

PENN Psychiatry Perspective



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Department of Psychiatry
and
PENN Behavioral Health
University of Pennsylvania

The Department Welcomes Michael E. Thase, MD

Michael E. Thase, MD joined the Department in January as Professor of Psychiatry. He comes from the University of Pittsburgh Medical Center where he was Chief of the Division of Adult Academic Psychiatry, and an internationally renowned clinical investigator.

At Pittsburgh, Dr. Thase says that he “had the good fortune to work with and learn from senior colleagues who are some of the field’s most outstanding clinical researchers in the areas of psychotherapy, psychopharmacology, and psychopathology. In the future, I hope to return the favor to the coming generations of trainees and junior faculty members at the University of Pennsylvania.”

After earning an MD degree from Ohio State University in 1979, Dr. Thase did his residency and fellowship training at Pittsburgh and then rose through the faculty ranks there. “Since 1988, I have run one of the largest integrated mood disorders programs extant,” says Dr. Thase. His primary focus has been to evaluate pharmacologic and psychotherapeutic strategies – singly and in combination – for both unipolar and bipolar mood disorders.

Working first with neuroendocrine studies and assessments of neurophysiologic activity during sleep, and later with positron emission tomography and functional resonance imaging, Dr. Thase and his team have identified central nervous system profiles that may predict whether patients may suffer a relapse or recurrence of their illness and whether they might benefit more from psychotherapy or drug therapy.

During the past 15 years, Dr. Thase has worked on multi-center studies with an increasingly larger network of treatment researchers. These include the National Institute on Drug Abuse Treatment of Cocaine Collaborative Study (which was led by colleagues at Penn) and the Chronic Depression Study



Group. More recently, he was one of the principal architects of two large National Institute of Mental Health public health-relevant research initiatives – the Systematic Treatment Evaluation Program for Bipolar Disorder (STEP-BD) and Sequenced Treatment Alternatives to Relieve Depression (STAR*D).

Coming to Penn opens exciting opportunities. “Penn’s Department of Psychiatry has a long tradition of excellence in my area of interest - mood disorders

research,” Dr. Thase says. At Penn, he plans to strengthen on-going collaborations with colleagues maintained at a distance over the past years, including Drs. Dwight Evans, Jay Amsterdam, Jacques Barber, Aaron Beck, Paul Crits-Christoph, and Karl Rickels. He’s also excited about the opportunities to initiate collaborations investigating the neurobiological correlates of treatment response utilizing neuroimaging, neurochemical, and genomic probes with new colleagues such as Drs. Ruben and Raquel Gur, Irwin Lucki, Chang-gyu Hahn, and Wade Berrettini.

Dr. Thase remains intrigued by a longstanding issue in the field – the boundary between sadness as a normal and temporary mood state and depression as a definable illness. Understanding the difference between the two states impacts prescribed treatments, and has created a lingering controversy that, according to Dr. Thase, “has fueled debates between clinicians and researchers for years.”

The tools required to address this problem have not existed until now. Today, though, Dr. Thase says that “contemporary researchers can draw upon genomics and neuroimaging to better define the boundary between normal and abnormal brain activity and more accurately monitor transitional states.” It’s an issue Dr. Thase will continue to explore in the coming years in collaboration with his Penn colleagues. ♦

Chairman's Report

Newly published information documents what mental health professionals have long known. Diseases of the mind are destroying millions of lives.

What the World Health Organization (WHO) has recently reported is startling. In high-income countries, mental health disorders account for *three of the top four diseases* producing the largest numbers of healthy years lost to disability – unipolar depressive disorders (#1), Alzheimer's and other dementias (#2), and alcohol use disorders (#4). In low- and middle-income countries, unipolar depressive disorders rank first, with schizophrenia eighth and alcohol use disorders ninth.

It's a destructive lineup that puts psychiatry departments at the front of the battle against debilitating disease. I'm proud to say that our faculty are intensively investigating the causes and treatments for each of these and other ravaging diseases, and I'd like to highlight a few initiatives.

Causation – Bench researchers in the Center for Neurobiology and Behavior (Wade Berrettini, MD, PhD) study the underlying neurobiology and possible genetic causes of disease. They work on the full range of mood disorders (e.g., unipolar depression and bipolar disorder), and other illnesses related to substance abuse, anxiety, psychosis (e.g., schizophrenia), dementia (e.g., Alzheimer's), and eating disorders (obesity and anorexia). Several efforts explore how a person's genes may impact the effect of antidepressant drugs in the body. This exciting area has the potential to lead to custom-tailored drugs for individuals, truly research at a fundamental level.

Treatment and Prevention – Psychiatrists and psychologists are trained to treat depression, the world's leading cause of disability, and our faculty provide care to many patients with this crippling disorder. We also develop treatments for this disease that have been adopted world-wide. Aaron T. Beck, MD, as a stellar example, is highly honored for developing Cognitive Therapy, which he first invented to treat depression and is now used internationally to treat many mental and behavioral health diseases. His current focus is on treating and preventing suicide, an all-too-common outcome of depression.

The Center for Psychotherapy Research (Paul Crits-Christoph, PhD), the Center for Cognitive Therapy (Cory Newman, PhD), and the Center for the Treatment and Study of Anxiety (Edna Foa, PhD) also conduct research to improve psychotherapeutic approaches for treating depression, anxiety, and other disorders.

Department faculty are also heavily invested in developing new drug therapies, an area targeted by the Depression Research Unit (Jay Amsterdam, MD) and the Mood and Anxiety Disorders Section (Karl Rickels, MD). And the newly established Mood Disorders Research and Treatment Program (Michael Thase, MD) will evaluate pharmacologic and psychotherapeutic strategies for both unipolar and

bipolar mood disorders.

A long-term focus of the Department has been to improve treatments for alcohol and substance abuse disorders, led by the pioneering efforts of Charles P. O'Brien, MD, PhD. The Center for Studies of Addiction, and its affiliated units, spearhead the Department's work in testing and improving drug therapies for addiction.

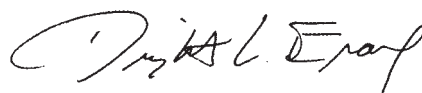
Raquel Gur, MD, PhD and the Neuropsychiatry Section, with its strong focus on schizophrenia and other psychotic disorders, works across the clinical-basic science interface to search for underlying causes and to develop better treatments for these illnesses.

The Section of Geriatric Psychiatry (Steven Arnold, MD) investigates new treatments for disorders affecting the elderly, including depression and substance misuse, and also focuses on the neuropsychiatric complications of Alzheimer's disease.

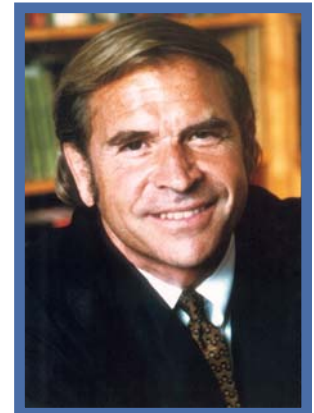
Our Department is also heavily involved in the study of tobacco use and smoking cessation and prevention (Caryn Lerman, PhD), the study of obesity treatment and prevention (Thomas Wadden, PhD), and the study of circadian rhythms and sleep (David Dinges, PhD) – each related to medical illnesses which carry their own burden of disease (cancer, diabetes, cardiovascular disease, accidents, etc).

Delivery Systems – The best treatments are of little value unless they get to the people who need them, and the Center for Mental Health Policy and Services Research (Trevor Hadley, PhD) is studying – and implementing – the best means to deliver mental health care to the community. Related efforts include the work of the Center for Psychotherapy Research in bringing psychotherapeutic options to the community and use of a mobile van by the HIV/AIDS Research Prevention Division (David Metzger, PhD) to recruit local members of high-risk populations into clinical trials which test HIV prevention interventions.

As the WHO global burden of disease study drives home, an imposing array of mental and behavioral health diseases is jeopardizing the quality of life of millions. While we are only a single department with a limited number of faculty, we are highly collaborative, and I believe that we are mounting a worthy response to this threat.



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



Program Highlights

THE PENN ADULT DEVELOPMENTAL DISORDERS PROGRAM

In recent years, American medicine and the general public have started to pay closer attention to “developmental disorders.” These disorders comprise a broad set of conditions in which an individual’s cognitive, social, and/or emotional capacities are atypical, leading to a variety of functional impairments requiring mental health treatment. Usually associated with children, developmental disorders also persist into adulthood where symptoms can disrupt school, work, and social relationships.

Often, the humiliation associated with the manifestations of developmental disorders prevents adults from seeking treatment. There are no cures for developmental disorders, but the associated psychiatric symptoms and functional limitations can be managed successfully.

This is where the expertise of the psychiatrists and psychologists at Penn Behavioral Health’s Adult Developmental Disorders Program (ADDP) comes in. The ADDP is directed by Anthony L. Rostain, MD, MA, Associate Professor of Psychiatry and Pediatrics and an acclaimed expert in developmental disorders across the life span – a specialty referred to as developmental neuropsychiatry. A generous gift from Mr. John Parker, former CEO and President of AC Moore, helps support the program’s research agenda and infrastructure.

The ADDP specializes in the assessment and treatment of older adolescents (those over 16) and

adults with developmental disorders. These range from Attention-Deficit/Hyperactivity Disorder (ADHD) to Autistic Spectrum disorders, and include academic learning disabilities, communication disorders, nonverbal learning disorders, Asperger’s Syndrome, Tourette’s Syndrome, and post-concussive syndromes. No other center in the region offers similar services.

According to recent national epidemiologic studies, ADHD is present in 4.4 percent of the adult population but only 1 in 4 people receive treatment. Autism affects fewer individuals -- roughly one in 150. However, related diagnoses for Asperger’s Syndrome, schizoid personality disorder, social phobia, or nonverbal learning disorder increase this number to roughly 2 percent, and academic learning disabilities occur in about 5 percent of the population. While there is overlap between ADHD and these other conditions, it is fair to estimate that over 10 percent of adults have some form of developmental disorder.

Developmental disorders are often hard to diagnose in adults, as their behavioral signs are often confused with other conditions. ADHD’s main symptoms are inattention, impulsive behavior, and hyperactivity, but these can be accompanied by anxiety, depression and/or substance abuse. People with “social learning disorders” have trouble understanding

nonverbal communication, such as body language and facial expressions, and they tend to have restricted interests. Many also suffer from social anxiety and obsessive compulsive disorders.



from l to r: Edward S. Brodtkin, MD; Anthony Rostain, MD, MA; Mary Riggs Cohen, PhD; J. Russell Ramsay, PhD

According to Dr. Rostain, “It is hard to estimate rates of misdiagnosis, but we frequently see patients whose developmental difficulties were overlooked by other clinicians.” Several factors explain this, he adds, including inadequate training for most psychiatrists and psychologists, clinicians’ tendencies to treat co-morbid psychiatric disorders – such as anxiety, depression, and substance abuse – without looking for indications of developmental abnormalities, as well as disagreements among clinical researchers about diagnostic criteria.

All this makes it critical that those suffering from these disorders seek evaluation and treatment from top experts who are aware of the latest advances in the field.

The Penn Adult Developmental Disorders Program offers two distinct clinical service programs –

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the Adult ADHD Treatment and Research Program and the Social Learning Disorders Program. Both programs are similar in their clinical approaches, offering patients assessment and diagnosis, specialized custom-tailored treatment, and access to clinical research protocols.

Patients are educated as to the nature of their disorder and directed to relevant information and other resources to help them actively participate in

their own treatment process. As appropriate, they are offered medication, psychotherapy, or a combination of the two to modify thinking and behavior patterns and to maximize functional capacity. Patients also have access to academic tutoring, vocational counseling, and coaching, and may be directed to support groups to aid their treatment regimens. Family intervention and support services are also provided when appropriate.

No single test can definitively prove whether someone has ADHD or a "social learning disorder." Clinicians at the ADDP gather a thorough history of each person's functioning since childhood and supplement this with standardized behavior checklists, symptom rating scales, observations from others, and neurocognitive screening measures to gauge a person's "executive functions," those abilities that allow us to control our thoughts and actions. ADDP clinicians also evaluate any accompanying psychiatric condi-

tions because these can significantly modify treatment priorities.

Complementing the ADDP's clinical services are its equally strong education and research programs. ADDP faculty, which include Edward S. Brodtkin, MD, J. Russell

Ramsay, PhD, and Mary Riggs Cohen, PhD, in addition to Dr. Rostain, train other mental health professionals and educate the general public about these complex disorders.

They are also engaged in research on adult develop-

mental disorders, particularly important because there is much to learn about what causes them. "There is no question that progress is being made," says Dr. Rostain, "particularly through the use of novel neuroimaging techniques combined with specific neuropsychological tasks that enable scientists to pinpoint which brain areas are functioning less optimally in patients with these disorders. There is a strong consensus that heredity plays a big role here, but, more than likely, it will be combinations of genetic variables that will be found to play a determinative role." Current research suggests that autism, for example, may involve the interaction of several dozen genes.

ADDP scientists are heavily involved in research to identify the best treatments. Drs. Rostain and Ramsay recently published a study showing that combined use of both medication and cognitive-behavior therapy improves outcomes for adult ADHD patients (1). This work led the team to write a treat-

ment manual – *Cognitive Behavioral Therapy for Adult ADHD – An Integrative Psychosocial and Medical Approach* – to be published by Routledge Press in July 2007.

"We believe that the combination of treatments is the most effective," says Dr. Rostain, "although more research is needed to understand how each type of intervention contributes to positive results. Of course, because we individualize our treatments, patient preferences play a major role in determining what approach to start with."

In another initiative to improve treatments, Dr. Mary Riggs Cohen has been documenting significant improvements in social functioning in adults with social learning disorders who attend her social skills seminar. The curriculum for this unique class is about to be published by the Autism Asperger Publishing Company.

"What makes the Penn Adult Developmental Disorders Program unique," Dr. Rostain says, "is that we are a multidisciplinary team utilizing state-of-the-art diagnostic methods and treatment approaches, and engaging in clinical research focused on improving functional outcomes for these patient populations." It's a compelling combination for those enduring these complex conditions. ❖

For additional information about the Penn Adult Developmental Disorders Program, you may access the ADDP Website (<http://www.med.upenn.edu/add/>). You may also call (215) 573-1159 to learn more about the program or to make an appointment.

(1) Rostain, AL, Ramsay, JR. A combined treatment approach for adults with ADHD--results of an open study of 43 patients. *J Atten Disord.* 2006 Nov;10(2):150-9.

Usually associated with children, developmental disorders also persist into adulthood where symptoms can disrupt school, work, and social relationships.

DELIVERING DRUGS: The Stanley Center for Experimental Therapeutics Explores New Ways to Treat Schizophrenia

Schizophrenia is a devastating illness, a severe psychosis with symptoms which include disturbed thinking, misinterpretation of reality, withdrawal from the outside world, and delusions and hallucinations. According to the National Schizophrenia Foundation, over 2.1 million Americans suffer from this terrible disease.

There is no known cure for schizophrenia, but psychotherapy and antipsychotic drugs can control it when utilized properly. Patients with schizophrenia, however, often have difficulty adhering to their treatment regimens. As many as 80 percent do not take their medications as prescribed, limiting their effectiveness.

Steven J. Siegel, MD, PhD, Assistant Professor of Psychiatry and Director of The Stanley Center for Experimental Therapeutics in Psychiatry, is addressing this significant problem in a fundamental way. For over five years, he and his laboratory team have been developing long-term drug delivery systems that do not rely on the need for patients to make daily decisions to take their medicine. These newly emerging systems, Dr. Siegel says, "are designed to increase patient autonomy by allowing people to make their own treatment choices while they are well, rather than during periods of relapse."

A particularly promising approach has been the development of implantable devices to deliver medication on a regular basis. First reported by Dr. Siegel and his Penn colleagues in a 2002 article in *Neuropsychopharmacology* (1), the device is a small disc surgically placed under the skin which dissolves slowly to release medicine. Experimentation with rats and mice has already demonstrated the value of the disc to deliver the antipsychotic agent haloperidol for up to one year. The quarter-size disc is made of various biodegradable polymers, complex compounds of high molecular weight, each designed to disintegrate at pre-specified rates to allow the required medication release over a designated period of

time. The implantable devices can be easily removed if adverse side effects occur, not possible with either oral or depot (injectable) delivery systems.



Steven J. Siegel, MD, PhD

Dr. Siegel and his fellow scientists are now integrating other antipsychotic medications into implants. With support from the National Institute of Mental Health, Dr. Siegel (Principal Investigator) and Karen Winey, PhD (Co-PI), Professor in Penn's Department of

Materials Science and Engineering, are developing implants using risperidone, favored by patients and doctors over haloperidol.

Related work is funded by the Stanley Medical Research Institute (SMRI). The SMRI, formerly the Stanley Foundation, is an advocacy organization for families afflicted with schizophrenia. It started funding Dr. Siegel's work while he was a second-year resident. Additional drug delivery projects have been funded by the Nanotechnology Institute (a joint Penn and Drexel University project), Penn's Institute for Translational Medicine and Therapeutics, and NuPathe, a local pharmaceutical company.

The ultimate goal of this translational research venture is to produce an implantable device used in patient care. Once the device is sufficiently refined to warrant clinical trials, the next step is to establish a partnership with the pharmaceutical industry, which possesses both the financial strength and expertise to bring drugs and instruments to market.

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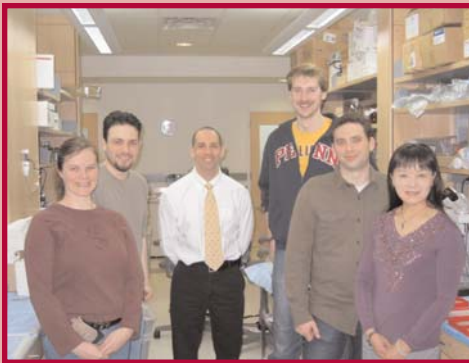
"I am hopeful," says Dr. Siegel, "that we will eventually be able to move the concept far enough that industry will pick up the idea and run with it. Only a pharmaceutical company can truly effect significant impact on improved therapies in humans. The challenge is to find a pharmaceutical company ready to invest in such a novel concept and take on the regulatory, distribution and marketing hurdles. Specifically, we need to get both pharmaceutical companies and academic reviewers to make the conceptual leap from understanding that patient compliance is the major determinant

"I'm hopeful that the atmosphere is slowly coming around to recognize that medications for schizophrenia have not changed in over 50 years," Dr. Siegel says, "and that delivery systems to increase adherence could be the largest single improvement to health care in psychiatry in the foreseeable future."

percent of patients, 80 percent of family members, and 85 percent of health care providers think implants are a good idea. If the value of the implantable devices can be demonstrated to the satisfaction of the Food and Drug Administration, there appears to be a ready market for them.

tion of science and its practical application illustrates the difficulty of bringing laboratory findings to the bedside. Money is not the only impediment but it remains a major one. "The size of an average R01 grant from the National Institutes of Health is quite small compared to the true cost of bringing even a single drug to market," says Dr. Siegel, "so there is still a large gap between the mechanisms to distribute academic funding and the real world challenges ahead."

But as large as the barriers, the rewards are great. "I'm hopeful that the atmosphere is slowly coming around to recognize that medications for schizophrenia have not changed in over 50 years," Dr. Siegel says, "and that delivery systems to increase adherence could be the largest single improvement to health care in psychiatry in the foreseeable future." It's certainly a challenge well worth the effort. ❖



The Siegel lab team -- from left to right:
Chalon Majewski-Tiedeken, BA; Richard Ehrlichman, BS;
Steven Siegel, MD, PhD; Tobias Halene, MD, PhD;
Jake Burnbaum, BA; Yuling Liang, MD
Not pictured:
Rachel Rosenberg, James Cheng, BA,
Rachel Klein, Suzanne Wilson, Omid Motobar, Cara Rabin

of outcome in schizophrenia to accepting that there are practical things that can be done about it."

Will patients and physicians accept implantable devices? Dr. Siegel and his team have conducted a survey both in the U.S. and abroad showing that 40

Complementing their work on drug delivery systems, Dr. Siegel's 13-person laboratory team, with others in the Department of Psychiatry, also study the neurobiology of schizophrenia and other mental disorders. Dr. Siegel directs a project in the NIMH-funded Conte Center for Neuroscience of Mental Disorders, which is headed by Raquel Gur, MD, PhD (PI) and Steven Arnold, MD (Co-PI). Dr. Siegel also

receives support from the Department's Transdisciplinary Tobacco Use Research Center, which is headed by Caryn Lerman, PhD, and currently has a grant from AstraZeneca to study the role of nicotine receptors in information processing.

Dr. Siegel's work at the intersec-

(1) Siegel SJ, Winey KI, Gur RE, Lenox RH, Bilker WB, Ikeda D, Gandhi N, Zhang WX: Surgically implantable long-term antipsychotic delivery systems for the treatment of schizophrenia. *Neuropsychopharmacology*. 2002 Jun;26(6):817-23.

EXTENDED WEATHER FORECAST...

RAINE IS COMING

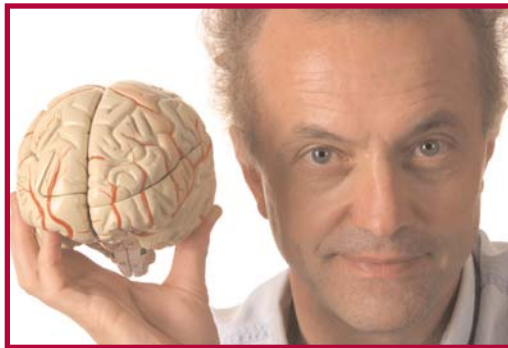
In January, Adrian Raine, DPhil, an internationally renowned investigator, was named the fourth Penn Integrates Knowledge (PIK) Professor. When he arrives at Penn on July 1, he will become the Richard Perry University Professor and receive faculty appointments in the Departments of Psychiatry and Criminology. He has been a member of the Department of Psychology at the University of Southern California for the past twenty years.

PIK professorships, initiated by Penn President Amy Gutmann, bring to Penn scholars and teachers whose work crosses disciplines, departments, and schools. Dr. Raine is the epitome of a PIK Professor. His main research focus has been discerning the interlocking web of factors that lead to criminal behavior, an extraordinary range of contributing conditions requiring an equally broad array of disciplinary tools.

"I have been researching the biosocial bases of antisocial, violent, and criminal behavior for my whole academic career," says Dr. Raine. "A key thrust of my work has been the premise that the violent offender is a complex, interdisciplinary jigsaw puzzle that requires the integration of information from multiple disciplines to truly understand the cause of one of society's major problems." A secondary research interest has been his work on schizotypal personality disorder, an attenuated form of schizophrenia.

Dr. Raine earned his BA and MA in Experimental Psychology from Oxford University (1977 and 1982) and his DPhil in Psychology (1982) from York University, both English institutions. During his graduate training, he first encountered the perils associated with interdisciplinary work. "My very first publication as a PhD student provided experimental

evidence to indicate that antisocial behavior in schoolchildren is an interaction between classical conditionability and social class," he recalls. But later, his examination committee insisted that this published experiment be taken out of his final thesis, "an indication," Dr. Raine laments, "of the enormous barriers to integra-



tive research that existed then, and still to some extent exist today."

Not deterred by this setback, Dr. Raine continued to explore the causative interplay among environmental, genetic, nutritional, psychological, and neurological factors, an approach the Penn environment nourishes. "The reason I am excited about the possibility of moving to the University of Pennsylvania," Dr. Raine says, "is that there is evidence of genuine support for an interdisciplinary perspective – not just lip service, not just wishful thinking."

Dr. Raine anticipates future collaborations with faculty throughout the University, and Psychiatry faculty will play a central role. "Penn's truly world-leading Psychiatry Department was a major attraction to my moving to Penn," says Dr. Raine. "Being a part of this program and its faculty is truly a great honor. My very first academic appointment in England had been in the Department of Psychiatry at Nottingham University, and it was a very happy and stimulating three-year period of my academic life. In a

way I'm looking to re-inventing that part of my career, a time when I first began brain imaging work."

The fit with the Department is ideal. "The beauty of Penn Psychiatry," says Dr. Raine, "is that it has a brilliant faculty with expertise and interest in schizophrenia and antisocial personality disorder and the brain mechanisms involved," areas which hold special interest for him. Beyond this, "there's a personal touch to Penn Psychiatry, both at the faculty and staff level, that I find to be very attractive," he adds.

In Psychiatry, "the presence of [Drs.] Ruben and Raquel Gur and their interest in forensic psychiatry as well as schizophrenia-spectrum disorders, plus [Dr.] Dan Langleben's expertise in the detection of deception, obviously match my own interests," says Dr. Raine. "But much more broadly, I know my growing interests in molecular genetics could really benefit from interacting with people like [Drs.] Wade Berrettini and Ted Brodtkin in the Center for Neurobiology and Behavior, while my continuing work on psychophysiology and cognition will benefit from experimental psychiatrists and psychologists like [Dr.] David Dinges. And I have already made contact with [Dr.] Trevor Hadley in the Center for Mental Health Policy and Services Research about a possible future collaboration on obstetric factors in clinical disorders."

"There is increasing recognition that the major advances in my field of study will be made by research that lies at the interface between converging disciplines that can be brought to bear on the pressing societal problem of violence and crime," Dr. Raine emphasizes. It's why he is coming to Penn and why, he says, "I'm very excited to being part of Penn Psychiatry." ❖

Our Distinguished Faculty

AWARDS & HONORS

Penn Honors

Steven E. Arnold, MD was appointed Director of the Geriatric Psychiatry Program in the Department of Psychiatry.



Janet Audrain-McGovern, PhD will be promoted to Associate Professor with tenure, effective July 1, 2007.

Aaron T. Beck, MD received the 2006 Edward A. Strecker Award from Pennsylvania Hospital and the University of Pennsylvania Health System for outstanding contributions to the field of clinical psychiatry.

Gregg E. Gorton, MD has been chosen to receive the 2007 Dean's Award for Excellence in Clinical Teaching at an Affiliated Hospital. This award recognizes teaching excellence and commitment to medical education at affiliated hospitals.



Chanita Hughes-Halbert, PhD will be promoted to Associate Professor with tenure, effective July 1, 2007. She is the first African American woman promoted with tenure in the Department.

Caryn Lerman, PhD was appointed Deputy Director of the University of Pennsylvania Abramson Cancer Center.

David B. Sarwer, PhD was named Director of Clinical Services for the Weight and Eating Disorders Program. The program will be launching a new clinic in 2007 named the Albert J. Stunkard Weight Management Program.

Richard F. Summers, MD has been chosen to receive the 2007 Robert Dunning Dripps Memorial Award for Excellence in Graduate Medical Education. This award is given to a member of the medical faculty to recognize excellence as an educator of residents and fellows in clinical care, teaching, or administration.

Robert M. Weinrieb, MD was appointed Director of the Consultation/Liaison Psychiatry Service at HUP.

Regional, National & International Honors

Steven E. Arnold, MD was elected to the Editorial Board of *Schizophrenia Bulletin*.

Janet Audrain-McGovern, PhD was selected Program Co-Chair of the 2007 Annual Meeting of the Society for Research on Nicotine & Tobacco and Program Chair for the Society's 2008 Annual Meeting.

Jacques P. Barber, PhD is President-Elect of the International Society for Psychotherapy Research and will become President on July 1.

Aaron T. Beck, MD received the William C. Menninger Memorial Award for Distinguished Contributions to the Science of Mental Health from the American College of Physicians in April 2007.

Robert I. Berkowitz, MD serves on the Mayor's Blue Ribbon Commission to evaluate behavioral health services for youth in Philadelphia.

Frances Bonds-White, EdD became President of the International Association for Group Psychotherapy & Group Processes in July 2006 at the Association's 16th International Congress in Sao Paulo, Brazil. During her 2006-2009 term, the IAGP will hold a Mediterranean Regional Congress, a Pacific Rim Regional Congress, and its 17th International Congress in Rome, Italy in August 2009.

Rhonda Boyd, PhD is the Society for Community Research and Action (Division 27 of the American Psychological Association) liaison to the Society for Prevention Research.

Edward S. Brodtkin, MD was listed in *America's Top Doctors* (6th edition, Castle Connolly Medical, 2006) for expertise in autism (specialty: Psychiatry).

Gregory K. Brown, PhD was appointed to the National Scientific Advisory Council for the Suicide Prevention Advocacy Network USA, the Scientific Advisory Board for the American Foundation for Suicide Prevention, and the Scientific Review Board for the National Registry of Evidence-Based Programs and Practices of the Substance Abuse and Mental Health Services Administration.



E. Cabrina Campbell, MD received the 2005-2006 Nancy C.A. Roeske, MD Certificate of Recognition for Excellence in Medical Student Education from the American Psychiatric Association.

David Dinges, PhD served as President of the World Federation of Sleep Research and Sleep Medicine Societies. He was selected for a sixth consecutive year to serve as the scientific Team Lead for the NASA-funded National

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Space Biomedical Research Institute's Neurobehavioral and Psychosocial Factors Team. In 2006, Dr. Dinges was also selected for membership in the International Academy of Astronautics.

Josephine Elia, MD was selected to the editorial board for the new on-line open access journal *Child and Adolescent Psychiatry and Mental Health*.

Edna B. Foa, PhD is chairing a Task Force of the International Society of Traumatic Stress Studies on Effective Treatment for PTSD.

Martin E. Franklin, PhD was named Associate Chair of the Trichotillomania Learning Center's Scientific Advisory Board, as well as its Research Chair.



Raquel E. Gur, MD, PhD will become President of the Society for Biological Psychiatry in May and was President of the Psychiatric Research Society. In February 2007, she received the Dean Award at the annual meeting of the American College of Psychiatrists.



Caryn Lerman, PhD was appointed to the National Advisory Council for Human Genome Research at the NIH and served as a Member of an IOM Committee on Gene-Environment Interactions in Health. She was also appointed to a National Cancer Institute Senior Leadership Team for Lung Cancer I2. In January 2007, Dr. Lerman served as Co-Chair of a National Institute on Drug Abuse/National Cancer Institute workshop on "Translational Medication Development for Nicotine Dependence."

Ronald Liebman, MD was honored in 2004 when both the American Psychiatric Association and American Academy of Child and Adolescent Psychiatry designated him a Life Fellow.

David S. Mandell, ScD was elected Chair of the Mental Health Section of the American Public Health Association. The two-year term will start in November 2007.

Lisa Maslankowski, MD was a member of the Microbicide Trials Network Leadership Group. The Microbicide Trials Network is a research network sponsored by the Division of AIDS in the National Institute of Allergy and Infectious Diseases.

James R. McKay, PhD was appointed Director of the Center for Excellence in Substance Abuse Treatment and Education (CESATE) at the Philadelphia VA Medical Center. The CESATE at the PVAMC is one of only two Centers of Excellence nationally that focus on improving the treatment of veterans with substance abuse through education and training.



David S. Metzger, PhD was selected for membership on the HIV Vaccine Trials Network protocol development committee for clinical trials of preventive HIV vaccines targeting Injection Drug Using populations (IDUs).

Cory Newman, PhD was selected to become a member of the Honored Advisory Board of the newly formed Chinese Association for Cognitive and Behavioral Therapies. In conjunction with this honor, he delivered lectures on cognitive therapy for mood disorders, personality disorders, and suicidality in Hong Kong in December.



David Oslin, MD was appointed the new Director of the Mental Illness, Research, Education, and Clinical Center (MIRECC) of the VA's Stars & Stripes Network (VISN 4). He has been an active Philadelphia-based investigator in the MIRECC since its inception in 1999, and has served as Acting Director of the MIRECC for the last nine months. The MIRECC is a VA Center of Excellence with hubs in Philadelphia and Pittsburgh, with collaborators at the other eight major medical centers and community based outpatient centers in the VISN 4 network. The VISN 4 MIRECC focuses on improving treatment of veterans with psychiatric disorders and co-morbid substance abuse and/or medical disorders through a range of new clinical demonstration projects, educational programs, and research initiatives. The VISN 4 MIRECC is one of ten such national Centers of Excellence funded by the Department of Veterans Affairs. Dr. Oslin was also appointed to a Department of Veterans Affairs National Steering Committee to create a web-based portal for patients to interact with their medical record (MyHealththe Vet) and is the Chair for the Advisory Panel on Integrated Care for the VA. In addition, Dr. Oslin was the program Chairperson for the American Association for Geriatric Psychiatry Annual Meeting in March 2006.

J. Russell Ramsay, PhD is on the Editorial Board of the *Journal of Attention Disorders*, and has been chosen to be a member of the Professional Advisory Board of the Attention Deficit Disorder Association.

Paul Robins, PhD holds two key positions - Federal Education Advocacy Regional Coordinator and Internship Site Reviewer for the American Psychological Association. He received the Board of Educational Affairs Award for Distinguished Contributions for the Education and Training of Child and Adolescent Mental Health Psychologists from the APA.

Carla Rodgers, MD received the 2006 Daniel Blain Award from the Philadelphia Psychiatric Society for service to the profession. Dr. Blain was the American Psychiatric

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Association's first medical director and later served as its President (1964-65).

Anthony L. Rostain, MD received the 2006 Physician Educator of the Year Award from the Philadelphia Psychiatric Society.

Robert Schnoll, PhD received several major appointments during the past year: Associate Editor of the *Annals of Behavioral Medicine*, Member of the Society for Research on Nicotine & Tobacco 2007 Annual Meeting Program Committee, Member of the Adult Psychopathology and Disorders of Aging Study Section, and Member and Speaker of the American Russian Cancer Alliance's Conference on Prevention and Treatment of Tobacco-Related Cancers.

Steven Siegel, MD, PhD was elected a Member of the American College of Neuropsychopharmacology.



Thomas Wadden, PhD was President of the Obesity Society in 2005-06 and, in October, became the Immediate Past President. In February 2007, he was awarded the Distinguished Alumni Award from the Department of Psychology at the University of North Carolina, Chapel Hill.

Daniel Weintraub, MD was named to serve on the Scientific Review Committee of the Parkinson Study Group, "a consortium of scientific investigators from academic and research centers who are committed to the cooperative planning, implementation, analysis and reporting of controlled clinical trials and of other research for Parkinson's disease and related disorders." He was also invited to participate on the Movement Disorders Society Task Force to

review rating scales for anxiety and apathy in Parkinson's disease. Dr. Weintraub was also chosen to receive the Harold Brenner Pepinsky Early Career Award in Neurobehavioral Science from Ohio State University. The award recognizes scholars early in their careers for their "outstanding research in the fields of neurobehavior, cognitive neuroscience, neuropsychiatry, neurology, psychiatry, or related fields." Dr. Weintraub will give a lecture at Ohio State this spring when he receives the award.

In June, **Elizabeth Weller, MD** will receive the Lifetime Achievement Award in Research and Clinical Care in Mood Disorders in Children and Adolescents from the Regional Council of the American Academy of Child and Adolescent Psychiatry. She is on the Grants Review Committee of the national organization. She also served as Chair of the Blanche F. Ittleson Award Committee of the American Psychiatric Association. The Ittleson Award honors the best research in child and adolescent psychiatry. She is also Editor in charge of the *Current Psychiatry* report for child and adolescent psychiatry issues and serves on the editorial board of *Current Psychiatry* for clinical psychiatry and child and adolescent psychopharmacology.

Donna Wolf-Palacio, LCSW was chosen as a Fellow of the Psychoanalytic Center of Philadelphia.

Paul Root Wolpe, PhD is currently serving as President of the American Society for Bioethics and Humanities. He helped found the Neuroethics Society and is a member of its Board. He was also elected and inducted as a Fellow of the College of Physicians of Philadelphia. Dr. Wolpe is the national Bioethics Advisor for the Planned Parenthood Federation of America. ❖

Mark your calendar ...

American Psychiatric Association 160th Annual Meeting Events May 19-24, 2007 -- San Diego, CA

Sunday, May 20, 2007

44th Annual Edward A. Strecker Award Brunch Honoring 2007 Recipient
Joseph T. English, MD, Professor and Chair of Psychiatry, New York Medical College
11:00 am - 1:00 pm, Marina A/B, The Hilton San Diego Gaslamp Quarter, 401 K Street



Monday, May 21, 2007

Annual Meeting Cocktail Reception
6:30-9:30 pm
USS Midway, 910 N. Harbor Drive

NEWS & GOINGS ON

Howard S. Baker, MD spoke on "The Role of Organized Sports in Adolescent Development--The Good and the Not so Good" at both The Church of the Redeemer in Bryn Mawr and St. Peter's Church in Philadelphia. His co-presenters were Alexander W. Baker, a research assistant in the obesity group at Penn, and Margaret N. Baker, PhD.



Peter B. Bloom, MD gave four lectures and workshops at the Annual Meeting of the Swedish Society for Clinical Hypnosis in Stockholm in April. He spoke on the recent advances in neuroscience relevant to clinical hypnosis from a clinician's perspective, finding one's voice as a therapist in both medicine and psychotherapy, enhancing creativity in clinical practice, and the process of therapist change during patient change in long-term psychotherapy.

Edward S. Brodtkin, MD was an organizing committee member of a March 2007 research retreat on "Research Perspectives in Autism" sponsored by the University of Pennsylvania and Children's Hospital of Philadelphia. He also helped organize the Second Annual Penn Autism Network Conference on "Journeys Through Adolescence and Adulthood" sponsored by the University of Pennsylvania in March. This spring he is serving as co-director of a course on the "Neurobiological Basis of Psychiatry" for PGY-1 psychiatry residents.



In September 2006, **Edna B. Foa, PhD** presented an invited address and conducted a half-day pre-conference workshop on the use of Cognitive Behavior Therapy to treat PTSD victims at the 36th Congress of the European Association for Behav-

ioral and Cognitive Therapies in Paris. Dr. Foa also spoke on "Cognitive Behavioral Interventions for Acute and Chronic PTSD" at the 19th European College of Neuropsychopharmacology Congress, also in Paris in September. In November, Dr. Foa and members of the CTSA conducted a two-week training session for psychiatrists from Pakistan and the Philippines who are treating earthquake victims with PTSD. In December, she presented a workshop on the treatment of PTSD to Jewish and Arab psychiatrists and psychologists who are treating victims of the Lebanon war. In January, 2007, she gave an invited lecture on the diagnosis and treatment of PTSD in the Department of Psychiatry at the Northwestern University Feinberg School of Medicine. In March, she gave a workshop on the treatment of PTSD to psychiatrists and psychologists in Tokyo and also delivered the keynote address at a conference sponsored by the Japanese Society for Traumatic Stress Studies.

Robert F. Forman, PhD took a leave of absence in December 2006 to work as a clinical scientist at Alkermes, a biotech firm located in Cambridge, Massachusetts. The company makes Vivitrol, a medication recently approved by the FDA for the treatment of alcohol dependence. At Alkermes, Dr. Forman participates in clinical trial design, data analysis, publications, medical affairs initiatives, and scientific presentations.

Raquel E. Gur, MD, PhD spoke on "A Lifespan Perspective on Schizophrenia" before the Jewish Alliance for the Mentally Ill in September 2006. She presented on "Neurodevelopment and Psychiatric Disorders" at the DFG International Research Training Group in Aachen, Germany in November. Also in

November, she delivered a talk on "Emotion Processing in Schizophrenia" at the Lundbeck Symposium for Psychiatrists in Copenhagen, Denmark. In March 2007, she and **Ruben C. Gur, PhD** spoke at the Neuropsychiatry Open House on "Translating Research to Treatment in Schizophrenia." Approximately 140 people attended the Open House. The audience included patients and families, health care professionals, community leaders, and faculty and staff.



Ruben C. Gur, PhD presented on "Imaging in Schizophrenia" at The International Symposium on Schizophrenia in Göttingen, Germany in September 2006. The conference was sponsored by the Göttingen Research Association for Schizophrenia. Later in September, he spoke on "The Inherent Mitigation of Youth: Brain Development in Adolescents and Young Adults" at the Making the Case for Life Conference in Las Vegas.

Chanita Hughes-Halbert, PhD presented on her work at several national conferences this past fall – "Community Cancer Prevention and Control," National Cancer Institute, 2nd Biennial Career Development Workshop to Increase Diversity in Research Funding, Palm Desert, CA (September 2006); "Weight Gain in African American Breast Cancer Survivors," National Cancer Institute, American Cancer Society, and Lance Armstrong Foundation, Third Biennial Cancer Survivorship Research Conference, Bethesda, Maryland (October 2006); and "Racial Differences in Quality of Life Following Prostate Cancer Diagnosis," American Association for Cancer Research, Frontiers in Cancer Prevention Research Conference, Boston (November 2006). In March 2007, she initiated a seminar

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The **Treatment Research Center** hosts a Monday lecture series funded by Cephalon, Inc. and Alkermes, Inc. called "Bridging the Research to Treatment Gap: Recent Innovations in Treatment of Addictive Disorders." The TRC seeks to promote awareness of some of the latest advances in addiction treatment for Penn medical professionals and the local health care community. It is anticipated that this series will play a role in minimizing the "research to treatment gap" and improving quality care. Speakers include Dr. Richard Rawson (January 22), Dr. Henry Kranzler (February 12), Dr. Kathleen Carroll (March 26), Dr. Susan Murphy (April 2), Dr. Allen Zweben (April 30), and Dr. Hugh Myrick (May 14). Lectures begin at 3:30 pm at 3900 Chestnut Street in the main conference room. **For further information, please call Helen Pettinati, PhD at 215-222-3200 ext 139.**

series on community-based participatory research.

Christian Kohler, MD participated in outreach programs with schools, mental health centers and the National Alliance for the Mentally Ill to increase public awareness about early signs of schizophrenia among young people. Over the past five to ten years, prevention of schizophrenia has received much attention world-wide. Focus has been on identifying adolescents and young adults who have behavioral or genetic risk for schizophrenia and exploring possible treatment intervention. This effort on prodromal schizophrenia at Penn is coordinated at the Schizophrenia Research Center, including **Monica E. Calkins, PhD** and **Raquel E. Gur, MD, PhD**, in collaboration with **Karen Borgmann-Winter, MD** at Children's Hospital.

Mary Anne Layden, PhD gave invited lectures in June 2005 at the International Congress of Cognitive Psychotherapy in Goteborg, Sweden on "Non-Consensual Sex, Use of Prostitutes, Use of Pornography, Acceptance of the Rape Myth and

Permission-Giving Beliefs" and on "Cognitive Therapy for Sexual Addiction." Later that summer, she spoke to several groups in Australia on "The Human Cost of the Sex Industry" and "Prostitution and Sex Trafficking."

Ronald Liebman, MD is participating in the "Philadelphia Juvenile Treatment Court," a program initiated by the Juvenile Division of the Philadelphia District Attorney's Office. The program's mission is to treat and rehabilitate adolescent substance abusers.

In October 2006, **Marion Lindblad-Goldberg, PhD** made a presentation titled "There's No Place Like Home: Effective In-Home Therapy" at the 64th Annual Conference of the American Association for Marriage and Family Therapy in Austin, Texas. In December, she spoke to the staff and supervisors of a New York mental health agency (Heartshare) on in-home therapy challenges. In March 2007, she participated in a videoconference titled "New Directions In Effective In-Home Therapy" sponsored by the University of Edinboro in Pennsyl-

vania. The videoconference was conducted in Sarasota, Florida and viewed by a Pennsylvania audience including University of Edinboro post-graduates and current graduate students in psychology and social work; staff and supervisors from eight mental health agencies; and private practitioners in psychology.

David S. Mandell, ScD is working with the new speaker of Pennsylvania's House of Representatives, Dennis O'Brien, and with local and national autism advocates such as Autism Speaks to develop legislation mandating private insurance coverage of autism-related services.

In Geneva, Switzerland in September 2006, **Charles P. O'Brien, MD, PhD** presented in French the Plenary Lecture for a symposium on the "Treatment of Addiction." He gave an evening lecture the same day for the general public on the "Modern Understanding and Treatment of Addictive Disorders." In January in Honolulu, he delivered the Cutting Lectureship Award as Visiting Professor at the University of Hawaii Medical School. Later in January, Dr. O'Brien briefed U.S. House and Senate staff in Washington, D.C. on the benefits of NIH research. The event was sponsored by the American Association of Medical Colleges. In February, he presented on "Promising Approaches in the Treatment of Drug Addiction" at the 2007 Annual Meeting of the American Association for the Advancement of Science in San Francisco. His talk, part of the session "Addiction and the Brain: Are We Hard-Wired to Abuse Drugs?", explored how neuroscience research is leading to new medications to treat substance abuse.

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Helen Pettinati, PhD was a symposium presenter on "The Role of Medication Non-Adherence in Evaluating Treatment Response in Alcohol Dependent Patients" at the U.S. Psychiatric & Mental Health Congress in New Orleans in November 2006. In December, she was a symposium presenter on "A Randomized, Placebo-Controlled Pilot Trial of Quetiapine for the Treatment of Alcohol Dependence" at the Seroquel Investigator-Initiated Seroquel Studies Meeting in Madrid, Spain.

R. Arlen Price, PhD taught a course during the fall semester on Behavioral Genetics. This year, the course (BBB451/PSY407) focused on obesity and was attended by Penn undergraduates, graduate students, and postdoctoral fellows. In October, Dr. Price spoke on "Obesity: Nature or Nurture" at the 2006 Obesity Congress organized by the Cleveland Clinic.



J. Russell Ramsay, PhD gave an invited lecture and workshop on adult ADHD at the Karolinska Institute in Stockholm,

Sweden in June 2005. In February 2006, he was the invited keynote speaker and led a workshop at the "Conference on Adults with ADHD" in Aalborg, Denmark. His clinical workshop illustrated a cognitive behavioral therapy framework for treating young adults and adults diagnosed with ADHD.



Mark Salzer, PhD edited a book titled *Psychiatric Rehabilitation Skills in Practice* that was published in December 2006

by the United States Psychiatric Rehabilitation Association (USPRA). This book is already the biggest seller for USPRA. It assists practitioners in developing, enhancing, and maintaining their skills by describing skill sets and

exercises that they can use in practice. Dr. Salzer is also helping community mental health agencies in the North Penn/Indian Valley region of Montgomery County develop a unified plan to promote the community integration of persons with psychiatric disabilities. The plan supports people with severe mental illnesses by presenting strategies aimed at helping them go to school, participate in religious activities, and engage in community activities open to everyone. Dr. Salzer plans to discuss this effort at the Montgomery County Behavioral Health awards luncheon in May 2007. This initiative is supported by the North Penn Community Health Foundation.

David B. Sarwer, PhD gave lectures in the fall and winter on the following topics: "Psychological Aspects of Facial Disfigurement" (Philadelphia College of Physicians, Philadelphia); "Pharmacological Treatment of Obesity" and "Psychological Aspects of Extreme Obesity" (Comprehensive Treatment of the Obese Patient, Absecon, New Jersey); "Group Cognitive Behavioral Treatment for Body Dysmorphic Disorder: A Pilot Investigation" (40th Annual Convention of the Association for Behavioral and Cognitive Therapies, Chicago); "Psychiatric Considerations for Patients Undergoing Bariatric Surgery" (American Society for Bariatric Surgery Unified Course, Las Vegas).

Robert A. Schnoll, PhD served as Facilitator at the Pennsylvania Cancer Control Consortium Research Summit in November 2006. The Summit highlighted on-going innovative cancer research initiatives in Pennsylvania, including clinical research studies, and emphasized the importance of widespread participation in these programs. Speakers shared methods for over-

coming the barriers to such participation and discussed the best methods of promoting research initiatives to improve cancer treatment in the Commonwealth. Over 100 individuals, representing dozens of organizations interested in cancer research, attended the event.

Steven Siegel, MD, PhD introduced a new treatment modality to psychiatry - antipsychotic implants for long-term treatment. This therapeutic approach has not yet been approved for humans, but it is an exciting new idea (see related article on page 5). Dr. Siegel also participated in the "Family to Family" program sponsored by the National Alliance for the Mentally Ill, a mental health advocacy group providing educational programs and support services for psychiatric patients and their families. The "Family to Family" program educates families about their ill family member's illness and helps them cope with the stresses that the patient's condition places on them and the entire family structure.

Richard F. Summers, MD was a panelist for a December 13, 2006 program, "The Vulcanization of the Human Mind: Neuroimaging, Decision-Making and Ethics." The program was the second in a public education series titled "Freud, Franklin and Beyond: A Contemporary Interdisciplinary Forum on Mental Health and Society," jointly sponsored by Penn's Department of Psychiatry and the Psychoanalytic Center of Philadelphia. (For a more detailed description of this new collaboration, please see the story on page 28.)

In January, **Elizabeth B. Weller, MD** presented on the "Developmental Aspects of Psychopharmacological Treatment with SSRIs in Children, Adolescents and Adults" at the Annual Meeting of the Amer-

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ican Academy of Child and Adolescent Psychiatry in New York. In March she gave Grand Rounds in the Department of Psychiatry in Galveston, Texas on "Bipolarity in Children and Adolescents."

Donna Wolf-Palacio, LCSW has presented at the Bryn Mawr School of Social Work on working with children and was appointed to the Social Work Field Advisory Committee at the school. She has also presented at the Penn School of Social Policy and Practice on play therapy and was appointed to the Early Childhood Behavioral Health Work Group of the Pennsylvania Community Providers Association. Ms. Wolf-Palacio was awarded a grant from the School District of Philadelphia's Head Start Division for a training series for staff and providers from the Head Start program and Pennsylvania Hospital's Hall Mercer Community Mental Health and Mental Retardation Center. The training series is titled "Aggression and Anxiety in Early Childhood: Assessment and Intervention Strategies." She was also awarded a grant from Philadelphia Connections to organize a training series for interns and staff at Pennsylvania Hospital and other Philadelphia mental health providers. The series covers such diverse topics as family therapy, art therapy, cultural awareness, grief and mourning, crisis intervention, stress management, and dealing with trauma. Philadelphia Connections is a collaboration between health and mental health providers, schools of social work, and Community Behavioral Health. CBH is Philadelphia's

own managed care organization, providing behavioral health coverage for persons on Medicaid.

Paul Root Wolpe, PhD lectured on a wide range of topics in different venues, including: "Their Bodies, Ourselves: Embodiment and Personhood" at the Quandaries in Health Care Conference, Given Institute, Aspen, Colorado (September 2006); "Bioethics, Biotechnology, and the Brain" at the Seventh European Molecular Biology Organization & Laboratory Science and Society Conference, "Genes, Brain/Mind and Behavior," Heidelberg, Germany (November); "Embryonic Stem Cells" at the Twenty-Sixth Annual Pediatric Novemberfest, Temple University School of Medicine, Atlantic City (November); "Emerging Neurotechnologies for Lie Detection and the Fifth Amendment" at The American Journal of Law & Medicine's 2nd Annual Symposium Conference on Brain Imaging and the Law, Boston University, Boston (February 2007).

George E. Woody, MD gave two talks at the American Society of

Addiction Medicine Review Course in Addiction Medicine in October 2006 titled "Sedative-Hypnotics" and "Behavioral Therapies." In November, he presented in St. Petersburg, Russia on "Substitution Treatment in the Former Soviet Union: A Review of the Evidence" at a conference on the treatment of drug dependence in the era of HIV/AIDS. He is now developing an educational program on how to integrate HIV and addiction treatment in Russia. This project is in collaboration with the Substance Abuse and Mental Health Services Administration, the President's Emergency Plan for AIDS Relief, the UN Office on Drugs and Crime, and Healthy Russia 2020, and is to be organized by the Medical University of Irkutsk. Through the Delaware Valley Node of the Clinical Trials Network, Dr. Woody is facilitating training of providers at community-based treatment programs in research procedures, including motivational interviewing, motivational enhancement, and seeking safety treatments. ❖

The **UPENN Collaborative on Community Integration of Individuals with Psychiatric Disabilities**, funded by the National Institute on

Disability and Rehabilitation Research, hosted its first international conference in September 2006 on the promotion of community integration. Center Director **Mark Salzer, PhD** reported that more than 230 persons attended the conference from across the nation and world, including attendees from Australia and Sweden. The response to the conference has been extremely positive and many have reported in post-conference surveys that they have used the ideas discussed at the conference in their work. Participants were particularly enthusiastic about the significant inclusion of persons with serious mental illnesses as presenters – more than 50 percent of the sessions involved someone with a mental illness as a presenter. The research and practice presentations covered areas such as education, religion, leisure and recreation, and citizenship, topics not commonly discussed or researched.

RESEARCH NEWS

Edward S. Brodtkin, MD and **Tracy L. Bale, PhD** are Principal Investigators on a Collaborative Pilot Grant from the Penn Comprehensive Neuroscience Center. Their grant project is titled "Stress Pathways in Autism: Examination of a Genetic Mouse Model of Stress Sensitivity." They will study the effects of acute and chronic stress and a corticotropin-releasing factor receptor-1 (CRFR1) antagonist on autism-related behaviors in a corticotropin-releasing factor receptor-2 (CRFR2) knockout mouse. Funding for the one-year grant begins on July 1, 2007.

The *Journal of the American Medical Association* published a study which found that Prolonged Exposure Therapy, the treatment for PTSD developed by **Edna B. Foa, PhD** and her colleagues, was superior to conventional treatment for female veterans with PTSD at ten Veterans Affairs medical centers. The paper received wide attention among PTSD experts (Schnurr PP, Friedman MJ, Engel CC, Foa EB, Shea MT, Chow BK, Resick PA, Thurston V, Orsillo SM, Haug R, Turner C, Bernardy N. Cognitive Behavioral Therapy for Posttraumatic Stress Disorder in Women: A Randomized Controlled Trial. *JAMA*. 2007 Feb 28;297(8):820-30). Also, in March, two books co-authored by Dr. Foa on how to treat patients with chronic PTSD were published (EB Foa, EA Hembree, and BO Rothbaum [Eds.] *Prolonged Exposure Therapy for PTSD: Emotional Processing of Traumatic Experiences Therapist Guide*, Oxford University Press, New York, 2007; BO Rothbaum, EB Foa, and EA Hembree, [Eds.] *Reclaiming Your Life from a Traumatic Experience Workbook*, Oxford University Press, New York, 2007).



Martin E. Franklin, PhD was awarded a grant from the Tourette Syndrome Association to conduct a pilot study of a cognitive-behavioral treatment package for adolescents and young adults with

chronic tic disorders, including Tourette Syndrome. Patient recruitment is ongoing and will be completed in December 2007. The grant is a two-site effort between Penn and Duke University Medical Center.

Chanita Hughes-Halbert, PhD received an AVON-National Cancer Institute Progress for Patients Award for "Breast Cancer Risk Counseling in African American Women." The grant provides funding from 2006 to 2008. The Avon Foundation-NCI collaboration is a special private-public partnership to fund research on preventing, detecting, diagnosing, and treating breast cancer. She also published an article demonstrating that acceptance of BRCA1/2 test results, evaluating possible genetic risk for breast cancer, may be limited among African American women (Halbert CH, Kessler L, Stopfer JE, Domchek S, Wileyto EP. Low rates of acceptance of BRCA1 and BRCA2 test results among African American women at increased risk for hereditary breast-ovarian cancer. *Genet Med*. 2006 Sep;8(9):576-82). Since 2005, she has been developing infrastructure for community-based research in cancer and cardiovascular-related diseases. This project is based on an academic-community partnership between Penn investigators and community-based organizations in Philadelphia. The project is supported by the National Center on Minority Health and Health Disparities.

David S. Mandell, ScD received a \$2 million grant from the National Institute of Mental Health to study how state and local level policies and practices affect health care utilization among children with autism. Funding started in April.



James R. McKay, PhD was awarded an R01 grant in September from the National Institute on Drug Abuse on the "Effectiveness of Extended Treatments for Drug Dependence." The total amount of

this five-year award is approximately \$2.6 million. Dr. McKay is the Director of the Center on the Continuum of Care in the Addictions, which is affiliated with the Department's Treatment Research Center. Dr. McKay's Center was established in 2006 to advance research on new approaches to improve the management of alcohol and drug use disorders over time.

The initial discovery of an endophenotype of alcoholism by the group of **Charles P. O'Brien, MD, PhD, David Oslin, MD, and Wade Berrettini, MD, PhD** was replicated by another group, who reported this finding to the American College of Neuropsychopharmacology in December 2006. Prospective studies are underway. Evidence is accumulating that the Penn team has discovered a genetic subtype of alcoholism that responds to a specific treatment.



Helen Pettinati, PhD received an investigator-initiated study grant from Forest Pharmaceuticals for an alcohol treatment study, and a National Institute on Alcohol Abuse and Alcoholism-sponsored grant to evaluate the efficacy of novel medications for the treatment of alcohol dependence in a national, five-site study.

Mark Salzer, PhD was the lead author of a study published in the October 2006 issue of *Psychiatric Services* in which he and his colleagues analyzed national census data for state- and county-funded psychiatric institutions from 1984 to 2003. They found a slowdown in the de-institutionalization of persons with mental illnesses following the 1999 Supreme Court Olmstead decision rather than an increase, as might be expected given the court's ruling in that case that unnecessary institutionalization is a violation of the Americans with Disabilities Act.

Robert A. Schnoll, PhD received a
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new NIH grant on “Assessment of a Teachable Moment for Smoking Cessation.” The five-year grant will run through March 2012. A teachable moment (TM) refers to life events or transitions that inspire behavioral changes. Dr. Schnoll’s study will assess whether a lung cancer diagnosis increases enrollment in a smoking cessation program and the rate of cessation, and reduces smoking among the patient’s relatives or spouse who smoke.

Steven Siegel, MD, PhD received a grant from the Stanley Medical Research Institute to develop implantable devices to deliver antipsychotic medication and an R01 grant from the National Institute of Mental Health to advance risperidone implants (see related article on page 5).

Phyllis Solomon, PhD co-authored a book on psychiatric rehabilitation, due for release in August by Guilford Press – *Principles and Practice of Psychiatric Rehabilitation: An Empirical Approach*. The other authors are Patrick W. Corrigan, Kim T. Mueser, Gary R. Bond, and Robert E. Drake. The authors use an evidence-based perspective to present the diversity of psychotherapeutic interventions for adults with severe psychiatric disorders. The primary practice domains

covered include independent living, education and employment, personal relationships, health, criminal justice, and spiritual life and recreation, encompassing all aspects of social functioning and community living.

Andrew A. Strasser, PhD received an R01 grant from the National Cancer Institute titled “Smoking Topography and Harm Exposure in a New PREP.” PREP stands for “potential reduced exposure product,” a new class of cigarette and cigarette-like nicotine delivery devices.

Daniel Weintraub, MD is the Coordinating Investigator for an international, multi-center, industry-sponsored (Boehringer Ingelheim) study of the frequency and correlates of impulse control disorders in Parkinson’s disease.

Paul Root Wolpe, PhD received a \$750,000 grant from the Scattergood Foundation to establish the Scattergood Program in the Applied Ethics of Behavioral Health. The School of Medicine added \$125,000 to the project, for a total of \$875,000. The project will begin June 1. ❖

RESEARCH GRANTS

The following sponsored research funding was received by the Department during the period September 1, 2006 through March 31, 2007.

New NIH Awards (includes New and Competing Renewals)		
Name	Sponsor	Project Title
BARBER, JACQUES	NIH	DYNAMIC THERAPY VS CBT FOR PANIC DISORDER
COVIELLO, DONNA	NIH	EMPLOYMENT INTERVENTION FOR OFFENDERS
FOA, EDNA	NIH	MAXIMIZING TREATMENT OUTCOME IN OCD
GUR, RAQUEL	NIH	THE NEUROBIOLOGY OF STIMULUS ENCODING IN SCHIZOPHRENIA
HAHN, CHANG-GYU	NIH	NEREGULIN 1-erbB SIGNALING IN SCHIZOPHRENIA
MCKAY, JAMES	NIH	EFFECTIVENESS OF EXTENDED TREATMENTS FOR DRUG DEPENDENCE
MINKEL, JARED	NIH	CHANGES IN AFFECT REGULATION DURING SLEEP DEPRIVATION
OSLIN, DAVID	NIH	NRSA TRAINING: PSYCHIATRIC-MEDICAL COMORBIDITY IN AGING
PETTINATI, HELEN	NIH	DOUBLE-BLIND, PLACEBO-CONTROLLED MULTICENTER TRIAL OF QUETIAPINE FOR THE TREATMENT OF ALCOHOL DEPENDENCE
SCHNOLL, ROBERT	NIH	ASSESSMENT OF A TEACHABLE MOMENT FOR SMOKING CESSATION
SIEGEL, STEVEN	NIH	AN IMPLANTABLE SEMIANNUAL ANTIPSYCHOTIC DELIVERY SYSTEM
STRASSER, ANDREW	NIH	SMOKING TOPOGRAPHY AND HARM EXPOSURE IN A NEW PREP
WADDEN, THOMAS	NIH	IMPROVING THE MANAGEMENT OF OBESITY IN PRIMARY CARE PRACTICE
WOODY, GEORGE	NIH	METHADONE MAINTENANCE AND HIV RISK IN UKRAINE

Other Federal Agencies

Name	Sponsor	Project Title
OSLIN, DAVID	DEPARTMENT OF VETERANS AFFAIRS	IPA - RHA
OVERALL, KAREN	FEDERAL AVIATION ADMINISTRATION	AN INTEGRATED APPROACH TO PREDICTING AND IMPROVING WORKING OUTCOME IN TSA DOGS - A PROPOSAL FOR THE TRANSPORTATION SECURITY LABORATORY

Other Agencies and Organizations

Name	Sponsor	Project Title
ARNOLD, STEVEN	NATIONAL ALLIANCE FOR RESEARCH ON SCHIZOPHRENIA AND DEPRESSION	RELATIONSHIP OF DYSBINDIN TO SYNAPTIC VESICLE PROTEIN EXPRESSION IN SCHIZOPHRENIA AND THE SDY MOUSE
LANGLEBEN, DANIEL	DEFENSE ADVANCED RESEARCH PRODUCTS AGENCY	PHYSIOLOGICAL INDICATORS OF DECEPTION AND MALICIOUS INTENT
O'BRIEN, CHARLES	CHARLES A. DANA FOUNDATION	DEPOT VERSUS ORAL NALTREXONE TREATMENT OF OPIOID-DEPENDENT PAROLEE
WENZEL, AMY	AMERICAN FOUNDATION FOR SUICIDE PREVENTION	SUICIDE-RELEVANT COGNITIVE BIASES AND COGNITIVE THERAPY: A LONGITUDINAL INVESTIGATION
WOLF, DANIEL	SCOTTISH RITE SCHIZOPHRENIA RESEARCH	SCHIZOPHRENIA RESEARCH FELLOWSHIP PROGRAM

Clinical Trials

Name	Sponsor	Project Title
O'REARDON, JOHN	BRISTOL-MYERS SQUIBB COMPANY	A MULTICENTER, DOUBLE-BLIND STUDY ON THE EFFICACY AND SAFETY OF ARIPIPRAZOLE IN COMBINATION WITH LAMOTRIGINE IN THE LONG-TERM MAINTENANCE TREATMENT OF PATIENTS WITH BIPOLAR I DISORDER WITH A RECENT MANIC OR MIXED EPISODE
PETTINATI, HELEN	CEPHALON, INC	BRIDGING THE RESEARCH TO TREATMENT GAP: RECENT INNOVATIONS IN SUBSTANCE DEPENDENCE
PRICE, R. ARLEN	ELI LILLY AND COMPANY	ELI LILLY COLLABORATION
WADDEN, THOMAS	AMYLIN PHARM INC	A RANDOMIZED, PARALLEL-GROUP, MULTICENTER STUDY TO EXAMINE THE SAFETY, TOLERABILITY, AND BODY WEIGHT EFFECT OF SUBCUTANEOUS PRAMLINTIDE IN COMBINATION WITH THE ORAL ANTI-OBESITY AGENTS SIBUTRAMINE OR PHENTERMINE IN OVERWEIGHT AND OBESE SUBJECTS
WADDEN, THOMAS	PFIZER INC	A TWO-YEAR, RANDOMIZED, DOUBLE-BLIND, PLACEBO-CONTROLLED, PHASE 3 STUDY TO EVALUATE THE LONG-TERM EFFICACY AND SAFETY OF CP945,598 IN THE TREATMENT OF OBESE SUBJECTS
WADDEN, THOMAS	OREXIGEN THERAPEUTICS, INC	A MULTICENTER, RANDOMIZED, DOUBLE-BLIND, PLACEBO CONTROLLED STUDY COMPARING THE SAFETY AND EFFICACY OF NALTREXONE SUSTAINED RELEASE (SR) / BUPROPION SUSTAINED RELEASE (SR) AND PLACEBO IN SUBJECTS WITH OBESITY PARTICIPATING IN A BEHAVIOR MODIFICATION PROGRAM
WEINTRAUB, DANIEL	BOEHRINGER INGELHEIM PHARMACEUTICALS	A CROSS-SECTIONAL RETROSPECTIVE SCREENING AND CASE-CONTROL STUDY EXAMINING THE FREQUENCY OF, AND RISK FACTORS ASSOCIATED WITH, IMPULSE CONTROL DISORDERS IN PARKINSON'S DISEASE PATIENTS TREATED WITH MIRAPEX (PRAMIEXOLE) AND OTHER ANTI-PARKINSON AGENTS (DOMINION STUDY)

FACULTY IN THE NEWS

Judith S. Beck, MD was interviewed for segments on the April 11 Today Show (NBC-TV) and the April 12 NPR Radio Morning Edition about her new book, *The Beck Diet Solution: Train Your Brain to Think Like a Thin Person*. The book was officially released in bookstores during the first week in April and quickly climbed to the twelfth position on the *New York Times* Hardcover Advice, How-To and Miscellaneous Bestsellers List. Streaming videos and audios of Dr. Beck's media appearances can be found on her web site (www.beckdietsolution.com).

Edna B. Foa, PhD was interviewed for several articles covering topics related to trauma and posttraumatic stress disorder (PTSD): Sara Corbett, "The Women's War" (*New York Times Magazine*, March 19) and Sarah Richards, "How People Heal from Trauma" (online magazine *Salon.com*) and "How to Treat PTSD" (*Financial Times Magazine*). She also contributed to a documentary on PTSD by BabyLegs Entertainment, Inc.

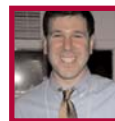
Robert F. Forman, PhD was interviewed several times for the HBO Special "Addiction." In the associated book and website, his work is cited and his biosketch included. Dr. Forman was quoted in a *Wall Street Journal* article on alcoholism pharmacotherapy. The March 2 issue of *Time* magazine quoted Dr. Forman extensively in the article, "When Drug Dealers Go Online."

Raquel E. Gur, MD, PhD and **Ruben C. Gur, PhD** appeared on a Today Show Special on December 14, 2006 to discuss sex differences.

Ruben C. Gur, PhD, Daniel D. Langleben, MD, Paul Root Wolpe, PhD, and Stephen J. Morse, PhD, JD (School of Law and secondary appointment in Psychiatry) were quoted in the March 11, 2007 *New York Times Magazine* cover story, "Neuro-law," written by Jeffrey Rosen.

Chanita Hughes-Halbert, PhD gave an interview to *Black Enterprise* in December 2006 on racial differences in trusting health care providers. She completed several interviews with different media outlets following publication of her study show-

ing that African Americans have lower levels of trust in health care professionals than whites [Halbert CH, Armstrong K, Gand, OH, Jr, Shaker L. Racial differences in trust in health care providers. *Arch Intern Med*. 2006 Apr 24;166(8):896-901.] In January 2007, Dr. Hughes-Halbert was interviewed by the American Association for Cancer Research on her study on sociocultural predictors of breast cancer risk perceptions in African American breast cancer survivors. The study was published in February 2007 [Brewster K, Wileyto EP, Kessler L, Collier A, Weathers B, Stopfer JE, Domchek S, Halbert CH. Sociocultural Predictors of Breast Cancer Risk Perceptions in African American Breast Cancer Survivors. *Cancer Epidemiol Biomarkers Prev*. 2007 Feb;16(2):244-8.]



David S. Mandell, ScD appeared on PBS' Tavis Smiley Show on July 21 to discuss autism in the African American community, particularly disparities in diagnosis. He was also quoted in a February 18, 2007 article in the *Sunday New York Times Week in Review* on how local education and health care resources can affect the proportion of children with autism recognized by the education and medical systems.



In February, **Charles P. O'Brien, MD, PhD** participated in an international press conference to discuss advances in the treatment of addiction. Stories were subsequently written by the Swedish, German, and American press. The event was held in conjunction with the Annual Meeting of the American Association for the Advancement of Science in San Francisco.

David B. Sarwer, PhD was interviewed for stories across a range of topics. These included: "Enviga: Negative Calorie Drink" (CBS 3 Evening News); "What No One Even Tells You about Breast Implants" (*Glamour Magazine*); "Cosmetic Surgery Gets a Lift from Boomers," "As a Gift, Surgery Cuts Both Ways," "Buoyed by Bigger Breasts," and "Acne Leaves Emotional Marks" (*USA Today*).

Steven Siegel, MD, PhD was interviewed about

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his team's use of implantable devices to deliver medication to schizophrenia patients by the *Washington Post*, *Philadelphia Inquirer*, *Boston Globe*, and *New York Post* (see related article on page 5).

Paul Root Wolpe, PhD was quoted in the *Chicago Sun Times* on September 4, 2006 on the issue of physicians who report on their impaired colleagues. A profile of Dr. Wolpe ran in the *Philadelphia Inquirer* on September 24 on his work at NASA. He was also cited in the *Philadelphia Inquir-*

er on October 9 on lie detection and ethics. MSNBC quoted him on December 26 on neuroethics and he was quoted by the Associated Press and in a number of news outlets on January 13, 2007 on the controversial study about the biological basis of male sheep mounting behaviors.

In December 2006, **George E. Woody, MD** was a panelist on a program sponsored by Radio Russia on the spread of HIV and addiction in Russia. ❖

Department Faculty Participate in HBO's ADDICTION Project

The Department of Psychiatry is deeply committed to expanding public understanding of brain diseases. The Department's Center for Studies of Addiction is a world leader in addiction research, and several of its faculty are participating in a major new effort to raise public awareness about addiction's causes and treatments.

On March 15, HBO aired "Addiction," the first installment of a 14-part documentary series to help viewers recognize addiction as a treatable brain disease and to spotlight new medical advancements. For the first time, HBO is using all of its digital platforms, including television stations, podcasts, web streams, and DVD sales, to support a campaign that includes the cable network's documentary series, a book published by Rodale Press, four independent addiction-themed films, a comprehensive website, and a national community grassroots outreach campaign. The project is intended for anyone who wants to know more about addiction – from those who are addicted to their families and friends. It is jointly funded by the National Institute on Drug Abuse (NIDA), the National Institute on Alcohol Abuse and Alcoholism (NIAAA), and the Robert Wood Johnson Foundation (RWJ).

Charles P. O'Brien, MD, PhD, Anna Rose Childress, PhD, Robert F. Forman, PhD, and A. Thomas McLellan, PhD contributed their considerable expertise in developing the educational platforms. All were interviewed extensively for this important public education initiative with the potential to reach a global audience. In addition, as part of the HBO media effort, Dr. Childress appeared on the April 9 Oprah Winfrey Show to discuss her research on how addictive substances impact the brain. (Please go to <http://www.addictionaction.org/> to learn more about this significant media campaign.)

Cornerstones

Recognizing the significant achievements of our faculty and staff

Childhood obesity in America is an epidemic, and spreading rapidly. In 1980, 5 percent of children and adolescents were considered obese; today, the figure is over 15 percent.

How and why this is happening, and what can be done about it, are questions that Robert I. Berkowitz, MD has confronted for a quarter century.

Now in a leadership position in Psychiatry at Penn and Children's Hospital of Philadelphia (CHOP), Dr. Berkowitz continues to battle this threat to the health of our youngest citizens.

"I was always interested in psychiatry," says Dr. Berkowitz, "because I had a strong interest in behavior and the brain. And I always wanted to be a physician." As an undergraduate at Wesleyan, he nurtured this fascination with courses in biology and psychology, and worked as a technician in a psychiatric hospital. He also worked with children and adolescent youth groups.

In 1973, Dr. Berkowitz earned an MD at the University of Connecticut School of Medicine, and did a two-year residency in Psychiatry there. He followed with a two-year fellowship in Child Psychiatry at Yale, and then moved cross-country for a research fellowship at Stanford.

During his psychiatric training, Dr. Berkowitz developed what became a lifelong interest in the

interplay among the mind, brain, and body. In 1983, he launched his academic career in obesity research with a review paper examining behavioral, physiological, genetic, and environmental

Dr. Berkowitz rose through the faculty ranks at Penn in the 1990's, and was appointed Associate Professor of Psychiatry and Pediatrics in 1997. Among other responsibilities, he served as Director of the

Adolescent Weight Management Program at CHOP's Philadelphia Child Guidance Center and Medical Director of Penn Psychia-

try's Weight and Eating Disorders Program.

In 2004, Dr. Berkowitz assumed major management roles when he was named Chair of CHOP's Department of Child and Adolescent Psychiatry and Executive Director of The Behavioral Health Center. The appointment also meant a leadership role at Penn, because all faculty in CHOP's Department are also members of Penn's Department of Psychiatry. "I hadn't ever thought of taking on a leadership role," says Dr. Berkowitz, "just as I hadn't thought of coming to Philadelphia. The lesson learned is that the journey of life is always intriguing. I always look at challenges as opportunities, and I'm always looking for interesting things to do."

Dr. Berkowitz says that he had reached a stage in his career when he was ready to build programs by bringing people together to pursue common goals. The challenge was to elevate CHOP's Department into a strong academic unit, with high quality research,

FACULTY SPOTLIGHT

Robert I. Berkowitz, MD



Professor at Stanford, Dr. Berkowitz presented an infant growth study at a conference attended by the Department's Albert J. Stunkard, MD. The event proved to be career-altering. Just days after the session, Dr. Stunkard called to compliment him on the talk and asked if he could see him the next day. The two met the next afternoon in the Behavioral Medicine Clinic at Stanford. Dr. Berkowitz came to Penn two years later, initiating a research relationship with Dr. Stunkard, and later with Thomas A. Wadden, PhD, that has continued since.

factors causing obesity in children (1). "Even then," he says, "we could see the coming of the obesity epidemic in children."

In 1988, while a Clinical Assistant

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clinical care, and training programs. "Dr. Steven Altschuler [President and CEO of CHOP] and I see the Department of Child and Adolescent Psychiatry as one with the University, and CHOP as just one of the sites, with a lot of collaboration between CHOP and Penn."

Dr. Berkowitz' administrative work has not reduced his commitment to exploring ways to arrest childhood obesity in an "obesogenic" world. Sedentary lifestyles, lack of exercise, increased consumption of sugars and fats, larger portion sizes, and the constant advertising barrage for food place children, adolescents, and adults at great risk for obesity and its attendant health problems such as diabetes, hypertension, cancer, and depression.

Dr. Berkowitz is the lead author on two important studies evaluating interventions to reduce the incidence of teenage obesity. In the first clinical trial of any FDA-approved weight-loss medication in adolescents, Dr. Berkowitz and colleagues demonstrated that adding sibutramine to a behavioral program for seriously overweight teens more than doubled weight loss over a six-month period, compared to treatment with behavior therapy alone, with placebo (2). A follow-up twelve-month trial confirmed these impressive results (3).

Another important study grew from a 1989 conversation with Dr. Stunkard. This research, begun in 1992 and now in its thirteenth year, established that children of overweight mothers are more likely to show signs of excessive body weight by age four and excessive

body fat by age six than children of lean mothers. While the study did not examine whether this was due to genetic or environmental factors, it suggested that weight control should begin by age four in overweight children of overweight mothers (4).

In 1983, Dr., Berkowitz launched his academic career in obesity research ... "Even then," he says, "we could see the coming of the obesity epidemic in children."

For the future, Dr. Berkowitz plans to expand programs targeting the complex links among psychological, psychiatric, and medical disorders. CHOP's Behavioral Health Integrated Program provides behavioral health services to patients with co-occurring serious medical and surgical problems. Another venture is the new Healthy Weight Program, which helps overweight children and adolescents with serious co-morbid medical illnesses, such as hypertension, lipid disorders, and obstructive sleep apnea.

Also important is an ongoing collaboration with Raquel E. Gur, MD, PhD in the Department's Neuropsychiatry Section and Karin Borgmann-Winter, MD, a Department faculty member at CHOP. The Program for Developmental Neuropsychiatry assesses and treats children, adolescents, and young adults who are at risk for or suffer from psychotic disorders.

Continuing obesity research collaborations with Drs. Stunkard and Wadden in Penn's Center for

Weight and Eating Disorders is a major focus for Dr. Berkowitz. The collaboration has been both productive and enjoyable. "It's just a joy to come to work every day with those two guys," says Dr. Berkowitz. "They are wonderful friends, mentors, collaborators, and colleagues." Dr. Berkowitz adds that the outstanding relationships existing throughout the Department "speak to the vision of the Department chairs who have provided leadership over the years, including Drs. Stunkard, [Peter C.] Whybrow, and [Dwight E.] Evans."

"It's not an easy time in academic medicine or medicine in general," Dr. Berkowitz says. "I believe my persevering patient nature is helpful in keeping relationships going in up and down times. The buffer here is the good relationships." He emphasizes that building strong collegial connections between Children's Hospital and Penn is key to getting things done. It's the foundation for all the good work that flows from an outstanding faculty, and remains at the top of Dr. Berkowitz' priorities. ❖

(1) Berkowitz RI. Physical activity, eating style, and obesity in children: A Review. Behavioral Medicine Update. Ann Behav Med. 1983 5:9-14.

(2) Berkowitz RI, Wadden TA, Tershakovec AM, Cronquist JL. Behavior therapy and sibutramine for the treatment of adolescent obesity: a randomized controlled trial. JAMA. 2003 Apr 9;289(14):1805-1812.

(3) Berkowitz RI, Fujioka K, Daniels SR, Hoppin AG, Owen S, Perry AC, Sothorn MS, Renz CL, Pirner MA, Walch JK, Jasinsky O, Hewkin AC, Blakesley VA; Sibutramine Adolescent Study Group. Effects of Sibutramine Treatment in Obese Adolescents: A Randomized Trial. Ann Int Med. 2006 July 18;145(2):81-90.

(4) Berkowitz RI, Stallings VA, Maislin G, Stunkard AJ. Growth of children at high risk of obesity during the first 6 y of life: implications for prevention. Am J Clin Nutr. 2005 Jan;81(1):140-146.

Contemplate this:

- over forty years caring for patients and advancing the goals of the profession.
- almost five decades teaching future generations of psychiatrists and exploring the workings of the human mind.
- more than half a century sharing personal and professional milestones with a life partner and colleague.

Then, double it.

You've now begun to approach the surface reality, if not the inner meaning, of the lives and careers of psychoanalysts Ruth S. Fischer, MD and Newell Fischer, MD, Clinical Professors in the Department of Psychiatry.

It's been two long journeys, personal and professional, taken together and independently, kind of two intertwined Philadelphia stories.

By the calendar, personal preceded professional. Ruth and Newell first met in "junior high and high school," Newell recalls, and they married in 1958. Today, they have four married children and five grandchildren.

Their professional lives have shown a similarly strong link, starting with their education and training in the Philadelphia region.

Dr. Ruth Fischer earned her BA at the University of Pennsylvania in biology. She decided to pursue a medical career in the late 1950's when there were few women doctors. A great aunt, who had been a physician, influenced her choice. "I had great respect for her and loved her and she always seemed to be doing interesting things," she remembers. As a pre-med at Penn, she shook off momentary vacillation and went on to receive her MD from the Medical College of Pennsylvania.

Dr. Newell Fischer earned his BA from Temple University. Early in college, he recognized that a career in medicine "would provide for much of what meant a lot to me – helping people and being involved with them in a meaningful way, doing something

psychiatry at St. Christopher's Hospital for Children. Both are board-certified in psychiatry and in adult and child psychoanalysis.

For Newell, becoming a psychiatrist and, ultimately, a psychoanalyst was an extension of the initial reasons why medicine was so attractive.

"I continue to be convinced," he says, "that the deepest

way to learn about people, to do therapy, and to learn about the human condition and existence is through psychoanalysis."

Ruth's interest in psychiatry was "always present" and was strengthened in high school, when she read Freud's *Psychopathology of Everyday Life*. As a psychiatry resident, she found psychoanalysts to be "the most interesting people who had the best understanding of what was going on."

Ruth and Newell opened private psychiatric practices in the Philadelphia suburbs and engaged in teaching and research at the institutions where they had received their training. In 1988, Newell was appointed Clinical Professor of Psychiatry at Penn and Ruth received this distinction in 2000.

In her career, Ruth has taken special interest in children. "Children," she says, "are fun to work with, but more than that, that's where problems arise and can be most easily alleviated as character has not been permanently set."

Female psychology also became a special area of focus. "What I was being taught in psychiatry made sense to the men, but didn't make total sense to me." With others, primarily women, she helped modify psychoanalytic theory to "open up the field to a greater understanding of women."

This, plus the increased number of

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VOLUNTARY FACULTY PROFILE

Ruth S. Fischer, MD and Newell Fischer, MD



worthwhile, exploring scientific problems." At the University of Pennsylvania School of Medicine, where Newell received his MD, interest in the "medical part – listening to hearts and tapping knees" emerged, but so did his fascination with people and fathoming the "nature of the human condition."

Both Ruth and Newell followed roughly similar paths in their medical post-graduate training – medical internships at Pennsylvania Hospital, psychiatry residencies at the Institute of Pennsylvania Hospital, and training in adult, child, and adolescent psychoanalysis at the Philadelphia Psychoanalytic Institute (now the Psychoanalytic Center of Philadelphia). Ruth also completed a fellowship in Child Psy-

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women in the field, has led to a greater focus on relatedness, both in psychiatry and in psychoanalysis. It also pointed to a key observation that “the need for relationships is a primary motivating factor in people’s lives,” says Ruth. This was first recognized in the lives of women and is now being recognized in men’s lives as well.

Ruth’s most recent interest is in the mother-daughter relationship. There has been a major theoretical shift here as well. It was once believed that for a woman to grow up, become independent, and establish a partnership of her own, she first had to end her relationship with her mother. This would allow her to turn to her father. It’s now understood, says Ruth, that for a girl to establish a relationship with her father, there is no need to cut herself off from her mother. Her relationship with her father is lifelong, beginning at birth, and exists alongside of her relationship with her mother. The relationships with both parents are lifelong and continually evolving.

Newell has sought to answer the simple but elusive question – what in psychoanalysis leads to change? “The ultimate goal of all mental health professionals,” he says, “is to help patients – to feel, think, and function better, and to grow and mature.” In his own experience, “the more patients I saw, the more questions were raised in my thinking about what really happens in the therapeutic relationship that stimulates growth.”

Many elements in the patient-therapist encounter contribute to a positive outcome. “The relationship, the support, the insight are all important,” Newell explains, “but much depends on the patient’s needs and the therapist’s ability to sensitively hear and understand.” The conventional medical model is that doctors prescribe “treatment” and the patient hopefully complies. Newell, in his writing about “therapeutic process,” proposes that

“we rethink or expand this perspective and include the patient’s capacity to extract from the relationship elements that are most useful for ongoing growth.” He compares this to the developing child’s ability to take from the surroundings that which is needed to promote maturation. Some patients require more support, others benefit from greater understanding and insight, while some patients seek a corrective relationship.

Drs. Ruth and Newell Fischer have had distinguished careers as practicing psychiatrists. The Philadelphia Psychiatric Society has recognized both as Practitioners of the Year, Newell in 1996 and Ruth in 2005. Both, too, are active teachers of residents, fellows, analytic candidates, and medical students, and have been honored for their contributions. Why do they continue to teach? “It’s fun,” says Ruth. Newell adds, “It’s really true that the best way to learn something is to have to teach it. It keeps you honest. The students and residents are very smart. They will ask piercing, unnerving questions.”

Practicing and teaching psychoanalysis in an age when Freud is no longer center stage in psychiatry leads to the inevitable question. What is its future? It’s an issue Newell publicly raised during his tenure as President of the American Psychoanalytic Association from 2002 to 2004. He now explains that there had been a turn in psychiatry toward a focus on the biochemical workings of the brain and away from the mind, but focus now appears to be moving back to a renewed consideration of the mind function. “With this,” he says, “I would hope that the APsaA will increase its base and expand its boundaries to integrate with the neurosciences and with cognitive therapy. I think we will become more inclusive, and I think we will grow.”

Ruth finds evidence of this pendular shift in the increasing interest in psychodynamic therapy, a variation of psychoanalysis. Penn’s residency pro-

gram has established a psychodynamic track and, at Children’s Hospital of Philadelphia, she says that “residents and fellows are requesting that psychoanalysts teach them how to talk to children.”

Locally, the Psychoanalytic Center of Philadelphia, with about 300 members, runs a class for people who wish to become psychoanalysts. “For a couple years, it was pretty quiet,” Newell says, “but last year we had eleven new candidates, a record high, and it’s almost as high this year. It’s amazing to see the swing in interest.” In addition, the recently initiated public education seminar series arising from a collaboration between the PCOP and Penn’s Department of Psychiatry has added to the visibility of psychoanalysis in the region (see related article on page 28).

The Fischers’ affiliation with Penn goes back many years. For Ruth, the reason for it is uncomplicated. “Penn’s the best,” she says. Their original professional connection with the University dates back to the Institute of Pennsylvania Hospital, which was affiliated with Penn’s Department of Psychiatry in the 1960’s when both Ruth and Newell trained there. “The Institute,” Newell says, “was first or second in the country for providing psychodynamic training, right up there with Harvard.”

For Drs. Ruth and Newell Fischer, two long and distinguished journeys have been connected by a single abiding relationship. When they work with students and trainees or sit down with patients to plumb relationships or establish the all-important patient-therapist bond, they no doubt draw upon their extensive professional experience. Unquestionably, too, they tap an equally deep well in their own lasting union. If the need for human ties resides at the core of the human psyche, Drs. Ruth and Newell Fischer can speak to us with some authority. ♦

It's Wednesday afternoon, 1:40 pm, and Psychiatry's Outpatient Center's waiting room on the 2nd floor of 3535 Market is crowded with a diverse group of patients and family members. The space is tight, for both patients and the staff entrusted with making sure everyone gets to their appointments with paperwork in order.

On any given day, between 100 and 160 patients – 8000 per year – receive treatment in Psychiatry's Outpatient Center for bipolar disorder, treatment-resistant depression, neuropsychiatric disorders, and other psychiatric problems. The 2nd floor unit also provides an outpatient experience for third and fourth-year residents, who are supervised by attending psychiatrists.

This is the workaday world of the dedicated team of Clinical Services Manager, Jan Smedley, and the Patient Service Representatives (PSR's) who guide patients through the administrative complexities of mental health care in the modern age.

The PSR's are the front-line staff, and they give patients their first impression of the Outpatient Clinic. They check patients in and out, schedule patient appointments, update the physicians' master sched-

ules, process medical records requests, archive charts, reconcile receipts, and answer the

Karima Williams has been a PSR for almost two years, qualifying her as a veteran. One of her special duties is acting as on-site registrar. "I like

checking people in and greeting them," she says. "Sometimes patients don't have outside family or friends. If

you ask them, 'how was your holiday?', they just light up." Showing care and concern for patients is a very important part of the job. "Patients can tell if you're smiling over the phone," she says. "We can never have bad days. We're up. That's our job."

Karima had previous experience at a mental health facility. "For this job, it is useful to have some kind of mental health back-

ground," she says. "It helped me understand the patients a little bit more." In her earlier position, she interacted with patients exclusively over the phone, quite different than working with patients in person. Face-to-face contact brings with it an entirely new set of acquired lessons.

"Since I've come here," she reflects, "the most important thing I've learned is patience. I thought I didn't have much patience outside the job, but

EMPLOYEE SNAPSHOT

At the Front Desk:

The Demanding World of Patient Service Representatives at the Outpatient Psychiatry Center



from left to right: Karima Williams, Jan Smedley, Wilmarie Sanchez

triage lines that roll over from the fourth floor Contact Center. Each PSR is cross-trained to perform most duties assigned to the team. In addition, each is accountable for specific functions.

The PSR's are trained on the job in customer service, crisis intervention, recognizing mental health problems, and working with patients presenting symptoms. They have a large workload, with overlapping shifts Monday through Friday.

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when I come in here I realize that I have so much patience." A sense of humor and an understanding of human beings are also essential. "You have to understand that people



Karima Williams

are here for a reason." Another thing she's learned? "You have to have tough skin to work here," she says.

Outside of work, Karima likes to travel – she visited Jamaica in August for a wedding. "And I love to shop," she adds.

Wilmarie Sanchez came to the outpatient clinic only four months ago from a large pediatric practice in South Philadelphia. As the Financial Prep PSR, she "scrubs" the encounter forms for the next day's appointments, in other words making sure the patients' insurance is current and co-payments are documented and accurate. She also processes medical records requests, archives medical charts, reconciles daily receipts, and prepares deposits.

It's a full set of responsibilities for one person to master in a

short time, but it is all done as part of a team effort. Asked what she enjoys most about her job, Wilmarie replies that learning new tasks and competencies has been very important to her. And she adds that "it's been gratifying being part of such a supportive team."

Jan Smedley, a psychotherapist, sees about six patients per week, balancing this with her overall responsibility for the operations of the outpatient clinic, which she shares with Associate Medical Director Sarah DeMichele, MD who has medical responsibility for the unit. Jan has been in the manager position for three years. Her psychotherapy training is



Wilmarie Sanchez

critical to her work, helping with crisis intervention, conflict resolution, and mediation. Most satisfying to her is "putting together new initiatives and making them work." Helping her staff appreciate their jobs and recognize excellence are also important objectives for her.

In her limited free time, Jan enjoys oil painting, travel and photography, and "I love to knit." "What spare time I do have, I guard jealously," she emphasizes.

The University of Pennsylvania Health System places special priority on PSR's. Lisa Fino, MBA, Director of Practice and Revenue Operations for the Clinical Practices of the University of Pennsylvania (CPUP), recognizes the central role that these front-line employees play in creating a welcoming environment for patients. "CPUP Administration has recognized the importance of the Patient Service Representatives in the practice," she says, "and is sensitive to the amount of knowledge and subsequent competencies they need in order to ensure the patient has the ideal patient experience." CPUP has recently implemented special training programs to help PSR's build the skills and motivation necessary for interacting with patients, and more are planned.

Patient Service Representatives have difficult and demanding jobs. The position is definitely not for everyone. But it's satisfying, too. "If you can show patients that you care," says Karima, "they really enjoy it. I like showing that I'm not just here to do a job. I do care, and that really helps the patients." ♦

Educational Highlights

A DAY IN THE LIFE OF THE RESIDENTS' OUTPATIENT CLINIC: MAKING THE TRANSITION --BY VALERIE NORDQUIST, MD



As a fourth-year resident, I am both looking ahead to graduation and reflecting back on the past four years of training. Our residency program is designed such that the first two years are primarily inpatient and the last two years are outpatient. The division of training certainly accentuates the growth and transition that occurs during these influential four years.

Nearly two years ago, I left the familiar routine of inpatient psychiatry at the hospital and ventured the six blocks north to the residents' outpatient clinic at 3535 Market Street. Little did I know that six blocks may as well have been six galaxies.

I felt confident in my inpatient training. I could calmly face the threatening manic patient, list 20 approaches to treating acute agitation, and skillfully interact with the apostles and various gods that graced the inpatient unit. I naively assumed that outpatient psychiatry would be "a cake walk." "A breeze," I told myself, in comparison.

I had barely finished hanging the diploma in my new outpatient office when I started rethinking my cavalier assessment. My voicemail was full of messages from patients whose prior resident had graduated. I was their new doctor. They were calling me – for refills, for therapy, with side effects, for lab results, for...well, sometimes even by the end of our conversation, I still had no idea why exactly they had called me. I kept thinking that there had to be some mistake. Shouldn't they call someone with outpatient experience? I had never even written a prescription for more than a two-week supply! That was part of the mysterious job of the outpatient psychiatrist whose name I would see listed in the "discharge follow-up plan."

As if medication management weren't enough, there was the prospect of doing psychotherapy with a real, live person sitting several feet away from me for an hour while my office seemed to close in around me. Sure, I had been to those "introduction to psychotherapy" lectures and read those papers (well, most of them) but did I really know how to do psychotherapy? Many of these 'patients' were higher functioning than I can be on my good days, not to mention post-call!

At the time, I thought I might be able to convince the program directors that I needed remedial inpatient work and should return to the hospital...immediately. In hindsight, I realize that I was well prepared for this new adventure, even if my nerves were telling me otherwise.

The initial transition was difficult, but my attendings, supervisors, and colleagues helped me navigate this new land. With time, I discovered how to be someone's physician for more than an impersonal three-day hospitalization. I gained the experience of providing psychiatric treatment within the context of an ongoing relationship. This included seeing the long-term outcomes and consequences of my interventions, both positive and negative. Sometimes that meant following someone long enough to see them recover from a debilitating depression to return to work, while other times it meant watching someone's weight and cholesterol skyrocket as the result of a medication I prescribed. I had heard about such stories while on the inpatient

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service, but seeing them first-hand in my patients was professionally educating, and personally affecting. As the safe structure of my protective cynicism dissolved, these personal and professional influences became more difficult to keep apart.

In the outpatient realm, I also learned how to be known as someone's primary psychiatrist. The inpatient world has the distinct benefit of working within a large and immediately available team. While necessary and valuable, it had the effect of making me feel like a cog in a large machine. The patients I treated were always referred to as my attending's patients and questions were most frequently directed to him or her. In our outpatient clinic, there is no question that I am my patient's doctor. The guidance and direction of my attending is always available, but the vast majority of patient interactions and decisions are made with me. They are "my patients" and I am "their doctor."

During an average week in the outpatient residents' clinic, we have 8-12 hours of medication clinic with direct attending supervision, carry 5-10 hours of psychotherapy, attend numerous lectures, meet with 3-6 supervisors to discuss our therapy cases, and participate in our chosen electives. In between these scheduled activities, we're checking voicemail, calling pharmacies, faxing prior authorizations, returning patient calls, reviewing labs, catching up on charts, reading articles, and then checking our voicemail which is full yet again.

As a chief resident, the day is also interspersed with unpredictable administrative dilemmas to manage, co-residents to assist, and endless scheduling changes to address. Although this extra responsibility certainly takes additional time and energy, being able to advocate for and respond to my fellow residents to the best of my ability is one of the most satisfying aspects of the day.

The irony of it all is that of the three chief resident roles, I am the outpatient chief. If someone had told me during those first terrifying weeks of outpatient work that this is where I would end up, I would have thought they were in need of psychiatric treatment. Had they gone on to tell me I would be excitedly planning for my outpatient private practice to start in July, I would have considered involuntary commitment. Yes, residency is definitely a time of development and transition.

As you can see, outpatient psychiatry has grown on me. But don't be fooled. I've kept my ties to acute psychiatry throughout these past two years. Each week you will find me moonlighting at the local Crisis Response Center (CRC) and covering the inpatient unit and consults. I admit, the paycheck may have played a small (read: big) role in my choice to moonlight, but it has been an invaluable experience. The CRC maintained and sharpened all of the skills I acquired in those first two years of inpatient training. Working there regularly has also allowed me to keep a balanced perspective between the calmer pace of outpatient life and the immediate challenges of acute services.

I certainly don't know what life will look like after I leave the snug nest of residency training. I have no doubt that it will be yet another new galaxy of psychiatric experience, but I'm also sure that my travels thus far have given me the training and varied tools to be able to navigate a new world on my own. ❖

SAVE THE DATE ...

Resident & Fellow Graduation

Friday, June 15, 2007

6:00 pm

BRB II/III Auditorium

(Reception Following Ceremony)

Department of Psychiatry

Annual Family Picnic

Saturday, July 14, 2007

Residence of

Dwight and Jan Evans

A GROWING COLLABORATION: THE DEPARTMENT TEAMS UP WITH THE PSYCHOANALYTIC CENTER OF PHILADELPHIA

For at least five decades, faculty in Penn's Department of Psychiatry have maintained an active relationship with the Psychoanalytic Center of Philadelphia (PCOP). Today, about 50 members of the Department's clinical faculty and several members of the full-time faculty are PCOP members.

A little over a year ago, the Department and the PCOP formally agreed to develop joint educational and research activities, and the new venture's first foray in public outreach is now a reality.

With forerunner entities first established in 1939, the Psychoanalytic Center of Philadelphia was re-organized in 2001 under its current name. Its primary mission is to sponsor educational, research, and community service programs to further the study and practice of psychoanalysis. Psychoanalysis, initiated with the work of Sigmund Freud, explores how unconscious factors in the mind affect human behavior, thinking, and relationships. About 3500 analysts are current members of the American Psychoanalytic Association, the discipline's national organization.

The Penn-PCOP collaboration

joins a number of university/psychoanalytic connections, which include



*Richard F. Summers, MD
speaking at the April 5 Penn-PCOP program on immigration*

Columbia, Cornell, Emory, Mt. Sinai (New York), New York University, and the University of Colorado. The Department's residency program does not provide psychoanalytic training, though some residents pursue this route in post-residency training. Richard Summers, MD, Clinical Associate Professor of Psychiatry, the Department's Associate Director of Education for Residency Training, and a practicing psychoanalyst, says that Penn resi-

dents receive formal instruction in "psychodynamic psychotherapy, the psychotherapy version of analysis," and adds that the Penn-PCOP collaboration "further strengthens the Department's depth in the varied forms of psychotherapy."

The first product of the renewed Penn-PCOP collaboration is a planned eight-program public education series titled "Freud, Franklin and Beyond: A Contemporary Interdisciplinary Forum on Mental Health and Society." The programs are held on the Penn campus and the public is invited.

The first program in the series – "A City in Crisis? The Rise of Violence in Philadelphia" – was held on October 19, 2006. Six expert panelists, representing disciplines as varied as psychiatry, sociology, social policy and practice, law, and child development, discussed the causes and consequences of urban violence, with a specific focus on the role of trauma. A diverse group of 175 persons attended the event, including psychoanalysts, Penn faculty (including University and School of Medicine faculty), Penn students (including an entire class from the School of Social Policy and Practice), and the general public.

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Following this successful start, the next forum was held on December 13, 2006, titled "The Vulcanization of the Human Mind: Neuroimaging, Decision-making and Ethics." The primary presenter was Jonathan Cohen, MD, PhD, Director of the Center for the Study of Brain, Mind, and Behavior at Princeton University. The program explored how humans weigh complicated, and often opposing, factors in making decisions involving risk, reward, danger, and right and wrong. The presenter and two panelists from the Department, Dr. Summers and Paul Root Wolpe, PhD, used

insights gained from modern imaging techniques, economic theory, and the fields of ethics and psychoanalysis to explain the decision-making process.

The third program, held on February 1, 2007, was titled "Why Curse? Why Not?" and examined the taboo of cursing from linguistic, sociological, and psychological perspectives. Lawrence D. Blum, MD from PCOP moderated the session with five discussants from Penn and PCOP. The next program, held on April 5, featured an interdisciplinary panel discussing "Closing Borders, Open Questions: Taking the Immigration

Debate Beyond Politics."

Funding for the series is generously provided by the PCOP, Penn's Department of Psychiatry, the Scattergood Foundation, and the Philadelphia Psychoanalytic Foundation.

For additional information about the Penn-PCOP series, please contact Richard F. Summers, MD (summersr@mail.med.upenn.edu) or visit the Department of Psychiatry's Penn-PCOP Website (www.med.upenn.edu/psych/PCOP.html). Streaming videos of the programs are found on the Website. ❖

More Information at Your Fingertips – Psychiatry Residency Training Program and Intranet Websites

The Department of Psychiatry is expanding its on-line resources.

The Psychiatry Residency Training Program now has its own web site (www.med.upenn.edu/psychres/), accessible through the Department's main web page (www.med.upenn.edu/psych). The residency web site includes basic information for interested applicants and Penn residents about the program curriculum and structure, research and fellowship opportunities, electives, salaries and benefits, and essential details about living in Philadelphia.

Also new is a Residents' Intranet web site (<http://www.med.upenn.edu/psychres/psychepedia/>). Created by Chief Resident for Affiliated Sites Dhwani Shah, MD, faculty member John P. O'Reardon, MD, and Abigail Woodworth, the Intranet site is an on-line resource for medical students, residents, and Psychiatry faculty who wish to learn more about the residency program and selected topics in contemporary psychiatry. It contains contact information (including direct links to residents' pagers and e-mails!), key journal articles, and useful links to other internet sites. Accessing the site requires a password – please contact Michele Cepparulo (cepparul@mail.med.upenn.edu) for log-on instructions.

The Intranet site also includes an exciting new feature – the Penn Psychepedia. This is an ever-evolving database of psychiatric information designed for clinicians. It contains important information on medications used for psychiatric illnesses, addiction management, legal and emergency procedures, consultation and liaison psychiatry, critical guidelines and algorithms, and much more. Residents and faculty members are encouraged to use the site, and to and make contributions and corrections to it as well. So, check it out! ❖



Celebrating Aaron T. Beck, MD



On November 9, 2006, colleagues, friends and family gathered at the Union League in Center City Philadelphia to celebrate Dr. Beck's receipt of the 2006 Albert Lasker Clinical Medical Research Award, the most prestigious honor bestowed in American science.



Vartan Gregorian
(President, Carnegie Corporation
of New York) and
Arthur H. Rubenstein, MBBCh



The Beck Family



Dr. Aaron T. Beck with
Dr. and Mrs. Dwight L. Evans



Calendar of Events

APRIL 2007

- 19 **Psychiatry Grand Rounds, 12:00-1:00 pm, BRB II/III Auditorium**
Psychological Distress, Aging, Neurodegeneration and Dementia
Steven E. Arnold, MD, Associate Professor of Psychiatry and Neurology; University of Pennsylvania
- 20 **Center for Neurobiology & Behavior Seminar Series, 10:30-11:30 am, Room 124 Conference Room, 1st Floor, TRL**
Identifying Genetic Risk Factors for Bipolar Disorder
Margit Burmeister, PhD, Molecular & Behavioral Neuroscience Institute, University of Michigan
- 30 **Treatment Research Center Lecture Series, 3:30 pm, Main Conference Room, 3900 Chestnut Street, Philadelphia, PA**
Patient Adherence to Medication and Psychosocial Treatment in Large Clinical Trials Evaluating Treatments for Alcoholism
Allen Zweben, DSW, Professor & Associate Dean for Research & Sponsored Projects, School of Social Work, Columbia Univ.

MAY 2007

- 3 **Psychiatry Grand Rounds, 12:00-1:00 pm, BRB II/III Auditorium**
Geriatric Psychopharmacology: Enhancing Benefit Reducing Risk
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
- 10 **Annual Strecker Lecture, 12:00-1:00 pm, CRB Austrian Auditorium / Reception immediately following in CRB Lobby**
Cognitive Approaches to Schizophrenia
Aaron T. Beck, MD, University Professor Emeritus of Psychiatry, University of Pennsylvania (2006 Strecker Award Recipient)
- 11-12 **American Association for Geriatric Psychiatry Annual Meeting, Marriott Hilton Head Beach & Golf Resort, Hilton Head, SC**
- 17 **Psychiatry Grand Rounds, 12:00-1:00 pm, BRB II/III Auditorium**
Neurodegenerative Module (Case Presentation)
Daniel Weintraub, MD, Assistant Professor of Psychiatry and Neurology, University of Pennsylvania
- 18 **Center for Neurobiology & Behavior Seminar Series, 10:30-11:30 am, Room 124 Conference Room, 1st Floor, TRL**
Probing Mechanisms Modulating Stress, Depression and Reward: The Role of Kappa Opioid Systems
Jay P. McLaughlin, PhD, Assistant Professor, Department of Psychology, Northeastern University, Boston
- 19-24 **American Psychiatric Association Annual Meeting (160th), San Diego, CA**
May 20 **44th Annual Edward A. Strecker Award Brunch**
honoring 2007 recipient Joseph T. English, MD, Professor and Chair of Psychiatry, New York Medical College
(11:00 am-1:00 pm, Marina A/B, The Hilton San Diego Gaslamp Quarter, 401 K Street)
- May 21 **160th Annual Meeting Cocktail Reception**
(6:30-9:30 pm, USS Midway, 910 N. Harbor Drive)

JUNE 2007

- 15 **Department of Psychiatry Resident & Fellow Graduation, 6:00 pm, BRB II/III Auditorium / Reception following ceremony**
- 20-24 **National Alliance for the Mentally Ill Annual Convention, San Diego, CA**

JULY 2007

- 14 **Department of Psychiatry Annual Family Picnic at the residence of Dwight and Jan Evans**

AUGUST 2007

- 17-20 **American Psychological Association Annual Convention (115th), San Francisco, CA**

SEPTEMBER 2007

OCTOBER 2007

- 7-11 **World Congress on Psychiatric Genetics (XVth), Marriott Marquis-Times Square, New York, NY**
- 23-28 **American Academy of Child and Adolescent Psychiatry Annual Meeting (54th), Boston, MA**

NOVEMBER 2007

DECEMBER 2007

- 9-13 **American Neuropsychopharmacological Association Annual Meeting, Boca Raton Resort and Club, Boca Raton, FL**

Updated information on Department of Psychiatry events is posted on the
Department of Psychiatry website at <http://www.med.upenn.edu/psych/rounds.html>

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**



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