

Department of Psychiatry HEADLINES

Hats off to the Class of 2013!

They started out as a group of seven, but are leaving us as a group of nine. One of the largest graduating classes the department has seen said their final goodbyes on June 21 as they were presented with their graduation certificates at the Marriott Harbourfront Hotel in Halifax.

A hardworking, ambitious, yet varied group, they hold an impressive list of accomplishments, not only with their masters' degrees and published books and articles, but also in the personal lives, with their families and children.

"They have been so great to work with," says **Dr. Margaret Rajda**, director of postgraduate education. "I'm very proud of their accomplishments and grateful to have had the opportunity to work with them."

Dr. Rajda says the residents weren't the only ones doing the learning over their five years with the department. "They helped me to learn new things," she says. "Like how to shape a program and how to create an individual approach. They are a very talented group and the department will surely miss them when they're gone."

Please join us in congratulating the graduates on an exceptional five years! For more on what comes next for them, read on.

Anett Bessenyei

Beginning in September Anett will be going to work with the Reproductive Mental Health team at the IWK Health Centre.

Sumeer Bhalla

Sumeer has accepted a nine-month term staff position at The Nova Scotia Hospital Mayflower Unit. He remains



Clockwise from left: Drs. Anett Bessenyei, Daniel Rasic, Christopher Murphy, Meagan MacNeil, Sabina Nagpal and Catalina Lopez de Lara.

committed to his long term practice plans in acute care psychiatry with focus on Emergency and Crisis Management. Dr. Bhalla will also be working on his secondary career in golf and "building those oh so important core muscles."

Catalina Lopez de Lara

After finishing residency, Catalina will be moving to Toronto to start the two-year Subspecialty Program in Geriatric Psychiatry at the University of Toronto.

Long term, she plans to practice geriatric psychiatry, most likely in an outpatient setting. She may also do some outreach work. Dr. Lopez de Lara has a research interest in the area of mood disorders in the elderly and therefore, would eventually like to have a practice where she can combine both clinical and research work.

Meagan MacNeil

Immediately following her residency, starting July 1, Meagan will begin a Geriatric Psychiatry Fellowship with Dalhousie, with hopes of advancing her career in a local academic center. She is available for hire!

On a more personal note, Meagan will be getting married in August to Michael Forbes in their hometown of New Glasgow.

Christopher Murphy

Christopher Murphy completed his residency training in February and has since completed a locum position on 7-Lane. He will be taking a couple of weeks off to do "guy stuff" with his 11-yr-old son, who's already finished school for the year.

Dr. Murphy will remain here at Dalhousie and will begin a fellowship

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Message from the Head

Dr. Nick Delva

This issue of Headlines illustrates well the many strengths of our department! These include: a vibrant and resident-centred postgraduate training program; cutting-edge clinical care (e.g., please see stories on page 10 regarding deep brain stimulation for refractory depression, and personalized medicine); keen and successful researchers at different stages of their careers (e.g., **Dr. Cindy Calkin**, **Dr. Martin Alda**); a well-integrated approach to education under the leadership of Director of Education, **Dr. Allan Abbas**; a range of interesting and valuable Continuing Education offerings, including debates and presentations by visiting speakers with a range of expertise; integration of our academic activities with provincial mental healthcare services (**Dr. Stan Kutcher** – see Academy, page 8; **Dr. Phil Tibbo** – see report on the provincial network for early psychosis, page 9; and **Dr. Emmanuel Aquino** – see Community Focused Living, page 12); global psychiatry initiatives in the South and the North, including the development of a psychiatric mental health nursing program for nurses in the Northwest Territories; and the ongoing development of our faculty (congratulations to **Dr. Lara Hazelton**, now MEd).

Congratulations to this year’s graduates! We wish them well as they set out on the next stages of their

careers, which in many cases include further subspecialty training. As illustrated on our front-page story, after ensuring that their mandatory rotations are covered, our residents have the ability to choose from a wide range of options as they prepare for their careers in psychiatry. These include working in a number of clinical fields (including the psychiatry of intellectual disabilities, forensic psychiatry, general psychiatry with a focus on inpatient and/or community care, global psychiatry with its focus on providing care to areas of limited psychiatric resources both within and outside our country, child & adolescent and geriatric psychiatry, and a number of other areas of subspecialization) and the completion of higher degrees within the residency, including the MEd and Master’s degrees in various scientific fields. Our child and adolescent division now offers a Royal College-approved subspecialty training program, which will accept its first subspecialty training residents in 2014, and it is hoped that our geriatric psychiatry program will soon be approved for the same. The Royal College Clinician Investigator Program is also an option and to do this, residents who are accepted are supported to spend two years at the PGY-4 level, during which time they devote 80 per cent of their time to research while continuing with some clinical work,



which maintains well the continuity of their clinical training. Thus, as I often say, in the Dalhousie Department of Psychiatry, our residents can follow their dreams!

I would like to thank our Chief Resident, **Dr. Liisa Johnston**, and Associate Chief Resident, **Dr. Vanessa Thoo** for their hard work and dedication to these important leadership positions, which are so important for success in everything from a successful CaRMS match to the smooth and effective day-to-day operation of our postgraduate program and clinical services, in which our residents play crucial roles (e.g., as first point of contact for acutely ill patients in the Emergency Department).

In closing, I would like to thank all those who made our last academic year such a success, and wish you all a happy and enjoyable summer.

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HEADLINES

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Research Section

Submitted by: Janet Bardon
Research Administrator

Meet a Researcher: Dr. Cynthia Calkin

This issue profiles Dalhousie psychiatrist and researcher Dr. Cynthia Calkin. *Meet a Researcher* 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 Brown** at Jen.Brown@dal.ca.

Current research interests: My current interests are predominantly in clinical research and include medical co-morbidity in patients with bipolar disorder. Specifically, I am interested in the effects of insulin resistance (IR) and type 2 diabetes (T2D) on the course of bipolar illness and treatment response.

Current research projects: I am the principal investigator for a Brain and Behaviour Research Foundation funded study titled “The risk and burden of insulin resistance in bipolar disorder.” This is a two year study to establish the rates of IR, a precursor to T2D in bipolar disorder subtypes and to further identify risk factors. We are examining the impact of IR on the course of bipolar illness and treatment response.

I am also an investigator for the “Pharmacogenomics of mood stabilizer response in bipolar disorder” (PGBD) study, a large international genome wide association study of pharmacogenomics of lithium response, as well as on an ELAN new treatment trial for bipolar disorder.

A typical day in the life: As a psychiatrist in the Mood Disorders Program, the majority of my time involves seeing new patients in consultation and following patients with more refractory bipolar disorder or depression. This includes clinical teaching for medical students and residents. I am also involved in new treatment programs within our department, such as deep brain stimulation and ketamine infusion for treatment resistant depression. I have two afternoons per week that are set aside for research, although clinical work often interrupts this.

What do I wish I'd known: Doing research involves long hours outside of clinical work, in particular, when trying to establish ones' research career. It is difficult to justify scheduled time for research if not yet funded, however, it requires a significant amount of time and effort outside of working hours in order to obtain funding. It is a bit of a catch-22 in the beginning and it requires some stamina and perseverance. Without strong mentor support, it would not be possible.

Most satisfying and frustrating aspects of doing research: Working with patients frequently gives rise to more clinical



Dr. Cynthia Calkin

questions than answers. The most satisfying aspect of doing research for me includes investigating clinical questions that may immediately influence treatment decisions or management for patients. For example, we all have patients who can be difficult to treat (have refractory illness). We have learned that patients with co-morbid IR or T2D have a more chronic course and are less likely to respond to lithium. It could be that treating underlying abnormalities in glucose metabolism may be one way of improving response to bipolar treatment. In some patients, this could be an important factor in their lack of response to treatment.

One of the more difficult aspects of doing research involves recruiting patients. If a study requires a large sample size, or one wants the sample to not only represent patients from a specialty clinic, then one must recruit patients from general psychiatry or the community. I think this can be a challenge at times, as clinicians are busy seeing patients and may not see the research as relevant or perhaps within the patient's best interest. But without research, our clinical questions

remain unanswered and we are no further ahead in improving treatment and outcome.

Experience that best prepared me for this position: It is difficult to say that there was a single experience that best prepared me. I think that strong mentorship within a well established research infrastructure has been most critical. I have also come to appreciate my background in medicine and its contribution to my research in medical co-morbidity in patients with bipolar disorder.

My research mentor: I have been fortunate to have Dr. Martin Alda as my mentor since I began studying psychiatry. He has been central to both my interest in clinical psychiatry and in psychiatric research.

My second career choice: I practiced family medicine for 10 years prior to studying psychiatry. Although I liked not being limited to one area of medicine, I think that I have always had a special interest in psychiatry, and I was ready for a new challenge. Although family practice was my initial first choice of careers, I would now consider it my second career choice.

Psychiatry Research Day 2013: November 1, The Lord Nelson Hotel

Mental Capital and Longer Lives

Keynote speaker: Tom Kirkwood, Institute for Ageing and Health, Newcastle University, UK

We all know lifespans are increasing, but why is this happening and where might it lead? Previous increase in life expectancy was caused by preventing deaths in the early and middle years, however, the increase is now driven by something new: we are reaching old age in generally better health. At the same time, biology has established that there is almost certainly no fixed program for aging. Aging is much more malleable than we used to think. We need to establish the parameters that govern this malleability and to identify the interactions between intrinsic biological processes that drive age-related frailty, disability and diseases, and the social and lifestyle factors that influence our individual trajectories of health in old age. Of particular importance is the preservation through the life course of an individual's mental capital, defined as "the totality of an individual's cognitive and emotional resources, including their cognitive capability, flexibility and efficiency of learning, emotional intelligence, and resilience in the face of stress." Mental capital alters through life and can be thought of in terms of a trajectory which rises during an individual's early years, reaches a plateau during the middle years, and finally declines in later life due partly to intrinsic age-related changes but also to continuing failure to confront the destructive marginalization of the considerable quantity of potential, but under-utilized mental capital of seniors. In this lecture, the deep connections between biology of aging, demographic change, and mental capital will be explored.

If you are interested in presenting at this year's Psychiatry Research Day, please contact **Ms. Jennifer Brown** at Jen.Brown@dal.ca. The deadline to submit an abstract is August 30.

Announcements

Congratulations to the successful applicants of the February 2013 Department of Psychiatry Research Fund:

- Dr. Line Caes (**Dr. Christine Chambers**) – "Impact of pain on reward motivation in children and adolescents."
- Dr. Sean MacKinnon (**Dr. Sherry Stewart**) – "Drinking motives mediate the relationship between personality and alcohol problems: A 4-wave, 4-week study of romantic couples."
- **Dr. Katherine Matheson (Dr. Alan McLuckie)** – "Mental stress and financial status in medical students."
- Ms. Tamara Speth (**Dr. Penny Corkum**) – "The impact of sleep restriction on the cortisol awakening response in typically developing children and children with ADHD."
- **Dr. Joel Town** – "Halifax treatment refractory depression trial."

Education Section

Submitted by: Annette Cossar
Education Administrator

Meet an Educator: the Education Management Committee (EMT)

Education is one of the major pillars of the university department's mission. The Education section is pleased to begin a series of segments in *Headlines* to introduce you to the section and to some key educators in the Department. This issue profiles the Department of Psychiatry's Education Management Committee (EMT). *Meet an Educator* will be a recurring article in the Education Section of *Headlines*. If you are interested in being profiled in an upcoming publication, please contact **Ms. Annette Cossar** at Annette.Cossar@cdha.nshealth.ca.



(Clockwise from left): Dr. Allan Abbass, Ms. Genevieve MacIntyre, Dr. Michael Butterfield, Ms. Annette Cossar, Dr. Mark Bosma, Dr. Cheryl Murphy, Dr. Heather Milliken, Ms. Michelle Patenaude and Ms. Mandy Esliger. Missing from photo: Drs. Margaret Rajda, Sonia Chehil, Lukas Propper, Laurie Potter, Vanessa Thoo, Ms. Amy MacKay and Ms. Norma Thompson.

The Education Management Team (EMT) meets monthly to review emerging educational matters, discuss funding and generate ideas to develop education. This year, for example, we are starting a new peer nominated Educator of the Year Award, with the goal of recognizing the truly excellent education we provide here in the department.

Members of the EMT are as follows:

- Dr. Allan Abbass, Chair, Director, Education
- Dr. Malgorzata Rajda, Director, Postgraduate Education
- Dr. Heather Milliken, Director, Continuing Education
- Dr. Cheryl Murphy, Director, Undergraduate Education
- Dr. Mark Bosma, Director, Fellowship and Subspecialty Programs
- Dr. Sonia Chehil, Director, Global Psychiatry
- Dr. Lukas Propper, Faculty Coordinator, Child and Adolescent Psychiatry
- Dr. Laurie Potter, Faculty Coordinator, Horizon Health Network
- Dr. Vanessa Thoo, Chief Resident
- Dr. Michael Butterfield, Associate Chief Resident
- Ms. Norma Thompson, Postgraduate Coordinator
- Ms. Genevieve MacIntyre, Education Coordinator
- Ms. Mandy Esliger, Undergraduate Coordinator
- Ms. Annette Cossar, Education Administrator

Stay tuned for the *Meet the Educator* sections in upcoming *Headlines*.

Undergraduate News

Congratulations to the recipient of the Poulenc prize, Mr. Colin Turner and of the RO Jones Award, Ms. Amy Trottier.

This year, the Global Health Office accepted three International Medical University (IMU) students from Malaysia and two International Medical Graduates (IMG) into their Link Program, which aims to prepare international students for entry into Clerkship in September. The Psychiatry unit of the program consists of an introduction to Psychiatry, three neuroscience cases and ten clinical interviewing skills sessions. The interviewing skills sessions have doubled this year to better prepare the students for clerkship.

We are still recruiting tutors for the Med 1 & Med 2 education activities for 2013/14, including the Clinical Skills II unit. If you are interested in participating please contact **Ms. Mandy Eslinger** at Mandy.Eslinger@cdha.nshealth.ca.

Postgraduate News

The Department hosted the 2013 Graduation Exercises on June 21 at The Marriott Harbourfront Hotel. This year's celebration drew a great turnout for the graduating residents with faculty, staff, residents and family and friends attending. Congratulations to the Class of 2013: **Drs. Anett Besssenyei, Sumeer Bhalla, Catalina Lopez de Lara, Meagan MacNeil, Christopher Murphy, Sabina Nagpal, Dilruba Rahman, Daniel Rasic** and **Jennifer Slater**. Congratulations is also in order for **Drs. Arlene MacDougall** and **Mirko Manchia** who completed their Fellowship training with the department. A job well done to all!

The evening allowed for the opportunity to celebrate the achievements of not only the graduating class, but also other residents and faculty. Awards were given out as follows:

Clerks' Choice Award: **Dr. Marie Claire Bourque**

Resident's Choice - Teacher of the Year: **Dr. Curt Peters**

Above and Beyond Award: **Dr. David Gardner**

PGY-5 Excellence in Mentorship: **Dr. Jackie Kinley**

Horizon Health Network SJ Zone PGY 1 Resident of the Year Award: **Dr. Sarah Fancy**

Alexander H. Leighton Resident of the Year Award: **Dr. Sabina Nagpal**

Dr. Charles J. David Prize: **Dr. Michael Butterfield**

Dr. W.O. McCormick Award: **Dr. Michael Butterfield**

Loonie Award recipients: **Drs. Mirka Kolajova, Christian Wiens, Meaghan MacNeil, Liisa Johnston** and **Vanessa Thoo**

Dr. Robert & Stella Weil Fund in Psychiatry: **Dr. Shauna Correia**

Chief and Associate Chief Residents – Recognition: **Drs. Liisa Johnston** and **Vanessa Thoo**

Division of Child & Adolescent Psychiatry Long Standing Service Award: **Dr. Khalil Ahmad**

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in Forensic Psychiatry starting on July 1, with the ultimate goal of obtaining employment in the Atlantic Provinces.

Sabina Nagpal

Immediately after graduation, Sabina will do a short locum on 6-Lane, before starting her one-year fellowship with the Nova Scotia Early Psychosis Program. In addition to working with individuals with psychotic illness, her fellowship will include training in group psychotherapy under the supervision of **Dr. Jackie Kinley**.

In the long term, Dr. Nagpal hopes to integrate her passions for public mental health and psychiatry. She would love to split her work between clinical care for young persons with severe and persistent mental illness, as well

as be involved in mental health system strengthening both locally and globally.

Dilruba Rahman

Following the completion of her residency in February, Dilruba started working as a Staff Psychiatrist at South Shore Regional Health Authority. She is also working as an outpatient psychiatrist.

During her residency Dr. Rahman developed an interest in consultation-liaison psychiatry and dynamic psychotherapy. She has also taken an active role in the Seniors Mental Health team and Addictions Services and has a growing interest in those areas.

Coming from a small third world country, being a visible minority, and finding her way to continue working as

a physician and more importantly as a psychiatrist was a dream come true for Dilruba. She says the journey of her residency was an absolute joy.

Daniel Rasic

Daniel is the first graduate in the department to complete the Clinician Investigator program. His plans are a bit up in the air after graduation, though he says he's got "something in the works!"

Jennifer Slater

Jennifer had to miss the graduation exercises since she was due to have her first baby! She recently moved to Vancouver and will be putting her career on hold until January 2014.

Continuing Education Activities

Overview

As the Continuing Education/Continuing Professional Development Program for the academic year comes to an end, it is a time to reflect on the many achievements and highlights of the past year.

It was another highly successful year for the Joint Dalhousie University Department of Psychiatry & Capital Health Addictions & Mental Health Continuing Education Program. Attendance at the regularly occurring events including monthly University Rounds, weekly Clinical Academic Rounds, monthly Child & Adolescent Psychiatry Academic Rounds, weekly Inter-Professional Education Sessions, Sleep Rounds and monthly Seniors Mental Health Education Sessions increased significantly. In addition to current sites throughout Nova Scotia and Saint John, New Brunswick, videoconferencing of University Rounds and Clinical Academic Rounds was extended to other sites in New Brunswick and the NSH based Inter-Professional rounds are now videoconferenced to the Northwest Territories in addition to multiple community mental health sites throughout CDHA.

One of the highlights of the academic year were the Psychiatry Debates, based on the internationally recognized Maudsley debates at King's College and now held twice a year in the fall and spring. Two teams of debaters, each consisting of a faculty member and a resident, argue in favour of or against a resolution related to a controversial topic in psychiatry, with the audience determining the ultimate winner.

This year's debates were:

- "Problems with Prediction: The Quagmire of Suicide Risk Assessments" on November 7, 2012. Debaters were **Drs. Mark Bosma** and **Mirka Kolajova** versus **Drs. Andrew Harris** and **Christian Wiens**.
- "Nipping it in the bud: Can Psychiatrists Prevent Mental Illness?" on March 27, 2013. Debaters were **Drs. Sabina Abidi** and **Michael Butterfield** versus **Drs. Rudolph Uher** and **Marie-Claire Bourque**.

Recent Highlights

At University Rounds on May 15, 2013 – Dr. Arnold Slive, Ph.D., Visiting Associate Professor of Psychology at Our Lady of the Lake University, San Antonio, Clinical Consultant, Austin Child Guidance Center, gave a very interesting presentation on the topic: "Single Sessions with Families: Making the Most of One Hour."

This year's Department of Psychiatry, R.O. Jones Memorial Lecture was given by Dr. Sarah Hollingsworth Lisanby, Lawrence C. Katz Professor and Chair, Department of Psychiatry and Behavioral Sciences Duke University School of Medicine. Her presentation "Therapeutic Neuromodulation in Psychiatry: Opportunities & Challenges for our Field" provided an excellent overview of the use of brain stimulation technologies in the treatment of mental disorders.



Dr. Arnold Slive



Dr. Sarah Hollingsworth Lisanby

Upcoming Events

While the regular Continuing Education/Continuing Professional Development programs are suspended for the summer months, resuming in September 2013, we are already busy planning for the Academic Year 2013-2014. Invitations are being sent out to potential University Rounds speakers and planning has begun for: the XXV Annual Academic Day, a Psychotherapy conference and workshops on "Teach the Teacher," Motivational Interviewing, and Use of IT technologies in education. This year as part of the IPP process, faculty were asked to indicate their agreement to present at either the QEII Clinical Academic Rounds or the Inter-Professional Education Sessions. Faculty members can either present individually or as part of a multidisciplinary team. Faculty are encouraged to contact **Ms. Genevieve MacIntyre** at Genevieve.Macintyre@cdha.nshealth.ca or 902-473-5664 as soon as possible in order to obtain your preferred date for your presentation.

Wishing everyone a wonderful summer and looking forward to seeing you again in September 2013 for the start of another excellent year of Continuing Education/Continuing Professional Development Programs.

Sun Life Financial Chair in Adolescent Mental Health

Submitted by: Dr. Stan Kutcher

Sun Life Financial Chair in Adolescent Mental Health

TeenMentalHealth.org rolls out updated Transitions resource for students

The transition from high school to post-secondary education just got a little easier for students. TeenMentalHealth.org has redesigned and revamped Transitions, a resource for first-year students to help them deal with this transitional stage, and to find out where to get help.

Transitions is the first of its kind in Canada and a unique resource intended to help youth overcome issues faced during transition to university or college life. It covers study strategies, peer pressure, financial responsibilities, mental illness, addictions, sexual health and suicide.

Today mental disorders are the most common and disabling conditions affecting young people and this can affect a student's emotional & physical well-being, their ability to learn, and can be a factor in why some students drop out of school. "Our aim is to enlighten youth on the choices they have and to provide information that they can use to make healthy choices for themselves and their peers as they transition into their new social and academic environment," says **Dr. Stan Kutcher**.

"Above all, Transitions will help bring awareness to common mental disorders that teens may encounter and provide information on campus counselling services and where teens can go to get help."

"The format versatility of Transitions makes it easy for teens to access the information across all plains of communication," says Dr. Kutcher. Transitions will be available as a hard-copy book, an App, an eBook and for free from TeenMentalHealth.org.

For more information and to access Transitions, visit TeenMentalHealth.org.



Making a difference in the classroom

A recent report by Dalhousie University and the Department of Education shows staggering numbers in substance abuse, suicide and depression in young people across the province. The numbers demonstrate significant concern for our youth, especially considering that 70 per cent of mental illnesses begin before the age of 25.

"Early assessment and intervention is a key priority for Nova Scotia families. It builds on the work we've been doing with educators," said Dr. Stan Kutcher. "This July, we are inviting teachers, counselors, advisors, clinicians, administrators, healthcare providers, advocates and parents to participate in The Academy which will equip them to deal with mental health problems and disorders in teenagers." Dr. Kutcher talks further on The Academy at: <http://youtu.be/xrwzrWpInVA>.

Dr. Kutcher and his team have developed resources to assist educators make a difference in the mental health of their students. Alongside training, "High School and Mental Health," is a curriculum used nationally and internationally, along with Transitions, a resource for students transitioning from school to university. These resources have improved mental health literacy, and understanding in the classroom, while educators have had a desire to learn more, talk to experts and engage with other educators leading to the birth of the Academy.

This year the Academy will take place on July 8-9 at Halifax West High School where Dr. Kutcher will be joined by **Dr. Pajer, Dr. Abidi, Dr. Bagnell, Dr. Corkum, Dr. Junek, Dr. Zinck** & Ms. Kaiser.

For more information visit TeenMentalHealth.org/for-educators/academy-in-school-mental-health-2012/.



Dr. Paul Janssen Chair in Psychotic Disorders

Submitted by: Dr. David Whitehorn
Facilitator, Nova Scotia Early Psychosis Network

New Provincial Service Standards for Early Psychosis

It is nearly ten years since provincial service standards for Early Psychosis were first adopted by the Nova Scotia government. Over the past two years a process has been underway, led by **Dr. Phil Tibbo** and members of the Nova Scotia Early Psychosis Network, to revise and update the standards based on advances in research and clinical programming.

The establishment of the Nova Scotia Early Psychosis Network, in 2004, was mandated by the service standards adopted at that time. The Early Psychosis Network is one of four such mental health speciality networks in the province, the others being Eating Disorders, Seniors Mental Health and Developmental Disorders. In the recently released provincial Strategy for Mental Health, the specialty networks were strongly supported.

The Early Psychosis Network brings together clinicians from all of the health districts and the IWK. The Nova Scotia Early Psychosis Program, a Clinical Academic Program of Dalhousie University and Capital Health, has a leadership role on the Network as well as representing both the Capital Health District and the broader issues of research, education and clinical programming for the entire province.

As the Dr. Paul Janssen Chair in Psychotic Disorders and the Director of the Nova Scotia Early Psychosis Program, Dr. Tibbo plays a central role

in all of the efforts to enhance care for young people developing psychosis in Nova Scotia, and their families.

In March 2013, the Early Psychosis Network conducted a day and a half conference that brought together over thirty clinicians and mental health administrators from throughout the province, along with consumer, family and community group representatives. The purpose of the conference was to examine in detail the new Early Psychosis Standards and to identify issues that will arise as these new standards are implemented over the coming three to five years.

The conference began with a presentation by Ms. Lori Hassall, Coordinator of the Early Psychosis Program in London, Ontario and a leader of the Ontario Early Psychosis Network. Ms. Hassall has been instrumental in the recent development of provincial standards for Early Psychosis in Ontario. The presentation traced the history of Early Psychosis services in Ontario, beginning in 1995 with the pioneering program in London, and expanding to the over thirty Early Psychosis programs now active in the province. Ms. Hassall identified key issues that need to be addressed in the implementation of standards, including the importance of consistent sharing of information among clinicians and administrators throughout a province.

Following that presentation, Dr. Tibbo

spoke and traced the history of Early Psychosis in Nova Scotia, beginning with the establishment in 1995 of a program for first episode psychosis that integrated clinical service with education and research, and became known as the Nova Scotia Early Psychosis Program.

For the remainder of the conference, working groups examined each of the eight new standards, exploring not only the content of the standards, but also the nature of the measureable indicators associated with each of the standards.

The presence of a wide range of stakeholders, including those in administrative roles in the mental health system, as well as clinicians, from every part of the province, made the discussions especially rich and meaningful. Those who attended now form a learning community that will be able to grow and work together over the coming years as the standards are implemented.

In addition, as an outgrowth of the conference, the Early Psychosis Network will be offering a series of webinars over the coming year, to provide enhanced access for all stakeholders to the key research findings relevant to the field of Early Psychosis.

Further information can be found on Nova Scotia Early Psychosis Website: <http://earlypsychosis.medicine.dal.ca>.

Killam Chair in Mood Disorders

Submitted by: Dr. Martin Alda
Killam Chair in Mood Disorders

Deep brain stimulation treatment for patients with treatment resistant depression

The Mood Disorders Program recently saw its first patient treated for depression by neurosurgery. Deep brain stimulation of the white matter adjacent to the subgenual cingulate gyrus has been proposed by Dr. Helen Mayberg and colleagues in Toronto in 2005 as a method to alleviate chronic depression resistant to standard therapies. Dr. Ivar Mendez and Ms. Paula Chiasson (Neurosurgery) and Drs. Matthias Schmidt (Radiology), **Cindy Calkin** and **Martin Alda** (Psychiatry) have been involved in the care of the patient. Over the years we have seen an increasing number of patients who have not responded to standard treatment options such as psychotherapy, antidepressants or ECT, and so we welcome having another treatment option available.

CINP Thematic Meeting on Pharmacogenomics and Personalised Medicine in Psychiatry held in Jerusalem in April 2013

In many areas of medicine we are witnessing a shift towards personalized treatments. Successful examples can be found especially in oncology, but also other fields such as cardiology or immunology. Attention to not only clinical diagnosis, but also disease subtype and its clinical stage are important in selecting the right treatment for the right patient. Personalized patient care depends on a number of factors including careful clinical characterization, knowledge of the long term course and outcome of the illness, as well as discovery of biological

and genetic markers that can facilitate treatment selection and clinical monitoring. Several groups in psychiatry are now working towards similar goals in managing of severe mental illness (schizophrenia, bipolar disorder and severe depression in particular). The Mood Disorders group at Dalhousie University has been involved in similar efforts for close to 15 years. In recognition of their work, Dr. Martin Alda was invited to give a plenary lecture "Genetics of lithium response and personalized treatment of bipolar disorder" at the CINP Thematic Meeting on Pharmacogenomics and Personalised Medicine in Psychiatry, in Jerusalem in April 2013. Dr. Mirko Manchia, fellow in the Mood Disorders Program, was awarded the CINP Rafaelsen Young Investigator Award to attend the conference and present findings on risk and protective factors for suicide in bipolar disorder.

The two most common themes of the conference were the need to go beyond current diagnostic classification and to diagnose and treat severe mental illness early. The clinical research of the Mood Disorders group has been active on both counts. They have been busy working on genetic predictors of response to lithium treatment in bipolar disorder using genome-wide association and whole genome sequencing approaches. They have been also investigating biomarkers that could, for instance predict the risk of suicide in susceptible individuals. Last, but not least, they have been working with family members, analyzing data from the youngest generation to predict the risk of developing the illness. These studies use clinical, genetic and brain imaging methods (with **Dr. Tomas Hajek**) and connect naturally with the FORBOW project (**Dr. Rudolf Uher**). Much of this research is in collaboration with other groups in Canada, Europe and the U.S. Only by combining resources and validating each others' results will we be able to advance the treatment of our patients.



Dome of the Rock in Jerusalem.

Dalhousie Global Psychiatry

Submitted by: Ms. Sandra Hennigar
Special Projects, Global Psychiatry

Training in Tobago

Ms. Keltie Donnellan, RN and trainer for the PMAV (Prevention and Management of Aggression and Violence) and AVDHA (Annapolis Valley District Health Authority), and **Ms. Sandra Hennigar** did a second week of training in the Prevention and Management of Aggression and Violence in Tobago at the Scarborough General Hospital. Participants came from areas of mental health, emergency medicine, maternity and the Tobago police force. This was another exciting week of training as the participants shared their experiences with us, allowing us to demonstrate how to intervene in situations that are common for them.

We witnessed the opening of discussion between the mental health officers and the police officers, who have no formal mechanisms to talk about individuals they share in common. The police have no training in mental illnesses and have some common misconceptions about the mentally ill.

We will return in the fall to begin the train-the-trainer model with a core group of individuals. We look forward to continuing the relationships we have developed and to foster new relationships.



(Left) Ms. Keltie Donnellan teaching a self-defensive move with the students.



Ms. Keltie Donnellan outside of Scarborough General Hospital after a day of teaching.

Police Mental Health Partnership in Guyana

Last July Global Psychiatry staff responded to a request from Guyana's National Security Department to provide education on mental illnesses among law enforcement. The purpose of the education is to better equip them to identify and manage emotionally disturbed persons and to intervene in a manner that provides safe outcomes for the individuals and the police officers. A team, including staff from

the Mental Health Mobile Crisis Team, met with and demonstrated the type of education program used to teach police officers in Nova Scotia. Those attending the sessions were impressed with the materials presented and agreed that this form of education was needed across all policing services, including prison staff and staff from Human Resources.

The major challenge to continuing this work is securing the required

funding for the project. The Dalhousie team agreed to seek funding opportunities. Ms. Sandra Hennigar returned to Guyana recently to meet with those interested partners to ensure this training remains a priority for them and to secure in-country support for moving the project forward for funding through an upcoming Grand Challenges Canada call.

Psychiatric Mental Health Nursing program and the NWT Initiative

Ms. Sandra Hennigar and Ms. Loretta Whitehorne, with the support of Ms. Valerie Eden, Director of the Registered Nurses Professional Development Center (RNPDC), have had several conversations with Stanton Regional Health Authority about offering the specialty post RN nursing program to their area. We have reached resolution on most of the challenges that must be addressed prior to commencement. Because of the limited specialty psychiatric nursing skills in the area, challenges around clinical supervision and conducting the face-to-face labs required resolution before we were able to seek final funding approval. The Dalhousie Global Psychiatry team agreed to partner with RNPDC to provide the clinical supervision while Aurora has agreed to collaborate with RNPDC to support the four labs that occur throughout the course. A new inpatient manager will be starting mid-June and will require updating on this initiative. A letter of agreement with defined roles of all partners has been drafted, including the budget for the project.

Dalhousie-NWT partnership update

Submitted by: Dr. Arlene MacDougall
Fellow, Global Psychiatry

Dr. Curt Peters is the most recent faculty member to become involved in the Dalhousie Psychiatry-Northwest Territories partnership. Over a two week span in April, Dr. Peters provided clinical care in the outpatient psychiatry service in Yellowknife, and this month will be joining the cohort of faculty members providing regular telepsychiatry service from Halifax.

Dr. Peters, along with **Dr. Bianca Lauria-Horner** (Primary Mental Healthcare Education Leader) and **Dr. Arlene MacDougall** (Fellow in Global Psychiatry), have recently held preliminary discussions with our NWT partners around the development of a collaborative care model for mental health in primary care. These discussions have been positive, and will

be continuing over the summer.

Dr. Nick Delva traveled to Yellowknife at the end of June for two weeks where he will work in the outpatient service as well as perform a travel clinic to the community of Fort Smith. During his time up North, Dr. Delva will meet with the NWT partner leads to discuss directions for the partnership in the coming year. A number of clinical, educational, research, program and system-level initiatives are currently underway and/or in the process of being developed. By all accounts the partnership to date has been a success and is expected to be renewed in July 2013.

Clinical Divisions of the Department of Psychiatry

Each month we highlight one of the many services offered by the Department of Psychiatry. This issue we feature Community Focused Living, a Capital Health program.

Community Focused Living

Submitted by: Dr. Emmanuel Aquino
Psychiatrist, Capital District Health Authority, Dalhousie Department of Psychiatry

The Community Focused Living (CFL) Service has been morphed into Community Living Initiative (CLI). CLI has a broader scope of serving Recovery and Integration clients both in hospital and in the community. Since the inception of the Community Focused Living Initiative in 2006, the service has been a strong advocate for the Peer Support program. The use of peer support in mental health is not intended to replace any services which are already in place, but to complement the care team. Peer support is an evidence-based best practice which should add to the care team's ability to reach a wider group of people.

Last year, CFL (Laurel Unit) and Rehabilitation (Maritime Hall) merged into the Community Living Initiative approach at Simpson Landing. These are now under the leadership of **Drs. Edward Gordon** and **Ezio Dini**.

It is worthy to note that the CFL/CLI projects have hosted a pilot peer support effort since 2006. Last year, the Province of Nova Scotia released its first Mental Health and Addictions Strategy in which it committed to creating a provincial hospital and community peer support services. It is also important to mention that the Nova Scotia Certified Peer Support Specialist Program is recently underway and the host agency is Healthy Minds Cooperative.

News & Announcements

Congratulations

Dr. Lara Hazelton graduates from Acadia

Congratulations to **Dr. Lara Hazelton** who recently graduated from Acadia University with her Masters of Education in Curriculum Studies. Dr. Lara Hazelton completed her medical school and residency training at Dalhousie University, followed by fellowship training in group and cognitive-behavioural psychotherapy at the University of Toronto. Dr. Hazelton is Co-Director of Faculty Development for the Dalhousie Faculty of Medicine, and is cross-appointed to the Dalhousie Division of Medical Education. Congratulations again to Dr. Hazelton!



Dr. Lara Hazelton

Dr. Allan Abbass wins prize for contributions in the area of Depression Care and Research

Congratulations to **Dr. Allan Abbass** who was recently named the winner of the Douglas Utting Prize for 2013. The prize, which consists of a medal plus \$7,500, will be awarded to Dr. Abbass in November at McGill University where he will deliver the Douglas Utting Lecture. Well done, Dr. Abbass!



Dr. Allan Abbass

News

6th Annual Atlantic Provinces Child and Adolescent Psychiatry Conference (APCAPC)

The 2013 APCAPC, held June 7-10 at the Atlantica Hotel and Marina, Oak Island, was a huge success! APCAPC is a yearly conference attended by our colleagues in child & adolescent psychiatry from the Atlantic Provinces. We gather together in a casual and relaxed atmosphere not only to learn from one another, but also to connect, build collaborative relationships and review issues regarding a field of medicine that, while represented by small numbers, is very large in terms of

enthusiasm for this aspect of psychiatry.



Dr. Maryam Mehtar

This year we greeted each other in lovely Chester, Nova Scotia and were fortunate to have had Dr. Maryam Mehtar, professor in pediatrics from the University of

Saskatchewan, Saskatoon, present to us on her innovative and respected initiatives in the field of social pediatrics. Dr. Mehtar is currently post-graduate director of pediatrics at the University of Saskatchewan and a national leader spearheading the development of school based clinics in vulnerable communities. She spoke eloquently about the social determinants of health and barriers to care that exist, particularly in the area of youth mental health, stating “ninety per cent of what I see are mental health,



Atlantic Provinces Child and Adolescent Psychiatry Conference attendees 2013

behavioral and developmental issues.”

Dr. Mehtar recounted complex cases encountered within the community setting, providing an excellent segue to our full day of complex case presentations or “diagnostic dilemmas.” We heard reviews of difficult yet fascinating cases of youth seen across the provinces and had the opportunity to

discuss the issues as a group and formulate each case collectively. The day ended with a competitive and exciting round of JEOPARDY which proved to be a nerve-wrecking test of our basic, scientific and theoretical knowledge of all things child & adolescent psychiatry.

Following a lovely evening of lobster, BBQ steak and dancing, we gathered again the following morning for committee meetings and collaborative discussions focused on how to improve our networks both intra and interprovincially. The weekend was complete with a subtle show of the sun to follow us all on our drive home.

APCAPC will gather together again for the 7th year in Chester in June 2014. It promises to be fun and exciting and as always, a terrific opportunity to learn amongst friends.



Dr. Jerry Gray leads a conga line during conference festivities.

Dr. Jackie Kinley presents at APA conference in San Francisco

A symposium recently held at the American Psychiatric Association Annual Conference (APA) in San Francisco on Integrated Care was chaired by **Dr. Jacqueline Kinley**. The panel, which included Dr. John Clarkin (Cornell) Dr. John Livesly (UBC) and Dr. Anthony Bateman (St. Ann's Hospital, North London) explored an integrated approach to the treatment of personality disorder as an alternative to the various specialized therapies that have been shown to be effective in randomly controlled trials.

Several reasons for adopting an integrated approach were presented. First, it was argued that evidence that different treatments produce similar outcomes and that specialized treatments are not substantially better than good clinical care points to the importance of change mechanisms common to all treatments. Second, none of the current therapies provide the comprehensive array of treatment methods needed to treat all aspects of personality pathology making integration a viable option. Third, integration offers a more parsimonious treatment strategy than combining several specialized treatments. Finally, such an approach allows treatment to be tailored to the needs and psychopathology of the individual that accommodate the extensive heterogeneity of personality pathology and its complex etiology better than a one-approach-fits-all strategy.

The presentation discussed the rationale for integrated treatment and a framework for conceptualizing and organizing treatment; assessment, formulation, and treatment planning; a conceptual framework for understanding when, how and



International Panel Focusing on Integrating Mental Health Delivery. (L-R) Drs. John Clarkin (NY, New York), Jackie Kinley (Halifax, NS), John Livesley (Vancouver, BC), Anthony Bateman (London, England).

why to target domains of pathology in treatment; the role of general strategies such as mentalizing within an integrated treatment model; and a discussion of how to organize and deliver integrated treatment within a group program and mental health system.

Update from the Seniors Mental Health Program

Submitted by: Dr. Keri-Leigh Cassidy

Clinical Director, Geriatric Psychiatry/ Seniors Mental Health Program

In educational news, the Seniors Mental Health Team is excited to welcome **Dr. Meagan MacNeil** to their Geriatric Psychiatry fellowship program this year. Dr. MacNeil has established interests in research and education. In terms of future directions for the fellowship program, the physician group is also actively working on a Royal College application for subspecialty recognition in Geriatric Psychiatry. If successful, Dalhousie will be one of a handful of competitive programs in Canada offering a two year training program in Geriatric Psychiatry.

This year's R.O. Jones Memorial Lecturer, Dr. Sarah Lisanby, from Duke University is an academic geriatric psychiatrist and leading world expert in neuromodulation therapies. With the preponderance of seniors requiring ECT and a need to reduce cognitive side effects, Dr. Lisanby's review and discussion of future directions, including promising evidence for Magnetic Seizure Therapy, is of great interest to many members of the Seniors Mental Health Team.

Dr. MacNeil completed a quality assurance research project last year on the impact of bright light therapy on mood and behaviours of inpatients on our Geriatric Psychiatry unit.

Measurements were taken before and after the installation of bright (1000 lux) light bulbs on the ceiling of the unit, which replaced the previous dim (~100 lux) light bulbs. Measures of patient agitation were obtained using the Cohen-Mansfield Agitation Inventory (CMAI), and measures of patient mood were obtained using the Cornell Scale for Depression in Dementia (CSDD). Preliminary analyses revealed no significant baseline-treatment differences in overall scores on the CMAI or the CSDD. Further analyses are planned to examine baseline-treatment differences for the subscales of each measure. Measures of staff mood were obtained at baseline and treatment using the Profile of Mood States (POMS), a self-report questionnaire. Further analyses are planned to examine the effect of bright lights on staff mood.

The team is also collaborating on a "Memory for Life" study for patients with cognitive impairment with **Dr. Karen Chipman**. This is a 10-week memory training group offered at CDHA as part of a three-year research project funded by the Nova Scotia Health Research Foundation. Participants learn and practice strategies to help them cope with common memory problems. For more information, please contact: Dr.

Karen Chipman, Principal Investigator, at 464-6059 or Laura Hamilton, Study Coordinator, at 464-3434 memoryforlife@cdha.nshealth.ca.

Provincially, all of the specialty mental health areas share a similar challenge to provide accessible tertiary services across the province. The provincial government's "network" model links all district mental health teams in order to improve knowledge exchange and equity of services across districts, a model that continues to be endorsed by the government in the recent provincial Mental Health Strategy "Together We Can" document. This year, our Nova Scotia's Seniors Mental

Health Network (NSSMHN) conducted a "District Engagement Strategy" funded by the Department of Health and Wellness with several regional consultations in the province to engage all District Mental Health teams more fully in the NSSMH Network. Consultations occurred across the province with a final provincial meeting in early April to discuss the findings from all regional consultations and strategize how to move forward. We hope these efforts will improve seniors mental health care delivery and will also have general applicability to other specialty networks.

Proposed Graduate Program in Psychiatry (MSc)

The Department of Psychiatry, led by **Drs. Sherry Stewart** and **Kim Good**, is attempting to develop a graduate level program in order to broaden our academic mandate. The proposed Graduate Program in Psychiatry Research (MSc) will be a two year, thesis-based program, overseen by the Department of Psychiatry, under the regulations set out by the Faculty of Graduate Studies at Dalhousie. The aim is to provide a research intensive program for those with undergraduate degrees in related fields (e.g., - but not limited to: psychology, neuroscience, anatomy and neurobiology, pharmacology) or Psychiatry Residents interested in developing a research background. The intent is to have the program on the University Calendar for a start date of September, 2014. For further information or to inform of your wish to participate in this program (teaching, supervising graduate students), please contact either of the two organizers (sherry.stewart@dal.ca, kim.good@dal.ca).

Announcements

Shoppers Drug Mart Run for Women in Support of Reproductive Mental Health Services - August 10, 2013, Shubie Park

Postpartum depression affects one in 10 mothers, who often suffer in silence and shame. But they don't suffer alone: postpartum depression can also affect their infant's and other children's well-being. At Reproductive Mental Health Services (RMHS), the multi-disciplinary team provides woman-centered mental health care to mothers living with mental illnesses in pregnancy and postpartum.

On August 10, 2013, join the Reproductive Mental Health team in the Shoppers Drug Mart 5K/10K Run/Walk for Women in Shubie Park, Dartmouth, in support of RMHS. There is also a 1K Girl's Run/Walk. Olympic champion Heather Moyse will be the keynote speaker.

To join or support the run, please go to the website www.runforwomen.ca or contact **Dr. Tanya Tulipan** at tanya.tulipan@iwk.nshealth.ca.

Headlines Submissions

Headlines aims to provide a forum for the exchange of information, ideas, and items of general interest to the faculty, fellows, students and staff of the Department of Psychiatry. Your contribution(s) are needed and greatly appreciated.

The next issue of Headlines will be distributed on September 3, 2013, with the deadline for submissions to be August 16, 2013.

Please send all submissions to
Kate.Rogers@cdha.nshealth.ca

Upcoming Award Deadlines

There are many awards that Department of Psychiatry faculty, fellows, residents, and staff are eligible to win each year. The following is a list of awards with upcoming deadlines. Please send any nominations to **Ms. Kate Rogers** at Kate.Rogers@cdha.nshealth.ca by the internal nomination deadline listed here, in order for the nominee to be considered.

Please note that the internal due date is for Departmental purposes only and is generally three weeks prior to the due date of the granting body to allow time for award package preparation, mailing, etc. If you wish to submit nominations directly to the granting body, please refer to the external due date in brackets, found on the Departmental website (psychiatry.medicine.dal.ca/awards/awards_date.htm). If no external deadline is listed, please refer to the website of the granting body for further information.

Granting body: **Royal College of Physicians and Surgeons of Canada**

Internal deadline: Aug. 7, 2013

- Royal College Teasdale-Corti Humanitarian Award
- RCPSC/AMS/Donald Richards Wilson Award

Granting body: **Dalhousie Continuing Medical Education**

Internal deadline: Sept. 7, 2013

- R. Wayne Putnam Award for Outstanding Contributions to Community CME

Granting body: **Dalhousie University Department of Psychiatry**

Internal deadline: Sept. 30, 2013

- Outstanding Clinician Award

For the terms of reference of awards please visit the website of the granting body. If you have any questions please contact **Ms. Kate Rogers** at Kate.Rogers@cdha.nshealth.ca or by phone at 473-1677.

Photo Feature

Submitted by: Dr. Shabbir Amanullah

Psychiatrist and Lecturer, Department of Psychiatry



Dragonfly, Byron Village, London 2013.

Humanities Corner

Submitted by: Dr. Lara Hazelton
Humanities Coordinator

Humanities Student Writing Contest

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 to the Dalhousie Department of Psychiatry Annual Student Writing Competition. One entry in each category (medical student, postgraduate trainee) is selected to receive a \$100 cash prize.

This year we featured our winning entry for the medical student category in the March issue of Headlines. Tamar Rubin, from the University of Alberta, was given first place in the postgraduate trainee category. Tamar's poem, *Chinatown*, is featured below.

Chinatown

A homeless man sat dripping
in the fumes and bustle
in front of the butcher shop.

I tried not to look.

The rain hit us both like a wild dog
in the stomach, suddenly
and without warning. He screamed

that he killed a man
and would do it again.

The air was acid
on our damp bones,
pigs and calves hung

upside down behind him. I ran
for shelter in the nearby streetcar.
We didn't talk and I pretended
not to see him.

When I got home today I wrote this poem,
and never shared my own confession.