organizations</b>		
Name	Sponsor	Project Title
Bechtholt, Anita	National Alliance for Research on Schizophrenia and Depression	Examining the Mechanisms of Chronic Antidepressant Efficacy
Li, Wei-Dong	American Heart Association	Genetics of Lipid Related Phenotypes in Obesity Cohorts

### Other Agencies and Organizations (continued)

Name	Sponsor	Project Title
Lohoff, Falk W.	American Psychiatric Association	Bipolar Disorder
Lohoff, Falk W.	American Philosophical Society	Genetics of Schizophrenia and Bipolar Disorder
Lohoff, Falk W.	National Alliance for Research on Schizophrenia and Depression	Shared Bipolar/Schizophrenia Susceptibility Genes on Chromosome 8P
Rodriguez, Daniel	Cancer Research and Prevention	Mediators of the Adolescent Physical Activity and Smoking Relationship
Sarwer, David	Plastic Surgery Educational	Psychological Status Following Cosmetic Breast Augmentation
Schnoll, Robert A.	American Cancer Society	Comparing the Lozenge to the Patch for Smoking Cessation
Stunkard, Albert J.	Robert Wood Johnson Foundation	Statistician Support for Childhood Obesity Studies
Wadden, Thomas A.	William Wrigley Jr., Company	Use of Chewing Gum to Facilitate Appetite Control and Weight Loss in Overweight Individuals Treated by Lifestyle Modification
Wadden, Thomas A.	Commonwealth of Pennsylvania / CHOP	Primary Care Network for the Treatment of Adolescent Obesity
Wenzel, Amy	National Alliance for Research on Schizophrenia and Depression	Cognitive and Behavioral Predictors of Suicide Behavior in Suicide Attempters

### Clinical Trials

Name	Sponsor	Project Title
Amsterdam, Jay D.	Eli Lilly and Company	A Functional Change and Efficacy of Duloxetine in Patients with Co-Morbid Major Depression Soft Tissue Discomfort
Amsterdam, Jay D.	Sanofi-Synthelabo, Inc.	A Multi-Center Randomized, 30-52 Week Double-Blind, Placebo-Controlled Study to Evaluate the Efficacy, Safety, and Tolerability of Saredutant 100 mg Once Daily in the Prevention of Relapse of Depressive Symptoms in Outpatients with Major Depressive Disorder Who Achieved an Initial Response to 12 Weeks of Open-Label Treatment with Saredutant 100 mg Once Daily
Langleben, Daniel D.	No Lie MRI	CLTR: Detection of Deception and Concealed Information with Functional MRI
Lucki, Irwin	Predix Pharmaceuticals	Evaluation of PRX-00023 in Rodent Antidepressant Tests
O'Reardon, John P.	Cyberonics, Inc.	Randomized Comparison of Outcomes in Patients with Treatment-Resistant Depression Who Receive VNS Therapy Administered at Different Amounts of Electrical Charge
O'Reardon, John P.	Neuronetics, Inc.	A Compassionate Use Treatment Protocol for Patients with Major Depression Previously Responsive to RTMS Treatment with the Neuronetics Model 2100 CRS Repetitive Transcranial Magnetic Stimulation System
Pettinati, Helen	AstraZeneca LP	A Multi-Center, Randomized Parallel-Group, Double-Blind Phase IV Comparison of the Efficacy and Safety of Quetiapine Fumarate to Placebo as Adjunct Therapy
Pettinati, Helen	Forest Laboratories, Inc.	Initiating Acamprostate Within Versus Post-Detoxification in the Rehabilitative Treatment for Alcohol Dependence
Siegel, Steven	Nupathe, Inc.	Development of Implantable Formulations for CNS Applications
Weintraub, Daniel	Myriad Pharmaceuticals, Inc.	Phase 3 Multicenter, Randomized, Double-Blind, Placebo Controlled Study of the Effect of Daily Treatment with MPC-7869 on Measures of Cognition, Activities of Daily Living and Global Function in Subjects with Mild Dementia of the Alzheimer's Type

## FACULTY IN THE NEWS

In December 2005, **Judith A. Coche, PhD** appeared on NBC's Today to discuss "why gift-giving is so hard."

Associated Press medical writer Ms. Lauran Neergaard interviewed **Charles Dackis, MD** for an article in April about the efficacy of Modafinil for the treatment of cocaine dependence. The piece was widely syndicated.

**David F. Dinges, PhD** was interviewed about sleep-related issues for stories appearing in *Time Magazine*, *Forbes*, *PENN Medicine*, and *The Baltimore Sun*, as well as for an Associated Press article. In May, he contributed to two CNN shows on sleep - "America is Sleep-Deprived: Long-Term Health Consequences Related to Lack of Sleep; Car Accidents Caused by Lack of Sleep" and a primetime sleep special entitled "Sleep."



**Marion Lindblad-Goldberg, PhD** was interviewed for an article on "Adolescents and Divorce" which appeared on the MSN.com Website, on "Mothers and Children Participating in the Same Activities" in *Time Magazine* (March), and on "Three Generation Vacations" in *Parenting Magazine* (August). She was also quoted on single parenting issues in a book by Ellie Slott Fisher, *Mom, There's a Man in the Kitchen and He's Wearing Your Robe* (De Capo Press, 2005).

**David B. Sarwer, PhD** was interviewed for stories across a spectrum of topics. These included: "Can We Ward Off Aging?" (*PENN Medicine*), "Face Transplantation" (Radio Times—WHYY), "Surgically Slim: A Cure for Obesity and Why It's Risky" (*Consumer Reports*), "10 Shocking Truths about Plastic Surgery" (*Cosmopolitan*), "Saving Face" (*Self*

*Magazine*), "New you? New us" (*Los Angeles Times*), and "Sultan of Skin" (*Riverfront Times* – St. Louis, Missouri).

**Albert J. Stunkard, MD** was interviewed by Ms. Lynne Lamberg for an article on Night Eating Syndrome for *Psychiatric News*.

**Richard F. Summers, MD** was interviewed for an article on dreams, which appeared in the May 6 issue of *U.S. News & World Report*.



**Daniel Weintraub, MD** interviewed for the Paula Zahn Show on CNN, along with Matthew Stern, MD (Department of Neurology). The segment, which aired on March 22, was about impulse control disorders in Parkinson's disease and their possible association with dopamine agonist treatment. Drs. Weintraub and Stern and colleagues published a paper on their work in this area in the *Archives of Neurology* on July 10, 2006, "Association of dopamine agonist use with impulse control disorders in Parkinson's disease." (63: 969-973, 2006).

**Paul Root Wolpe, PhD** was interviewed on CBS News by Elizabeth Kaledin in April about emerging issues in neuroethics, appeared on ABC's show Top Priority in May to discuss egg donation, and was on National Public Radio's Talk of the Nation in June (with **Daniel D. Langleben, MD**) describing the science and ethics of neuroimaging for lie detection. Dr. Wolpe was also quoted extensively in *Nature* on brain imaging for lie detection (441: 918-919, 22 June 2006) and in *The Scotsman's* Sunday Magazine in "'Bionic Man' Uses Power of Thought to Control TV" (July 13). ❖

## Cornerstones

### Recognizing the significant achievements of our faculty and staff

“One thing I am known for,” says Paul F. Crits-Christoph, PhD, “is being the father of 12-year old triplets— two boys and a girl.” A lesser known fact is that he and his wife Katherine, also a clinical psychologist, and the entire family are expertly trained and avid scuba divers, and eagerly look forward to exploring the mysteries that lie just below the surface.

It’s an apt avocation for Dr. Crits-Christoph, whose professional career is founded on proficient training, solid teamwork, and boundless curiosity about the secrets of the mind.

Dr. Crits-Christoph, Professor of Psychology in Psychiatry, is the Director of the Department of Psychiatry’s world-renowned Center for Psychotherapy Research. For over 20 years, the former President of the Society for Psychotherapy Research and widely published scholar has pursued two intriguing lines of inquiry.

“What continues to fascinate me,” remarks Dr. Crits-Christoph, “is that while psychotherapy is widely practiced, we know little about how it works. Additionally, there are multiple forms of psychotherapy, and we need to figure out what works best for what kinds of patients.”

For Dr. Crits-Christoph, the path to these questions has largely wound through Penn’s leafy cam-

pus. He earned a BA at the University of Pennsylvania, majoring in biology with a particular interest in environmental biology. A skilled athlete, he played baseball and basketball on Penn’s fresh-

position at the Food and Drug Administration. But when Dr. Luborsky offered him a full-time research assistant position, Dr. Crits-Christoph accepted. As matters turned out, he had chosen his road.

During the next two years, he worked for Dr. Luborsky, and took psychology courses at

Penn. He then went on to graduate school, earning an MS, MPhil, and PhD in Clinical Psychology at Yale University.

With his post-graduate degrees in hand, at least one decision seemed clear. “I was always more interested in an academic path,” says Dr. Crits-Christoph. “The scientific questions were what interested me. I had considerable training in statistics and methodology, so aspects of the process of doing research, not just the content, were also of interest to me.”

Coming out of graduate school in 1984, he applied for positions in psychology departments, but again accepted a position with Dr. Luborsky who had a grant to hire a junior faculty member. He took the faculty position at Penn, because Dr. Luborsky’s prime interest was in psychotherapy research, and he had an active and successful research program. Moreover, Dr. Crits-Christoph emphasizes, “we had successfully collaborated on quite a few papers up to that point, so I knew it

## FACULTY SPOTLIGHT

### Paul F. Crits-Christoph, PhD



man teams, at a time when the Ivy League did not allow freshmen to play varsity.

As part of his financial aid package at Penn, he was randomly assigned as a freshman to a work-study position with Psychiatry Professor Lester Luborsky, PhD, a celebrated psychotherapy researcher. To borrow a line from Robert Frost’s “The Road Not Taken”, Dr. Crits-Christoph’s relationship with Dr. Luborsky “has made all the difference.” He worked for Dr. Luborsky for all four of his undergraduate years. Upon graduation, he first sought jobs in biology, and was offered a

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would be a productive environment.”

Penn was, indeed, an ideal place to do psychotherapy research. There were two well known and successful programs — one on psychodynamic therapy with Dr. Luborsky, and one with the Department’s Aaron T. Beck, MD, who developed the theory and practice of cognitive therapy. Like most more recently trained clinical psychologists, Dr. Crits-Christoph had been exposed to a variety of clinical approaches and was interested in comparing and potentially integrating them.

By the late 1980’s, the time was right for Dr. Crits-Christoph to assume a leadership role in this effort. Dr. Crits-Christoph saw the opportunity to expand the scope of psychotherapy research at Penn with support from the National Institute of Mental Health (NIMH). In 1990, with Dr. Beck’s and Dr. Luborsky’s approval and collaboration, Dr. Crits-Christoph received an NIMH Center grant on comparative psychotherapy research, including both cognitive and psychodynamic approaches. It was the only NIMH Clinical Research Center in the U.S. focused solely on psychotherapy research. At the time, Dr. Crits-Christoph, only 36, was probably the youngest director of an NIMH Clinical Research Center.

Over the past 16 years, the Center for Psychotherapy Research has furthered its international reputation, both for teaching and research. Dr. Crits-Christoph and other faculty at the Center teach Penn medical students, residents, post-doctoral fellows, and University undergraduates, and mentor

PhD psychology graduate students.

The Center’s research agenda has been equally broad and deep, comparing the effectiveness of various psychotherapies — and pharmacotherapy — for different

*Determining the best psychotherapies to treat particular disorders is not easy, but the solutions, Dr. Crits-Christoph underscores, will have “very real and direct implications for public health and the lives of many people.”*

maladies, such as cocaine dependence, generalized anxiety disorder (GAD), panic disorder, and depression.

“Penn has been a great place to work in terms of colleagues, the quality of the research programs, and access to patients for research studies,” says Dr. Crits-Christoph. Departmental collaborations have been developed with George E. Woody, MD on substance abuse, with Karl Rickels, MD on a study of combining medication and cognitive behavioral therapy for GAD, and with Trevor R. Hadley, PhD on new initiatives in community-based research. Collaborations continue with Dr. Beck to explore the use of cognitive therapy for suicidal patients. Dr. Crits-Christoph has also been collaborating with Andrew B. Newberg, MD in the Department of Radiology on brain imaging of patients before and after psychotherapy. (Dr. Newberg has a secondary appointment in the Department of Psychiatry.)

Investigators at the Center have produced many research findings, perhaps none as surprising as the

results of a multicenter study of the treatment of cocaine dependence. “The majority of studies of active forms of different psychotherapies find no differences between the different treatments,” says Dr. Crits-Christoph. “In our cocaine treatment study, we hypothesized that doctoral-level professional psychotherapists, using techniques developed specifically for cocaine dependence, would have better outcomes than individual and group drug counseling practiced by addictions counselors.” But the data indicated that, contrary to

expectations, “the package of individual and group drug counseling was significantly better than professional psychotherapy, plus group drug counseling.”

When the NIMH ended its Clinical Research Center program a few years ago, Dr. Crits-Christoph and his colleagues turned to the NIMH’s new program encouraging studies in community settings. For the past few years, the Center has been making the transition to community-based research, and has recently received an NIMH grant to partner with a community mental health center in Philadelphia (Northwestern Human Services of Philadelphia). This work represents a major future direction for the Center, providing the opportunity to test and disseminate evidence-based psychotherapies in routine clinical settings.

Determining the best psychotherapies to treat particular disorders is not easy, but the solutions, Dr. Crits-Christoph underscores, will have “very real and direct implications for public health and the lives of many people.” ❖

Six weeks a year, Joseph DiGiacomo, MD leaves his teaching and clinical responsibilities to sail the warm waters of the Gulf of Mexico off Naples and Key West, Florida. His "mini-sabbatical" allows him time to rejuvenate and keep current with the latest medical literature.

An experienced sailor, he and his wife, Madonna, tack into the wind or run with it, maneuvering to take advantage of wind shifts and avoid shoals threatening to interrupt their voyage. Much as he navigates his nautical journeys, Dr. DiGiacomo has steered his career in medicine with a sense of adventure, and with consummate skill.

Dr. DiGiacomo, Clinical Professor of Psychiatry, has been at Penn for 39 years, but his trip did not begin here, nor even with psychiatry for that matter. He received his undergraduate and medical degrees from Wayne State University before an internship in medicine at the Detroit Receiving Hospital. This was followed by a residency and fellowship in Medicine at Mt. Sinai Hospital in New York. He then served as an internist in the U.S. Air Force from 1959 to 1962 at MacDill Strategic Air Base in Tampa, returning to Mt. Sinai as chief resident in Cardiology.

While in the Air Force, he was impressed with a psychiatrist seeing patients on the floor. "I realized that there was more to medicine than what I was doing," says Dr. DiGiacomo, and he altered his career direction.

From 1964 to 1967, Dr. DiGiacomo

trained in Psychiatry, including psychoanalysis, at Tulane University, developing the first of his career interests – psychosomatic medicine. Tulane encouraged him to establish an institute in the field but, before he could get started,

At Penn, Dr. DiGiacomo took full advantage of the opportunity to practice and teach in multiple settings and to see a wide spectrum of patients. Taking Dr. Stunkard's advice, he opened a private practice, which he still maintains, to

better understand the full dimensions of the field.

He also practiced institutional medicine, seeing

patients and teaching at the Hospital of the University of Pennsylvania, the Institute of Pennsylvania Hospital, the U.S. Naval Hospital, Harrisburg State Hospital, Trenton State Hospital, Allentown State Hospital, and Wernersville State Hospital. His monthly conferences and grand rounds at the state hospitals brought him into close contact with the seriously mentally ill, and he developed an interest in treating patients suffering from chronic schizophrenia.

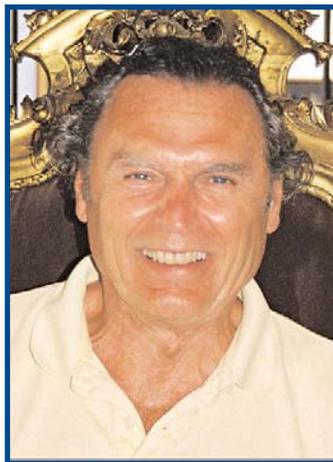
From 1970 to 1980, Dr. DiGiacomo served as Chief of Psychiatry at the Veterans Administration Medical Center, Philadelphia, where he developed a comprehensive program in general hospital psychiatry, including an inpatient psychiatric unit, consultation-liaison service, alcohol treatment unit, drug dependence treatment center, and emergency psychiatric service. His contributions at the VA helped earn him tenure at Penn. Second-year psychiatric residents and medical students now rotate through the VA program.

During his time at the VA, Dr. DiGiacomo developed a new

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## VOLUNTARY FACULTY PROFILE

### Joseph DiGiacomo, MD



Albert Stunkard, MD, then Chairman of Penn's Department of Psychiatry, invited him to Philadelphia.

That visit proved to be a course-changing event. Dr. DiGiacomo vividly remembers that he was "blown away" by the "incredible" quality of the faculty and residents, and the possibility to care for ward patients afflicted with both medical and psychiatric ailments. Responding to the Chairman's suggestion that he stay awhile, Dr. DiGiacomo recalls thinking that he was "not leaving until they kick me out."

*Continued from page 19*

interest in forensic psychiatry, a natural fit with his data-driven and evidence-based approach to medicine. He was frequently engaged as an expert witness in criminal trials for either the prosecution or defense. Perhaps his most publicly visible testimony was given in defense of Edward J. Leary, accused and ultimately convicted of detonating a firebomb on a Manhattan subway car, which injured 48 people. Dr. DiGiacomo testified that a combination of prescription drugs taken by Mr. Leary contributed to his "descent into madness."

The case stirred strong emotions in New York. After appearing at trial one day, Dr. DiGiacomo, at a local tavern with the defense attorney, overheard a patron say, "someone should blow his house up." The individual referred to was not the defendant, but the psychiatrist speaking in his defense. Fortunately, Dr. DiGiacomo was an anonymous presence at the scene.

The Leary case was an important turning point. While Dr. DiGiacomo still believes that Mr. Leary's actions were influenced by drug interactions, and that each defendant is entitled to a robust defense, he recognized his own personal responsibility "to be part of civilization and to do the right thing."

Dr. DiGiacomo now limits his work primarily to civil cases, such as malpractice work. Most of his legal work is for the defense, but whether working for the plaintiff or defense, he emphasizes that "if

I don't believe in a case, I'll say it."

Dr. DiGiacomo's career has benefited from the timely intercession of valued mentors who have

*When Dr. DiGiacomo reflects on his Penn years, one thought stands out. "I can't believe it's true," he says. "I could not have asked for anything more."*

directed him into exciting new waters. It is entirely fitting that one of his great loves is helping future generations of physicians to sail their own uncharted seas. "When I teach residents, I lose track of my age." He praises Chairman Dwight L. Evans, MD for revitalizing the Department's residency program and raising the quality of the matriculants to a high level. And Penn's medical students, he adds, "are very bright, the epitome of idealism."

Dr. DiGiacomo is an active and enthusiastic participant in the medical student curriculum and housestaff training. He has been highly honored for his teaching contributions, clinical expertise, and his life-long contributions to psychiatry. He is the recipient of the Earl Bond Award from the Department for teaching medical students, residents, and/or graduate students; the Dean's Award for Excellence in Teaching from the School of Medicine; and the

Psychiatric Residents' Excellence in Teaching Award. In 2006 he received the second annual Irma Bland Award for Teaching Residents from the American Psychiatric Association, the Clinical Faculty Award from the Department of Psychiatry, the Lifetime Achievement Award from the Philadelphia Psychiatric Society, and was again named as one of American's Top Psychiatrists.

Dr. DiGiacomo's vessel has sailed to many intellectual destinations during his distinguished career, but

there is no doubt that his home port is here at Penn. Initially venturing out as an "insecure" psychiatrist, clothed in a white coat and bearing a stethoscope, Dr. DiGiacomo's interactions with his colleagues at Penn have helped him to explore new subspecialties in psychiatry. Penn, he says, "is an eclectic place where one can sample the hors d'oeuvres while deciding on the main course."

Learning remains his constant joy. It is little wonder that retirement is not a concept that Dr. DiGiacomo embraces. Looking to the horizon, he says he would like to continue to do "more of the same," a blend of teaching, lecturing, consulting, seeing patients, and discovering. He prefers to look ahead, but when he steals a glance sternward, and reflects on his Penn years, one thought stands out. "I can't believe it's true," he says. "I could not have asked for anything more." ❖

The Department has been building its clinical programs at an increasingly rapid clip, and Bobbie Pugh is right at the heart of this effort. Bobbie does the essential – and often unrecognized – work that helps practitioners navigate the complex and confusing world of regulatory requirements.

Bobbie has been at Penn for 17 years. She held several positions prior to coming to the Department, most notably as Assistant to several Associate Deans in the School of Arts and Sciences. She also found time to enroll in the Wharton management degree program, before moving to the Department of Psychiatry in September 1996 as Assistant to Rosellen Taraborrelli, the Department's Chief Financial and Administrative Officer.

At the very start, Bobbie faced a big challenge. She was given responsibility for planning and coordinating the departmental staff holiday dinner at Dave and Buster's, only three months away. Bobbie says that "I didn't think that I could do it, but it went off without a hitch." The 1996 party is now regarded as legendary. "It was phenomenal," Bobbie

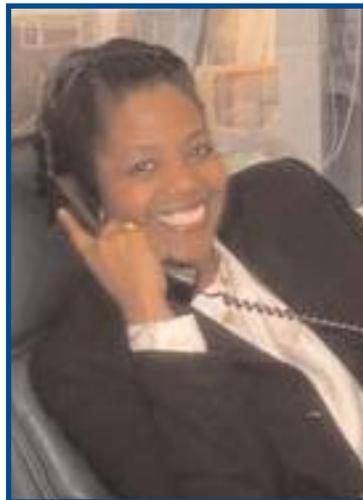
recalls. "To this day, people still talk about that party. It truly felt like the Department was family."

ment, and malpractice coverage. Bobbie also oversees provider relations and network operations for PBH

Corporate Services, working hard to foster strong relationships with the growing number of network providers.

## EMPLOYEE SNAPSHOT

### Bobbie Pugh



Over time, Bobbie assumed increasing responsibilities in the Department. Today, she is the Manager of Provider Relations for the Department and PENN Behavioral Health Corporate Services. The office provides critical support services to faculty, as well as to providers in the PBH specialty network who deliver care to enrollees in PBH's various service programs. The office helps providers complete necessary paperwork related to credentialing, billing enroll-

Bobbie interacts with people and confronts deadline pressures on a daily basis. "I have learned," she says, "not to take things personally. During the course of the day, I literally communicate with many diverse personalities. Maintaining a professional and calm demeanor enables me to see the bigger picture – getting the job done!"

It's not all work, however, and in her non-Penn time, Bobbie enjoys being with her eleven-year-old daughter, reading, gardening, and "catching a good sale!" Bobbie is also a budding entrepreneur. She manages Bobbie's Basics, created in 1999, through which she teaches basic corporate and office skills, offers typing services, and assists small businesses with administrative paperwork. She is also a Notary Public.

With all this going on, Bobbie is still smiling, and continually keeps things moving as she does. ♦

## Educational Highlights

### INTRODUCING THE RESIDENT CLASS OF 2010

**T**he Department of Psychiatry welcomes the Class of 2010 to the residency-training program. The current class of interns in psychiatry was chosen from 499 applicants of whom 89 were ranked. These 10 individuals are extremely talented young doctors who were at the top of their medical school classes and 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 will begin on November 10th and continue until January 24, 2007. ❖



**Sibel Algon, MD**  
UMDNJ-Piscataway



**Joshua Blume, MD**  
Jefferson University



**Scott Campbell, MD**  
University of Pennsylvania



**Julie Chilton, MD**  
UCSF



**Amy Huberman, MD**  
Johns Hopkins



**Margot O'Donnell, MD**  
Jefferson University



**Matthew Prowler, MD**  
Jefferson University



**Theodore Satterthwaite, MD**  
Washington University



**Lilly Sehgal, MD**  
New York University



**Alexander Threlfall, MD**  
Texas Tech University

Additional and updated information about the Residency Training Program can be found on the Residency Program web site -- [www.med.upenn.edu/psychres](http://www.med.upenn.edu/psychres)

## RESIDENT ACTIVITIES

### From the Chief Resident for the Affiliated Sites --Dhwani Shah, MD

The Psychiatry residents have been active in improving our program in a variety of ways. Ryan Connolly, MD, MS, Ben Pumphrey, MD, and Jenny Kim, MD, PharmD have restarted Journal Club with a focus on a critical review of evidence-based literature. A new elective has been implemented to allow PGY-2 residents to focus on specialized aspects of psychiatric treatment, such as pain medicine, sleep medicine, or inpatient child and adolescent psychiatry.

The Veterans Administration Medical Center inpatient addictions rotation has been enhanced with greater involvement of the Treatment Research Center. TRC staff are graciously offering their time for supervision and teaching, including didactics on motivational interviewing. Laura McNicholas, MD, PhD has been active in creating a mandatory free buprenorphine certification course for all PGY-3 and PGY-4 residents. Valerie Nordquist, MD is creating a seminar with a focus on accessing and utilizing Alcoholics /Narcotics Anonymous, with speakers and an introduction to the twelve steps.

Our “crash course in psychiatry” for interns has been reformatted to create an intensive teaching curriculum that includes a psychopharmacology review, consultation/liason issues and “real world” practical didactics on emergency psychiatry, including medical emergencies, clinical interviewing, managing involuntary commitments, and capacity evaluations.

Samar Jasser, MD and the chief residents are working together to create a website and resident manual that will include resident-based information, pivotal articles in psychiatry, and a detailed handbook of evidenced-based practice guidelines and protocols. John O’Reardon, MD is also assisting this project by contributing his extensive collection of psychopharmacology notes and lectures.

Movie Club, a popular event last year, will continue with Anthony Rostain, MD, Henry Bleier, MD and other faculty members screening and discussing movies, including *The Squid and the Whale* and *Tarnation*. All are welcome to attend!

Lisa Rosenthal, MD has restarted the Community Psychiatry elective with seminars which include consumers, advocates, providers, and policy makers in the public mental health system (and dinner!), and field trips that include shelters, jails, residential programs, psychosocial rehabilitation programs, and a state psychiatric hospital.

Kate Blumner, MD, MPH also has been active in creating a seminar entitled “Alternative Treatments in Psychotherapy.” Her recent seminar focused on hypnosis with Peter Bloom, MD as a discussant.

We look forward to these exciting developments and more in the coming months! ❖

## FROM THE HUP INPATIENT CHIEF RESIDENT --Kari Groff, MD

Medical student education is an important aspect of the Penn psychiatry program. This year, we find more and more senior residents returning to the inpatient side of psychiatry to teach medical students and junior residents. Every Wednesday and Friday morning, we have a special medical student morning report run by the HUP chief resident, as well as many hours of direct one-on-one supervision and clinical observation on the Consultation-Liaison Service by senior residents. Several fourth-year residents are working as junior attendings and provide valuable leadership skills and exceptional teaching to the medical students and junior residents. They bring the perspective of outpatient experience back to the inpatient unit and the Consultation-Liaison Service.

Residents have also been involved in teaching Brain and Behavior and the Doctor-Patient interviewing course to the first and second-year medical students. The medical students have given excellent feedback with regard to resident teaching. We look forward to continuing to enhance medical education, working closely with the medical student education director, Benoit Dube, MD.

This year, we are continuing Professors Rounds on Friday mornings and welcome many esteemed Penn faculty members to Founders 11 to participate in this activity. Professors Rounds are geared toward enhancing resident education, patient care, and introducing residents to some of our more senior faculty. On that note, we will also be having a Masters Dinners series with senior faculty members and residents at the Chairman's house. We look forward to a rewarding year of both learning and mentorship. The chief residents have made medical education a priority in their work this year and are excited to participate in this long tradition of Penn teaching. ❖

## THE FAMILY SYSTEMS PROGRAM IN THE GENERAL RESIDENCY

Ellen Berman, MD and Robert Garfield, MD

The couple and family systems program in the Department of Psychiatry, under the direction of Ellen Berman, MD and Robert Garfield MD, is now fully integrated into all four years of training in adult psychiatry. The program teaches a systems orientation to psychiatric care, emphasizing the critical role family members play in successful treatment and how best to involve and support patients and their families in the therapy regimen. Residents

become familiar with common family and couples issues and developmental milestones faced by adult children and their parents throughout the life cycle, especially in the presence of psychiatric illness in either generation. A separate mini-course covers sexual function and dysfunction and sexual orientation issues. The program's fundamental message is that families are an asset to the psychiatrist's work rather than a burden.

Research has shown that the

support of partners and family is critical to the patient's recovery from illness. According to national residency training guidelines, residents must learn the ability to communicate with, assess, and educate patients and families. In addition, they need to be familiar with the basics of family therapy.

The Penn Psychiatry family systems training program is now recognized nationally for its extensive and comprehensive nature. The curriculum has been presented at

*Continued on page 25*

*Continued from page 24*

major conferences, including the American Association of Directors of Residency Training and Academic Psychiatry. Dr. Berman is also the Chair of the Family Committee of the Group For Advancement of Psychiatry and Chair of the Association of Family Psychiatrists, allied with the American Psychiatric Association. She is co-author of a textbook, *Marital and Family Therapy*, and articles on the state of family systems training in psychiatry in this country.

The program begins in the PGY-1 and 2 years with faculty demonstrations of family interviewing on the inpatient unit. The goal is to teach residents how family systems affect psychiatric illness and hospitalization, to learn about caregiver burden, and to understand how families can be supported in their care of the patient. Concurrent lectures introduce systems concepts and review normal family development and attachment theory.

In the PGY-3 year, the residents observe faculty assessments of outpatient couples and adult children and their parents, and coursework focuses on the theory and practice of assessment. Residents begin to do evaluations of the families or partners of their individual outpatients, and often begin one or two family therapy cases. Systems supervisors support their work.

In the PGY-4 year, coursework focuses on specific techniques of couples therapy and common relational issues (for example, secrets and



*Robert Garfield, MD and Ellen Berman, MD*

affairs, substance abuse, family violence, and divorce and remarriage) that are frequently seen in both individual and family therapy. Residents observe an ongoing couples therapy case conducted by a senior faculty person. Family systems training is also represented in the coursework for the psychotherapy track.

By the end of the program, residents are expected to complete numerous evaluations of individual patients with their "significant others" or other family members, and to have conducted at least two couple and two family therapy cases. For residents wishing more in-depth experience, a family therapy elective is available.

Several teaching methods are widely used in the program.

Classes are taught using an extensive video collection of movies and demonstration tapes. Role play is an integral part of the process, to hone skills of dealing with multiple family members at once. Personal reflection is an important part of training, as one's own history and beliefs are particularly likely to affect one's ideas of what is normal for families. Unlike the majority of residency training programs, family systems thinking is introduced at adult inpatient and outpatient sites, rather than limited to child and geriatric settings or family clinics.

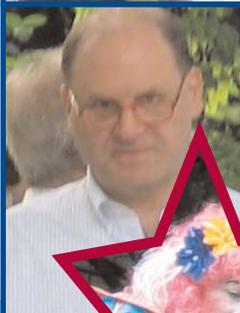
This encourages residents to see how family involvement can be useful in psychiatric treatment in most patient populations, although family therapy is not always necessary.

Current instructors in the program include David Wohlsifer, DHS, LCSW, MSW (who was instrumental in beginning the program), Mickey Bernstein, MD, Benoit Dube, MD, Guy Diamond, PhD, Nancy Gambescia, PhD, Carol Gantman, PhD, C. Wayne Jones, PhD, Deborah Luepnitz, MD, Bill Oberfield MD, Anthony Rostain, MD, and Leda Sportolari, MSW LCSW. The family systems faculty are well-known at the local and national levels, and many have published widely in the field. ❖



## Department of Psychiatry

On July 8, members of the Department of Psychiatry's extended family gathered at the home of Dr. and Mrs. Evans to take part in the annual departmental picnic. The event introduces new housestaff to the Department and their new colleagues, and is always a wonderful opportunity for new and old members of the Department to reconnect. The sun shone warmly on the lawn of the Evans' home as the children, parents, and grandparents delighted in clowns and ice cream. Everyone enjoyed the activities, food and fellowship, and the annual picnic was a fitting start for a new and exciting year in the Department of Psychiatry.



## 2006 Annual Family Picnic



## Calendar of Events

### PSYCHIATRY GRAND ROUNDS

12:00-1:00 pm

BRB II/III Auditorium

#### SEPTEMBER 2006

- 7 *Dissecting the Disease Process of Schizophrenia: From Pathogenetic Mechanisms to Treatment Interventions*  
David A. Lewis, MD, Professor, Departments of Psychiatry and Neuroscience; Director, Translational Neuroscience Program; Director, Conte Center for the Neuroscience of Mental Disorders; University of Pittsburgh
- 21 *Translational Research in Schizophrenia: Promises and Challenges*  
Raquel E. Gur, MD, PhD, The Karl and Linda Rickels Professor; Vice Chair for Research Development, Departments of Psychiatry, Neurology & Radiology; Director, Neuropsychiatry Section; University of Pennsylvania

#### OCTOBER

- 5 *Psychosocial and Pharmacological Interventions for Improving Functional Outcomes in Schizophrenia*  
Stephen Marder, MD, Professor of Psychiatry; UCLA Medical Center
- 19 *Title TBA - Psychosis Module (Case Presentation)*  
Christian Kohler, MD, Associate Professor of Psychiatry and Neurology, University of Pennsylvania

#### NOVEMBER

- 2 *Genetics of Bipolar Disorder*  
Wade Berrettini, MD, PhD, Karl E. Rickels Professor of Psychiatry; Director, Center for Neurobiology and Behavior; University of Pennsylvania
- 9 *Title TBA*  
James L. Stinnett, MD, Professor Emeritus of Psychiatry; University of Pennsylvania  
Dr. Stinnett's portrait unveiling and reception will follow in the BRB II/III Lobby.
- 16 *Marijuana and the Endocannabinoid System: Promises and Problems*  
Herbert D. Kleber, MD, Professor of Psychiatry; Director, Division of Substance Abuse; Columbia University College of Physicians & Surgeons; New York State Psychiatric Institute
- 30 *Interventions for Cocaine*  
Charles A. Dackis, MD, Assistant Professor of Psychiatry; University of Pennsylvania

#### DECEMBER

- 14 *Title TBA -- Substance Abuse Module (Case Presentation)*  
Kyle Kampman, MD, Associate Professor of Psychiatry; University of Pennsylvania

#### JANUARY 2007

- 11 *Neurobiology and Suicide*  
J. John Mann, MD, Paul Janssen Professor of Translational Neuroscience in Psychiatry and Radiology, Columbia University; Chief, Department of Neuroscience, New York State Psychiatric Institute
- 25 *Cognitive Therapy for Suicide Prevention*  
Gregory K. Brown, PhD, Research Associate Professor of Clinical Psychology in Psychiatry; Associate Director, Center for Intervention and Prevention of Suicide; University of Pennsylvania

#### FEBRUARY

- 8 *Title TBA -- Suicide Module (Case Presentation)*  
Aaron T. Beck, MD, Professor Emeritus of Psychiatry; Director, Center for Intervention and Prevention of Suicide; University of Pennsylvania
- 22 *Translational Research and Suicide*  
David Brent, MD, Professor of Psychiatry; University of Pittsburgh

#### MARCH

- 22 *Depression and Menopause*  
Ellen W. Freeman, PhD, Research Professor, Departments of Obstetrics & Gynecology and Psychiatry, University of Pennsylvania

#### APRIL

- 5 *Translating Research on Mechanisms of Neurodegeneration into Disease Modifying Therapies*  
John Q. Trojanowski, MD, PhD, William Maul Measey-Truman G. Schnabel, Jr, MD Professor of Geriatric Medicine and Gerontology; Director, Institute on Aging; Director, Alzheimer's Disease Center; Co-Director, Center for Neurodegenerative Disease Research and Marian S. Ware Alzheimer Drug Discovery Program, University of Pennsylvania
- 19 *Psychological Distress, Aging, Neurodegeneration and Dementia*  
Steven E. Arnold, MD, Associate Professor of Psychiatry and Neurology; University of Pennsylvania

#### MAY

- 3 *Title TBA -- Neurodegenerative Module (Interventions)*  
Bruce G. Pollock, MD, PhD, FRCPC, Sandra A. Rotman Chair in Neuropsychiatry & Head, Division of Geriatric Psychiatry, University of Toronto; The Rotman Research Institute, Baycrest Centre for Geriatric Care, Toronto
- 17 *Title TBA -- Neurodegenerative Module (Case Presentation)*  
Daniel Weintraub, MD, Assistant Professor of Psychiatry and Neurology, University of Pennsylvania

The Psychiatry Grand Rounds schedule will be posted on-line on the  
Department of Psychiatry web site at [www.med.upenn.edu/psych](http://www.med.upenn.edu/psych)

## Penn Behavioral Health



The Penn Behavioral Health Contact Center is staffed with masters' level professionals who are trained to **assess your needs and direct you to the appropriate providers** and the appropriate level of care.

*Some of the conditions we provide guidance and assistance for include:*

- ◆ Agoraphobia
- ◆ Bipolar Disorder
- ◆ Depression
- ◆ Panic & Anxiety Disorders
- ◆ Schizophrenia
- ◆ Dementia
- ◆ Family & Relational issues
- ◆ Obsessive Compulsive Disorder
- ◆ Schizoaffective Disorders
- ◆ Substance Abuse

**Please call us at 1-866-301-4PBH (4724)  
Or find us online at [www.pennhealth.com/pbh](http://www.pennhealth.com/pbh)**



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