Dalhousie Psychiatry

2014/15 ANNUAL REPORT

Department of Psychiatry, Dalhousie University, Halifax, N.S.

ADVANCING THE FIELD

OF PSYCHIATRY AND MENTAL HEALTHCARE



HEAD'S MESSAGE



This year's annual report describes our department after 65 years of evolution. We celebrated this milestone with an event which included talks by eminent speakers, Drs. Jock Murray and Jane Murphy, and a lively panel discussion by four of the six department heads.

Our annual report provides us with an overview of our people and achievements, and is also an important historical record. I would like to acknowledge the excellent work of our communications coordinator, Ms. Kate Rogers, in putting it together. Space allows me to touch on only a few of the strengths of our department and I would like to thank all of our faculty members, residents and staff for their hard work and admirable achievements.

This year saw our first Child and Adolescent Psychiatry subspecialty resident, Dr. Ferid Fathalli, and approval by the Royal College of Physicians and Surgeons of our subspecialty residency program in Geriatric Psychiatry. Our thanks to Dr. Janya Freer and all others who did the hard work required to obtain approval for this program. In past years, we have provided subspecialty training in these two fields, and this was termed "fellowship" training. We continue to offer subspecialty training by way of fellowships in a number of other areas of clinical practice and research. Thus we now offer subspecialty training in two of the three recognized subspecialties in psychiatry (the third being Forensic Psychiatry) and in many other areas.

Much excellent research is taking place in the department, among which is the work by Dr. Cindy Calkin and colleagues on the apparently deleterious effect of diabetes and insulin resistance on the effects of therapy for bipolar disorder. They are conducting a randomized, controlled study to test whether treatment of insulin resistance might lead to better outcomes. Dr. Hajek's research work is featured on page 37 – this has made a big impact, being featured on the cover of one of the most important journals in psychiatry, Biological Psychiatry.

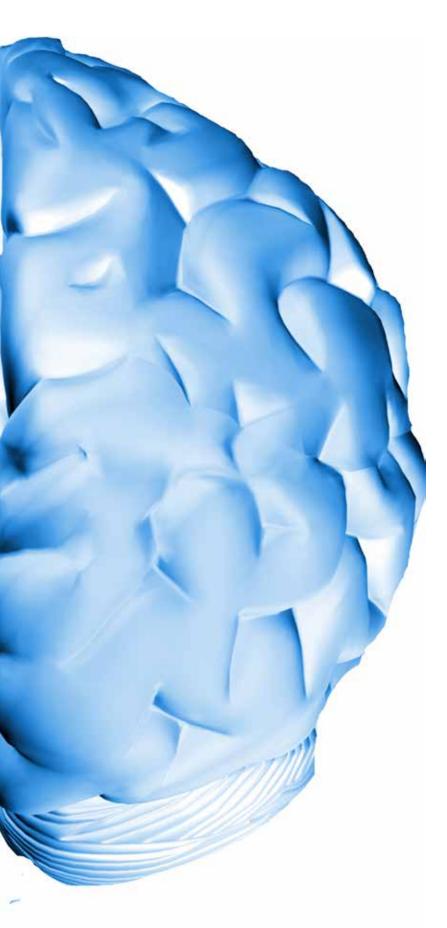
I would like to make note of and thank for their contributions those members of the department who have retired or moved elsewhere: Drs. Khalil Ahmad, Kathleen Pajer, Alec Hipwell, Saravana Muthu, Pam Mosher, Lorraine Lazier, and Martina Ruzickova. You will all be missed.

This year we saw the beneficial effects of a sophisticated and purpose-built inpatient unit for adolescents, the Garron Centre at the IWK. This is a model for inpatient psychiatric units and we hope one day to see this type of high-quality build for our adult inpatient units. The high quality of the Garron Centre is a result of excellent design and an excellent process of consultation, plus most generous donations by Myra and Berna Garron, Marjorie Lindsay, RBC, Kim and John Horrelt, the Windsor Foundation and others. I have visited the unit, which is roomy, bright and cheerful, on two occasions, and each time the music room was in use. The security system is state-of-the-art, and there have been significant declines in the use of seclusion and the number of incidents requiring a "code white" for disturbance, and big increases in satisfaction by patients and staff. The built environment of our inpatient units is a therapeutic tool, and all of our inpatients, young, middle aged and old alike, deserve to have modern and effective therapeutic environments, so that they can recover as quickly as possible.

In closing I would like to congratulate our many excellent faculty and residents who were recognized by awards, and also our graduating residents, all of whom passed their Royal College examinations.

Dr. Nicholas Delva, MD FRCPC

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This report covers the period of April 1, 2014 to March 31, 2015, with the exception of the Education Section, which covers the academic year, July 1, 2014 to June 30, 2015. Photography has been provided by Nick Pearce (Dalhousie), John Sherlock (IWK), Maureen Wheller (CDHA) and Kate Rogers (Dalhousie).

Our mission statement in Action





Department offers second subspecialty training program

In the fall of 2013 a small team of geriatric psychiatrists and administrative staff began to meet to discuss offering a Geriatric Psychiatry Subspecialty Training Program at Dalhousie. By February 2014 they had applied to and received approval from the Triprovincial Committee and submitted an application to the university. In May they sent their application to the Royal College of Physicians and Surgeons of Canada (RCPSC) and in fall 2014, a year after they began the process, they received word from the RCPSC that they had received accredited new program status.

The program is a two-year residency, with the option of completing the first year during an existing residency. Based at the Capital District Health Authority and Dalhousie University, it will be one of only five accredited programs in the country, and the only one east of Montreal. The accredited status will attract residents to the program. Without the accreditation, the program would have been obsolete, and residents would have had to leave the Maritimes to receive

training in geriatric psychiatry.

A great deal of planning and teamwork allowed for the successful application. All of the geriatric psychiatrists participated in the process, with significant contributions coming from Drs. Janya Freer, Cheryl Murphy, Mark Bosma and Keri-Leigh Cassidy. Dr. Freer led the charge as the new program director, delegating sections of the application to other team members, integrating and polishing the final version and finally, submitting it for review. Dr. Cassidy, who provided impetus, leadership and instrumental support to the team is very happy with the outlook of the program. "Our program is now more comprehensive and rigorous for both residents and educators," she says, "with more mechanisms for evaluation of a wider range of competencies throughout training."

If all goes well, the Department of Psychiatry at Dalhousie will accept learners into their first ever Geriatric Psychiatry Subspecialty Training Program in July of 2015.



Working to treat severe bipolar disorder

Some patients with bipolar disorder (BD) have a more severe form of illness that is more difficult to treat. Many of these patients get referred to the Mood Disorders Program for consultation. While several contributing factors have been identified (for example, comorbid anxiety, substance use, thyroid disorders, sleep disorders), some patients remain unwell. Dr. Cindy Calkin and the Mood Disorders group have been engaged in research to try and identify other factors that may be contributing to treatment resistance. Dr Calkin's research has examined the effect of metabolic dysregulation on the course and outcome of bipolar illness. Her interest in medical comorbidity in BD stems from her background in medicine.

Initial studies by Dr. Martina Ruzickova, a former fellow in the Mood Disorders Program, found that patients with BD and type 2 diabetes (T2D) have a more severe form of BD. This led Dr. Calkin and the Mood Disorders group to study obesity, a risk factor for T2D, in relation to BD. They found that obese patients with BD also have a more chronic course, with longer duration of illness, poorer functioning, and greater disability. Further, patients whose weight was in the obese range had no clinical response to lithium (the principal treatment for BD), compared to those in the healthy range, who achieved complete remission of symptoms on lithium. This was the first research to show that obesity was associated with poor outcome in BD.

Obesity is also a risk factor for insulin resistance (IR, or "pre-diabetes"). Dr. Calkin wondered whether IR might be one of the unidentified variables playing a role in non-remitting BD. Insulin resistance is not apparent on regular blood testing, as fasting glucose is normal in these patients. One would have to specifically test for IR to know if it was present. This led Dr. Calkin and the group to do just that. In a study funded by CHRF (Capital Health Research Fund) and NARSAD (Brain and Behaviour Research Foundation), they systematically

tested for IR and T2D and found that bipolar patients with IR or T2D were three times more likely to have a chronic course of BD compared to bipolar patients without IR or T2D, and three times more likely to have rapid cycling (a more difficult course of BD to treat). Further, they are the first group to have studied IR and T2D and response to lithium. They found that bipolar patients with T2D or IR were 8.4 times less likely to respond to lithium compared to bipolar patients without IR or T2D. Significantly, patients with IR had equally poor psychiatric outcomes as those with T2D. Their findings suggest that IR may be a factor in the progression of BD to a more advanced stage of disease, even before T2D manifests. This is important, as patients are not screened for IR by either their family physician or their psychiatrist, even when their BD fails to remit.

The most important question now is whether treating IR (a metabolic problem) may be a novel strategy for obtaining remission in refractory bipolar disorder (a

psychiatric problem). Dr. Calkin's research has led to her hypothesis that treating IR, the earliest stage of impaired glucose metabolism, may be a novel strategy for improving outcome in BD. She is the principal investigator for a double-blind randomized clinical control trial: "Treating Insulin Resistance to Improve Outcome in BD" (TRIO-BD), a million-dollar project funded by the Stanley Medical Research Institute. In collaboration with co-PIs Drs. Martin Alda, head of the Mood Disorders Program at the Capital District Health Authority, and Roy Chengappa in Pittsburgh, patients will be randomized to metformin (an insulin sensitizing drug) or placebo to treat IR in non-remitting bipolar patients. They are the first group to pursue treating IR as a strategy to improve mood symptom control, decrease the level of disability, and ameliorate treatment response and/or outcome in BD. If Dr. Calkin's hypothesis is correct, this would have an immediate impact on the treatment of bipolar patients with the greatest burden of illness.

Garron Centre for Child and Adolescent Mental Health thriving at the IWK

On May 14, 2014, the first patients walked through the doors of the Garron Centre for Child and Adolescent Mental Health at the IWK Health Centre. The new psychiatric inpatient unit, located on the fifth floor of the children's building, officially opened on May 2, 2014 with an event honouring all those who made the unit a reality, as well as IWK staff, leaders, patients and families who offered input into the design and organization of the facility.

Construction began on the new inpatient unit in May 2013 after a transformational gift of \$5 million from Myron and Berna Garron. This was part of a \$10 million donation to the IWK with significant donations coming from local philanthropist Marjorie Lindsay, RBC, Kim and John Horrelt of PEI and The Windsor Foundation, among others.

"We are so pleased to play a part in this incredible project that ultimately will help young people feel

stronger and healthier," says Myron Garron. "Thanks to everyone for your passion and commitment to changing the face of mental health treatment. This demonstrates what is possible when people work together to bring change."

The Garron Centre was designed with input from youth and their families who used the former unit on 4 South at the IWK. The environment is meant to feel safe, warm and welcoming, and is designed to resemble a trendy university dorm. Patients and visitors are welcomed by a glass sand dollar art feature upon entering which sets the tone for the spacious yet inviting interior. Calming blues and greens, natural light and common areas with fireplaces are welcoming to patients, their families and staff. For patients who want to stay active there are several pieces of exercise equipment. And for those interested in making music, the unit features several guitars and a practice drum set.



At the time of opening, then Chief of Psychiatry at the IWK Health Centre, Dr. Kathleen Pajer, commented on the potential held by the new unit. "The new inpatient mental health unit will enhance the exceptional work of the IWK Mental Health and Addictions Program staff and physicians," said Dr. Pajer. "We will continue to provide excellent treatment for conditions such as psychosis, depression, bipolar disorder and obsessive compulsive disorder in children and teens, but the unit's environment will now contribute additional therapeutic effects to our interventions. The physical space will truly be part of the healing process."

This new unit has greatly enriched the road to recovery for the patients. Ms. Glenna Rose, operations manager of the IWK Health Centre Foundation says she could see within the first week the benefits of this new space.

"That first week I saw how the right environment can have a profound impact on mental illness. One of our youth, who we've known for some time, was standing within a group of other youth in the living area. On 4 South, this youth would not have been standing within the group but would have stood outside the small TV area looking in. It did my heart good to see him standing with the other youth. Donors can feel incredibly proud of the gift they've given our patients and staff."

Certified Child Life Specialist at the IWK, Ms. Krista McKeage, also heard great things from youth utilizing the space. When a group was asked if being in a beautiful environment will help them be healthy faster they responded with a resounding, "yes, definitely!"

Nearly a year after opening, the success of the Garron Centre is evident through the drastic decline in aggressive patients and threats of violence (code white). In the eight months prior to the opening of the Garron Centre there were 36 recorded code whites, 41 instances of physical aggression targeting staff, 13 counts of physical aggression towards property and 11 counts of verbal aggression to staff. During the eight months after its opening those numbers decreased to 11 code whites, 17 acts of physical aggression targeting staff, five counts of physical aggression towards property and two instances of verbal aggression to staff.

The Garron Centre for Child and Adolescent Mental Health is a labour of love made possible by the many donors, staff, leaders, patients and families who contributed their time, ideas and funds. Thanks to their generosity, children and youth with mental illness are one step closer to recovery.

Awards & Accolades



DR. KATHLEEN PAJER AWARDED TRIC GRANT

Dr. Kathleen Pajer was awarded funding for her project "Transforming the emergency mental health service at the IWK: preparing for an evidence-based prospective evaluation" from the QEII Foundation and IWK Foundation's new Transforming Research into Care (TRIC) grant.

TRIC grants are the result of a partnership between Capital Health and the IWK Health Centre, funded by the QEII Foundation and the IWK Foundation. The grants are awarded to successful teams of researchers and administrators who propose ideas that will fuel direct and positive changes for health care. These ideas include better patient outcomes, reduced wait times and improved access to care. What makes the granting model unique is the team has to implement a solution together, making the approach among the first of its kind in Canada.

DR. SHERRY STEWART EDITS BOOK ON SUBSTANCE ABUSE

Dr. Sherry Stewart, in partnership with Dr. Marco Layton, professor in psychiatry at McGill University, edited a book entitled, *Abuse in Canada: Childhood and adolescent pathways to substance use disorders*. The book was published in June 2014 and is a resource of the Canadian Centre on Substance Abuse.

DRS. PROPPER AND MOSHER ANNOUNCE SUCCESSFUL EXAM RESULTS

Dr. Lukas Propper successfully completed the Child & Adolescent Psychiatry subspecialty exam. Dr. Pam Mosher passed the American Board of Psychiatry and Neurology board exam in child and adolescent psychiatry. Dr. Mosher is now a diplomate of the organization.

DR. RUDOLF UHER RECEIVES MAX HAMILTON AWARD

Dr. Rudolf Uher was the recipient of the 2014 Max Hamilton Award from the International College of Neuropsychopharmacology (CINP). The award, consisting of a monetary award of \$10,000 and an engraved plaque, is given to a young scientist in recognition of an outstanding contribution to psychopharmacology. Dr. Uher was presented with his award on June 22, 2014 during the opening ceremony of the 2014 CINP World Congress in Vancouver.



DR. STAN KUTCHER RECIPIENT OF PHE CANADA EDUCATOR AWARD

Dr. Stan Kutcher received one of the national Physical and Health Education (PHE) Canada Health Educator awards for the 2013 school year. The award honours an individual for their work to further the importance of health education in Canada and who has served as a champion in promoting the importance of Health Promoting Schools at the local, regional, provincial or federal level. Dr. Kutcher was recognized for his countless contributions to health education.

DRS. LYNCH AND FRASER RECEIVE DR. G. W. ARCHIBALD GOLD-HEADED CANE AWARD

Drs. Mary Lynch and John Fraser were the recipients of this year's Dr. G. W. Archibald Gold-headed Cane Awards. The recipient of the Gold-Headed Cane Award for in the Humanities was Dr. Mary Lynch and the other recipient for the College of Physicians and Surgeons of Nova Scotia Gold-Headed Cane Award was Dr. John Fraser. Dr. Mary Lynch is a faculty member of the Departments of Psychiatry, Anesthesiology and Pharmacology. She provides ongoing education and mentorship to many learners in the Department of Psychiatry and recently gave an excellent Psychiatry Grand Rounds presentation. Dr. John Fraser is also very active in the department, educating residents both through didactic and clinical teaching during the residency addiction rotations. They were both presented with these awards on Feb. 7 at the Golden Headed Cane Award Dinner Gala.



DR. MARIE CLAIRE BOURQUE PRESENTED WITH ALS SOCIETY AWARD

Dr. Marie Claire Bourque, PGY-4, was presented with The Marcel Bertrand Award by the ALS Society of Canada for volunteerism and service in the community of ALS. The purpose of this award is to evaluate and recognize an exceptional support service program. Support services include: an educational program designed for people with ALS and their families or health care providers; a direct support service to people with ALS or their caregivers intended to enhance quality of life; a collaborative effort working with a clinic or other community-based organization or institution within the past two calendar years. Dr. Bourque received the award in Toronto in May 2014.

DEPARTMENT OF PSYCHIATRY TEAM AWARDED A GRANT TO ESTABLISH CDRIN MARITIMES DEPRESSION HUB

Faculty members vying for a Canadian Depression Research and Intervention Network (CDRIN) Maritimes Depression Hub were successful in their application and were awarded a grant for its establishment. The Hub will be hosted by the major health providers in Nova Scotia, with central activities of the Hub to be housed within the integrated facilities and programs of Capital Health, the IWK Health Centre and the Dalhousie University Department of Psychiatry. The **CDRIN Maritimes Depression Hub** will be a platform for translational research in depression, with involvement of people with lived experience and two-way communication between research and the clinics.



DR. MICHAEL
BUTTERFIELD, PGY-4,
AWARDED SPOT AT CPA
JUNIOR INVESTIGATOR
RESEARCH COLLOQUIUM

Dr. Michael Butterfield was awarded a spot at the newly launched Canadian **Psychiatric Association** (CPA) Junior Investigator Colloquium, which aims to provide guidance, mentorship and encouragement to young investigators in the early phases of their training. Junior investigators have the opportunity to obtain feedback about their past, present, and future research from mentors who are tops in their field in a small group setting as well as participate in plenary sessions about career development and grantsmanship.

DR. MARIE-CLAIRE BOURQUE SELECTED AS FELLOW

Dr. Marie-Claire Bourque, PGY-4, was chosen by a selection committee for the APA Minority Fellowships to participate in the fellowships as a Minority Leadership fellow for the 2014 academic year. The two-year fellowship offers her travel funds, mentorship, leadership training and other opportunities to grow as a leader in psychiatry.

Dr. Bourque was also selected as a recipient of the 2015 Laughlin Fellowship of the American College of Psychiatrists. This is a very prestigious award given to a select number of residents from the United States and Canada deemed likely to make a significant contribution to the field of Psychiatry. As part of the award, Dr. Bourque was invited to attend the annual meeting of the ACP in Huntington Beach, CA in February, 2015.

DR. SHERRY STEWART AWARDED

Dr. Sherry Stewart was the recipient of the Professional of Distinction category for the 2014 Discovery Awards for Science and Technology. The awards are presented by the Discovery Centre in Halifax and recognize talented individuals and outstanding companies in Nova Scotia for their national and international work in the science and technology fields. The Professional of Distinction Award recognizes an individual who is a leading innovator, a role model for people who choose science as a career. Dr. Stewart received the award in November 2014.

Dr. Stewart was also awarded a Progress Club Women of Excellence Award for 2014. Dr. Stewart was chosen as a recipient in the Education and Research Category. The Progress Women of Excellence Awards Gala takes place each November. Hosted by the Canadian Progress Club Halifax Cornwallis, this annual fundraiser hosted in support of Phoenix honours 19 inspirational women who play an important role in our community.



SENIORS MENTAL HEALTH NETWORK RECEIVES R. WAYNE PUTNAM AWARD

Dr. Keri-Leigh Cassidy and the Seniors Mental Health Network members received the Dalhousie Faculty of Medicine R. Wayne Putnam Award in 2014. The award was established in 2005 to recognize those who contribute in an exceptional way at the community level to the continuing education of physicians. Dr. Cassidy leads the network with Mr. Tony Prime.



ACPC EXCELLENCE IN EDUCATION AWARD PRESENTED TO DR. MARGARET RAJDA

Dr. Rajda was the recipent of the 2014 The Associations of Chairs of Psychiatry in Canada (ACPC) Excellence in Education Award. The award is presented to an individual who has made a significant and sustained contribution to education in psychiatry, someone who excels not only in active teaching and supervision, but who goes above and beyond in the areas of academic management, course development and student evaluation, and who has written on education and teaching.



DR. KERI-LEIGH CASSIDY RECEIVES CAGP AWARD FOR REGIONAL CONTRIBUTIONS IN **GERIATRIC PSYCHIATRY**

Dr. Keri-Leigh Cassidy was the recipient of the 2014 Canadian Academy of Geriatric Psychiatry's (CAGP) Award for Regional Contributions in Geriatric Psychiatry. This award recognizes a geriatric psychiatrist who has made a significant contribution to geriatric psychiatry through education, clinical service or innovations in service delivery at the local level. Dr. Cassidy is recognized for her work in Nova Scotia as a leader in education and seniors' mental health program development. Her dedication to providing high quality care to older adults and educating those who care for them has been an inspiration to many. Dr. Cassidy received the award in September 2014 at the 2014 Canadian Academy of Geriatric Psychiatry Conference in Toronto.

DR. DEREK FISHER NAMED ASSOCIATE **EDITOR OF JOURNAL**

Dr. Derek Fisher was made an Associate Editor for the journal Clinical EEG & Neuroscience in January 2014. Clinical EEG and Neuroscience conveys clinically relevant research and development in electroencephalography and neuroscience. In this role, he reads scientific manuscripts assigned by the Editor-in-Chief and then he selects and assigns reviewers. Ultimately, Dr. Fisher is one of several Associate Editors who determine which papers will be published in the journal and which will not.

DEPARTMENT STAFF MEMBERS AMONG TEAM AWARDED FACULTY OF MEDICINE COLLABORATOR OF THE YEAR AWARD

Ms. Carolyn Sisley, Director of Finance and Administration, and Ms. Kate Rogers, Communications Coordinator, along with their committee of clinical administrators, were awarded the 2014 Faculty of Medicine Collaborator of the Year Award for their work on the 2013 ACCADA (Association of Canadian Clinical Academic Department Administrators) Conference. The award recognizes members of the Faculty of Medicine Professional/ Managerial Group who have proven themselves as outstanding Professional/Managerial Group members and who have made important. collaborative contributions to the success of the Faculty of Medicine. The conference planning committee worked together over a two year period, carefully organizing every detail of the annual conference. In the end they hosted 100 of their colleagues from across the country and received rave reviews from delegates.

DR. JONATHAN WAN RECEIVES INAUGURAL DR. HERB ORLIK CHILD AND ADOLESCENT PSYCHIATRY RESIDENT AWARD

The Dr. Herb Orlik Child and Adolescent Psychiatry Resident Award honours a resident who has demonstrated exceptional performance in their Child and Adolescent Psychiatry rotation. Dr. Jonathan Wan was nominated by Drs. Pam Mosher, Sabina Abidi and Alexa Bagnell for his superior level of professionalism, strong work ethic and calm, compassionate style of interviewing and communicating with pediatric patients and their families. Dr. Wan is admired for his collaborative approach to patient care and willingness to assist while on-call in the Emergency Department at the IWK.



DR. STAN KUTCHER RECEIVES ORDER OF N.S.

Dr. Kutcher, along with four other outstanding Nova Scotians, was named by J.J. Grant, the Lieutenant Governor of Nova Scotia and Chancellor of the Order of Nova Scotia, as a recipient of the Order of Nova Scotia on December 3 at the 13th investiture ceremony at Province House in Halifax. Premier Stephen MacNeil was on hand to offer his congratulations to all recipients.

The Order of Nova Scotia is the highest honour of the Province of Nova Scotia. It was established in 2001 and encourages excellence by recognizing Nova Scotians for outstanding contributions or achievements.

Dr. Kutcher and the other recipients each received a medal in the form of a mayflower, the provincial floral emblem, bearing the shield of arms of Nova Scotia surmounted by the crown.



DR. MICHAEL BUTTERFIELD AWARDED RESIDENT RESEARCH SCHOLARSHIP; ELECTED CHAIR OF MIT OF CPA

Dr. Michael Butterfield was awarded the American Psychiatric Institute for Research and Education (APIRE)/Janssen Resident Psychiatric Research Scholarship in April 2014. This one-year fellowship is supported by a grant from Janssen Pharmaceutica and is intended for postgraduate psychiatry trainees. The program will focus specifically on clinical and health services research in all areas of psychiatric research. There is a special emphasis placed on mentoring and career enrichment programs both at the APA Annual Meeting and throughout the year. Dr. Butterfield will be mentored by Dr. Mary Lynch, Director of Research at the Pain Management Unit at the QEII Health Sciences Centre. She is trained as a psychiatrist and specializes in the field of pain disorders.

Dr. Butterfield was also elected to be the next Chair of the Members in Training (MIT) Section of the Canadian Psychiatric Association in May of 2014. He has served as the Atlantic Provinces Representative in the CPA MIT executive committee and was elected by the executive board to the position of chair-elect and will become chair of the MIT section in May of 2015 for a one year term. This new position allows him to take on a greater leadership role at a national level.

DR. MICHAEL BUTTERFIELD RECEIVES RESEARCH FUNDING

Dr. Michael Butterfield was successful in his application and was awarded funding through the Capital Health Research Fund (CHRF). This award will provide additional support for the research project entitled "Investigating the Association between Post-Operative Pain and Symptoms of Post-Traumatic Stress Disorder." The goal of this research is to better understand the potential link between acute pain and the development of symptoms of PTSD. Knowledge gained from this research may facilitate improving patient outcomes following painful events and procedures, increase the awareness of how pain can impact psychological functioning, and may lead to developing methods to optimize analgesic treatments that could reduce the incidence of negative psychiatric sequelae. Dr. Butterfield's supervisor, Dr. Mary Lynch, has been integral in the development of this project and continues to provide ongoing support and guidance.



DR. CHRISTINE CHAMBERS EMPOWERS WOMEN; NAMED FINALIST IN SOCIAL INNOVATION

Dr. Christine Chambers' YouTube video, "It Doesn't Have to Hurt: Strategies for Helping Children with Shots and Needles" was named a 2014 Innovation in Practice finalist for Social Innovation by the Progress Media Group.

Dr. Chambers was also accepted as a member of the 2014-2015 class of the American Psychological Association's Leadership Institute for Women in Psychology, held in Washington, DC in August 2014. The institute's goal is to prepare, support and empower women psychologists as leaders to promote positive changes.



DR. HERB ORLIK NAMED OUTSTANDING CLINICIAN

Dr. Herb Orlik was awarded the 2014
Department of Psychiatry Outstanding Clinician
Award. Dr. Orlik has been a dedicated child and
adolescent psychiatrist for more than 40 years.
His commitment to his patients and their families
is unwavering, as is his dedication to clinical
service. He currently serves as the clinical
leader for the Autism/PDD specific care clinic
and recently served as a psychiatrist with the
Eating Disorders Team.

Dr. Orlik continuously receives positive feedback from residents on-call and is an exceptional role model to learners and is a sought-after mentor among faculty. He has exhibited very strong leadership and has served as the Chief of Psychiatry and the Head of the Division of Child and Adolescent Psychiatry. He is heavily involved in education, particularly at the undergraduate level and has served on many national education committees.

Known for his dedication to patient care, Dr. Orlik is a passionate advocate for patients and their families. He was a pioneer in the development and implementation of telepsychiatry, particularly at the IWK. His work in this field has helped children and families in rural areas receive care that they otherwise would not have received.

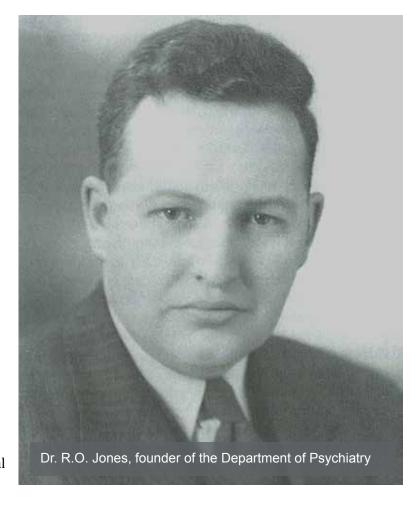
DR. STAN KUTCHER RECEIVES CACAP AWARD FOR EXCELLENCE IN EDUCATION

Dr. Stan Kutcher was awarded the Canadian Academy of Child and Adolescent Psychiatry (CACAP) Excellence in Education Award 2014. This award was presented at the CACAP Annual General Meeting and is awarded to a psychiatric educator who has made a significant contribution in undergraduate, postgraduate, continuing professional education or public education in child and adolescent mental health.

Department of Psychiatry celebrates 65 years

The year 2014 marked the 65th anniversary of the Department of Psychiatry at Dalhousie University. On June 20, 2014, faculty, fellows, residents, staff, and special guests joined together to celebrate 65 years of excellence in education and research. Invited speakers Drs. Jock Murray ('63) and Jane Murphy engaged the audience with talks about R.O. Jones ('37) and the Stirling County Study, respectively, and a panel of past and present department heads spoke candidly about their time at the reins.

The Department of Psychiatry was founded in the spring of 1949 under the very ambitious Dr. R.O. Jones. The first three residents in the department began their studies in July 1949 with the objective to receive training in psychiatry to work in government services in the area, pass the Royal College Certification Exam in psychiatry, and receive a Dalhousie University diploma in psychiatry. To accomplish this task, a basic two-year course covering general psychiatry, for which candidates were registered with the Faculty of Graduate Studies at Dalhousie and accepted as residents at the various hospitals, was developed. Residents would spend several months rotating through the different psychiatric areas: general hospital











outpatient psychiatry, inpatient medicine/neurology, child psychiatry, and psychotic inpatient psychiatry. In addition to the clinical portion of training, residents had regular seminars, journal clubs, supervised reading, and basic science lectures in neuroanatomy/neurophysiology.

After the two-year course, residents were required to complete two additional years in a Dalhousie-approved setting in order to receive a diploma in psychiatry, after which they could write the Royal College Speciality Exams. Dr. Jones was responsible for most of the training during the first year, feeling his way through different types of instruction. He reported after that first academic year that it was going well, stating: "I feel it's going ahead successfully... perhaps, more importantly, I think the residents feel the same."

In the early 1950s, the department enhanced its continuing medical education for general physicians, broadening their psychiatric knowledge and skills. More psychiatrists joined the faculty and resident numbers continued to grow, with a total of 15 residents in 1954. By 1959, 45 physicians had entered residency

training in the Department of Psychiatry, and only five did not complete their training. During this time more emphasis was put on research, and residents were encouraged to complete a research project in their final years of training. The program went through changes and restructuring in the early 1960s as more instructors joined the expanding department.

From Dr. Jones to current head Dr. Nicholas Delva, the Department of Psychiatry has benefited from competent leadership and strong directors. There have been struggles—developing a solid reputation as an excellent clinical and teaching program, attracting faculty and learners, flourishing when health care resources are diminishing and expectations are increasing—but the department has thrived and is one of the premiere psychiatry training programs in the country. Researchers continue to make discoveries in a wide variety of topics related to mental health, and the clinicians are committed to identifying and promoting the highest standards of clinical practice. With advances in technology and medicine, there is no telling what the department will look like in another 65 years.

Academic Chairs

The Department of
Psychiatry has four academic
chairs: The Killam Chair in
Mood Disorders, the SunLife
Financial Chair in Adolescent
Mental Health, the Dr. Paul
Janssen Chair in Psychotic
Disorders, and the Canada
Research Chair in Early
Intervention.

The Killam Chair in Mood Disorders Dr. Martin Alda MD FRCPC

Clinical research is the intersection at which theories and pathophysiological models are examined on the one hand, and put to practical tests on the other. This process often takes time and is marked by uncertainty regarding its outcomes and benefits. This report highlights some of the work done by Dr. Martin Alda, the Killam Chair in Mood Disorders, and his team, that benefitted from a long term focus.

Since Dr. Vivek Kusumakar and Dr. Alda started the Maritime Bipolar Registry 15 years ago, it has grown into an important clinical research resource. Along with the follow-up of patients in the clinical program and the longitudinal project of genetic studies, the registry has provided the basis for numerous clinical and neurobiological investigations. A key factor has been the long term commitment of the Chair's research staff, Claire Slaney RN, Julie Garnham RN BN, and Joanne Petite who know the patients and their families very well and provide much needed alliance and continuity.

An important shift in the last decade has been the establishment of large international consortia to tackle the issues in psychiatric genetics or brain imaging through the use of large datasets. Thanks to the team's long term focus, they were well positioned to join several such groups.

The Chair's studies of the genetics of response to lithium led to the largest molecular-genetic study of lithium response in international collaboration of more than 20 centres (ConLiGen, conligen.org). At Dalhousie, they coordinated the phenotypic characterization of the sample and contributed the largest proportion of the 2600 patients studied. ConLiGen found an association of lithium response with two so-called large non-coding RNAs on chromosome 21. Such RNAs are involved in regulating the function of networks of genes. John Kelsoe's group in San Diego has replicated this finding and the Chair has now submitted the joint paper reporting the results.

The genetic sample continues growing and today

includes more than 1550 DNA samples and 1100 lymphoblast cell lines. These are available for detailed genetic analyses and for studies of cellular phenotypes of bipolar disorder.

A major limitation of neurobiological research in psychiatry until recently has been that researchers were unable to study living nerve cells of their patients. This is now changing thanks to new stem cell technologies. In collaboration with the Sanford-Burham Institute, the team has obtained neurons derived from stem cells produced from white blood cells. This will allow them to investigate neuronal changes in groups of patients with well-defined clinical characteristics, such as response to treatment or differential risk of suicide. In the future, such cells may provide a model for screening new treatments as well.

The ultimate goal of these studies is the development of individualized treatment protocols. One important step in this process is to combine the molecular genetic data with clinical information. Currently, Dr. Alda and his team are in the middle of studying clinical predictors of lithium response in more than 2,200 subjects. The findings will be possible to validate in a prospective study of Pharmacogenomics of Bipolar Disorder (PGBD, http://www.lithium.ucsd.edu/) conducted in several US centres, in Norway and in Halifax and through their whole exome sequencing study of lithium responders and non-responders. Already, these collaborations are bearing fruit; they have been a part of a group reporting a finding of two new genes conferring susceptibility to bipolar disorder published in Nature Communications. They are also contributing to the efforts of the Psychiatric Genomics Consortium to conduct the largest genome-wide association study of bipolar disorder to date.

The family sample has been the basis for long-term studies of children of bipolar parents. In collaboration with Dr. Anne Duffy they have studied the clinical features and early trajectories of bipolar disorder from its prodromal stages. With Dr. Tomas Hajek they are conducting neuroimaging studies of brain development in this population. One of the most important results has been the discovery of structural brain changes associated with the genetic risk of bipolar disorder, a finding that has been independently replicated in

another sample in Europe. The brain imaging program has reached close to 300 MRI scans and made it possible to join the ENIGMA consortium to study brain changes in thousands of patients and examine the interplay between genetic factors and brain changes.

About 14 years ago Dr. Alda and his team started investigating the link between metabolic dysfunction and bipolar disorder. Dr. Martina Ruzickova, as a clinical research fellow, reported that bipolar patients who had diabetes had more chronic illness and worse outcome. This finding was recently confirmed by the work of Dr. Cindy Calkin. Current clinical practice does not call for screening for insulin resistance, yet this simple test could help greatly in routine care for bipolar disorder. The next step is to test whether reversing insulin resistance will improve the psychiatric outcomes of bipolar disorder. This will be done in a doubleblind trial funded by the Stanley Medical Research Institute by a grant to Dr. Calkin and colleagues. In parallel, Dr. Tomas Hajek has shown, for the first time, that metabolic dysfunction was associated with neurochemical and structural brain changes that had been previously attributed to bipolar disorder alone.

Ultimately, only advancement of knowledge will move the field forward and transform the practice of psychiatric medicine. To achieve it, we will need a combination of ingenuity, careful clinical observations, and long term vision.



The Sun Life Financial Chair in Adolescent Mental Health Dr. Stan Kutcher MD FRCPC

It's been a busy year for the Sun Life Financial Chair Adolescent Mental Health team, led by Dr. Stan Kutcher, as they continue to work towards improving mental health literacy locally, nationally and internationally. Over the past year many previously ongoing projects have progressed, and new initiatives in Canada and abroad have been implemented.

Earlier in 2014, Dr. Kutcher received a grant to create a pre-service teacher mental health literacy program in collaboration with faculties of education from the University of British Columbia, Western University and St. Francis Xavier University. When completed, this program will be made freely available to all Canadian faculties of education. The faculty of education at the University of British Columbia is currently evaluating a preliminary approach to this using *The Mental Health & High School Curriculum Guide*.

In January, the first Canadian study of its kind, demonstrating how mental health literacy for students can be achieved within schools, was published. It showed that embedding the Guide in an existing school curriculum is an effective, sustainable and inexpensive intervention that increases mental health literacy in secondary school students. In another study, similar findings were also demonstrated among teachers who taught the Guide. This peer-reviewed publication was identified as the most reviewed scientific paper (more than 2,000 accesses) amongst all publications in the BMC Psychiatry in January 2015.

Transitions, a publication that provides first-year students with information on topics including time management, relationships, sexual activity, mental illness, suicide and addictions, received very positive feedback from rural high school and Dalhousie University students. Survey respondents claimed that the resource improved their knowledge, attitudes and help-seeking efficacy on mental health and mental illness. Approximately 76 per cent of surveyed high school students discussed *Transitions* with someone else and 71 per cent thought all grade 12 students



should be given the resource before they leave high school. Among Dalhousie students who had read *Transitions*, 88 per cent of students found the resource to be helpful and 89 per cent would recommend it to someone they know. Over 60 per cent said they would suggest a friend seek help because of what they learned from *Transitions* and about 15 per cent said the same about themselves.

Additional research on the impact of *Transitions* in a post-secondary setting is planned and the team has recently received a grant to modify and adapt the resource for use in grade 12.

The fourth annual Academy in Mental Health was held in July 2014. Dr. Kutcher was joined by Drs. Alexa Bagnell, Sabina Abidi, John Leblanc, Suzanne Zinck,

Bianca Lauria-Horner, David Gardner and Andrea Murphy, along with many IWK educators and other healthcare professionals. The Academy welcomed 162 participants from Nova Scotia, New Brunswick, Prince Edward Island, Newfoundland, Ontario, Manitoba, British Columbia and the Northwest Territories. The Academy was assessed through program evaluations and received participant feedback. This reflected a group of satisfied participants who felt the sessions were appropriate, informative and would assist them in their careers.

The Dr. Paul Janssen Chair in Psychotic Disorders Dr. Phil Tibbo MD FRCPC

The Dr. Paul Janssen Chair in Psychotic Disorders, Dr. Phil Tibbo, continues in his mandate to lead, foster, and mentor research in psychosis and schizophrenia. Under his direction the department continues to see the breadth and depth of psychosis research expand, including not only the furthering of our understanding on the biological underpinnings of psychosis, but investigations of novel treatment options, the role of substance use in psychosis development, service delivery, and the translation of this knowledge to various stakeholders.

Over the last year, Dr. Tibbo and his research team have published three neuroimaging papers, with another recently submitted and two in preparation. He was asked to present his work regarding a novel approach to investigate white matter in early phase schizophrenia using proton magnetic resonance spectroscopy at the International Congress on Schizophrenia Research. Investigating the connections of the brain (via white matter) in schizophrenia, rather than separate areas of the brain, has helped further our understanding of psychosis. These papers have

also been examining the role of substance use at the early phase of psychosis, including methamphetamine, cocaine and cannabis.

A particular focus of the Chair's recent research has been on the effects of cannabis on the developing adolescent brain. Last year he was asked to present and partake in a knowledge sharing initiative with the Canadian Centre on Substance Abuse, as well as being invited to a round table discussion with the Federal Minister of Health on cannabis use in adolescence. The Chair's radio, newspaper and TV spots in the last year have helped communicate the research in this area of work. Last year Dr. Tibbo was also invited to write a guest editorial (Chronical of Neurology and Psychiatry) and an ethics paper (Clinical Pharmacology and Therapeutics) on cannabis and the maturing brain. Dr. Tibbo's team will continue to work in this area, as it is a priority research and clinical need.

The Janssen Chair continues to support, under the leadership of Ms. Margie Crown, the *Because Your Mind Matters* project (beacuseyourmindmatters.ca). This

excellent product aims to promote early help-seeking and reduce delays in getting appropriate treatment for psychosis by targeting first year University/ College students (18-19 yrs old) who are making the transition to postsecondary education. Over the last year this project has reached over 800 students, with presentation of the material to Dalhousie University, Kings College, Saint Mary's University, and Mount Saint Vincent University. The website has over 8000 hits per video and the feedback received by students and faculty remain resoundingly positive. This project will continue into the next year.

Dr. Tibbo has become a board member of the national Canadian Consortium for Early Intervention in Psychosis (CCEIP) which has advocacy, training, service delivery and research arms. Projects involving Dr Tibbo include the development of a relapse prediction tool for clinicians and family members, a novel tool for monitoring side effects of medication, the role of clozapine in early phase psychosis, and defining clinical effectiveness. This group has been researching service delivery models in Canada and has presented this work at the CPA and the World Psychiatric Association meetings in 2014, with a subsequent paper accepted to the Canadian Journal of Psychiatry. Dr. Tibbo has also chaired, with CCEIP members and in collaboration with the CPA and Mylen and Associates (a medical education company), a unique CME Section 3 program for physicians that focuses on maximizing positive outcomes for early phase psychosis patients. This has had a successful early roll out across the country.

The Janssen Chair also keeps busy fulfilling his mandate as a board member of the Schizophrenia Society of Canada, Chair of the Schizophrenia Society of Canada Foundation, member of the editorial board of the



Canadian Journal of Psychiatry, member of the CPA Research Committee, and more locally as Director of the Nova Scotia Early Psychosis Program, Co-Chair of Quality Council and Co-Chair of the Psychosis Pathway Redesign project.

Canada Research Chair in Early Intervention Dr. Rudolf Uher MD PhD MRCPsych

One in twenty Canadians are affected by severe mental illness, such as schizophrenia, bipolar disorder or severe recurrent depression. These conditions often develop in adolescence or in young adulthood and disable most affected individuals for life. Dr Uher and his colleagues at Dalhousie University are testing new ways of preventing mental illness in youth. They are working in partnership with families in Nova Scotia. More than 200 youth and their parents are taking part in the Families Overcoming Risks and Building Opportunities for Well-being (FORBOW) study. Dr Uher and his colleagues assess each young participant every year to track their developmental trajectories and identify early signs of problems that may still be reparable. The Skills for Wellness (SWELL) intervention teaches young people to understand their emotions, make decisions and solve problems. "We believe that mental health is a skill to be learned," says Dr Uher, "and if we learn it early, it can make a difference that grows with us. The few sessions with our psychologist can make the difference between spending your life in the driver seat and flailing from the rear." FORBOW and SWELL started in 2013 and 2014 thanks to investment from the Canada Research Chair Program, Canadian Institutes for Health Research, Nova Scotia Health Research Foundation and the Canadian Foundation for Innovation. It will take at least 10 years to find out what really works in helping young people stay healthy. Dr Uher believes this will be worth the wait. If we take the 'early' in early intervention seriously, it will always be a long-term effort. If we can prevent two cases of severe mental illness, the savings to the health system and provincial economy will pay for the entire program. In the meantime, Dr Uher and his team are busy improving the prediction of risk and resilience and measuring aspects of brain development that may help them decide what will work for whom. In 2015, the FORBOW team have started to measure brain development using a new magnetic scanner and collecting saliva samples that will allow them to carry out genetic analyses. This is another investment in the future. Today, we only go by symptoms and we deal with the problems as they come. In the future, with the

right combination of history, mental state assessment, genetic tests and brain images, we may be able to predict who is at risk and what is needed to prevent adverse outcomes in an individual case.

For more information, see www.forbow.org



Education Director: Dr. Margaret Rajda MD FRCPC ABSM

The 2014/2015 academic year marked the first full year for Dr. Margaret Rajda as the Director of Education. The past year also saw Dr. Mark Bosma assume the role of Director of Postgraduate Education, Dr. Sherry James take on the role as Associate Director of Postgraduate Education, and Dr. Joanne MacDonald begin as the Humanities Coordinator. In New Brunswick, Dr. Laurie Potter was responsible for education activities there until she left the department in November 2014. We wish her well in her new position in Ontario. New Brunswick faculty members Drs. Emily Maxan and Tunde Apantaku-Olajide assumed the roles of Director of Undergraduate Education and Director of Postgraduate Education respectively.

In 2014/2015 the education section began a strategic planning process aimed at identifying learning needs of faculty and enhancing faculty motivations to participate in an academic capacity in the department. Results will be published at a later date.

As mentioned in the *Our Mission Statement in Action* section, we have now begun offering a Royal College of Physicians and Surgeons accredited subspecialty program in geriatric psychiatry. In addition to this, we continue to offer accredited subspecialty training in child and adolescent psychiatry, along with various other fellowships.

We had excellent results from our 2015 CaRMS recruiting with a record number of Dalhousie applicants and recruits for our postgraduate program. The new residents will begin training on July 1.

The department is working towards recognition of the outstanding teaching provided by our faculty. A new award, 'Educator of the Year,' was established and will be awarded for the first time at the June 2015 graduation ceremony.

Education Section

The Dalhousie Department of Psychiatry offers undergraduate, postgraduate and continuing education in psychiatry within the Faculty of Medicine. The five-year residency program trains the next generation of psychiatrists with help from over 100 faculty members serving the child and adolescent, adult and senior populations.

Undergraduate Education Director: Dr. Cheryl Murphy MD FRCPC

The psychiatry undergraduate program is designed to provide high quality education in psychiatry to Dalhousie University medical students throughout the four years of their training. The faculty participates in a variety of educational experiences including acting as case-based or clinical skills tutors in the first and second year core curriculum, clinical supervisors for core or elective students and facilitating didactic seminars.

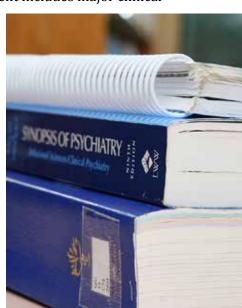
PRE-CLERKSHIP (YEAR 1 AND 2)

In the second year three weeks are focused on psychiatry in the Neurosciences Unit. Students work

Dr. Cheryl Murph

through six cases primarily focused on mood, anxiety and psychosis, supplemented by two to three lectures per week. Lecture content includes major clinical

conditions as well as substance abuse and personality disorders. The Skilled Clinician sessions. in the second year, provide opportunities for students to learn about and practice psychiatric interviewing skills. Students in both first and second year also have a half-day clinical elective that they can choose to spend in psychiatry.



IMU LINK PROGRAM

Each year, Dalhousie University accepts a small number of students from the International Medical University (IMU) in Malaysia, to complete the final two years of their undergraduate medical education at Dalhousie. Prior to beginning the clerkship year at Dalhousie University, the students are required to participate in and complete the Link program that provides them with the core clinical skills and practice sessions as taught throughout the first and second year medical program at Dalhousie. This program is designed to help the students to practice history and physical examinations, diagnosis and case presentations and to become familiar with the hospital and health care systems in which they will be working. The ultimate goal of the Link program is to ensure that the IMU students are entering clerkship at an equivalent level to that of Dalhousie students. The Department of Psychiatry received six IMUs and two IMGs into the Link Program in 2014/15.



CLERKSHIP (YEAR 3 AND 4)

During the third year of Medical School, students enter a two year clerkship. In the first year, students spend six weeks in core clinical psychiatry rotations and in the second year, students choose elective experiences which range from two to four weeks in duration.

During the first year of clerkship, our Halifax faculty and residents, deliver the core curriculum of 18 seminars to our clerks in Halifax and to distant sites via videoconferencing. Saint John delivers an equivalent curriculum to their clerks on-site. In addition, the department offers three online self-study modules, which have been developed by our faculty and residents, and two recorded videos developed by faculty.

With Dalhousie Faculty of Medicine's expanding distributed education model, the Department of Psychiatry has welcomed Amherst, in the Cumberland Health Authority, as its newest clerkship rotation site. Dalhousie Medicine New Brunswick (DMNB) also welcomed Upper River Valley Hospital in Waterville, NB as the newest Longitudinal Integrated Clerkship (LIC) site. The department now currently offers clinical clerkship rotations in Halifax, Amherst, Charlottetown, Truro, Sydney, Windsor, Moncton, Fredericton, Saint John, Miramichi and Waterville.

PSYCHIATRY STUDENT INTEREST GROUP

The medical student Psychiatry Interest Group is in its fourth year and is currently led by second-year medical students Amy Gough, Holly Greer, and Laura Schep. The group continues to work towards its mandate of informing medical students about psychiatry and mental health, in efforts to combat stigma and encourage interest in the field. In this pursuit, the group has received a tremendous amount of support from psychiatry residents and attending physicians. Members have been actively involved in numerous activities including a "Lifestyles in Medicine" night, a psychiatry based movie night, and shadowing with the Mental Health Mobile Crisis Team.

The Department of Psychiatry sponsors travel for a medical student to attend the annual Psychiatry Student Interest Group Network (PsychSIGN) Conference held in conjunction with the APA. This year, Amy Gough was chosen to attend the conference.

Postgraduate Education Director: Dr. Mark Bosma MD FRCPC

POSTGRADUATE EDUCATION FACULTY CHANGES

The Postgraduate Education section saw several changes occur this year. After nine years as program director, Dr. Margaret Rajda stepped down to focus on her new role as Director of Education. Dr. Mark Bosma became the Director of Postgraduate Education on July 1, 2014, and Dr. Sherry James subsequently accepted the position of Associate Postgraduate Director. Several changes also occurred on the Postgraduate Committee with long-term members Drs. Ed Gordon and Curt Peters stepping down, and new members Drs. Siobhan Bergin, Ezio Dini, and Sameh Hassan being welcomed.

CaRMS MATCHES:

Laura Downing Memorial University
Matthew Havenga Dalhousie University
Melissa Lahti Dalhousie University
Alexandra Manning Dalhousie University
Katherine Radchuck Dalhousie University
Crystal Zhou University of Alberta
Nadia Hassanali, Trinity College Dublin School of
Medicine

In addition to the new residents entering PGY-1, we are excited to welcome two new residents into PGY-2. Dr.

Joshua Green officially joined our program on April 8, 2015 in transfer from Internal Medicine, and will be starting PGY-2 on July 1, 2015. Joining him will be Dr. Kerry Murray, a family physician from the military with strong ties to Nova Scotia.

2015 END OF YEAR AWARDS

Teacher of the Year: Dr . David Lovas Above and Beyond: Ms. Sarah Krieger-Frost and Ms. Heather Rea

Dr. Herbert Orlik Child & Adolescent Psychiatry Resident Award: Dr Sarah Fancy

Clerks' Choice Award: Dr Marie-Claire Bourque Alexander H. Leighton Resident of the Year: Drs. Alice Aylott and Marie-Claire Bourque

Educator of the Year Award: Dr. Lukas Propper Horizon Health Network SJ Zone PGY1 Resident of the Year: Dr. Abraham Nunes

Dr. Charles J. David Prize in Psychiatry: Dr. Celia Robichaud

Dr. W.O. McCormick Award: Drs. Marie-Clarie Bourque and Vanessa Thoo

Loonie Awards: Drs. Rachel Bell and Anita Hickey
Dr. Robert & Stella Weil Fund in Psychiatry: Dr. Michael
Butterfield





RESIDENTS 2014-2015 ACADEMIC YEAR

PGY-1: Omar Alwatban, Paula Barker, Abraham Nunes, Justin Paradis, Joshua Smalley, Michael Wong, Olga Yashchuk

PGY-2: Jill Boyd, Mandy Emms, Vhari James, Lesley Kirkpatrick, Ian MacKay, Jenni Ojiegbe, Celia Robichaud, Ian Sarty, Kathleen Singh

PGY-3: Rose Clarkson, Ashley Crane, Sarah Fancy, Terry McCarvill, Ahmed Saleh, Michal Sapieha, Daniel Toguri

PGY-4: Alice Aylott, Amgad Barsoum, Marie Claire Bourque, Michael Butterfield, Anita Hickey, Liisa Johnston, Mirka Kolajova, Maghul Malik, Saima Nadeem and Jonathan Wan

PGY-5: Rachel Bell, Jacob Cookey, Kristen Holm and Vanessa Thoo

TEACHING

Several new teaching initiatives have been introduced to the program this year, including a neuroscience seminar series, and revisions to the resident Journal Club. In September 2014, the first Neurosciences in Psychiatry seminar was held for all psychiatry residents. Over the last year, Drs. Jacob Cookey, Michael Butterfield and David Lovas have worked to develop these seminars based on the need for more clinical neuroscience in the curriculum. To develop further opportunities for senior residents to gain experience teaching other residents, these seminars are facilitated by PGY-4 residents, with a faculty mentor present for guidance and support. The seminars were developed to involve active learning processes by participants, and incorporate various modalities in the dissemination of knowledge. The active learning process incorporates aspects of problem-based learning, case-based learning, and role-playing patient interactions to drive the learning process. These seminars are novel as they are focused on the Research Domain Criteria that was recently put forth by the National Institute of Mental Health as a new way of classifying psychopathology based on observable behavioural and neurobiological measures. The first seminar was focused on the neuroscience behind substance use disorders and

was facilitated by Drs. Cookey and Butterfield. This seminar incorporated the presentation of a case, group learning processes, presentation of recently acquired knowledge, a video presentation, role-playing talking to patients about the neurobiology of substance use disorders and finally incorporating this knowledge into relevant treatment strategies. Other seminars covered topics included Alzheimer's Disease, Major Depressive Disorder and Schizophrenia.

Under the guidance of Dr. Rudolf Uher, the resident Journal Club format was revised this past year. Once a month from September 2014 to June 2015, residents participated in a two-hour journal club facilitated by a resident and faculty mentor. Key papers from the literature on core topics in psychiatry were chosen, with a focus on improving resident critical appraisal skills. The new format has been well received, and will continue into the new academic year.

A strong academic curriculum has always been a focus of the residency program. To continue this tradition, a postgraduate sub-committee has been working on curriculum renewal. This has involved review of current curriculum components, with input from junior and senior residents, to refresh and reorganize the academic day schedule for the next academic year.



RESIDENT RETREAT

In September 2014 the residents held a retreat at the Atlantica Resort at Oak Island. The retreat focused on wellness activities, with residents participating in kayaking and Segway tours of the resort. A seminar on practice management, including how to manage a physician corporation, was delivered by an accountant and lawyer. The event was well attended by residents, and will be held again in September 2015 at the Whitepoint Resort.

Subspecialty and Fellowship Program Director: Dr. Sherry James MEd MD FRCPC

What's in a name? Some are still wondering what the difference is between a fellow and a subspecialty resident.

FELLOWSHIPS IN PSYCHIATRY

Fellowship training is an additional period of training, usually 12 months, following a completed residency program, designed to provide a trainee the opportunity to develop expert clinical and/or research skills in a given subspecialty of psychiatry. Dalhousie currently offers several fellowship opportunities in a range of subspecialty areas. Faculty are often interested in developing new fellowships in additional areas of psychiatry, which is exciting for graduating residents who may be seeking additional training.

Dr. Malika Robichaud is expected to complete her fellowship in group psychotherapy in July 2015. She has been training with Dr. Jackie Kinley and the Mental Health Day Treatment Program.

SUBSPECIALTY RESIDENCY TRAINING IN PSYCHIATRY

Subspecialty training is a Royal College-accredited program wherein the resident follows a course of training to develop expert clinical and research skills in a Royal College-recognized subspecialty of psychiatry. Dalhousie currently offers subspecialty training in child and adolescent psychiatry, and in the newly accredited geriatric psychiatry subspecialty. The child and adolescent program will have its first graduate, Dr. Ferid Fathalli, this July, and at the same time, the geriatric program is ready to take its first trainee. Although none are scheduled to start in July 2015, we hope to have trainees in both programs next year.

DR. MALIKA ROBICHAUD

My goals for the fellowship were linked to a number of skills and competencies. First. I wanted to become expert in group psychotherapy from a theoretical and clinical point of view. After being an active member of this integrated multidisciplinary team, I feel prepared to design programs, teach and deliver effective group psychotherapy in various settings. I am able to establish effective working relationships in a group setting, develop and implement integrated pharmacological and psychotherapeutic treatment plans, and tailor need-specific

services for marginalized or remote populations. Second. I have learned to become an independent psychotherapy researcher. I have designed a pilot study looking at FcMRI findings associated with the process of grieving. Thirdly, having had the pleasure of working closely with Dr. Kinley while she teaches the residents. I have had the opportunity to become proficient at both teaching and supervising psychotherapy. I have also had an opportunity to be involved with the development of the online curriculum. Finally, the skills in group program

administration that I have developed during this fellowship will be easily translated to a variety of clinical settings, enabling me to set up a multidisciplinary team and efficiently coordinate our work together, offering patients quality care in a timely and cost-effective manner. They will also equip me to contribute effectively to psychiatry department administrative roles. In summary, my experience has allowed me to become proficient in the effective use. practice, management and research of group psychotherapy.



Continuing Education Director: Dr. Heather Milliken MD FRCPC CSPO

OVERVIEW

In the fall of 2014, Dr. Heather Milliken developed and conducted an online survey of the CE/CPD (continuing education/continuing professional development) learning needs of department faculty and Addictions and Mental Health Program clinicians. Over 149 participants from a range of disciplines completed the survey. A mixed methods analysis (quantitative and qualitative analysis) of the data was performed and the wealth of information obtained will be very valuable in planning needs based, accredited CE/CPD activities over the next several years.

Chaired by Dr. Heather Milliken, associate professor and director of continuing education, the joint multidisciplinary Department of Psychiatry/CDHA Addictions and Mental Health Program Continuing Professional Development Committee organized a very full and successful schedule of CME/CPD activities during the past academic year. Regularly scheduled events included University Rounds, Clinical Academic Rounds, Child and Adolescent Psychiatry Academic Rounds, Inter-professional Education Sessions, Psychiatry Debates, Sleep Rounds and monthly Seniors Mental Health Education Sessions, as well as a number of workshops. The year ended on a very positive note with the first ever Neurosciences Jeopardy with Drs. Cookey, Butterfield and Lovas. All educational events sponsored by the Department of Psychiatry are accredited for RCPSC MOC Section 1 group learning activity credits.

During the past year, videoconferencing of educational activities continued to up to 25 sites throughout Nova Scotia and to Saint John, Fredericton and Moncton, New Brunswick.

CONFERENCES

The XXVI W.O. McCormick Academic Day was held on April 24 on the theme, "Emergency Psychiatry" and was very successful with outstanding presentations from all of our invited speakers and a sold-out house of 225 individuals from a wide range of disciplines attending. Named in honour of its founder, the late Dr. W.O. McCormick, Academic Day remains the department's largest annual conference and this year it was rated by



many participants as "the best ever."

In the morning, keynote speaker Dr. Peter Zed, associate professor and associate dean, Practice Innovation, Faculty of Pharmaceutical Services and associate member, Department of Emergency Medicine, Faculty of Medicine, University of British Columbia, gave a very lively and thought provoking presentation on "When does an Adverse Drug Event become an Emergency." Using a number of case studies, Dr. Zed highlighted the significant impact of adverse drug events on the health care system and discussed strategies that could be implemented to reduce their occurrence. In the presentation "Toxic Effects of Illicit Drug Use," our afternoon keynote speaker, Dr. Sophie Gosselin, associate professor and director of the McGill University Health Centre Medical Toxicology Service, emergency medicine specialist and toxicologist for the Quebec and Alberta Poison Control Centres, described the potentially dangerous consequences of abuse of illicit drugs as well as abuse of prescription medications such as opiates.

An innovative addition to the conference program this year was "A Dialogue about a Family Member's Experience with Mental Health Emergency Services" with Patricia Cosgrove MSW, Nova Scotia Early Psychosis Program (NSEPP) family support worker and Peter C., NSEPP family member. Using an



informal interview format this presentation focused on the challenges faced by families in dealing with psychiatric emergencies. A lively discussion with the audience regarding the strengths and weaknesses of current psychiatric emergency services followed the presentation.

Other excellent presentations were given by department members Drs. Tom MacKay, Andrew Harris, Suzanne Zinck and Aileen Brunet.

To view AV recordings of all of the XXVI W.O. McCormick Academic Day presentations please visit our website at www.psych.dal.ca.

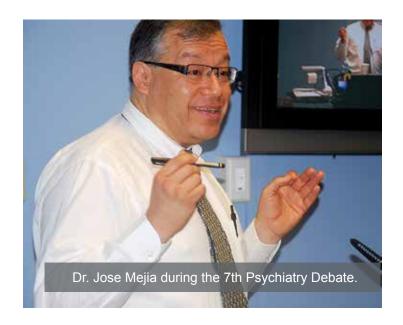
PSYCHIATRY DEBATES

The Psychiatry Debates continue to be one of the most popular continuing education activities and through an initiative of the CPA Council on Psychiatric Continuing Education (COPCE) chaired by Dr. Heather Milliken, six other Departments of Psychiatry across Canada have now introduced Psychiatry Debates into their Continuing Education schedule. The 7th Psychiatry Debate was held on Oct. 8, 2014. Arguing in favour of the motion "Those found NCR should never be free" were Drs. Aileen Brunet and Ahmed Saleh. Opposed were Drs. Jose Mejia and Anita Hickey. Although a pre-debate poll of the audience indicated a majority were opposed to the motion, thanks to the persuasive arguments of Drs. Brunet and Saleh, at the end of the debate they were declared the winners with the majority of the audience now voting in favour of the motion.

Videos of all of the Psychiatry Debates can be found on the Dalhousie Psychiatry Debates blogsite at https://blogs.dal.ca/psychdebates/

R.O. JONES MEMORIAL LECTURE

Named in honour of the late Dr. Robert Orville Jones, who among his many achievements, founded the Dalhousie Department of Psychiatry in 1949 and was the charter president of the Canadian Psychiatric Association, the R.O. Jones Memorial Lecture is held annually in conjunction with the Atlantic Provinces





Psychiatric Association annual conference.

This year's lecture was held on June 10, 2015 with invited guest speaker Dr. Anne S. Bassett, professor of psychiatry, University of Toronto and Canada Research Chair in Schizophrenia Genetics and Genomic Disorders presenting on the topic "Clinical Application of Genetics in Psychiatry."

UNIVERSITY ROUNDS

This year nationally and internationally recognized speakers presented on a diverse range of topics at the monthly University Rounds. As well a number of our University Rounds speakers (Drs. Bridge, Addington, Kisely and Arsenault) gave additional one-hour lectures to all psychiatry residents.

Date	Speaker	Topic
Sept. 17, 2014	Dr. Jeff Bridge, Associate Professor Ohio State University College of Medicine and Nationwide Children's Hospital	"Youth Suicide Prevention: Focusing on Periods of High Risk"
Oct. 15, 2014	Dr. Jean Addington, Professor of Psychiatry University of Calgary, Alberta Centennial Mental Health Research Chair and Novartis Chair for Schizophrenia Research	"Youth at Clinical High Risk for Psychosis"
Nov. 19, 2014	Dr. Steve Kisely, Professor, University of Queensland and Adjunct Professor Departments of Psychiatry and Community Health and Epidemiology, Dalhousie University	"The Association Between Child Maltreatment and Adult Mental Health Problems: Evidence from a Large Prospective Cohort"
Dec. 17, 2014	Dr. Ian Manion, Clinical Professor, School of Psychology, University of Ottawa and Executive Director, Ontario Centre of Excellence for Child and Youth Mental Health	"Top Ten Topics on Child and Youth Mental Health"
Jan. 14, 2015	Dr. Wade Berrettini, University of Pennsylvania School of Medicine, Karl E. Rickels Professor of Psychiatry	"Neuronal DNA Variation and CNS Disorders"
Feb. 18, 2015	Dr. Louise Arsenault, Professor of Developmental Psychology, King's College London, The Institute of Psychiatry, Psychology and Neuroscience	"Adult Health Outcomes of Childhood Bullying Victimization: Evidence from a 5-Decade Longitudinal Birth Cohort"
April 15, 2015	Dr. Judith Davidson PhD, Clinical Psychologist and Sleep Researcher, Queen's University	"Taming the Restless Pillow with Cognitive Behavioural Therapy for Insomnia: (CBT-I)"
May 13, 2015	Dr. Scott Stuart, Professor of Psychiatry and Psychology, Departments of Psychiatry, Psychology and Obstetrics & Gynecology, University of Iowa	"Structuring Psychotherapy: Trust the Clinician and the Patient"
June 24, 2015	Dr. Ken Le Clair Professor and Chair of the Division of Geriatric Psychiatry, Queen's University and Co-Director of the Centre for Studies in Aging and Health, Providence Care	"Health Systems Transformation for the Geriatric Population: Moving from Models to What Matters"

WORKSHOPS

Two University Rounds speakers provided workshops to various faculty members and mental health clinicians. On April 16, Dr. Judith Davidson from Queen's University facilitated a workshop on "Cognitive Behaviour Therapy for Insomnia (CBT – I)" and on May 14 and 15 Dr. Scott Stuart from the University of Iowa conducted a two-day Level A Course on interpersonal psychotherapy. Both workshops were evaluated very highly by the participants.

Medical Humanities

Coordinator: Dr. Joanne MacDonald MD FRCPC

For eight years the Department of Psychiatry Humanities Program has been collaborating with the Dalhousie Medical Humanities Program, as well as sponsoring activities of our own. On Jan. 1, 2015, Dr. Joanne MacDonald assumed the role of humanities coordinator. Her expertise and knowledge will be a great asset to the Humanities Program.

STUDENT WRITING COMPETITION

The fifth annual student writing competition wrapped up in October 2014. Each year Canadian medical students and residents are invited to submit reflective essays, poetry or short fiction that explore the intersection of mental health and the humanities. This year the winner in the resident category was Susan McNair, a resident at McMaster University. Her narrative, 'Sitting at 90 Degrees,' explores the experience of treating a patient suffering from psychosis.

In medical student category, Benjamin Huang, a student at the University of British Columbia, was the winner. His poem 'Closure,' is about suicide and the inability to find peace when a life ends in that manner. To read the winning entries, please visit http://medicine.dal.ca/departments/department-sites/psychiatry/education/medical-humanities/writing-competition.html.



Research

Director: Dr. Benjamin Rusak PhD FRSC

2014 SUMMER STUDENTSHIPS

Ms. Jasmyn Cunningham (Supervisor: Dr. Ben Rusak)

Ms. Jasmyn Cunningham spent the summer of 2014 working with Drs. Benjamin Rusak and Gail Eskes, after having spent the previous year working in the chronobiology laboratory. She is a third year neuroscience student at Dalhousie, and will be completing the honours program in the 2015-2016 school year.

During the time of her studentship, Ms. Cunningham began her research project investigating the effects of sleep restriction on components of attention in healthy young women. She was able to recruit 16 potential participants, and had gathered data from four by the end of the summer. Ms. Cunningham presented interim results during her poster presentation at the Dalhousie Psychiatry Research Day, the Brain Repair Center Research Day, and the Crossroads Interdisciplinary Health Research Conference.

The project is still ongoing and Ms. Cunningham

was awarded an NSERC Undergraduate Summer Research Fellowship, as well as a RADIANT Summer Undergraduate Research Fellowship in order to continue her work in the summer of 2015. This research will also be the subject of her honours thesis.

Ms. Rachel Frank (Supervisor: Dr. Gail Eskes)

In the summer of 2013, Ms. Rachel Frank worked as a research assistant under Dr. Daniel Anderson at the University of Massachusetts, Amherst, studying the effects of television on the cognitive development of young children. She graduated from Smith College in 2014 with a BA in psychology. In the summer of 2014, Ms. Frank came to Dalhousie University to train in Dr. Gail Eskes' Cognitive Health and Recovery Research Laboratory.

During her studentship, Ms. Frank worked on the development of a game-like software program meant to examine the endogenous (voluntary, goal-driven) and exogenous (automatic) mechanisms for control of selective visual attention.

Research Section

Research is one of the core functions of the Department of Psychiatry. Activities span a wide variety of topics and involve basic research, clinical research, clinical trials and population health. Much of the research involves collaborations with members of other clinical and basic science departments within the Dalhousie Faculty of Medicine, in the affiliated hospitals and in other organizations.

Mr. Davey Chafe (Supervisor: Dr. Joel Town)

Mr. Davey Chafe began volunteering with the Centre for Emotions and Health in October 2013. He went on to complete his studentship during the summer of 2014 with the Centre after graduating from the Honours psychology program at Saint Mary's University. During his studentship, under the supervision of Dr. Joel Town, Mr. Chafe was involved with a study investigating the relationship between in-session processes and therapy outcomes from a clinical trial of psychotherapy for treatment refractory depression. Mr. Chafe is still working with the Centre for Emotions and Health on this project, and remains actively involved with Dr. Town on various other studies.

Ceire Storey (Supervisor: Dr. Kim Good)

After graduating from Dalhousie University with a BSc in neuroscience, Ms. Ceire Storey continued her research with Dr. Kim Good. Ms. Storey volunteered in Dr. Good's lab during her final year of studies and, as a result of her studentship, was asked to stay on as a full time employee.

Ms. Storey spent the summer working on Dr. Good's project "Understanding reward motivation and expectancy in early phase psychosis smokers." Her responsibilities included drafting ethics amendments, participant recruitment, data entry, interviewing participants regarding their smoking habits, and accompanying participants to their MRI scans, which were used to examine their neurological responses to smoking-related cues. Ms. Storey hopes to pursue a career in medicine.

Ms. Kathleen Cairns (Supervisor: Dr. Kathleen Pajer)

After completing her second year of a BSc in neuroscience, Kathleen spent the summer working with Dr. Kathleen Pajer on her research project, "Diurnal HPA Axis Activity During Pregnancy and Postpartum Depression Symptoms." This project examined the relationship between hypothalamic-pituitary-adrenal axis reactivity during pregnancy and subsequent postpartum depression symptoms. Prior to this project, Ms. Cairns volunteered for one year with Dr. Pajer's Stress in Moms and Babies study.













SPECIAL EVENTS

Research Day

The 24th Annual Psychiatry Research Day was held October 24 at the Lord Nelson Hotel with nearly 100 faculty, students, and staff in attendance. The keynote presentation was an enlightening talk by Dr. Darryle Schoepp, Vice President and Therapeutic Area Head, Merck and Company Inc., titled "Current challenges in neuroscience therapeutics: What has changed and where are we?" This year we were welcomed by Dr. Peter Vaughan, Deputy Minister of the Department of Health and Wellness, who spoke about the critical role research plays in healthcare. "More can be done," he said, "and we will be doing more. I encourage you to continue the important work you do."

Thank you to our co-chairs, Drs. Kim Good and Sherry Stewart, and members of the planning committee Dr. George Robertson, Ms. Jennifer Brown, Ms. Janet Bardon and Ms. Megan Bellefontaine, for planning another successful event.

Research Day prizes were awarded to the following:

Best Undergraduate Presentation: Ms. Sarah Drost

Best Graduate Presentation: Ms. Jamie-Lee Collins and

Mr. Marcel Peloquin

Best Resident Presentation: Dr. Kristen Holm

Best Junior Faculty Presentation: Dr. Sean MacKinnon

Best Research Staff Presentation: Ms. Jennifer Parker

Café Scientifique

The department hosted a Café Scientifique at the Royal Bank Theatre on the evening of October 23, called "New Approaches in Treatment: Psychotic Disorders and Schizophrenia." The event was moderated by Dr. Maria Alexiadis and featured presentations by Drs. Sabina Abidi, Phil Tibbo, Zenovia Ursuliak and the Research Day keynote speaker Dr. Darryle Schoepp. Following the presentations there was a lively question-and-answer session among members of the audience and the panel. There were 82 health care professionals, students, researchers and members of the public in attendance.

Brain imaging in bipolar disorders

The introduction of brain imaging to psychiatry has been compared to the introduction of the microscope to microbiology. Yet, neuroimaging has not yet had a major impact on the everyday practice of clinical psychiatry. This may be related to methodological limitations of brain imaging, or even more importantly, to lack of relevant clinical information in neuroimaging studies. Without high quality clinical descriptions, we may not be able to correctly interpret the phenomena we observe through the lens of MRI scanners. Consequently, the potential of neuroimaging to unravel the biology of psychiatric disorders and to yield practical diagnostic and prognostic tools may not be fully realized.

Dalhousie University is a unique environment where it is possible to collect high quality, prospective clinical data and combine them with cutting-edge neuroimaging technology. Dr. Tomas Hajek came to Dalhousie in 2003, not because of local neuroimaging facilities, which at the time were in fact rather limited, but because of the high quality clinical/research program established and run by Dr. Alda at the Mood Disorders Clinic. This service provides consultations and follow-up to patients with primary mood disorder (bipolar disorder (BD), unipolar depression) and runs a specialized clinic for people treated with lithium (Li). Most of the clients who attend the clinic contribute clinical information to

RESEARCH FEATURE

Dr. Tomas Hajek

His research focuses on studying clinical variables associated with brain changes in bipolar disorders, including genetic risk, treatment with Lithium, illness burden (numbers of episodes, duration of illness) and most recently diabetes/prediabetes. He is also interested in the clinical evolution of bipolar disorders.

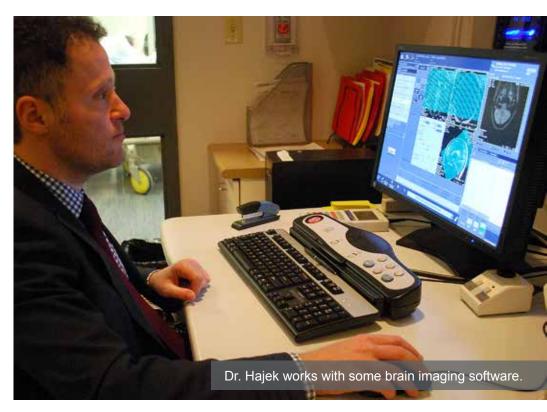
the Bipolar Registry. The Bipolar Registry, established by Dr. Alda, is a large genetic database of families affected with bipolar disorders. This is a treasure trove of data, which is hard to find elsewhere in North America.

Dr. Hajek's first project at Dalhousie was to acquire neuroimaging data from offspring of bipolar parents, so-called genetic highrisk design. "It is generally thought that acquiring such data is very difficult. However, that was not the case here," says Dr. Hajek. Because of the well-established collaboration with families, the researchers were able to recruit a large sample of offspring of bipolar parents in a relatively short period of time. They were among the first to publish brain volumetric and



magnetic resonance spectroscopy data from subjects at genetic risk for bipolar disorders. These findings demonstrated, that many of the neurochemical or structural brain changes previously reported in adults with BD are absent in participants at the early stages of the illness. This research also uncovered the first replicated neuroanatomical signature of familial predisposition for BD. This finding could aid in early identification of subjects at risk for the illness even before they develop any symptoms. The results were featured on the cover page of Biological Psychiatry, one of the most prestigious journals in the field. Dr. Hajek and his team continue with this line of research, which has set the stage and created questions for subsequent studies. For example, if many of the brain changes in BD are not pre-existing, perhaps it may be possible to prevent their development?

To this goal, the team started studying effects of medications, in particular Li, on the brain. In collaboration with the International Group for Study of Li Treated Patients (IGSLI), they were able to provide support for the neuroprotective effects of Li even in participants with an average of 27 years of highly recurrent bipolar illness. They also showed for the first time that the positive association between long-term Li treatment and hippocampal volumes was independent of treatment response and occurred even in participants with episodes while on Li. This suggests that the positive effects of Li on the brain could perhaps be used to treat



neurodegenerative disorders even in patients who do not have BD.

In addition, Dr. Hajek and his team have attempted to address one of the most interesting and most neglected questions in psychiatric neuroimaging. Although brain alterations are frequently reported in BD, they do not occur in all patients and are thus unlikely to be an inherent feature of BD. Why is it that only some patients show these alterations? Or in other words, which clinical variables contribute to these changes? In collaboration with Drs. Cynthia Calkin and Martin Alda, they were able to show for the first time that only BD participants with comorbid diabetes or insulin resistance showed brain alterations, whereas the brains of BD patients without these comorbid conditions were comparable to controls. This suggests that diabetes mellitus or insulin resistance may be risk factors for brain changes in bipolar disorders. The findings

are of concern as people with BD have an increased risk of diabetes and vet often receive suboptimal diabetes care. On a more positive note, perhaps treatment and close monitoring of diabetes could alleviate some of the neuroimaging alterations and adverse psychiatric outcomes found in participants with both of these conditions.

Currently the brain imaging program is moving into a prospective phase, where they are re-scanning patients after a number of years. This was again made easy by the fact that Dr. Hajek and colleagues continue to follow most of the research participants clinically. This is truly a team effort, with excellent research associates, students, computer scientists, data analysts, and even an astronomer, collaborating. The team is fortunate to benefit from volunteering efforts by the research participants, who are willing to come for scanning on the weekends, drive from other provinces and even show up in

blizzard conditions. This really is a close collaboration between patients, families, clinicians, researchers and experts.

Through this combined effort the team has collected neuroimaging data from close to 300 subjects and has published over 28 neuroimaging papers. Although the Clinical Research Scholarship Program at Dalhousie University was seminal in starting this clinical program, the research has since attracted external funding from the Brain and Behaviour Research Foundation (NARSAD), both junior and independent investigator awards, the Nova Scotia Health Research Foundation, and CIHR.

Dr. Hajek is very pleased with how things have progressed. "I am thrilled that our research is attracting international interest," he says. "We are closely collaborating

with Charles University in Prague, with colleagues in Germany, Poland, Austria, and recently, we were invited to join the ENIGMA consortium, which brings together neuroimaging data from 20 cohorts from around the world." This will give them access to a large sample (MRI data from 1,747 cases and 2,615 healthy controls) for validations and extension of their original findings. In addition, Dr. Hajek delivered rounds about the program and their results across Canada, in the United States (Harvard, Mount Sinai Hospital, UCSF), and in Europe (Cambridge University, Institute of Psychiatry, London, Charles University, Prague). The team regularly contributes to symposia at major conferences, including the Society of Biological Psychiatry, American College of Neuropsychopharmacology, Collegium Internationale

Neuropsychopharmacologicum, European Association of Psychiatry, World Congress of Biological Psychiatry, International Conference on Bipolar Disorders, International Society of Affective Disorders, and the American Academy of Child and Adolescent Psychiatry. Their work has also been featured in media around the world.

Ultimately, Dr. Hajek feels positive about his research. "The fact that my favorite research tool is of marginal clinical use in my clinical practice has always been a source of frustration, but also motivation for me. I am optimistic that the team effort of our group will help bridge the gap between bench and bedside and may allow us to better realize the potential of brain imaging and ultimately help our patients."

2014 DEPARTMENT OF PSYCHIATRY RESEARCH FUND GRANTS April 2014

- Dr. Jacquie Cohen "Treatment Experiences of Individuals with Borderline Personality Disorder."
- Dr. Heath Matheson (Dr. Shannon Johnson) "Electrophysiological investigation of emotion processing in Autism Spectrum Disorders (ASD)."
- Dr. Aaron Keshen "Efficacy of the ECHOs Approach for Patients with Eating Disorders and their Carers."
- Mr. Logan Nealis (Dr. Simon Sherry) "Biopsychosocial factors in perfectionism, stress, and depression."
- Dr. Kazue Semba "Analysis of circadian activity rhythms in a mouse model of schizophrenia."
- Dr. Ian Weaver "Role of ATRX in maintaining stress sensitivity and genome health in forebrain neurons."

October 2014

- Dr. Amanda Hudson (Dr. Sherry Stewart) "Examining mood, drinking motives, and alcohol use over the menstrual cycle."
- Dr. Patrick McGrath "Parents Preventing Alcohol Problems in Adolescents: An interactive, personalized, personality targeted, evidence based skills program for parents."
- Dr. George Robertson "Equepa: A novel therapeautic approach for stroke."
- Dr. David Whitehorn "The Experience of Mindfulness and Recovery: A Qualitative Study."

Global Psychiatry Director: Dr. Sonia Chehil MD FRCPC

Global Psychiatry at Dalhousie University works with partners to transition and advance mental health in the global community through innovative, sustainable and integrated solutions. Its mandate is organized under four pillars:

- Developing and Delivering Clinical Care
- Strengthening Research
- Developing and Delivering Education and Training
- Promoting Social Policy

This mandate is completed through a lens of social justice, innovation, integrated leadership while maintaining that health is the center of development in any situation.

NORTHWEST TERRITORIES PROJECT

Since 2012 the department has had an established partnership in the Northwest Territories with the Stanton Territorial Health Authority, the government of the NWT, and the Yellowknife Health and Social Services Authority (YHSSA) to provide services under a number of the pillars mentioned above. While the contract with NWT expired on March 31, 2015, we have been able to work under a number of the areas outlined in our mandate over the past year.

The NWT project is one of the newer contracts in which Global Psychiatry has provided direct clinical care. Several of the department's psychiatrists, Drs. Nick Delva, Curt Peters and Douglas Maynes, traveled to Yellowknife to work in the Yellowknife outpatient psychiatry clinic, the Stanton inpatient psychiatry unit,

Global Psychiatry

The Global Psychiatry section is a collective of health providers, administrators, individuals, researchers, and community members working together to promote mental health across the globe.

and to the more remote communities of Hay River and Fort Smith to work in the local health centers. Care was provided both on the ground in NWT, and through distance-based methods, including email, telephone, videoconferencing (telehealth), and remote access to the electronic medical record (EMR). The telehealth system had been non-functional for about a year, but came back on stream in the latter part of the summer of 2014.

While the majority of the clinical care provided involved general psychiatry assessments, several requests for assistance fell within the mandates of specialized services such as Seniors Mental Health and gender-based health issues. These were managed by Dr. Delva, who liaised with experts in the Dalhousie department and at Capital Health.

During each trip to Yellowknife and the travel clinics our psychiatrists were also able to spend some time at the Yellowknife clinic to lend assistance to the overworked psychiatric staff there. Dr. Pauweliena Laureijs, a Dalhousie graduate, is the only regular fulltime psychiatrist in the Northwest Territories. While most of the Global Psychiatry's clinical work has been









through the travel clinics or occasionally in Yellowknife, Dr. Doug Maynes answered a call in the late summer for a two-week locum at the 10-bed psychiatric inpatient unit at Stanton Territorial Health Authority. The unit functions primarily on locums from a number of different psychiatrists over the course of the year.

The NWT project aimed to improve the delivery of care to the residents of Yellowknife by developing an integrated collaborative stepped care model (ICSCM) for mental health in primary care in Yellowknife. Once piloted in Yellowknife, the plan was to roll it out to the remote communities serviced by Yellowknife Health and Social Services Authority, and potentially other regional authorities. A local team on the ground worked with both Drs. Arlene MacDougall and Bianca Horner to create a pathway (including a project charter, activities and timeline) for the development of a model. The model would clearly articulate the roles of the staff in a number of test sites as it pertained to identification of and screening individuals with potential mental health and addiction issues and outline the appropriate clinical care pathways. The pilot project was to involve a substantial education and training component to enhance the skill sets of those primary care and mental health staff involved. There was also an evaluation component focused on the diagnosis and treatment

of depression in adults. Establishing the project as a research study would have also created an opportunity for Global Psychiatry to fulfill another of its mandates, to strengthen research. Although little progress was made over the latter part of 2014, the first steps taken in this area do demonstrate the potential opportunities that exist to promote learning and system development. It is understood that the local team plans to build on the initial work performed on the development of the ICSCM.

The department has been active in assisting the government of the NWT in revising and updating their mental health legislation, bringing it in line with developments in the legislative schemes in other provinces and internationally. Dr. Scott Theriault consulted with government staff at the white paper stage of development and as drafts of the proposed bill were developed. It is hoped that the final bill will be presented in the House during the May sitting of the legislature.

Global Psychiatry completed the psychiatric nursing education project with nurses in the NWT. This project was outside the contract established between Dalhousie Department of Psychiatry and the NWT partners, but occurred as a result of that working



relationship. Throughout the year, Ms. Sandra Hennigar spent two 2-week periods in Yellowknife providing clinical supervision for the nurses taking the program. This program experienced a higher than normal drop-out rate, starting with eight nurses and graduating only two. Several factors attributed to this high attrition rate including medical complications from pregnancy, transfer of spouse, and lack of understanding of the commitment required by the program. Other factors, identified by administrative staff, fell more within the nursing culture of the area, but were not able to be substantiated in other ways, including a sense of entitlement amongst nursing staff, lack of interest in increasing the scope of practice, and a system entrenched in maintaining the status quo. The two graduates of the program provided valuable feedback and believed that despite the large amount of work, they learned a great deal and had already begun to change how they will practice. The program, offered through the Registered Nurses Professional Development Centre in partnership with Dalhousie, is both a theory-and practice-based program aimed not only in increasing knowledge, but actually changing nursing practice. The challenge to implementing practice change system-wide over the long term lies beyond providing education and rests more in

engagement of staff to meet their needs accompanied by the necessary supports and infrastructure required to make a change in any system.

TRINIDAD

This year Global Psychiatry began delivering training in Trinidad. This project was the direct result of the work done with the Ministry of Health in Tobago the previous year. Ms. Hennigar and Ms. Keltie Donnellan (Annapolis Valley District Health Authority) worked with the mental health division at the Ministry of Health to provide training in the prevention and management of aggression and violence, to mental health staff from across the regional health authorities. Through the innovation and vision of a local leader for mental health in Trinidad, Ms. Trudy Rouse-Harding, a group of stakeholders who could benefit from the training were brought together. Her vision was to instill within the group a collective vision that mental health issues and challenges do not solely belong to the health department, but are challenges faced by society and witnessed in the work of the many government agencies - the justice system through policing and prison services, people and social development (social services), and education and training services. She hoped to enlist leaders within those respective groups to accept the challenge of cross-jurisdictional education by garnering support from their respective ministries for additional funding to support ongoing training sessions.

In June 2014, Global Psychiatry provided two 3-day training sessions. The first group consisted primarily of staff from inpatient and community mental health services and emergency health services. The second group was a diverse group of staff from mental health services, education, policing and prison services, training and people and social development. While the session often generated more questions about their own systems issues than we were able to answer, it provided them with a forum to begin some networking. They agreed that training in the topics presented would be welcome across their service areas and were asked to be champions for their ministries, advocating for cross-jurisdictional training.

In the spirit of promoting the training as a cross-jurisdictional opportunity across Trinidad, the Ministry of Health hosted a kick-off to the Train-the-Trainer teaching in the fall. Invited guests from the various Ministries and the individuals chosen to become trainers were in attendance. Both Ms. Hennigar and Ms. Donnellan were able to speak about the program and its applicability to many settings. They were able to meet with representatives from the Ministry of Justice to discuss opportunities to bring this teaching to police and prison staff, as well as staff at the National Defence level, who at that time were assisting with policing

issues in Trinidad. Additional proposals for teaching were developed as a result of these meetings. Plans are being made to do some follow-up in May 2015.

Ms. Hennigar and Ms. Donnellan worked with the staff of the Mental Health Unit in Trinidad to develop a process of ongoing training and implementation. Because this is a Ministry of Heath funded program, the Mental Health Unit staff have agreed to co-coordinate the national program, meeting at set intervals with all the trainers across the island for the purpose of sharing and problem solving. Through this initiative we not only delivered training, but helped them strengthen their leadership as they begin to shape staff's learning about new and improved ways to interact with their patients.

LOOKING FORWARD

Global Psychiatry will continue working with developing countries and underserved areas in Canada, as outlined in our mandate and as requests come to us. In addition we will harness the invaluable core of public health skills and competencies acquired by the Global Psychiatry team over the past decade to position ourselves as resources for the Department of Psychiatry and other key stakeholders in health and actively participate in health and mental health reform processes underway locally.



Clinical Division

Clinical Director: Dr. Scott Theriault MD FRCPC

Deputy Clinical Director, Recovery & Integration: Dr. Jason Morrison MD FRCPC

Deputy Clinical Director, Acute Care: Dr. Curt Peters MD FRCPC

ADULT GENERAL PSYCHIATRY Inpatients

Staff continue to provide excellent services to individuals in need of inpatient care at our various locations, the Mayflower unit at the Nova Scotia Hospital, 6 Lane, 7 Lane and the Short Stay Unit at the Abbie J. Lane Building, although the facilities are aging. The new Minister of Health, the Honourable Leo Glavine, was given a tour of the facilities by members of the department in the fall and we await a funding decision about the revitalization of the units. Bed occupancy remains well over 90 per cent and the department continues to work with our partners at Capital District Health Authority and other agencies such as the Department of Community Services and

Continuing Care to identify and support housing and residential needs for our patients. Dr. Jason Morrison, Deputy Clinical Director of acute care, moved to a position of Deputy Clinical Director for recovery and integration services. His position was taken up by Dr. Curt Peters. We thank Dr. Morrison for his service in acute care and welcome him and Dr. Peters to their new roles.

Recovery and Integration

Individuals with severe and persistent mental illness continue to receive clinical services and psychosocial rehabilitation at our three "hubs" – Connections Halifax, Connections Dartmouth, and Connections Bedford/Sackville and in our newest facility, Simpson Landing.

Clinical Division

The Department of Psychiatry at Dalhousie University and its co-leaders, CDHA and the IWK Health Centre, are committed to identifying and promoting the highest standards of clinical practice. Faculty members hold key positions in clinical programs, provide consultation and assistance to community-based mental health programs, work to ensure physicians are equipped with the latent knowledge and skills to identify and treat mental illness, and conduct research that leads to improved treatment and outcomes.

With Dr. Morrsion's appointment as Deputy Clinical Director, the various locations will continue to develop a more cohesive and harmonized approach to care.

Community Clinics

The community clinics (Bayers Road, Belmont House in Dartmouth, Hants community clinic, Bedford/Sackville Clinic, and Cole Harbour) provide broad-based community care and continue to have high volumes of referral. The clinics are actively re-examining their programs and focus, with particular attention to the need to provide excellence in secondary level care and in the relationship with primary care providers in the community. All clinics are utilizing CAPA (Choice and Partnership Approach) and this, along with shadow billing data may lead to better benchmarking and efficiency in service delivery.

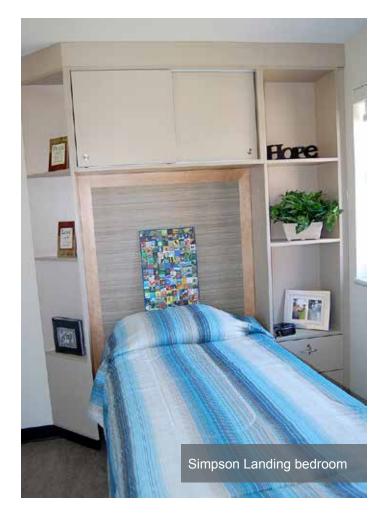
Other

An exciting development in the 2014-2015 year has been the Core Business redesign work, co-chaired by Dr. Morrison and Ms. Dorothy Edem, program manager

with Capital Health. Dozens of individuals spent several months developing treatment guidelines and future service maps for five identified areas: depression, anxiety, psychosis, bipolar disorder and personality disorder. Several high order commonalities arose from this work and in the next year hope to move into the implementation phase of the work, a process that may take several more years.

As the 2014-2015 fiscal year came to an end so did the relationship of the department with the Capital District Health Authority. As of April 1, 2015, all existing districts will be merged into one health authority comprised of four zones. The department looks forward to working with the clinical and administrative staff of the new health authority and the new central zone in the provision of care to individuals experiencing mental illness.





ADULT SPECIALTY SERVICES

Centre for Emotions and Health

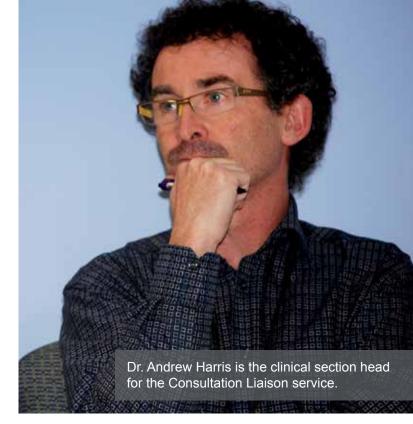
In 2014-2015 the Centre for Emotions and Health continued to provide cutting edge research, clinical care and world leading education.

The team was pleased to commence a newly funded collaboration with the Department of Family Medicine to identify and manage medically unexplained symptoms and anxiety in primary care patients. This position was filled through the hire of Dr. Angela Cooper from the UK. The aim is to provide services and collaborations, as have been done in the emergency department with Dr. Joel Town. This Accreditation Canada Leading Practice designated service has been replicated in other parts of the world since its implementation. In the coming year the hope is to secure funding support for a collaboration with the Department of Medicine to provide similar care and education related to Internal Medicine patients with medically unexplained symptoms.

This year the results were published of a nine-year study of 890 patients showing that the service brings cost reduction of over \$12,500 per patient in the three year follow-up through reductions in hospital days and physician visits. This is the fifteenth study published to show cost and/or service use reduction while using a specialized form of brief psychotherapy.

Based in part on research done by Centre for Emotions and Health team members, the method they use and teach is emerging around the globe as a method of choice for treatment refractory patients. Ten published studies from five countries now show the approach can assist diverse patients who have failed multiple treatments including first line psychotherapy and medications; further it may preclude the need for Electroconvulsive Therapy (ECT) in some cases and assist those who have failed to respond to ECT in other cases. Publications related to this are available on www.istdp.ca.

The team is pleased to continue to provide local training and clinical support to colleagues and look forward to contributing to the upcoming Clinical Care Pathway implementation that will help improve care across the region and province.



Consultation Liaison

The consultation liaison psychiatry service has undergone some changes in the last year. The departure of Dr. Mark Bosma to the position of postgraduate director was a significant loss. The current complement of the service is distributed amongst five psychiatrists: Dr. Mark Rubens (DGH), Dr. Terry Chisholm (MS Clinic), Dr. Glendon Tait (QEII), Dr. Mary-Ann Hudec (QEII) and Dr. Andrew Harris (QEII). The service has also welcomed a new member to the team, D'Arcy Bechard, a clinical nurse specialist who has spent much of the last year working with the medical and surgical teams to identify and educate about brain-based and mental health issues.

The service currently covers beds at the Halifax Infirmary, Victoria General, Nova Scotia Rehab, Veterans' Memorial Building, Dartmouth General Hospital and Restorative care at the Abbie J. Lane. Additionally the service runs subspecialty clinics in Neurology (MS), the Nova Scotia Cancer Care Program, and the Psychosocial Oncology site team. This totals approximately 1100 inpatient beds including three intensive care units and three intermediate care units. In a typical year the team will see between 600 and 700 new consults and follow 500 to 600 inpatients in medical/surgical beds. Examples of the hospital inpatient role are: caring for patients with behavioural manifestations of medical disease, not infrequently uncovering serious missed medical

problems; acute care of psychiatrically ill patients, for example post suicide attempt on medical floors—often averting inpatient admission; treatment of delirium/ encephalopathy; and education of colleagues on other services to decrease stigma and patholgizing of normal human experience of medical illness.

The consultation liaison service is a core rotation for senior psychiatry residents with an average of sixto-eight residents rotating through per year. Also, one to two residents per year return to the service for a senior elective, an optimal time to refine highlevel competencies as junior attending physicians. In addition they have neurology residents and physical medicine and rehab residents for one or two month rotations. They have between 15 and 20 clinical clerks who spend a three week core experience on the service. This provides the residents an excellent opportunity to enhance and develop their teaching skills. They contribute to postgraduate didactic sessions and CaRMS file review and interviews. Dr. Hudec also serves on the Postgraduate Education Committee. The team contributes to annual orals and STACERS and Dr. Tait is the chief examiner. Dr. Tait serves on the Dalhousie Steering Committee for Competency Based Medical Education. At the undergraduate level, they are also very active in courses from Med I to Med III and serve as examiners in Med II-Med IV OSCE exams.

From the academic perspective, the service has been very productive. This has led to four published/in



press peer-reviewed publications and five national/international presentations.

Dr. Tait has continued as a site-lead of a study supported by a CIHR grant, the largest qualitative study to date of team-based care in advanced disease. In the last year Dr. Tait also became Assistant Editor of *Academic Psychiatry*, an international peer-reviewed journal on psychiatric education, administration, and leadership and beyond editorial duties has enjoyed mentoring new authors.

Over the last year the service has received a number of requests from clinical departments for additional specialized support. These include Neurology (movement disorders, epilepsy), Traumatic Brain Injury, Dialysis and Transplant. The challenge will be how to support these areas with finite and limited resources. It will be a major focus for the service in the coming year to develop collaborative and innovative ways to further support medical and surgical care. The team is planning to develop a short-term consultationliaison outpatient follow-up clinic. This is state-of-theart in the area of collaborative mental health/medical psychiatry care as it has been shown to improve quality of life, improve medical outcomes (e.g., glucose and blood pressure control), and decrease costs. This requires a team-based approach and a financial and human resource investment not solely from psychiatry, but also from the broader health care system.

Mental Health Day Treatment Program

The Mental Health Day Treatment Program is a fully integrated psychotherapeutic clinical, teaching, and research program. Its unique dynamic relational approach leverages group psychotherapy to accelerate treatment and recovery.

Over the last year the program, under the clinical/academic guidance of Dr. Jacqueline Kinley, has presented extensively, expanded its academic presence and made several important contributions to the literature.

The Dynamic Relational Model of Group Psychotherapy approach to program and service design was presented at the Canadian Psychiatric Annual Conference in Toronto.

Clinically, the program continues to provide over 300 assessments per year and intensive treatment service to over 150 patients. The program, led by program coordinator Marie Kavanaugh MSW, recently welcomed a new case coordinator, Kim Morash RN, to the team. The case coordinators team includes: Mary Clare Bauld MSW, Jennifer Eames OT, Deborah Crosby MSW and recreation therapist Cheryl Jeffers-Johnson.

The program continues to provide residents and students with a strong and structured experience with an integrated model. This year Drs. Kirsten Holm and Rachel Bell joined the team. They had opportunities to experience the Dynamic Relational approach, familiarize themselves with a rationale empirical approach to care, learn a robust theory, participate in ongoing complex case formulations, and develop co-leadership skills in group therapy. This occurs within a true multidisciplinary team model in which, despite discipline-specific duties, there is a generic role common to all practitioners. Each discipline brings their specific expertise to the team. There is a high degree of informal and formal consultation and collaboration with team members which results in a dynamic team.

In July 2014 Dr. Malika Robichaud joined the program in a Fellowship in Psychodynamic and Group Psychotherapy at Dalhousie University.

The program continues to fund and support its community garden to ensure a healthy, healing environment for patients, visitors and families through generous contributions from the Nova Scotia Mental Health Foundation and the QEII Foundation.

Under the direction of research psychologist Dr. Sandra Reyno and Dr. Jacqueline Kinley, both past recipients of the prestigious Ann Alonso Award for Excellence in Psychodynamic Psychotherapy Research from the American Group Psychotherapy Foundation, the program continues to support a vigorous research program. The program holds multiple grants and continues to work on research projects focusing on changes in Brain Derived Neurotrophic Factor (BDNF) levels following intensive group psychotherapy and has also designed a pilot study looking at fMRI findings associated with the process of grieving.

Geriatric Psychiatry

The Geriatric Psychiatry Program has had an active year. One major highlight was receiving accreditation by the Royal College of Canada for our Geriatric Psychiatry Subspecialty Training Program. All of the geriatric psychiatrists at Dalhousie participated in the process, with substantial contributions made by: Drs. Keri-Leigh Cassidy , Janya Freer, Mark Bosma and Cheryl Murphy. The accredited Dalhousie Geriatric Psychiatry Program is a two-year residency, with the option of completing the first year during the five-year general psychiatry residency. There are only five such training programs in the country at this time.



Dr. Meagan MacNeil completed her fellowship year, and joined the geriatric psychiatry team. Clinically Dr. MacNeil now works with the interdisciplinary outreach and outpatient service out of the Nova Scotia Hospital, and provides cognitive therapy through Dalhousie's Enhanced Group CBT Program for depressed and anxious seniors. Dr. MacNeil contributes to capacity-building through the Nova Scotia Seniors Mental Health Network, and is actively involved in teaching and research as well.

Dr. Vanessa Thoo received the Canadian Academy of Geriatric Psychiatry (CAGP) Resident Research Award, and completed a clinical and research elective in geriatric psychiatry, under the supervision of Drs. Keri-Leigh Cassidy and Janya Freer. Through the provincial Fountain of Health Initiative for positive aging, Dr. Thoo's project involved developing a seniors' mental health promotion tool for use by clinicians, and evaluating the material through the NS Seniors Mental Health Network.

Provincially, the team has been engaged in the Nova Scotia Dementia Strategy. Under the work of the newly formed Care by Design Mental Health Committee, Dr. Sameh Hassan has provided leadership this past year in developing an acute response protocol for long term care, including recommended medication approaches to managing challenging behaviours. The Care by Design Mental Health Committee will continue its work to develop a sustainable model for long term care, aiming to connect these recommendations with those that emerge from the Provincial Dementia Strategy.

Dr. Cassidy was appointed to the Advisory Committee of the Nova Scotia Dementia Strategy, and has been providing leadership in seniors mental health promotion as co-Chair of the Fountain of Health Initiative. This year, the Fountain of Health Initiative received a \$25,000 grant from New Horizons to implement senior-led positive aging courses in the community, and a \$10,000 grant to increase mental health promotion activities by Nova Scotian family physicians. The Canadian Coalition for Seniors' Mental Health has begun to collaborate with the Fountain of Health Initiative on a national seniors' mental health promotion effort.

Nova Scotia has the oldest population in Canada with a senior population that will double over the next 20 years from 15 to 35 per cent of the NS population. As the only tertiary geriatric psychiatry service in the province, the team is acutely aware of the need for a sustainable provincial system that can meet the needs of the aging population. They envision that a sustainable future must include a paradigm shift toward greater seniors' mental health promotion and upstream prevention. The Our Healthy Living program is actively providing provincial leadership in seniors mental health promotion through the Fountain of Health Initiative. The team also envisions a paradigm shift from being a clinical service to increasingly being utilized as a provincial resource for education and community capacity building. The team has begun that process on many fronts, including through the Healthy Living program, the Nova Scotia Seniors Mental Health Network, and through our involvement in local and provincial strategies as described above.



CHILD AND ADOLESCENT PSYCHIATRY

The Division of Child and Adolescent Psychiatry at the IWK had a very busy and productive year. In 2014-2015, the team welcomed new faculty and the first child and adolescent subspecialty resident. Several clinical services underwent significant changes in integration of clinical service and care delivery. Faculty were very active in education, research and advocacy, with publications, presentations and awards locally, nationally and internationally. The demand for child and adolescent psychiatry across the province remains very high and there is a continued effort to try new and innovative ways to increase access to child psychiatry consultation for physicians. The provincial child and adolescent psychiatry network was established this year, with the goal of establishing stronger collaborations and clinical psychiatric care delivery for our province's youth. Working together and utilizing resources more efficiently is a key focus with the establishment of two provincial health authorities, IWK and the Nova Scotia Health Authority (NSHA) as of April 1, 2015.

Faculty & Staff

Dr. Jose Mejia joined the child and adolescent psychiatry forensic program in May 2014. Dr. Mejia comes with extensive experience in youth forensic and justice services, and worked in Alberta and Ontario in child and adolescent forensics.

Dr. Anett Bessenyei joined the child and adolescent division in August as part of the new adolescent intensive services team (providing both day program and residential services). Dr. Bessenyei is a graduate of Dalhousie Psychiatry residency program and had worked in Reproductive Mental Health and Inpatient Child Psychiatry at the IWK before accepting this position.

Debi Follett joined the child and adolescent division in June as the administrative assistant to the manager of psychiatry. Debi provides administrative support to the Chief of Psychiatry and the Executive Leadership team.

Five faculty members left the division over the last year.

Dr. Khalil Ahmad retired in June 2014 after over 30 years of service in child and adolescent psychiatry.



Dr. Wade Junek retired in October 2014, following several decades of dedicated service to the Department of Psychiatry. He returned in March 2015 to fulfill a locum in the IWK Dartmouth Community Mental Health clinic.

Dr. Kathleen Pajer, former Chief of IWK Psychiatry, left the department in August 2014 to take a position at the Children's Hospital of Eastern Ontario.

Dr. Pam Mosher, who worked in emergency, the consultation/liaison service, and Community Mental Health, left the IWK at the end of March 2015.

Dr. Lorraine Lazier left the Windsor Clinic, where she has worked for over a decade, at the end of March 2015.

Leadership Change

The Division of Child and Adolescent Psychiatry had a change in leadership structure in September 2014, with the departure of Dr. Kathleen Pajer. The Executive Leadership Team is now comprised of:

Dr. Alexa Bagnell, Interim Chief/Head Dr. Sabina Abidi, Interim Deputy Chief & Director of Outpatient Care



Dr. Gerald Gray, Director of Inpatient Care Dr. Lukas Propper, Director of C&A Education Dr. David Lovas, Psychiatry Co-Lead EMHAS

Dr. Aidan Stokes, Psychiatry Co-Lead COMPASS and CFDT

Michelle LeBlanc, Administrative Manager

Clinical

IWK Acute Care Psychiatric Inpatient Unit: As was highlighted in our Mission Statement in Action, the new IWK Acute Care Psychiatric Unit, the Garron Centre, opened on May 2, 2014. This state-of-the-art inpatient unit has received rave reviews from patients, families, staff and visitors. This unit was made possible through private donations with the wonderful support of the IWK Foundation. The patient and family and staff experience has greatly improved within this new environment.

IWK Emergency Mental Health and Addictions Service (EMHAS): The EMHAS team, co-leads Dr. David Lovas and Glenna Rose-Williams, piloted a new single form for use in the emergency room by EMHAS clinicians

and psychiatry. The form integrates screening tools to help inform system change and facilitate improvement of care for patients and families visiting the IWK emergency department with mental health concerns. Training took place for faculty, EMHAS clinicians and residents in the roll-out of the form. The three month pilot was held November 2014 to February 2015. Data has been collected as part of this project to help design emergency and crisis services that better meet the needs of the patients and families utilizing IWK emergency mental health services. A working group was established with key stakeholders for revising the EMHAS form, based on feedback. The new form is planned to be launched by fall 2015.

Adolescent Intensive Services: After almost two years of planning, Adolescent Intensive Service (AIS) officially opened in the Craigmore building on Sept. 29, 2014. This new service combines the previous Adolescent Centre for Treatment (ACT), the Adolescent Day Treatment Service and CHOICES inpatient and day treatment. Drs. Anett Bessenyei and Selene Etches





are now covering this service. AIS will provide 24/7 addictions services, a 24/5 mental health unit, as well as four day-treatment areas.

The Young Mothers Project: This new initiative started in 2014, led by Dr. Joanne MacDonald (Perinatal Psychiatrist) and Coleen Flynn (MSW), and was made possible with support from the IWK Mental Health and Addictions Program, the Department of Psychiatry and a private donor. The Young Mothers Project is an offshoot from the Reproductive Mental Health Service and focuses on reaching out to vulnerable mothers and families earlier in their illness and developmental risk periods. Young Mothers will operate as a collaborative community-based team with direct links to primary care and community agencies, serving young mothers aged 25 years and younger.

IWK Community Mental Health (CMH) Clinics

The outpatient clinics are successfully increasing access to psychiatry consultation for community physicians. Physicians can request a one-time psychiatry consult, "MD Choice," with a several month wait-time, or

telephone psychiatry consult within the same week. The CMH clinics have changed leadership structure this year:

Dr. Suzanne Zinck, Psychiatry Co-Lead, CMH Halifax Dr. Kene Ezeibe, Psychiatry Co-Lead, CMH Sackville Dr. Sabina Abidi, Psychiatry Co-Lead, CMH Dartmouth

Child Intensive Services

The child and family day treatment service and COMPASS residential treatment program are uniting to create a Child and Family Intensive Service located at the APSEA site in summer 2015. This service will provide both day and residential programming for children 7-12 years of age from across the province. Dr. Aidan Stokes is the psychiatrist with both these services and has been co-leading this integration work with manager, Barb Casey.

Education

The Education team (Dr. Lukas Propper and Janelle Duguay) have coordinated two well-attended education workshop retreats for faculty in the past 12 months.

These half day events were well received by faculty and a psychopharmacology workshop is planned for May 2015.

Child and Adolescent Psychiatry Residency Program

The Child and Adolescent Psychiatry Residency Program welcomed their first subspecialty resident to the program on July 1, 2014. Dr. Ferid Fathalli completed his general psychiatry residency at McGill University in June 2014. While at the IWK he worked in specific care clinics, the emergency department, the family therapy clinic and the Garron Centre. His research interests include autism and neuropsychiatry, and he is a PhD candidate at McGill University. Dr. Fathalli played an instrumental role in mentoring and teaching medical students and residents during his residency. Dr. Fathalli will be returning to join the McGill faculty after completing his residency in June 2015.

Community Outreach

Faculty members were active in the community, delivering many presentations and workshops for teachers, students, guidance counselors and the general public.

Dr. Alexa Bagnell was invited to be the regional expert for *Bell Let's Talk Day*, January 28, 2015, for the fourth consecutive year. *Bell Let's Talk* is a multi-year charitable program dedicated to break down the barriers associated with mental illness. She was also invited to speak at six schools and was the Graham Goddard Lecturer for the Department of Neuroscience in February 2015 speaking about "The Importance of Early Intervention in Anxiety Disorders in Children."

Dr. Stan Kutcher was invited to speak at five national conferences and presented at the World Congress in Psychiatry in Madrid, Spain in September.

Drs. Suzanne Zinck and Selene Etches delivered a presentation on "Harm Reduction in High-Risk Youth" to the College of Registered Nurses of Nova Scotia. Dr. Etches also presented on "Opioid Use Disorders" at the Department of Health and Wellness, and conducted a nursing teaching session on "Substance Use Disorders" at MSVU.

Drs. Ahmed Alwazeer, Joanne Gusella and Tania Wong,



members of the Eating Disorders Clinic, presented an eating disorders update to family physicians at the Annual Dalhousie 88th Refresher Course for Family Physicians on Nov. 27, 2014.

Dr. Normand Carrey presented at AACAP's 61st Annual Meeting in San Diego, Oct. 20-25, 2014.

Dr. David Lovas presented "Mindfulness & Prescribing" workshop, at the Mindfulness Clinical Applications: Conference for Trainees, hosted by Cambridge Health Alliance at Harvard Medical School.

Dr. Sabina Abidi was the keynote speaker at the Schizophrenia Society of NS annual conference and presented "New findings in Early Psychosis."

Research

The IWK faculty had a very productive research year, with over 25 presentations at conferences, 14 published articles and 10 grants funded. The faculty also hosted the 7th Annual Atlantic Provinces Child and Adolescent Psychiatry Conference in June 2014. Dr. Sabina Abidi has been the chair of the conference for the past several years and the event is very well attended.

Grants

Dr. Stan Kutcher received four grants from various organizations, including \$118,000 from SunLife Financial for his "Know Before You Go," Grade 12 Teaching Guide, and \$50,000 from the NS Department of Education for two research programs created to evaluate school mental health.

Dr. Sabina Abidi was awarded two research grants. She will be working with Dr.s Phil Tibbo and David Pilon on a TRIC-funded project examining how to sustain clinical gains in youth with psychosis transitioning for specialized clinics to community mental health care. Dr. David Whitehorn joins Dr. Abidi and Dr. Tibbo on their NSHRF Knowledge Sharing Support award for phase two of their project, "Key Findings in Early Psychosis Knowledge Sharing Initiative."

Dr. Alexa Bagnell and Dr. Amanda Newton from the University of Alberta succeeded in securing a Knowledge Synthesis grant from CIHR to develop a mobile app to help teens stick to their anxiety CBT treatment plan.

Dr. Normand Carrey received a CIHR Knowledge Synthesis grant for his project, "An interdisciplinary scoping review to map parenting interventions available to parents of maltreated infants and toddlers within the child welfare system." Dr. Carrey is also part of a group of researchers awarded a contract in February 2015 to conduct an EPC review on antipsychotics in children and young adults.

Dr. Jose Mejia has commenced a pilot project on "Use of Psychometric Instruments to detect Malingering and Factitious Disorders" in youth.

Drs. Jonathan Brake and Kathleen Pajer were granted Dalhousie Psychiatry Research funding for their project, "Assessing the Use of DBT in Adolescents with Chronic Suicidality and NSSI."





Saint John Site

Head: Dr. Kehinde Aladetoyinbo MD FRCPC

There have been a few staffing changes in the Department of Psychiatry in Saint John over the last year. As of Jan. 1, 2015, Dr. Kehinde Aladetoyinbo commenced duties as the clinical and academic head of psychiatry for Zone 2, taking over from Dr. Rachel Morehouse. The department recognizes Dr. Morehouse's valued contribution to the Department of Psychiatry over her many years in the position.

Dr. Omana John retired in 2014 and Drs. Laurie Potter and Christopher Bryniak have relocated to another province. With the resignation of Dr. Potter, the psychiatry medical education director position has been divided between Drs. Tunde Apantaku-Olajide and Emily Maxan. Dr. Apantaku-Olajide will be the director of postgraduate education and Dr. Maxan will be the undergraduate director.

Dr. Tolulope Alugo has joined the child and adolescent

team at the outpatient mental health clinic. Dr. Alugo is also the consultation liaison psychiatrist responsible for the pediatric unit at the Saint John Regional Hospital.

Dr. Satyendra Satyanarayana took on the role of treasurer of the New Brunswick Psychiatric Association in November 2014.

The department recently received a substantial donation from a private donor for professional development of all mental health staff. A steering committee has commenced work and educational programs facilitated by world-renowned experts in different aspects of mental health will hopefully be commencing later this year. The initial workshops will include ECT, psychopharmacology and psychotherapy.

The Saint John site also continues to be heavily involved with clinical clerk and resident teaching, and also with

Saint John New Brunswick

The Department of Psychiatry has an affiliated centre in Saint John, New Brunswick at the Horizon Health Network. Our faculty provide psychiatric services to the people of New Brunsiwck and are dedicated researchers and educators.

A change of command in Saint John

On Jan. 1, 2015, Dr. Rachel Morehouse stepped down as Academic/Clinical Head of the Department of Psychiatry in Saint John, opening the door for new opportunities and challenges.

Dr. Morehouse began her journey with the Department of Psychiatry as a resident in 1983. After residency she traveled to Southern California to complete a fellowship in sleep medicine. Upon her return to Halifax Dr. Morehouse found herself learning to develop and nurture a health care team that would become the Sleep Centre at the QEII.

Dr. Morehouse admits that initially she wasn't interested in research, but she was encouraged by her mentors in California to pursue it. Her biggest research project was work done in Halifax, heavily influenced and assisted by Dr. Roseanne Armitage, a professor and sleep researcher working at the University of Texas Southwestern, and Dr. Stan Kutcher. Together they were able to identify the future likelihood of depression in a group of teenage girls at risk – based on the microarchitecture of their sleep.

After 10 years she made the decision to return to her home in New Brunswick. Here she established a second Sleep Centre

and was soon appointed as Head of the Department of Psychiatry.

Dr. Morehouse says that over the years the biggest challenge she has faced is continuous re-tooling. She says she first set out to learn about psychiatry and how to be a good psychiatrist. Then as a junior faculty member she found she needed to learn how to teach, and then later she needed to learn how to do research. As the head of the department she had to learn about administration. To help her along the way she credits a lot of great teachers and mentors.

Dr. Morehouse has had a diverse career, with experience in a multitude of areas of healthcare. She admits however, that her clinical work has been the most rewarding. "I believe that it is such an honour to be a physician and to be a psychiatrist," she says. "Patients talk about their innermost fears, their worst fantasies, their secret desires, their pain - and when I can help them - wow." She says patients in the sleep clinic have often commented on her ability to listen and the ease with which they can talk to her, frequently stating "you should be a psychiatrist!" "When I hear this," she says, "it reaffirms that I am doing something right."



In stepping down as Head of the Department of Psychiatry in Saint John, Dr. Morehouse has left big shoes to fill. Dr. Kehinde Alatoyinbo, who has assumed the role, does not take this lightly. "The department made great strides during her tenure as head," he says. "As a department, our capacity to deliver clinical care for our patients in different subspecialties of psychiatry and our capacity to contribute significantly to medical education and research have both increased during her tenure. As a department, we will work collectively to enhance these strengths in the years ahead."

tutoring at the Dalhousie Medicine School in New Brunswick.

New Brunswick faculty have also expanded research interests with ongoing projects including "Chart Audit: Cardiometabolic Risk Factors in People with Severe Mental Illness."

Staff presentations over the last year have focused on topics such as Introduction to Critical Thinking in Clinical Decision Making, Optimizing Care for Patients with Schizophrenia, Expanding Collaboration between Primary and Secondary Care, Insomnia is Not a Sleep Disorder and Boundary Issues in Psychotherapy.

2014-2015 FACULTY AS OF MARCH 31, 2015

Full Faculty

Professors Emeritus

Last Name Munro First Name Alistair

Professor

Last Name First Name Abbass Allan Alda Martin Delva **Nicholas** Eskes Gail Gardner David Kutcher Stan Lvnch Marv Morehouse Rachel Robertson George Rusak Benjamin Stewart Sherry Tibbo Philip

Associate Professor

First Name Last Name Awara Mahmoud Bagnell Alexa Carrey Normand Cassidy Keri-Leigh Chisholm Terry Fisk John Good Kim Haiek **Tomas** Harris Andrew Hazelton Lara R. Wade Iunek Kinley Jacqueline Lamschstein Claudia Lauria-Horner Bianca Mejia Jose Milliken Heather O'Donovan Claire Orlik Herbert **Propper** Lukas Rajda Margaret Rao Sanjay Revnolds Paul Sadek Joseph Stokes Aidan Teehan Michael Theriault Scott Uher Rudolf Wiseman Eve

Assistant Professor

Last NameFirst NameAbidiSabinaAddlemanDavidAdediranPeterAicherJosephAladetoyinboKehindeAldridgeDavid

Alexiadis Ali Alwazeer Amanullah Anvaegbuna Apantaku-Olajide Tunde Aquino Arif Aspin Assh Aubie Banic Banjo Bekele Bergin Bessenyei Bhalla Bhargava Bhaskara Bilski-Pitrowski Black **Bombay** Borst Bosma Bradley Brake **Brooks** Brunet **Bryniak** Burke Butler Butler Calkin Champod Chehil Chipman Cohen Cohen Cooper Croxall Davis de Boer Dhar Dini Doucet Doucet Etches Ezeibe Faridi Ferguson Fisher Flynn Forsythe Fostey Fraser Fraser Ginnish Gordon Grant-Oyeye Grav

Gusella

Hassan

Hipwell

Hoyt

Herschenhous

Sameh

Nicole

Linda

Alexander

Hann

Maria Javad Ahmed Shabbir Okechuku **Emmanuel** Bungash John Donna Cheryl Zlatko Oluwafemi Yilma Siobhan Anett Dinesh Manoj Sreenivasa Miroslaw Katharine Amy Sioerd Mark William Ionathan Simon Aileen Christopher Brian Bev Gordon Cynthia Anne Sophie Sonia Karen Jacqueline Sebastien Kenneth Peter Donna Cornelis Neelma Ezio Ierome Iohn Selene Kenechukwu Anjum Ieanne Derek Michael Pamela Alan Iohn Ron Amanda Edward Lind Gerald Joanne Gerald

Hudec Mary-Ann **Iames** Sherry Rakesh Jetly Omana John Iohnston Mark Ioshi Vinod Keizer Heather Kelln Brad Keshen Aaron Niaz Khan Kronfli Risk Lazier Lorraine Laskowski Derek Waheed Lawal Liashko Vitaly Libbus Yvonne Lock Elizabeth Lovas David MacDonald Joanne MacDonald Shannon MacKay Tom MacNeil Meagan MacNeill Kara Maguire Hugh Maynes Douglas Maxan Emily Abdel Mershati Milligan Scott Mills Phillip Mishra Achal Morgan Matthew Morrison Jason Pamela Mosher Moss Phillipa Ava Muir Mulhall David Cheryl Murphy Murugesan Muthu Neilson Grainne Ortiz Abigail Ortiz Ana Parker Deborah Pavlova Barbara Pearce Patricia Pellow Tanya Pencer Alissa Peters Curt David Pilon Poder Kulli Pogosyan Marvna Pottie Patricia Pottle Robert Reliia Malgorzata Riives Mai Delyth Roberts Rosen Natalie Michael Ross Rowe Helen Anthony Rozario Rubens Mark Russell David Ruzickova Martina Sadiq Sved Satyendra Satyanarayana Schmidt Matthias Scholten Monique

Shahid Shamsuddin Siddhartha Sinha Slavter Smith Stewart Sullivan Sulyman Tahir Tait Taylor Thompson Town Thompson Tulipan Umar Ursuliak Walentynowicz Warren White Whitehorn Wilson Wood Woulff Yuzda

Raheel Syed Sanjay Nachiketa Ian Edwin Christopher Glendon Mutiat Laeeq Glendon Gretta Karen Joel Sarah Tanya Amir Zenovia Magdalena Katherine Kimberley David Adriana Bill Nina

Lecturer

Zinck

Last Name McAllindon Robertson Zehr First Name David Nancy Richard

Edward

Suzanne

Cross-Appointed Faculty

Professor Emeritus

Last Name
Robertson
First Name
Harold

Professor

Last NameFirst NameLeslieRonMcGrathPatrickSembaKazueChambersChristine

Associate Professor

Last NameFirst NameCorkumPennyLeBlancJohnMurphyAndreaNewmanAaronVallisMichael

Assistant Professor

Last NameFirst NameBarrettSeanJohnsonShannonKaiserArchibaldSherrySimonWeaverIanWestwoodDavid

Adjunct Faculty

Professor

Last Name First Name Duffy Anne Horacek Iiri Stephen Kisely Kopala Lili Murphy Iane Pajer Kathleen Patel Vikram Walter Garry

Associate Professor

Last Name
Cook
Crittenden
First Name
Allan
Patricia

Assistant Professor

Last NameFirst NameBernierDeniseBurleyJosephMacDougallArleneMarceau-CrooksHeleneMcLuckieAlan

cdha clinical section heads

Consultation/Liaison

Dr. Andrew Harris

Seniors

Dr. Keri-Leigh Cassidy Mood Disorders Dr. Martin Alda

First Episode Psychosis

Dr. Phil Tibbo

Centre for Emotions and

Health

Dr. Allan Abbass

ECFH Clinical Director

Dr. Aileen Brunet

cdha clinical academic

leaders

Addiction Prevention and

Treatment Services

Dr. Philip Mills *Mayflower Unit*Dr. Joe Sadek

Dartmouth City Team

Vacant **ECT**

Dr. Michael Flynn

Bedford/Sackville

Dr. Matthew Morgan

Cole Harbour

Dr. Kulli Poder

Bayers Road
Dr. Sonia Chehil

Intellectual Disabilities

Dr. Mutiat Sulyman

iwk leadership

Head/Chief (Interim)

Dr. Alexa Bagnell

Associate Chief (Interim)

Dr. Sabina Abidi

Director, Education

Dr. Lukas Propper

IWK Head, Outpatient Services

Dr. Sabina Abidi

IWK Head, Inpatient Services

Dr. Gerald Gray

iwk physician co-leaders

Dartmouth Community Mental

*Health Clinic*Dr. Sabina Abidi

Halifax Community Mental

*Health Clinic*Dr. Alexa Bagnell

Sackville Community Mental

Health Clinic

Dr. Lukas Propper

2014-2015 ADMINISTRATION AS OF MARCH 31, 2015

Adult Psychiatry Services

Addiction Prevention and Treatment Services

Centre for Emotions and Health

Community Mental Health

Consultation/Liaison

Developmental Mental Health

Early Psychosis

Eating Disorders

Emergency

Forensic Psychiatry Services

Inpatient Psychiatry

Mental Health Day Treatment

Mobile Crisis

Mood Disorders

Recovery and Integration Services

Reproductive Mental Health

Seniors Mental Health

Shared Care

Short Stay Unit

Sleep Disorders

Child and Adolescent Psychiatry Services

IWK Acute Care Psychiatric Inpatient Unit

IWK Consultation/Liaison Service

IWK Emergency Mental Health Service

CHOICES Addictions 24/7, Outclient & Day Program

Residential 24/5 Day Treatment for Children

Youth Forensic Services (includes Nova Scotia Youth

Facility Secure Care Unit)

Community Mental Health and Addictions Clinics

Specific Care Outpatient Clinics: Eating Disorders,

Bipolar Disorders, Obsessive Compulsive Disorder,

Tourette's/Movement Disorders, Early Psychosis, Shared

Care, Autism Spectrum Disorders

School Mental Health & Addictions

Administration

Dr. Nicholas Delva Department Head and CDHA District Chief

Dr. Michael Teehan **Deputy Head**

Dr. Scott Theriault Clinical Director, CDHA Department of Psychiatry

Ms. Carolyn Sisley Director of Finance and Administration Ms. Amanda Iadipaolo **Executive Assistant to Department Head**

Ms. Linda Ford Administrative Assistant

Ms. Kate Rogers **Communications Coordinator**

Ms. Sandra Millar Finance Assistant

Education

Dr. Margaret Rajda Director

Ms. Annette Cossar Administrator

Ms. Carrie Wipp Postgraduate Coordinator Ms. Mandy Esliger **Undergraduate Coordinator**

Ms. Tracy Fraser-MacIsaac

Research

Dr. Ben Rusak Director

Ms. Janet Bardon Administrator

Ms. Megan Bellefontaine Administrative Assistant

Global Psychiatry

Dr. Sonia Chehil Director

Division Of Child And Adolescent Psychiatry

Dr. Alexa Bagnell Head and Chief, IWK Department of Psychiatry (Interim)

Education Coordinator

Ms. Michelle LeBlanc Administrative Manager Ms. Jennifer Cunningham Administrative Assistant Ms. Dawn Jensen Administrative Assistant

Ms. Amy MacKay Administrative Assistant to the Sun Life Chair

Ms. Bonny Halket Administrative Assistant

Ms. Joan Sweet Receptionist

Ms. Robin Stinson Administrative Assistant Ms. Janelle Duguay **Education Coordinator**

FACTS & STATS, 2014-2015

Faculty Numbers

In 2014/2015 there were 242 faculty members in the Department of Psychiatry, including 16 crossappointments and 15 adjunct members.

Clinical Care

74,778 days were spent in adult inpatient services

1,253 discharges from adult inpatient care

121,454 visits to adult outpatient services:

- 38,939 to the community mental health clinics
- 10,722 to forensic services
- 29,728 to specialty mental health services
- 19,772 to emergency services and urgent care
- 22,114 to recovery and integrations services
- 189 visits to the community transition program and short stay unit outpatient follow-up

2261 registrations at the child and adolescent community mental health clinics between March 1, 2014 – Feb. 28, 2015

2049 registrations at the child and adolescent specific care clinics between March 1, 2014 – Feb. 28, 2015

220 registrations at the child and adolescent CHOICES outclient service

Two registrations at both the child and adolescent urgent care service and the Initiative for Sexually Aggressive Youth (ISAY)

873 registrations to reproductive mental health services

170 registrations to the Garron Centre Aftercare/ Daycare

30 Youth Justice Assessment registrations

59 registrations to child and adolescent forensic rehabilitation

Eight registrations to the Young Mothers Project

839 visits to the IWK emergency department seen by psychiatrists

Education

The Department of Psychiatry has a total of 37 residents and two fellows

120 medical students rotated through psychiatry services:

- 72 in HRM
- 17 at distant clerkship sites in Amherst, Truro, Sydney and Charlottetown
- 31 at Dalhousie Medicine New Brunswick (DMNB) clerkship sites in Moncton, Saint John and Fredericton
- Four of the DMNB students were part of the LIC in Miramichi and two were part of the LIC in Waterville.

The department delivered 1115 tutor hours to Undergraduate Medical Education for the Skilled Clinician I, CBL (Professional Competencies, Neurosciences, etc.), Elective and PIER units

372 tutor hours to departmental-led education activities (Skilled Clinician II, Shadowing Preceptor, CRAM Course, etc)

61 tutor hours to the IMU Link Program

108 examiner hours for OSCE examinations.

Faculty supervised six Dalhousie pre-clerkship elective students and 48 clerkship elective students from Dalhousie, Canadian and International universities

Four faculty were psychiatry component heads: Professional Competencies, Neurosciences, Skilled Clinician II and Sexuality

Research

A total of 56 students were supervised for various research projects in 2014/15

The Department of Psychiatry received a total of \$2,215,648.00 in new grant money in 2014/15

Department of Psychiatry faculty presented 123 abstracts or research presentations during the 2014/15 year

A total of 126 peer reviewed publications were published by Department of Psychiatry faculty







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