

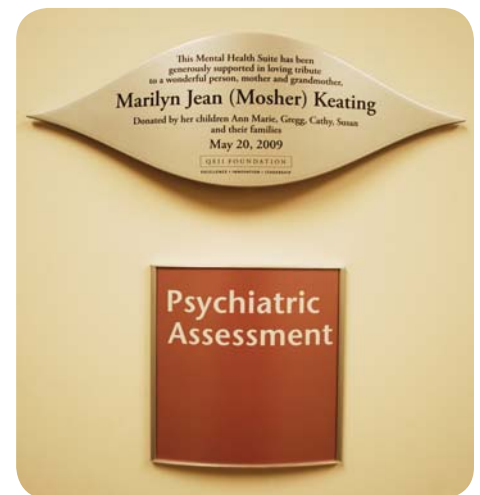
# Department of Psychiatry HEADLINES



A room with a view! Proudly standing in front of the window in the Psychiatric Emergency Service office are nurses Cynthia Legacy-Turcotte and Sherette Currie, manager Debbie Phillips, emergency psychiatrist **Dr. Peter Florence**, and second year psychiatry resident **Dr. Anett Bessenyei**.



One of the three private interview rooms.



## New Psychiatric Emergency Service

Submitted by: Dr. Ian Slayter

After several years of planning, including an emergency services review in 2003/2004, a community planning retreat in 2005, and an external consultation in 2007, the Queen Elizabeth II Health Sciences Centre and The Nova Scotia Hospital merged their psychiatric assessment services in the new Charles V. Keating Emergency and Trauma Centre at the Halifax Infirmary on July 6.

Why? Because we believe that we can offer a high class psychiatric emergency service on one site which we could not do when divided into two, less well resourced, sites as in the past. The new Psychiatric Emergency Service (PES) offers 24/7 operation with nursing and security around the clock, a

full-time emergency psychiatrist during weekdays, access to two residents at night and on weekends, three interview rooms, and a large multidisciplinary office, all immediately adjacent to the core work area of the emergency department. Two nurses are on together from 11:00am to 11:00pm when the emergency department is the busiest.

The goals are quick access upon arrival at the emergency department, high quality psychiatric emergency care, and rapid disposition. Already, staff are reporting substantial improvement in patient throughput times, many within our target timeframe of two hours from handover to us at the point of triage to disposition. This will go a long way

to improving the patient experience of emergency care where waits of six hours or more to get to mental health were the norm.

Ms. Debbie Phillips is the PES Manager and **Dr. Peter Florence** the emergency psychiatrist. Residents will resume emergency rotations in the near future. The service will also offer 24/7 bed management.

And there is more to come. A Crisis Clinic for same and next day service for follow-up of patients seen in the emergency department or in the community by mobile crisis is planned for the fall. It is expected to be housed next door in the old emergency department wing.

# Message from the Head

Dr. Nick Delva

Much effort has gone into the establishment of our new Psychiatric Emergency Service (PES), housed in greatly improved new facilities at the QEII, and I would like to thank and congratulate each and every individual in the Department, the Mental Health Program, the QEII Emergency Department, and elsewhere in CDHA who contributed to this most successful outcome. As anticipated, the new team provides expert comprehensive care around the clock and, as a single team, is able to deliver more timely care than was possible by two separate teams, one on each side of the harbour. The new unified service offers an excellent learning environment for our residents, clinical clerks, and other learners. Finally, the new team is already developing a program of research. The new PES exemplifies the benefits that can be achieved by restructuring, and we have much yet still to accomplish.

I'm also very happy to welcome many new faces to the Department. Our PGY-1 residents, the class of 2014, include **Drs. Christina Aydin, Jacob Cookey, Shauna Correia, Katherine Matheson, Soroush Sadafi, Ashwin Varghese, and Christian Weins.** This year we have two new Sobey Fellows, **Drs. Kosuke Kajitani and Mirko Manchia.** **Dr. Chris Bryniak** joins **Dr. Abigail Ortiz-Dominguez** in clinical-academic Departmental Fellowships — **Dr. Bryniak** in Forensic Psychiatry with **Dr. Scott Theriault,** and **Dr. Ortiz** for her second year in Mood Disorders with **Dr. Martin Alda.**

We also welcome two graduates of our Residency Training Program as staff psychiatrists, **Drs. Aaron Keshen and Curt Peters.** We bid farewell to **Drs. Tim Bood and Luke Napier.** **Dr. Bood** worked in the Assessment Unit at the NSH until its recent closure, and we thank him for his solid contribution to the Department over the years. As a member of the inpatient team on 7 Lane, **Dr. Napier** has made significant contributions to clinical care and teaching; he is planning to return to Nova Scotia after working in Bermuda for a year.

The Department of Psychiatry, Doctors Nova Scotia, and the Department of Health have signed an MOU that provides us with short-term stability and a timetable for the conclusion of a new contract, both of which are big steps forward. AFP members will be receiving further details of the new arrangements and if there are any questions, please contact myself, **Dr. Scott Theriault** or **Ms. Carolyn Sisley.**

In her remarks at our recent Awards Banquet, the President of the CPA, **Dr. Susan Abbey,** encouraged the graduates of our Residency Training Program to get involved in the management of our profession, including a much greater involvement in politics. While we are seeing much greater recognition and support for mental health services across the country and around the world, this is happening as a result of the actions and efforts of committed individuals, not because good people sit around



and wait for services to materialize. The existence of the Mental Health Commission of Canada (MHCC) and the new MHCC Mental Health and Homelessness Initiative came into existence as a result of the dedication of a few remarkable individuals, notably Senator Michael Kirby. The effort could, however, easily stall without continued efforts and vigilance. For example, as you can see in the article by **Dr. Sonia Chehil,** mental health was omitted in the new WHO Global Non-communicable Disease Network. It needs to be made apparent to all that mental health services have been underfunded relative to other areas of health, and need support commensurate with the burden of illness and disability from mental illness. I would therefore encourage all members of the Department to get directly involved in the political process, whatever your party affiliations may be. And please don't delay!

I wish you all a well-earned and relaxing break this summer — we will be busy come the start of September!

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## Department of Psychiatry HEADLINES

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# Administration Section

Submitted by: Carolyn Sisley  
Senior Administrator

## Update on AFP Negotiations

The Department of Psychiatry has signed a Memorandum of Understanding with the Department of Health that has increased our total funding envelope. This is a temporary agreement which will be built on as we work toward finalizing an AFP contract in late fall. Changes in the current remuneration model will be implemented when the increased

funding is forwarded from the Department of Health. Physicians will be notified when a release date has been determined. Questions regarding the ongoing negotiations can be directed to members of the Negotiating Team: **Dr. Nick Delva, Dr. Scott Theriault, or Ms. Carolyn Sisley.** Remuneration questions can be directed to Ms. Sisley.

## Individual Practice Profile Meetings

Faculty are reminded that IPP meetings are currently underway. If you have not submitted your forms or booked your annual meeting, please contact **Ms. Linda Ford** at 473-6214 or Linda.Ford@cdha.nshealth.ca. Meetings will be taking place throughout the summer and will be completed by early fall.

## Change in the Deadline for Activity Hours Submissions

The Department Finance Committee has reduced the grace period for submission of faculty activity information from eight weeks to two weeks effective July 27, 2009. A detailed communication went out to faculty the week of July 13. The activity reporting process remains the same and faculty will continue to utilize the One45 system to submit their information. A link to the system can be found on the front

page of the Departmental website and can be accessed from anywhere with an internet connection. Under our new MOU, fellows will also be reporting their clinical activity through this method. This reduction in the submission deadline is necessary due to the change in our funding formula. Questions can be directed to **Ms. Carolyn Sisley** at 473-3868 or Carolyn.Sisley@cdha.nshealth.ca.

## On-Call Remuneration

Under the new remuneration model, on-call service provision will be compensated separately. The current on-call schedule will be used to determine bi-weekly remuneration. For CDHA physicians, the on-line system updated by Ms. Tricia Dauphinee will be used to verify payments. For IWK physicians, the section on-call schedule maintained by Ms. Bonny Halket will be used to verify payments. Physicians who change shifts are responsible for notifying Ms. Dauphnee or Ms. Halket of those changes in order to ensure appropriate remuneration.

## Faculty Development Funding

Faculty members are reminded that there is funding available through the Departmental Faculty Development Grant to assist in offsetting registration fees, tuition, or travel costs associated with activities that are training focused and will promote the Department's vision, reputation, and skills development. Individuals wishing to apply for funding must complete the approved application form which is available from **Ms. Carolyn Sisley**, Senior Administrator.

Applications will be reviewed by the Finance Committee. All proposals must be approved by the respective clinical director, director of research, or director of education, and there is a maximum of one request per individual per year. Please carefully review the application process to ensure your request meets the stated criteria. Please note that funding is not provided for attending conferences.

## Promotions, Tenure, and Reappointments Reminder

Please note that the promotions, reappointments, and tenure process is currently underway. Faculty members who are eligible for promotion and whose appointments are up for renewal will be notified by mail by July 31.

If you feel you meet the criteria for promotion and wish to apply please contact **Dr. Andrew Harris** at 473-7638 or Andrew.Harris@cdha.nshealth.ca or **Ms. Linda Ford** at 473-6214 or Linda.Ford@cdha.nshealth.ca for further information. The Departmental deadline for promotion applications is September 15, 2009.

## Research Section

Submitted by: Jennifer MacDonnell  
Research Administrative Assistant

### 10 Questions for a Dalhousie Psychiatry Researcher

This issue profiles a new Sobey Postdoctoral Fellow in Psychiatry Research, **Dr. Kosuke Kajitani**. "10 Questions..." is a recurring article in the Research Section of *Headlines*. If you are interested in being profiled in an upcoming publication, please contact **Ms. Jennifer MacDonnell** at Jennifer.MacDonnell@cdha.nshealth.ca.

1. *Where were you born?* I was born in Shimane, Japan. Shimane is located in western Japan and is close to Hiroshima.

2. *Why did you want to come to Dalhousie University?* My mentor in Japan recommended **Dr. George Robertson's** laboratory, and I became interested in his research.

3. *What is your educational background?* I graduated from the Faculty of Medicine at Kyushu University, and then obtained a medical license. After training as a psychiatrist, I went on to receive my PhD in neuroscience.

4. *What are your current research interests?* I am interested in new treatments for schizophrenia. The symptoms of schizophrenia are roughly classified into positive and negative symptoms, while cognitive dysfunction is also a serious problem. I am very interested in research about new methods of cognitive improvement for patients suffering from schizophrenia.

5. *What type of research will you be doing while at Dalhousie?* I am studying schizophrenia using a mouse model and working towards revealing the

mechanism of cognitive improvement using a member of the cytokine family.

6. *Why did you choose psychiatry as a career?* The challenge. I enjoy the continuing challenge with each new patient to try to understand, diagnose, and help them to live a better life.

7. *What was your second career choice?* Psychology was my second choice.

8. *What experience best prepared you for your job?* Teaching. When I was a university student, I worked as a tutor and taught high school students math and science. Through this experience, I learned how to communicate and explain subjects in a simple manner. I draw on this experience when I am explaining the complexities of an illness to a patient.

9. *Who are your mentors?* I count Dr. George Robertson (Dalhousie, Departments of Pharmacology and Psychiatry), Dr. Yusaku Nakabeppu (Kyushu University, Japan, Medical Institute of Bioregulation), and Dr. Shigenobu Kanba (Kyushu University, Japan, Department of Psychiatry) as my mentors.



**Dr. Kosuke Kajitani**

10. *What do you consider the biggest challenge facing researchers today?* The economy! In many countries including Japan, research funding has been reduced.

#### Psychiatry Research Day 2009

This year's event is scheduled for Friday, October 16 at the Lord Nelson Hotel. Now in its 19th year, Psychiatry Research Day promotes student involvement in research and showcases the Department's diverse expertise to our university and local communities. The keynote speaker for this year's event is Dr. Rémi Quirion, Professor and Scientific Director at the Douglas Mental Health University Institute and former Scientific Director of the Institute of Neurosciences, Mental Health and Addiction of the CIHR.

To attend Psychiatry Research Day, please complete the registration form found at <http://psychiatry.medicine.dal.ca/research/researchday.htm>. For more information, contact **Ms. Jennifer MacDonnell** at Jennifer.MacDonnell@cdha.nshealth.ca. The registration deadline is October 2, 2009.

#### Drs. David Gardner and Andrea Murphy Receive Funding

Congratulations to **Drs. David Gardner** and **Andrea Murphy** on receiving funding from the Nova Scotia Health Research Fund. The project, "The Effect Size Illustrator", will develop a unique online tool that will help clinicians and health policy makers use evidence from research studies in making patient-specific and health policy decisions that affect our community. The effect size illustrator will support the translation of research findings into insightful clinical and health policy decisions.

#### Department of Psychiatry Research Fund

The next deadline for funding is October 1, 2009. For more information, please visit <http://psychiatry.medicine.dal.ca/research/dgaf.htm>.

## Education Section

Submitted by: Annette Cossar  
Education Administrator

### Undergraduate News

We are gearing up for the new academic year and with the Individual Practice Profile (IPP) process we are busy recruiting teachers for the various education teaching activities. There is a need for COPS tutors and Med 1 and 2 Patient/Doctor Interviewing teachers. Please contact **Ms. Martine McKay** at [Martine.McKay@cdha.nshealth.ca](mailto:Martine.McKay@cdha.nshealth.ca) or 473-4883 for details. The Class of 2011 clerks are set to begin the Introduction to Clerkship in September.

The report from the Liaison Committee for Medical Education (LCME) has been received after the Accreditation Site Visit in February 2009. Dr. Tom Marrie, Dean-Designate for the Faculty of Medicine (<http://communications.medicine.dal.ca/news.htm>) presented the report at a Town Hall meeting on July 15. The following is an excerpt from the memo his office distributed:

... I am writing to advise you that we have received notice of intent from the Liaison Committee for Medical Education (LCME) to place our undergraduate program on 24-month probation. We have been found in violation of 17 of the LCME's 132 standards. Given the seriousness of the issue, I have decided to move now as dean-designate to coordinate our response, rather than wait until September when my term as dean officially begins...

[W]e are appealing the preliminary ruling. On July 9 we served notice of intent to appeal. The appeal itself will be filed Sept. 17. It will cover 11 of the 17 standards for which we have been cited for non-compliance. (The remainder, we accept.) For those 11 standards in question, we will argue there were differences in interpretation by the LCME and by CACMS, and that the review committee lacked some critical information, unavailable at the time of the study, which might otherwise have resulted in a different outcome. The results of that appeal will not be known until October or November.

The notice of intent has no force or effect, pending the outcome of our appeal and a final ruling. That means we remain fully accredited at the present time.

Issues identified in the review committee's report relate mainly to curriculum management, monitoring, evaluation and information... We don't disagree that improvements were needed in those areas. We were already working to make many of them at the time of accreditation...

The Department of Psychiatry will follow the Undergraduate Medical Education Office and their direction as the Faculty of Medicine proceeds through this process and develops its action plan.

### Postgraduate News

The summer weather has finally arrived and so have our new residents. Please join me in welcoming our Class of 2014, PGY-1 residents: **Drs. Christina Aydin, Jacob Cookey, Shauna Correia, Katherine Matheson, Soroush Sadafi, Ashwin Varghese, and Christian Weins**. We also have our returning PGY-2 residents who have been completing rotations in other disciplines — welcome back to your home Department: **Drs. Anett Bessenyei, Sumeer Bhalla, Catalina Lopez de Lara, Meagan MacNeill, Sabina Nagpal, and Jennifer Slater**.

The Department welcomed the new PGY-1s and returning PGY-2s at a chilly BBQ on July 6. Thanks to **Ms. Norma Thompson** for planning the event.



The Class of 2014: **Drs. Ashwin Varghese, Katherine Matheson, Christian Weins, Christina Aydin, Soroush Sadafi, Shauna Correia, and Jacob Cookey.**

At the end of June, our annual graduation exercises were held at The Prince George Hotel. **Dr. Nick Delva** kicked off the evening's festivities by introducing Dr. Susan Abbey, President of the Canadian Psychiatric Association who was in attendance. Dr. Abbey provided some inspiring words for the graduates and everyone in attendance. **Dr. Jane Murphy** was a return special guest this year presenting the Alexander Leighton Resident of the Year Award in honour of her late husband.

**Dr. Malgorzata Rajda** presented the graduation certificates to the Class of 2009 residents: **Drs. Selene Etches, Margaret Hahn, Aaron Keshen, and Curt Peters**. **Dr. Cindy Calkin** was recognized though not in attendance.

Dr. Rajda also presented the certificates to the Fellows who completed their fellowship training: **Dr. Iliana Garcia-Ortega** (International Psychiatry) and **Dr. Kanwal Kukreja** (Psychotherapy).

The following represents the award categories and recipients:

- Clerks' Choice Award (Resident Teacher chosen by the Clerks): **Dr. Daniel Rasic**
- Teacher of the Year (Faculty Member-Residents' Choice): **Dr. Sabina Abidi**
- Alexander H. Leighton Resident of the Year: **Dr. Aaron Keshen**
- Dr. Charles J. David Prize: **Dr. Jonathan Brake**

- Dr. W.O. McCormick Award: **Dr. Randy Zbuk**; Loonie Awards (McCormick Award Runners-up): **Drs. Jonathan Brake, Sherry James, Ava Muir, Christa Peters, Daniel Rasic, and Michael Stubbs**
- Dr. Robert & Stella Weil Fund in Psychiatry: **Dr. Sherry James**

Chief Resident **Dr. Deborah Parker** and Associate Chief Resident **Dr. Emily Maxan** were recognized for their hard work and efforts over the past academic year.

Congratulations to the graduates and all of the award recipients! Well done!

## Fellowship News

**Dr. Abigail Ortiz-Dominguez** has been renewed to continue her fellowship training another year working with **Dr. Martin Alda** and the Mood Disorders group.

**Dr. Chris Bryniak** will join the fellowship program on August 1 to undertake his training in Forensic Psychiatry with **Dr. Scott Theriault**.

## Continuing Education Activities

The line-up for Clinical Case Conferences and University Rounds speakers is coming together for the 2009/10 academic year. If you have speaker suggestions, please forward to **Ms. Carrie Wipp** at [Carrie.Wipp@cdha.nshealth.ca](mailto:Carrie.Wipp@cdha.nshealth.ca).

There are several interesting workshops being organized which will include the 2nd Annual Collaborative Mental Health Care Workshop for the Spring 2010. Further information will be announced as the workshop plans are confirmed.

## Memorable moments from the Department of Psychiatry Annual Awards Night, June 26, 2009

**Dr. Malgorzata Rajda** (center) celebrates with new Fellowship graduates **Drs. Iliana Garcia-Ortega** and **Kanwal Kukreja**.





**top:** Drs. Curt Peters, Shannon MacDonald, Bill McCormick, and Saravana Muthu, Ms. Margaret Hipwell, and Dr. Alec Hipwell mingle at the pre-ceremony reception.

**left:** The Class of 2009 — Drs. Aaron Keshen, Selene Etches, Curt Peters, and Margaret Hahn. Missing from photo: Dr. Cindy Calkin.

**right:** Dr. Jane Murphy with Dr. Aaron Keshen, winner of the Alexander H. Leighton Resident of the Year Award.



## International Psychiatry Section

Submitted by: Sonia Chehil  
Director, International Psychiatry

### Mental Health, MIA Again: Reflections from the ECOSOC Meeting

In 2000, when the Millennium Development Goals (MDGs) were first introduced, Dr. Leslie Ramsammy, Minister of Health Guyana, highlighted the glaring omission of non-communicable diseases from this UN instrument for development. The MDGs state that health is critical to the economic, political, and social development of all countries, yet they contain no goals or targets for non-communicable diseases which account for the vast majority of all global deaths and are arguably the largest threat to health systems. In 2001, Dr. Ramsammy called for an MDG-plus: the inclusion of the non-communicable diseases — including mental health — within the MDGs.

Exclusion of the non-communicable diseases from the MDGs has perpetuated both their exclusion as priorities in the global development agenda and their continued neglect by donors and international organizations who have failed to pledge support to help developing countries address these leading health problems. Nearly a decade after the call for an MDG-plus, fragmented advocacy efforts are being aligned for a global movement for change.

#### The Millennium Development Goals

Eight goals for international development to be achieved by 2015, agreed to by 192 UN member states and over 23 international organizations:

1. Eradicate extreme poverty and hunger
2. Achieve universal primary education
3. Promote gender equality and empower women
4. Reduce child mortality
5. Improve maternal health
6. Combat HIV/AIDS, malaria, and other diseases
7. Ensure environmental sustainability
8. Develop a global partnership for development

<http://www.un.org/millenniumgoals>

In July 2009, the United Nations Economic and Social Council (ECOSOC) met in Geneva to focus on global public health goals and commitments and provided a platform for the WHO to launch the Global Non-communicable Disease Network (NCDnet). The NCDnet is a coalition of leading organizations and experts advocating for the integration of indicators on non-communicable diseases into the core MDGs. With the support of the World Bank, the World Economic Forum, the World Heart Federation, International Diabetes Federation, and International Union against Cancer, this coalition aims to raise the priority of non-communicable diseases and development work at global and national levels. Conspicuously, mental health is — once again — not at the table.

According to the WHO, the Neuropsychiatric Disorders account for 28% of disability adjusted life years (DALYs) attributable to the non-communicable diseases — greater than any other group of non-communicable diseases including cardiovascular diseases which account for 21% of DALYs. The WHO's 2005 report attributes 31.7% of all years lived-with-disability to neuropsychiatric conditions: 11.8% to unipolar depression, 3.3% to alcohol-use disorder, 2.8% to schizophrenia, 2.4% to bipolar depression, and 1.6% to dementia.

Further, there is growing awareness that mental disorders significantly contribute to the morbidity associated with non-communicable diseases as well as communicable diseases through delayed help-seeking, delay or failure of detection and diagnosis, poor adherence to medication treatment, and poor adherence to disease management recommendations. Like the other non-communicable diseases, mental illness has been largely ignored on the global health agenda. In fact, its glaring absence from the non-communicable disease global coalition raises concerns of whether mental health is truly considered part of any health agenda.

“Let us not forget that one of the most debilitating NCDs are the neuropsychiatric disorders and these conditions are no less a contributor to what leads to disability in our populations. Mental illness is a significant contributor to what prevents people from achieving long, healthy, productive lives. These conditions play no less a role than other NCDs in reducing our developmental trajectory,” stated Dr. Leslie Ramsammy at the WHO Ministerial breakfast meeting in Geneva, July 2009.

NCDnet is leaving the station — this is a train we can't afford to miss.



## Economic and Social Council

The ECOSOC (<http://www.un.org/ecosoc>), established under the United Nations Charter, serves as the central forum for discussing international economic and social issues, and for formulating policy recommendations addressed to Member States and the United Nations system. It is responsible for:

- promoting higher standards of living, full employment, and economic and social progress;
- identifying solutions to international economic, social, and health problems;
- facilitating international cultural and educational cooperation; and
- encouraging universal respect for human rights and fundamental freedoms.

### Facts about Non-communicable Diseases:

- 60% of deaths are caused by non-communicable diseases (NCDs) globally each year.
- 80% of these deaths occur in developing countries and of these nearly 50% are preventable.
- According to the World Bank, one third of the excess deaths among the poorest two-fifths of the world's population are caused by NCDs.
- By 2015 NCDs are predicted to increase globally by 17%: 27% in Africa, 25% in the Middle East, 21% in Asia and the Pacific, 17% in the Americas, and 4% in Europe.



**Dr. Sonia Chehil** in Geneva.

## Project Profile: Guyana Legislation

Submitted by: Scott Theriault  
Faculty, International Psychiatry

In Canada, we take for granted that there is a clear relationship between human rights, the law, and our work as clinicians, particularly in the area of the care and treatment of involuntarily admitted patients to hospital. We may not always agree on the details but we accept without hesitation that patients have basic rights, including the right to consent to treatment, freedom from abuse, confidentiality, etc. However, in some parts of the world this is not so.

As a forensic psychiatrist, and hence, as someone who may play an active role in denying individual rights under some clinical circumstances, I have a sensitivity to the rights of individuals with mental disorder. With this perspective I have had the great privilege to have been part of the work of the International Section in advancing new mental health legislation in the Caribbean region, including Trinidad and Tobago and most recently in Guyana. These areas

are burdened not only with outmoded facilities that can cause harm (however ill intentioned) to individuals but with outmoded ways of thinking about the capabilities and rights of individuals with mental disorder. It is immensely rewarding for me, professionally and personally, to be able to work with dedicated people to whom the concepts of health related rights and human rights are not abstract but are the building blocks of an improved mental

health system. Our hope in this work is that rather than assisting one patient at a time, new mental health legislation can assist all patients who present with mental disorders for care. In doing so I draw new energy for my day to day work in Canada and a deeper appreciation for the fundamental rights of the individual. We have recently produced a brief that has gone to the Legal Affairs Department in Guyana and are hopeful that within a few months a Bill will be generated that embodies the consensus made during recent visits. Someday I hope to toast the introduction of a new Act with the finest rum in the Caribbean.



**Dr. Scott Theriault** in Guyana in June reviewing the draft mental health legislation with stakeholders and policy makers.

## Dr. Paul Janssen Chair in Psychotic Disorders

Submitted by: Dr. Phil Tibbo

Dr. Paul Janssen Chair in Psychotic Disorders

Work continues at a busy pace since the last submission to *Headlines*. With the success of the Nova Scotia Health Research Foundation Development grant we have continued with the methodology refinement at the high field strength magnet (4Tesla) housed in the NRC-IBD (Atlantic) for neuroimaging. Specifically, we are developing high field strength magnet resonance spectroscopy (MRS) imaging so that we can assess specific brain neurochemicals in vivo. Once development/refinement is complete we will be ready for a clinical study. We are interested in researching white matter structures in the brains of individuals who are early in the psychosis illness, and following any potential changes over time, assessing these MRS measures as predictors of outcome.

The Janssen Chair also is pleased to report two more successful research grants:

1. As Co-Principal Investigator, **Dr. Phil Tibbo** was recently successful with a CIHR operating grant for a study entitled "NPAS3 variants in schizophrenia and other psychosis". This genetic study will examine the role of the NPAS3 gene in psychosis and its possible implications in

cognitive disruptions. This study is a collaborative study between researchers at Dalhousie University (Psychiatry) as well as the University of Alberta (Psychiatry, Medical Genetics). The organization of the logistics of this project are ongoing with a start planned for September 2009.

2. Dr. Tibbo is also a Co-Investigator on the recently awarded Department of Psychiatry Research Fund project entitled "Changes in appraisal, distress, and knowledge associated with two modes of family education in Early Psychosis" with Ms. Margie Crown, Nova Scotia Early Psychosis Program (NSEPP), leading this project. This project will investigate different ways to deliver education to family members of first episode psychosis patients (condensed vs. multi session) and began in July 2009.

A very successful meeting of the Nova Scotia Provincial Early Psychosis Network was held in June. The network is made up of clinicians representing each of the provincial health districts,

the IWK, Health Canada, and the NSEPP. Dr. Tibbo chaired the meeting which included, among other topics, the identification of standardized tools and protocols that could be reasonably applied across the province for first episode psychosis assessment and outcomes procedures. **Drs. Heather Milliken, Sabina Abidi, Alissa Pencer** and Ms. Crown were important contributors to the two-day meeting. There was also recognition that effective use of these tools and protocols will require involving more clinical staff, particularly those working in adult services, in a process of education and training, and, in some cases, more formal involvement with the network itself.

We have also been very busy brainstorming with collaborators around the issue of public education campaigns on early warning signs of psychosis — a secondary prevention approach. We hope to report more on this in the future.

# Sun Life Financial Chair in Adolescent Mental Health

Submitted by: Dr. Stan Kutcher  
Sun Life Financial Chair in Adolescent Mental Health

## Help Canada Create a Child and Youth Mental Health Strategy!

In Canada, approximately one in five children and adolescents experience some form of mental disorder. Most major mental disorders begin prior to the age of 25, making this period a critical time for the promotion and treatment of mental health problems.

One of the key initiatives of the Mental Health Commission of Canada is to develop a Mental Health Strategy for Canada. As part of the strategy the Child and Youth Advisory Committee of the Mental Health Commission of Canada will support the development of a framework specific to the needs of child and youth mental health.

The proposed framework, entitled Evergreen, will complement and provide a child and youth context to the Mental Health Strategy for Canada.

A framework for child and youth mental health is important because it helps keep everyone on the same page, working together towards a common goal — to develop a mental health system that effectively meets the needs of young people living with mental disorders and to encourage optimal development of young people.

Evergreen will be collaboratively developed by professionals, youth,

parents, and members of the public from across Canada who have expertise, interest, or experience with mental health and mental illness.

In the end we envision Evergreen to be among the most comprehensive child and youth mental health frameworks in the world!

## How YOU Can Make a Difference

Help us share this information and shape the future of Canada's mental health system!

*Engage* – we want people to share their opinions with us about what values Canadians want to uphold in relation to mental health and child and adolescent mental health services. The public forum is online. Share your voice and ideas at <https://surveys.dal.ca/opinion/s?s=5857>.

*Educate* – an informed public is a strong public. We want to give people the best available information to make good decisions about their mental health. Learn more about youth mental health and mental illness at <http://www.teenmentalhealth.org>.

*Advocate* – the Mental Health Commission of Canada is committed to creating a comprehensive mental health strategy for Canada and is in support of a component specific to the needs of

children and youth. Youth mental health will stay in the shadows unless we speak up and advocate for change. Learn more at <http://www.mentalhealthcommission.ca>.

*Connect* – join our group on Facebook and invite your friends! Our page is called “Help Canada Create a Youth Mental Health Strategy”. Find us online at [www.facebook.com/youthmentalhealth](http://www.facebook.com/youthmentalhealth).

Evergreen is a project of the Child and Youth Advisory Committee of the Mental Health Commission of Canada. Funding for this project is provided by the Mental Health Commission of Canada with additional support from the Sun Life Financial Chair in Adolescent Mental Health, the IWK Health Centre, T. R. Meighen Family Foundation, and Kathryn A. Weldon Foundation.



## News & Announcements

### Staff / Faculty Changes

**Dr. Luke Napier** has resigned from the 7 Lane inpatient unit, effective June 30, to work in Bermuda for one year.

**Dr. Tim Bood** has left the Department effective July 3. He previously worked at the Assessment Services Unit at the Nova Scotia Hospital.

**Dr. Aaron Keshen** has joined the faculty as a Lecturer and Staff Psychiatrist in Adult General Psychiatric Services, effective July 1. Dr. Keshen will be working on the 6th and 7th floor inpatient units of the Abbie J. Lane Memorial Building, and his office is located in Rm. 7519. He can be reached at 473-2355 or [Aaron.Keshen@cdha.nshealth.ca](mailto:Aaron.Keshen@cdha.nshealth.ca).

**Dr. Curt Peters** has joined the faculty as a Lecturer and a Staff Psychiatrist in Adult General Psychiatric Services, effective July 1. Dr. Peters will be working at the Cole Harbour Mental Health Clinic. He can be reached at 434-3263 or [Curt.Peters@cdha.nshealth.ca](mailto:Curt.Peters@cdha.nshealth.ca).

Please also welcome the following new faculty to the Department: **Dr. Simon Brooks**, Asst. Professor (Bridgewater); **Dr. David McAllindon**, Lecturer, Early Psychosis Unit; **Dr. Jacqueline Milliken**, Lecturer (Bridgewater); **Dr. Pippa Moss**, Lecturer (Amherst); and **Dr. Virkam Patel**, Adjunct Professor, International Psychiatry.



**Dr. Mirko Manchia** joined the Department on July 1 as a Sobey Postdoctoral Fellow in Psychiatry Research, working with **Dr. Martin Alda**. Dr. Manchia can be reached at 473-2712 or Mirko.Manchia@cdha.nshealth.ca. Please join the Department in welcoming Dr. Manchia to Canada.

## News

**Drs. Douglas Maynes** and **Philip Mills** attended the 2009 Collaborative Mental Health Care Conference in Hamilton in May. The three-day conference included keynote presentations from Drs. Nick Kates “The Next Ten Years: More than Just Collaboration”, Alan Cohen “Improving Access to Psychological Therapies: Lessons from the U.K. Experience”, Vincent Felitti “Adverse Childhood Experiences and Their Relation to Adult Health and Well-Being”, and Jean Clinton “Early Child Development: A Crucial Determinant of Health. What is the Shared Care Story?”. Dr. Kates was the keynote speaker at the Nova Scotia Hospital’s Academic Day XX in April and is a well-known expert on Shared Care with Primary Care practice.

The organization of the annual conference on Shared Mental Health Care in Canada is one of the projects of the National Shared Care Working Group. Each year the conference is held in different parts of the country, including Halifax in 2003. This year was the tenth such conference.

Drs. Maynes and Mills found the conference to be very interesting and it provided useful knowledge and information in regards to collaborative care practice.

**Drs. Stan Kutcher** and **David Gardner** offered a course entitled “Rational Drug Prescribing in Psychiatry” in Lisbon, Portugal in June, jointly offered by the Dalhousie University Department of Psychiatry and the Departamento de Saúde Mental, Faculdade de Ciências Médicas of the Universidade Nova de Lisboa. The two-day course included seven plenary sessions and small group work on a choice of two cases each day. The course was attended by 35 psychiatrists and psychiatry residents from in and around Lisbon. This was the second such course offered by Drs. Kutcher and Gardner in Lisbon.

## Announcements

The Department of Health has funded a student to work with **Dr. David Gardner** for the summer. Ms. Melissa Hawkins is going into her fourth year of the BSc Pharmacy program at Dalhousie in the fall and is working on a number of research projects as well as gaining clinical experience working with Dr. Gardner in the Early Psychosis Program.

## Congratulations

Congratulations to **Dr. David Gardner** for winning two teaching awards this year. He is the recipient the 2009 Association of Faculties of Pharmacy of Canada National Award for Excellence in Education and the 2008-2009 Dalhousie University Faculty of Health Professions Teaching Excellence Award. Well done!