

Department of Psychiatry HEADLINES



Academic Day organizers, speakers, and workshop facilitators (L-R):
Drs. Jonathan Brake, Alexa Bagnell, Nick Delva, Sreenivasa Bhaskara, Sameh Hassan, Michael Ross, Nick Kates, Philip Mills, Bill McCormick, and Mr. Peter Croxall.



Keynote Speaker Dr. Nick Kates, Professor, Department of Psychiatry, McMaster University

The Nova Scotia Hospital's Academic Day XX

Submitted by: Dr. Bill McCormick

As Friday April 24th approached Ms. Kim Byrne and I had quite a few concerns: there was to be the Collaborative Care Conference in early April; a CPA sponsored CPD day in early May; and it was our first time holding the Day off the NSH campus due to the new location of our Health Sciences Library.

As it turned out "Anxiety Disorders Across the Life-Span" exceeded our expectations. In a room with a maximum capacity of 235, we had 230 registrants and along with presenters, chairs, drug firm representatives, and helpers we had about 250 people in the Sea King Club at Shearwater.

Our Keynote Speaker was Dr. Nick Kates of McMaster University who is

probably the most famous psychiatrist expert on Shared Care with Primary Care practices. His keynote address "Improving the Management of Anxiety Disorders through Enhanced Collaboration with Primary Care" opened the day. The evaluations of his talk scored a stellar 91%.

After Dr. Kates we flowed through the Life-Span with the help of **Dr. Alexa Bagnell**: "The Development of Anxiety", **Dr. Sreenivasa Bhaskara**: "The Nature and Prevalence of Anxiety Disorders", and **Dr. Sameh Hassan**: "Anxiety Disorders in the Elderly". (Had I been given the chance Dr. Hassan's title would have been "Anxiety Disorders at the Prime of Life", which I define as my age + or - four years.)

In the afternoon participants chose two of three workshops, each given twice. This gave the chance for smaller numbers and more interaction.

Dr. Michael Ross covered psychotherapies, **Dr. Philip Mills** (with Dr. Kates also present to comment) covered feasible approaches in Family Practice, and **Dr. Jonathan Brake** covered drug treatments with Dr. Bhaskara.

A final panel of several of the speakers wound up what seems to have been a very successful day. I must give thanks to all of our helpers but most of all a heartfelt congratulations and thanks to Kim Byrne who found us the Sea King Club and, as always, put in a tremendous amount of work to ensure the Day's success.

Message from the Head

Dr. Nick Delva

In a perfect world, the 20% of the population who experience mental ill-health in any given one-year period would receive timely high quality primary, secondary, tertiary, or quaternary mental healthcare, depending on their level of need. Until recent years, the major clinical focus of our Department has been on secondary care, and we are now working to expand our efforts at the other levels of care. On one end of the spectrum, we aim to provide more subspecialty services (at the tertiary and quaternary levels), and with our colleagues in primary care, we are aiming to improve the lives of a large proportion of the population by expanding the capacity of the health care system to recognize and treat mental illness at the level of primary care.

In addition to increasing our direct clinical involvement in shared (collaborative) mental healthcare, we are keen to provide more education in this area. Over the months of April and May, three conferences pertinent to this endeavour took place. First, the Departments of Psychiatry and Family Practice and the Mental Health Program provided the First Annual Collaborative Mental Health Care Conference: "Strengthening Patient Care Through Shared Learning." We thank **Dr. Heather Milliken**, our Director of Continuing Medical Education, and all those who

participated in the planning and delivery of this successful event. Second, there was an important component of Shared Care in the highly successful NSH Academic Day XX, which concentrated on Anxiety Disorders: Dr. Nick Kates spoke on how best to treat these disorders through collaboration with primary care. Thanks to **Dr. Bill McCormick**, Ms. Kim Byrne and all those involved in the organization of this day. Finally, the Collaborative Forums in Mental Health, organized by the CPA CPD Institute, provided a packed program on a range of subjects.

We congratulate our senior residents who wrote the Royal College specialty examinations, all of whom were successful. We look forward to the upcoming Awards Banquet, at which we will recognize the achievements of our graduates and send them off into the wider world with our best wishes. I would like to thank **Dr. Deborah Parker** for her excellent work over the past year as Chief Resident, and I look forward to her continued leadership over the last two years of her residency, via participation in committee work, inter alia. We welcome **Dr. Emily Maxan**, who has been the Associate Chief Resident over the past year, to the position of Chief Resident, and **Dr. Christopher Murphy** to the position of Associate Chief Resident.

This issue of *Headlines* showcases



many aspects of the Department of Psychiatry, and it is clear that much is going well, from International Psychiatry, to the work of the Chairs, to our excellent educational and research programs. The article by Dr. Bill McCormick on the "Whole Person Doctor" shows the importance of flexibility in the choice of medical careers. In my own case, as a resident at the psychiatric hospital in Kingston, I found it to be of great value to my skills as a physician to take both general medical and psychiatric call, and I believe that there is much to be said for psychiatrists and residents in psychiatry expanding their therapeutic role in the "physical" health of their patients.

I hope to have something positive to say about the AFP negotiating process in the next issue of *Headlines*. Suffice it to say that we continue to work hard on this most important requisite of Departmental health.

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Department of Psychiatry HEADLINES

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Research Section

Submitted by: Jennifer MacDonnell
Research Administrative Assistant

Department of Psychiatry Research Day 2009

This year's event is scheduled for Friday, October 16, 2009 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. This year we will be giving presentation awards in the following categories:

- undergraduate;
- graduate;
- resident;
- junior faculty; and
- psychiatry staff.

We are pleased to announce that this year's keynote speaker will be 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.

Under his leadership, the Douglas Mental Health University Institute has become a premier research facility in Canada in the fields of neurosciences and mental health. Dr. Quirion has promoted the development of clinical research in Neurology and Psychiatry as well as social and evaluation aspects of research in mental health and addiction. His research interests include: understanding the relationships between key phenotypes of the Alzheimer's brain, molecular and pharmacological features of neuropeptide receptors focusing on NPY and CGRP, and their role in memory, pain, drug dependence, and models of schizophrenia. One of his major interests lies in the teaching and training of the next generation of researchers.

Throughout his extensive scientific career Dr. Quirion has been invited worldwide to numerous conferences and is one of the most highly cited

neuroscientists in the world. He has received several awards and honours, including Fellow of the Royal Society of Canada and a "Chevalier" of the "Ordre national du Québec".

Dr. Quirion was the inaugural Scientific Director of the Institute of Neurosciences, Mental Health and Addiction, one of the 13 "virtual" institutes of the Canadian Institutes of Health Research (CIHR) from 2000 to 2008 and will be the Director of a Special Global Initiatives on Alzheimer's Disease and Related Dementias at CIHR.

Deadline for submission of abstracts for Psychiatry Research Day is July 10, 2009. For more information contact **Ms. Jennifer MacDonnell** at 473-2470 or jennifer.macdonnell@dal.ca.

Resident Research Expo 2009

This year's Research Expo was a great success and well attended by both psychiatry residents and faculty members. Oral presentations highlighting research in Psychotic Disorders, Pediatric Pain, and Mood Disorders were given by **Drs. Michael Teehan**, Christine Chambers (Pediatrics and Psychology), and **Martin Alda**.

After the presentations, residents and faculty were treated to pizza and poster presentations by researchers in the Department. This year, the residents took part in a poster trivia game where they were given questions and had to search for the answers from each poster. Each successfully completed form was entered in a draw to win a gift certificate to Opa! or Saege. This year's winners were **Drs. Ava Muir** and **Michael Stubbs**. Thank you to everyone who helped with the event, especially **Ms. Janet Bardon**, **Ms. Carrie Wipp**, **Ms. Christy MacDonald** and the members of the Research Expo Planning Committee, **Drs. Kim Good** and **Alexa Bagnell**, and **Ms. Jennifer MacDonnell**.

Dr. Joanne Gusella discusses her poster "What motivates people to change? An examination of the pros and cons of 'taking action' against an Eating Disorder over a six-month period" with Dr. Maureen Gorman, a CDHA psychologist, at this year's Research Expo on April 22.



10 Questions for a Dalhousie Psychiatry Researcher

This issue profiles Dalhousie Psychiatry researcher **Dr. Simon Sherry**. “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 Peterborough, Ontario, Canada.
2. *When did you come to Dalhousie University?* I joined Dalhousie University in July of 2007.
3. *What are your current positions?* I am an Assistant Professor (tenure track) in the Department of Psychology and an Assistant Professor



Dr. Simon Sherry

- (cross-appointed) in the Department of Psychiatry at Dalhousie University. I also maintain a private practice at Genest Psychological Services where I assess and treat patients for a range of problems (e.g., anxiety, depression, or perfectionism).
4. *What are your current research interests?* The primary stream of my research program examines the personality-psychopathology connection, with particular emphasis on understanding if, when, and why perfectionism represents a risk factor for and a maintenance factor in mood disorders and eating disorders. The secondary stream of my research program examines attachment processes, emotional instability, and health anxiety.
 5. *What research projects are you currently participating in?* At the Personality Research Team (see <http://personality.psychology.dal.ca/>), we are presently studying perfectionism in relation to mood disorders, eating disorders, and other difficulties (e.g., interpersonal problems). We typically use ecological momentary assessment, multi-wave longitudinal designs, and diverse research populations (e.g., psychiatric patients, romantic couples, or high-functioning professionals) to answer our questions of interest.

6. *Why did you choose psychology?* Psychology provides me with a unique opportunity to study people, to help people, and to teach and be taught. I feel fortunate to have a truly excellent job.
7. *What was your second career choice?* Psychology was my second career choice. After my hockey career ended largely due to a lack of talent, I began to build a career in academic and clinical psychology.
8. *What experience best prepared you for your job?* Sports. Athletes and academics are highly similar in that both spend much of their time competing for scarce resources and social dominance!
9. *Who were your mentors?* I count Dr. Paul Hewitt (UBC), Dr. Gordon Flett (York), Dr. Peter Hall (Waterloo), **Dr. Sherry Stewart** (Dalhousie), and Dr. Martin Antony (Ryerson) as my mentors. I also value my emerging collaborations with **Dr. Anne Duffy** and the Mood Disorders Research group.
10. *What do you consider the biggest challenge facing researchers today?* To conduct research with advanced theories, methods, and statistics that is still relevant to and appreciable to everyday people and their problems.

Department Funding News

Congratulations to the most recent recipients of funding from the Department of Psychiatry Research Fund:

- “Atypical depressive symptoms in depressive episodes among offspring of bipolar parents: A pilot study.” **Dr. Lukas Propper**
- “Changes in appraisal, distress, and knowledge associated with two modes of family education in Early Psychosis: A pilot study.” Ms. Margie Crown (Education Coordinator, NSEPP)
- “Improving the identification, diagnosis, and treatment of adolescent depression in primary care — contextualization of the GLAD-PC Toolkit for Canadian use.” **Dr. Stan Kutcher**

- “The effects of alcohol on state anxiety and rumination in socially anxious individuals.” Ms. Susan Battista (PhD student, Psychology) with **Dr. Alissa Pencer**

Congratulations also to the winning supervisors of the Psychiatry Summer Studentships:

- **Drs. Anne Duffy** and **Simon Sherry**;
- **Drs. Kim Good** and **Sean Barrett**;
- **Drs. Margaret Rajda** and **Penny Corkum**; and
- **Dr. Sherry Stewart**.

International Psychiatry Section

Submitted by: Sonia Chehil

Director, International Psychiatry

The first quarter of 2009 has been buzzing with activity! For me the highlight was the opportunity to speak at the COPE meeting in Ottawa to promote elective experiences for Psychiatry residents in resource poor settings.

This opportunity forced me to take the time to reflect on why such elective experiences were important for resident education. What practical value can these elective placements offer that are unique to these settings?

Is it about social responsibility? Is it about understanding health care systems? Is it about understanding the social, political, and economic health determinants? Is it about understanding the relationship between health care practices, beliefs, and expectations? Is it about understanding how to provide service where resources are scarce? Is it about providing opportunities that challenge us to question what we think we know? Is it about learning how to collaborate across sectors?

Perhaps it is simply about inspiring leadership.

Lindsey George and Catherine Krasnik are leading the implementation of a community-based Substance Abuse Structured Relapse and Prevention Program in Guyana in collaboration with the Dalhousie Department of Psychiatry.

What were some of your “leadership lessons learned” from working in Guyana?

- | | |
|--|---|
| <ol style="list-style-type: none"> 1. Strong, collaborative leadership at the top is key to any successful organization no matter how large or small. The leader is accessible! 2. The leader's job is to create a strong empowered team that can be innovative, take risks, learn from mistakes, and celebrate success (as a group effort). 3. The leader has a clear vision and can articulate and defend it — and create commitment to it both within the team and to the outside community. 4. The leader has a hands-on knowledge of what's going on! They know the strengths and weaknesses of the team and acknowledge the latter by providing opportunities to enhance skills. The leader also has to “manage out” those people who cannot contribute to the effort. | <ol style="list-style-type: none"> 1. Leadership in the face of limited resources provides a unique opportunity for efficiency through creative collaboration and solutions. 2. A truly effective leader is one who is willing to acquire hands-on knowledge of what is important to people and is not afraid to consider and incorporate feedback from them while shaping policy. 3. Approachability, accessibility, effective communication, and respect are key elements to successful leadership. 4. The best public policy is made by listening to the people it impacts and then involving them in its implementation. 5. A good leader knows how to follow the people. The essence of effective leadership is having a strong vision and the courage to implement it. |
|--|---|

*Lindsey George, MES, MD, FRCPC
Assistant Professor, Department of Psychiatry and
Behavioural Neurosciences, McMaster University*

*Catherine Krasnik MD/PhD
Chief Resident (PGY-3), Department of Psychiatry and
Behavioral Neurosciences, McMaster University*

I would also like to extend a warm welcome to **Dr. Sabina Nagpal**, Benjie Nycum, Stephen Therauds, and **Dr. Mark Bosma**, who joined our team this winter.

Dr. Sabina Nagpal: Elective Experience in Public Mental Health

In February, I had the opportunity to do an International Public Mental Health elective in Georgetown, Guyana. The experience was enlightening and far surpassed any of my expectations. I went to Guyana with the expectation that I would be working in an HIV clinic, providing outpatient medical follow-up for patients infected with HIV. I had hoped to learn about the medication regimens used to preserve immunity in the treatment of HIV in Guyana, as well as some of the challenges that exist around compliance. I also expected

some exposure to patients suffering from opportunistic infections associated with HIV/AIDS. I had hoped that experience with the medical management of HIV would contribute to a more in-depth understanding of the psychiatric impacts of HIV.

My career goals involve working on the development of mental health programs for persons living with HIV in the developing world. I had hoped that my elective would help me both to confirm my interest and to gain an understanding of the overall care of

persons living with HIV.

To my great fortune, the experience turned out to be an incredible exposure to public health in a developing nation. Simply put, it was surreal. I was granted access to observe, contribute to, and learn from the plethora of projects and responsibilities that fall under the umbrella of the Ministry of Health in Guyana. Further adding to my disbelief was the amount of direct access I had to the Minister of Health, and all of the directors for the various aspects of health care in Guyana. I was

able to engage in long conversations about the Ministry's experiences with introducing Malaria nets, preventing still births, and the numerous initiatives for HIV education and prevention that have been carried out and continue to develop in Guyana.

It was interesting to see the stark contrast between areas of health that have been recently reformed and those that continue to exist as they did during periods of political instability.

I was encouraged by how far the country has come with regard to HIV prevention and the care it provides for its citizens living with HIV. The National Care and Treatment Center in Georgetown, where the majority of the capital city receives their HIV treatment, functions effectively and serves a high quantity of patients without sacrificing confidentiality or patient education. The staff unanimously recognized the need for increased psychosocial training to

improve the overall care that the clinic provides. They were excited to have me and made me feel like a welcome part of the team. I hope to be involved in future projects that focus on improving the mental health of persons living with HIV in Guyana.

*Dr. Sabina Nagpal, MD, PGY1
Department of Psychiatry
Dalhousie University*

Benjie Nycum and Stephen Therauds: From Psychiatric Hospital to Therapeutic Campus — Developing a Program for Change

Stephen Therauds, **Nancy Beck**, and I travelled to Guyana to investigate the National Psychiatric Hospital in New Amsterdam. The objective of the mission was to prepare a 10-year site phase-able concept upgrade plan for the National Psychiatric Hospital that would be in keeping with the vision of the overall National Psychiatric Program. The National Psychiatric Program is currently in a major planning phase with the end goal of implementing 21st Century psychiatric programs and facilities in Guyana.

The site of the National Psychiatric Hospital and the facility itself had decayed to deplorable conditions after decades of neglect. The Ministry of Health has advocated strongly for the refurbishment of the facility and has

slowly and persistently been making improvements. However, to date these improvements have been somewhat ad-hoc and responsive only to the existing site deficiencies rather than in the context of an overall program or plan.

It was a remarkably productive trip: what would typically take one year to produce was completed in an intense three-day workshop in Guyana. Under the leadership of Dr. Leslie Ramsammy, Minister of Health, we joined **Dr. Sonia Chehil** and the Guyanese technical team: Parmanand Samaroo, Director, Facilities Management, Georgetown Public Hospital Corporation and John Poonai, Facilities Director, Berbice Regional Health Authority to complete our objective.

A 10-year plan in the form of a

flexible Site Concept Plan drawing and Task Work-plan spreadsheet was developed and presented in keeping with a 10-year vision with the success outcome of leadership on the world stage: for Psychiatric programs in the developing world; for innovative facilities and programs that achieve positive outcomes with minimal cost; and for achieving progress in these programs that could not be achieved in the developed world.

Currently a costing and prioritizing exercise is underway using the 10-year Site Concept Plan aiming to develop the first steps as soon as funding is available.

All of this in three days!

*Benjie Nycum, CEO
William Nycum & Associates Limited*

Dr. Mark Bosma: A Review of Geriatric Care Services

My trip to Guyana was a trip of surprises. I found out one week prior to departure that I was going, with the purpose of assessing the geriatric component of the mental health system. Having never been to a developing country I was not sure what to expect. Suffice it to say — I learned a lot.

The health resource constraints in Guyana mean that available resources must be used in the most effective and efficient way possible. As a consequence, health resources target the greatest public health needs. In the coming decade, care for the elderly is expected to become a greater priority and a serious public health challenge as the population ages.

Elders, for the most part, are

cared for at home by their families. I was humbled by the patience, flexibility, acceptance, and tenderness demonstrated by families who quite naturally “did all the right things” to make their elders comfortable and maintain their dignity.

There are virtually no psychogeriatric services in Guyana. In fact, there is little in the way of specialized geriatric care at all. Accommodation for senior citizens is scarce, and knowledge about common mental health disorders in the elderly is very limited. The Ministry of Health and many of the health care providers we met recognize that the elderly are both a growing and an underserved population and wish to increase the capacity of the health care system to

prevent, identify, and treat common mental health issues in this population.

The challenge: how do you prepare the health sector to care for a growing elder demographic while maximizing the inherent networks of support that has allowed elders to remain with their loved ones as they have for generations before?

It is my hope that the Dalhousie International Psychiatry Section will be able to develop and facilitate the implementation of educational tools to increase the capacity of seniors mental health care in Guyana.

*Dr. Mark Bosma, MD, FRCPC
Assistant Professor
Department of Psychiatry
Dalhousie University*

Education Section

Submitted by: Annette Cossar
Education Administrator

Undergraduate News

Med 1&2

There will be a patient/doctor workshop for all tutors (and anyone interested in tutoring) scheduled for Friday, May 29 from 9:00-11:30am in Room 1613A, Veterans' Memorial Building. This year we have invited guest speaker Dr. Karen Mann from the Division of Medical Education who will give a presentation on "Reflective Practice". We will discuss how to introduce the students to the concept of self-reflection in the clinical encounter.

Members of the Undergraduate Program are planning for the next academic year (Brain & Behaviour Unit, recruiting tutors for COPS, patient/doctor interviewing, etc.).

Clerkship

Congratulations to Anna London, Class of 2009, who is the recipient of the Poulenc Prize (awarded to the student standing highest in Psychiatry in the final examinations in 4th year) and to Ryan Maldre, recipient of the R.O. Jones Prize (awarded to the new graduate who has achieved the highest standing in

Psychiatry for all four years in medical school!). These prizes were awarded at the Medical School Convocation Gala on May 23.

The Clerkship Rotation Schedule for next academic year (Class of 2011) is being finalized and will be sent out shortly.

IMU Link Program

The following is the description found on DalMedix that explains the IMU Link Program: *Dalhousie University is a Partner Medical School (PMS) with the International Medical University in Malaysia. Each year Dalhousie accepts 4-8 students from the IMU to Dalhousie University, Faculty of Medicine to complete their third and fourth years of the MD program. Upon successful completion IMU students receive the MD degree from Dalhousie University.*

Prior to beginning the clerkship years, the students are required to participate and complete the LINK PROGRAM, a comprehensive bridging program that provides them with the core clinical skills and practice sessions as taught

throughout the first and second year program at Dalhousie. This program is designed to help the students to practice history and physical examinations, become familiar with the hospital and health care systems in which they will be working. The ultimate goal of the Link Program is to ensure these international students are entering the clerkship at an equivalent level compared to Dalhousie students.

The Department of Psychiatry has participated in IMU Link Program for several years. Other participating departments which offer experiences for the Malaysian students include Medicine and Paediatrics. This year the Department has confirmed seven psychiatry sessions scheduled during the month of June for the six Malaysian students who will arrive at the end of May. On behalf of the Department, we would like to thank all of those who participate in these valuable training experiences for these international students.

Postgraduate News

Congratulations to **Drs. Cynthia Calkin, Selene Etches, Maggie Hahn, Aaron Keshen, and Curt Peters** who were successful in passing the Royal College examinations.

Dr. Deborah Parker has completed her term as Chief Resident. This has been a two-year commitment from Deborah who started as Associate Chief in her PGY-2. She has done a commendable job in her leadership role and **Dr. Margaret Rajda** is grateful to her for her hard work, positive attitude, and high standards. She has been very active in the on-call committee as well as contributing to various other committees over the past two years. We wish her well in her future career.


Dr. Emily Maxan is being promoted from Associate to the new Chief Resident and **Dr. Christopher Murphy** will assume the role as Associate Chief. **Dr. Rajda**, the Postgraduate Committee, and **Ms. Norma Thompson** would like to congratulate Drs. Maxan and Murphy on their appointments and are looking forward to fruitful collaboration.

The Faculty of Medicine Resident Research Day was held on May 21. **Dr. Aaron Keshen** presented "Prevalence of cannabis use in adolescent psychosis: Retrospective analysis of an inpatient population between 1997-2007", winner of the Best Presentation by a Psychiatry Resident at the 2008 Psychiatry Research Day.

The Postgraduate Program will undergo an Internal Review in late Fall 2009, as mandated by the Royal College. Details will follow as they become available.

Baby Boom

There are lots of babies in the residency ranks: **Drs. Christopher Murphy, Curt Peters** (and alumna **Shannon MacDonald**), **Daniel Rasic, Samir Taleb**, and **Adriana Wilson** have all welcomed new additions to their families within the current academic year. Welcome to the new arrivals.

Baby girl Stella Abernathy Murphy	Baby boy Lauchlan MacDonald Peters	Baby girl Maya Zofia Rasic	Baby boy Raslan Taleb	Baby boy Matthew Wilson
				
born April 30 Christopher Murphy (PGY-2) and Christy Bussey	born February 22 Curt Peters (PGY-5) and Shannon MacDonald	born April 13 Daniel (PGY-2) and Ewa Rasic	born December 15 Samir Taleb (PGY-5) and Manar Ahmad	born November 24 Adriana (PGY-3) and Ryan Wilson

Fellowship News

Congratulations to **Dr. Kanwal Kukreja** on the completion of his fellowship with the Department as of April 2009. Dr. Kukreja's fellowship focus was in the area of Psychotherapy with **Dr. Allan Abbass** and The Centre for Emotions and Health group.

Dr. Chris Bryniak, a graduate from Memorial University, will be starting a fellowship in Forensic Psychiatry at the East Coast Forensic Hospital on August 1, 2009.

Dr. Abigail Ortiz-Dominguez will be extending her fellowship experience as of July 1, 2009 to continue for another year on her research focus under the direction of **Dr. Martin Alda**. Her research is entitled: The Link between day-to-day Mood Variation and Risk of Relapse.

Dr. Iliana Garcia-Ortega will be completing her fellowship in International Psychiatry with **Dr. Sonia Chehil** in August 2009.

Continuing Education Activity Dates

Wednesdays:

Clinical Conference at the QEII and Clinical Academic Rounds at the IWK

May 27, 2009
June 3, 2009
June 10, 2009

Fridays:

Clinical Conference at the NSH

May 29, 2009
June 5, 2009
June 12, 2009

Upcoming Workshop/Conference R.O. Jones Memorial Lecture

In association with the Atlantic Provinces Psychiatric Association Annual Meeting

June 17, 2009: Marco Leyton, PhD,

Associate Professor, Department of Psychiatry, McGill University; and Department of Neurology & Neurosurgery, Department of Psychology, Medical Scientist, Royal Victoria Hospital

Topic: Alcohol, Nicotine, Amphetamine and Cocaine: One Neurobiological Pathway to Addiction

Location: Rm. 4074, Abbie Lane Bldg.

Dr. Leyton will present in the Department prior to travelling to Mill River, PE where he will present at APPA.

First Annual Collaborative Mental Health Care Conference is a resounding success!

Submitted by: Dr. Heather Milliken
Director, Continuing Medical Education

Approximately 100 health care professionals attended the First Annual Collaborative Mental Health Care Conference “Strengthening Patient Care Through Shared Learning” on April 3 at the Park Place Ramada Hotel in Dartmouth.

The conference was sponsored by the Department of Psychiatry, Capital Health’s District Department of Family Practice, and the Capital Health Mental Health Program. The day was also

educationally co-sponsored by Continuing Medical Education at Dalhousie and was accredited for seven credit hours for both MAINPRO-M1 of the College of Family Physicians of Canada and Section 1 group learning as defined by the Maintenance of Certification Program of the Royal College of Physicians and Surgeons of Canada.

Using a case-based highly interactive format incorporating presentations given jointly by a family physician and psychiatrist/addictions specialist, the conference was offered to provide participants with:

- an opportunity to gain knowledge and skills to be implemented in daily clinical practice to better manage patients with mental health and addictions issues;
- strategies for effective collaboration between primary health care and mental health professionals; and
- networking opportunities.

The day began with an introduction by conference organizer **Dr. Heather Milliken**. **Drs. Nick Delva** and Rick Gibson, and Mr. Peter Croxall also welcomed the capacity crowd before **Drs. Risk Kronfli** and Howard Conter’s presentation “ADHD — Beyond Childhood”. Next Drs. Rick Gibson

and **Ezio Dini** offered a presentation entitled “Crisis Intervention” followed by **Drs. John Fraser** and Mary Crompton’s presentation “Addictions & Motivational Interviewing”. Each presentation was followed by small group work followed by group presentations and summaries of key learning points.

Conference attendees included family physicians, psychiatrists, primary health care professionals, mental health professionals, addictions specialists, family medicine residents, psychiatry residents, and medical students. This diversity greatly enriched the learning experience as evidenced by the excellent evaluation results and written comments such as “fantastic idea for a conference”, “well organized”, and “great initiative”.

I would like to thank all of the other members of the planning committee: **Drs. Maria Alexiadis**, Greg Archibald, Rick Gibson, Michael Fleming, Harsh Mishra, Frances Moriarty, and **Ian Slayter** as well as Ms. Cheryl Billard, **Ms. Annette Cossar**, Ms. Kim Peterson, and **Ms. Carrie Wipp** for their hard work in ensuring the success of the conference.

Please mark your calendars for the Second Annual Collaborative Mental Health Care Conference: March 27, 2010



Dr. Heather Milliken

Annual Celebration

Where has the time gone? June is almost upon us and so is this year’s Annual Awards Celebration. Please “mark your calendars” for Friday, June 26. Invitations will be sent out shortly. The Education Program achievements will be celebrated this year at the Prince George Hotel. We are fortunate to have **Dr. Jane Murphy** attending again this year to present the Alexander H. Leighton Resident of the Year Award. Other special highlights are being prepared for the evening as well.

Dr. Paul Janssen Chair in Psychotic Disorders

Submitted by: Dr. Phil Tibbo

Dr. Paul Janssen Chair in Psychotic Disorders

After nine months, the Janssen Chair finally has a home! The renovations have been completed and as of May 12 the Janssen Chair is located on the 3rd floor of Abbie Lane within the Nova Scotia Early Psychosis Program (NSEPP). The actual chair and accompanying picture of Dr. Paul Janssen has found a place of honour in this space. Many thanks to Dorian Sablone (Project Manager) for all his hard work on the space(s).

With the final renovations complete, the recent hires by **Dr. Phil Tibbo** now also have a home. We welcome Ms. Carolyn Sinyerd (Secretary) in addition to Amy Nash (Research Assistant) and Dr. Denise Bernier (Postdoctoral Fellow). David McAllindon was Dr. Tibbo's MSc student in

Edmonton and with his research and biomedical engineering background, has recently moved to Halifax to take a position in the NRC-IBD (Atlantic). While David's office will be in the NRC he will play an active role in the Janssen Chair's imaging research. Welcome!

The Janssen Chair was recently successful with a Nova Scotia Health Research Foundation Development grant. This will allow refinement of an MRS imaging methodology to proceed, which will later be applied to clinical research projects. Other research projects in psychosis are in development phases.

It was a full house at the Foggy Goggle in downtown Halifax on May 8. Individuals who had recovered

from psychosis, their families, friends, students, and members of the public packed the venue on Argyle Street in Halifax for an evening of fun and entertainment in support of the NSEPP. Jennifer Jones, the sister of a young man being treated at the NSEPP, organized the event in collaboration with the SMU Psychology Society.

Ms. Jones was successful in having the local bands perform free of charge. The group also had educational materials available to raise awareness of psychosis and how to get help. Proceeds from the event will be directed toward leisure activities for individuals receiving treatment at the NSEPP.

Mind Matters Public Lecture and Panel a Success

Dr. Phil Tibbo offered his first public lecture as the Dr. Paul Janssen Chair in Psychotic Disorders on May 6 at the Holiday Inn Harbourside in Dartmouth.

The event was entitled "Mind Matters: Public Lecture and Panel Discussion on Psychosis" and was presented in collaboration with the Nova Scotia Early Psychosis Program, the Nova Scotia Psychosis Research Unit, and the Schizophrenia Society of Nova Scotia.

The night began with Dr. Tibbo's presentation to the crowd of 80+ on what psychosis is, what causes it, and why early recognition is so important.

The panel then took questions from the audience, and there was such participation that the panel could have gone far beyond the time allowed. The panel consisted of (from left to right): Linda Black, Laura, Jill Torreville, Dr. Stephen Ayer, and Dr. Tibbo (not shown in photo).

Linda is the mother of Simon, a young man who has recovered from psychosis. She is very actively involved in raising awareness about early

psychosis and helps with fundraising for Laing House. Her family shared their story of their son's illness and journey to recovery in the video: *The Sooner the Better: Get Help Early for Psychosis*. Laura has experienced psychosis herself and is very active in raising awareness of mental health issues through public speaking opportunities. She also works providing peer support to individuals living with mental illness at Laing House.

Jill is the Occupational Therapist with the Nova Scotia Early Psychosis Program and Dr. Ayer is the Executive Director of the Schizophrenia Society of Nova Scotia.

The Dr. Paul Janssen Chair in Psychotic Disorders is funded by the Department of Psychiatry, Capital District Health Authority, Janssen-Ortho, and the Mental Health Foundation of Nova Scotia.



Sun Life Financial Chair in Adolescent Mental Health

Submitted by: Dr. Stan Kutcher

Sun Life Financial Chair in Adolescent Mental Health

These past few months since our last newsletter have been busy. Our team has been working hard, and with summer approaching we have hired five summer students. Holly Huntley, Julia Gibson, Jess Wishart, Martha Carmichael, and Katie Radchuck will be joining our group to work on various projects including a resource on understanding adolescent anxiety, a youth mental health action guide, and research on the teen brain.

The capacity for us to expand our team is due in part to the generous support we receive from our funding partners. I am pleased to announce that Sun Life Financial, the T. R. Meighen Family Foundation, the Kathryn A. Weldon Charitable Foundation, and the IWK have all made significant contributions to the Chair allowing us to increase the scope and reach of some of our signature projects. Their support, even in the wake of this economic climate, speaks to their commitment to

enhance child and youth mental health nationally and internationally.

The timing of this support could not be better. This year the IWK Health Centre was the national host for mental health week events. Recognizing the need to enhance awareness about mental health in young people, Canada celebrated National Child and Youth Mental Health Day (May 7) during Mental Health Week (May 4–10). The day's events were held at Pier 21 and included a passionate speech by the Honourable Senator Michael Kirby, a recipient of the Order of Canada for his lifetime of achievement on public policy issues and his commitment to confronting issues related to mental illness. I had the honour of introducing Sen. Kirby and to speak briefly about innovations in mental health care and the need to establish child and youth mental health policies and plans in Canada.

One of the priorities of the Mental

Health Commission of Canada (MHCC) is the establishment of a national mental health framework. Part of this framework deals with youth mental health and the MHCC has been working closely with Alan McLuckie and myself to lead the Evergreen project. The Evergreen project is the development of an innovative national framework to effectively, ethically, and confidently address the mental health needs of Canadian children and youth now and in the future.

While these projects at the national level are of great importance to the Chair, we have also been working at the local level, specifically to develop projects that link mental health and the arts. The arts are a powerful vehicle for the exchange of meaning and emotion. Providing opportunities for young people to express their emotions and talk about mental health through art can help lessen the burden and stigma that is often associated with mental illness.

Last year the Chair partnered with the ViewFinders International Film Festival to host a series of film camps during March Break. This year we were able to partner again thanks to signature support from the T. R. Meighen Family Foundation. The 2009 camps focused on producing short animation films on mental health. The films, along with an accompanying documentary, were premiered at the ViewFinders festival in April and will be taken on the road to schools and communities across Atlantic Canada this summer and fall. The films were also screened at a family event as part of Mental Health Week.

In March the Chair also launched another art project. Working with the Art Gallery of Nova Scotia (AGNS) and J.L. Ilseley High School, the Chair was engaged in a series of art workshops to build awareness of the complexities surrounding the adolescent brain and mental health. The project effectively integrated mental health into the high school art program and linked the



Young artists at J.L. Ilseley High School work on a teen brain art project

workshops with the school's youth health centre. Art produced from the workshops will be a starting point for the development of an extended large-scale collaborative art project with the AGNS entitled "Art and the Brain" in 2010.

As we move forward with our initiatives the web will become an increasingly important tool for the dissemination of our material. We have worked hard to produce a site that is user-friendly and shares knowledge about youth mental health using the

best available scientific evidence. Recently our site won a silver award at the 2008 Web Health Awards. The Web Health Awards recognizes the best Web-based health-related content for consumers and professionals, with the goal of providing a "seal of quality" for electronic health information.

Looking ahead this summer our team will finalize the development of nationally-certified continuing medical education course on adolescent depression which will be ready in the

fall. I will also be teaching two courses at Mount Saint Vincent University as part of their undergraduate and graduate education programs. One course will focus on mental health literacy for educators and the other will examine adolescent depression and suicide education.

If you would like more information on the activities of the Chair please contact **David Venn** or **Tracy MacKenzie** at (902) 470-6598 or visit us online at www.teenmentalhealth.org.

News & Announcements

Announcements

The next Sobey Postdoctoral Fellow in Psychiatry Research will be **Dr. Kosuke Kajitani**, who will be working with **Dr. George Robertson**. The Fellowship begins on July 1.

Congratulations

Teenmentalhealth.org Wins Web Health Award

Teenmentalhealth.org is now an award-winning website! The site, which focuses on sharing knowledge about youth mental health and mental illness, won silver at the 2008 Web Health Awards.

"Teenmentalhealth.org is dedicated to providing information on youth mental health that is based on the best available scientific evidence, and this award recognizes our commitment to excellence," say **Dr. Stan Kutcher**, Sun Life Financial Chair in Adolescent Mental Health.

The Web Health Awards recognizes the best Web-based health-

related content for consumers and professionals. The program is held twice a year — spring/summer and fall/winter — with the goal of providing a "seal of quality" for electronic health information.

Some of the website's key mental health resources include: a guide to understanding teen depression, a guide to understanding evidence-based medicine, a booklet for siblings with a mental illness, various multimedia presentations, and free clinical tools for health professionals.

Teenmentalhealth.org is developed by Dr. Stan Kutcher and the Sun Life

Financial Chair in Adolescent Mental Health, a partnership between Sun Life Financial, Dalhousie University, and the IWK Health Centre.



Congratulations to **Dr. Tomas Hajek** and his wife Eva on the birth of their daughter Sofie (7lb, 12oz, 19.7in) at 8:30 am on May 1 at the IWK. Dr. Hajek reports "We are having a great time, a lot of it in fact, since sleep is not interrupting us. ;-)"

Features

The “Whole Person Doctor” — One Route to a Psychiatric Career

Submitted by: Dr. Bill McCormick

When a very brief summary of his professional career was circulated when our Dr. Paul Janssen Chair in Psychotic Disorders, **Dr. Phil Tibbo**, took over the leadership of the Early Psychosis Program, I sent in a note complaining that a key, albeit short, time in his career had been omitted — his year as a “Whole Person Doctor” at The Nova Scotia Hospital. **Dr. Nick Delva** suggested that I should submit a piece to *Headlines* about these posts and their role in the formation of future psychiatrists.

As we all know, there is always a lack of fully qualified psychiatrists to fill all positions even in the elite teaching hospitals, not just in rural areas. In 2009 CDHA and IWK have many posts filled by GPs in Psychiatry, psychiatrists trained elsewhere who are not certified by RCP&SC and, post-retirement staff (thank goodness!). When I became Medical Director of The Nova Scotia Hospital on loan from the Dalhousie Department of Psychiatry for six months (20 years and a month ago) we had a number of unfilled psychiatry positions. I recruited a number of doctors whose jobs combined doing the GP care of patients on the unit with having patients in their psychiatric care with supervision equivalent to a current R2 resident. I never dreamed that my nickname for these jobs would ever appear officially, but I have come across official health record documents signed: “P. Tibbo, MD Whole Person Doctor” and “J. Kinley, MD Whole Person Doctor”. I will now let three of our faculty members tell their stories of the contribution these jobs made to their eventual careers.

Philip Tibbo, the Dr. Paul Janssen Chair in Psychotic Disorders: The Whole Person Doctor and the Dr. Paul Janssen Chair — A Correlation?

As an avid gardener/landscaper I have always agreed that any path in a garden should not be linear. My route to the Janssen Chair has also not been linear. I have been fortunate to have experiences that helped direct me in my career. Being a “Whole Person Doctor” at The Nova Scotia Hospital was one, and an important one at that.

I completed my MD at Memorial in 1991, followed by a rotating internship (in the good ol’ days of rotating internships) in Edmonton. In Medical School I was aiming towards a career in Sports Medicine. I quite disliked my clerkship rotation in Psychiatry. During my internship, however, I had a wonderful experience in Psychiatry leaving me feeling: “I don’t know what residency to apply for!” I decided to work for a year as a GP to give me time to decide and then heard about the option at The Nova Scotia Hospital where I could work as a GP on a unit but also be “allowed” to do some Psychiatry. I remember every detail of my interview with then Medical Director **Bill McCormick** (I’ll save that story for another time) but I am grateful for his confidence as I was offered a position that day.

I only worked in that position for one year as CaRMS was coming in and I wanted to apply for residency before it came. During that year, my experiences with patients and staff led me to realize that Psychiatry would, indeed, be my specialty. I recognized the great “fit” and that I liked Halifax as a city. My training and later academic career at the University of Alberta lasted 18 years until my return as the Janssen Chair. A full circle?

Jackie Kinley of the Mental Health Day Treatment Program, Director of Psychotherapy Training for Residents, and 2004 “Teacher of the Year”: “Despite a meandering path, there is a method to my madness”

Having worked in Emergency immediately after graduating from Medical School, and then beginning practice as a Family Physician, I found that, increasingly, I missed having the time really to get to know my patients. I enjoyed the dynamics of working with individuals and families, but it was always in an impersonal manner and felt superficial and somehow inadequate. So many of the disorders I saw in family practice appeared rooted in ingrained maladaptive ways of thinking, feeling, and behaving. The structure of my practice did not allow me the time which I felt was necessary to address the root causes of these difficulties. I became somewhat disheartened with the practice of medicine and its ability to provide me with the type of fulfilment I was seeking in my career. These feelings led me to accept a new position as a “Whole Person Doctor”. The title appealed to me as I still thought of myself as a “Medical Doctor”.

Despite my enjoyment of working with colleagues and patients at The Nova Scotia Hospital in the early 1990s, the primarily biological approach to patients was again unsatisfying and further piqued my interest in Psychiatry, leading to my application to residency at the University of Colorado and ultimately the Denver Psychoanalytic Institute.

The rest is history. I credit the insight I gained during my five years at The Nova Scotia Hospital as being formative in shaping my attitude and approach to my patients and their families. The opportunity provided me with a richness of experience that has helped to make me a more complete psychiatrist.

Finally, some comments from Yvonne Libbus, Chief of Psychiatry at Cape Breton Regional Hospital and 2006 winner of the “Resident of the Year” Award: “I went to The Nova Scotia Hospital for one year and stayed for ten...”

In the Spring of 1996 I took on a few call shifts at The Nova Scotia Hospital (NSH). I was working as a new family doctor in the Halifax area and was looking for ways to supplement my income to pay off student loans. I was encouraged to apply for a staff physician (GP) job at the hospital and started in July 1996 expecting to stay for one year looking after the medical needs of patients on in-patient units.

I enjoyed the multi-disciplinary team atmosphere and found a population of patients whose medical problems had often been neglected. They often had complex histories and it was a privilege to be involved in their care. Five years later I was still at NSH, enjoying the work and becoming more and more interested in their *mental health care* needs.

I began seriously to consider a career in psychiatry, but was apprehensive about a four-year residency. GP in Psychiatry positions were not available at that time as the idea of these positions was being questioned. However, then Clinical Director **Michael Teehan** heard my request to consider this option so that I could “try on psychiatry” as I put it to him. Before undertaking four more years of study at reduced income I needed to be *sure* that I would like the work after all that training. During my nine months with the Dartmouth City Team I had support and back-up if needed and was supported by Dr. Teehan throughout the time. I entered the Dalhousie Residency Program in July 2002, finishing in 2006 and then, after ten years in the Halifax/Dartmouth area involved with Mental Health Services, I moved with my husband and three daughters to our hometown of Sydney.

I will always appreciate the “family of colleagues” I found at NSH. I am thankful to Dr. Teehan for allowing me the chance to open doors I would never have imagined going through when I took that first job in mental health “for just one year”, 13 years ago.

These are just three stories of how these sorts of jobs can help people decide on a career in psychiatry from earlier uncertainty, and enable them to enter psychiatry training with perhaps one year, but perhaps as much as five years experience in the field before formal training was started.

Trapped in Paradise: The Curious Case of the 2009 International Conference on Eating Disorders

Submitted by: Dr. Joanne Gusella

On April 26, **Dr. Stephanie Casey**, Lisa Parkinson McGraw, and I set out for Cancun to attend the International Conference on Eating Disorders.

When we arrived, we were thrilled with the resort and were looking forward to the international connections we would make, the new learning that would take place, and presenting our clinic research poster: “What motivates people to change? An examination of the pros and cons of ‘taking action’ against an Eating Disorder over a six-month period”.

What we didn’t bargain for was that a swine flu epidemic was about to become headline news around the world and that travel advisories would have conference participants change their minds about attending. The WHO announced that we were at Level 5, one step away from calling the flu a pandemic!

After the organizers confirmed that the conference would go ahead the day we left, they officially cancelled it on the Monday evening. Those of us already there would have a hard time returning home as flights were tight, seats were snapped up quickly, and some airlines were beginning to shut down operations to the airport.

Not all was lost! A reception was held for the approximately 40 participants at the resort, and it was a wonderful, intimate opportunity to discuss our research.

The conference proceedings were handed out including our published abstract, and we made some excellent connections. Canadians from different programs across the country were well represented in this lone group trapped in Cancun!



My picture doesn’t look all that unusual until you realize that there is only one person lying by the pool on a sunny afternoon in Cancun!

In Memoriam: Dr. Vivek Kusumakar

Submitted by: Dr. Stan Kutcher

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It was about a year ago and Vivek and I were sitting in his kitchen, single malts in hand and waxing philosophical. It was late and the house was dark-silent with only a kind of restless spirit sounds of two middle-aged guys to keep it company. He had not been well and had been fighting back against the weakness of a heart that betrayed the strength of his mind. As always we were chatting.

"There will come a time when we are gone and who we have been and what we have done will be as if we have never been there."

"Maybe, but maybe not."

Who knew that in such a short time one of us would be writing his remembrance of the other.

Vivek was a friend, a colleague and I, like all his friends and colleagues miss him. The details are surprisingly simple. Born in Mumbai, India in October, 1951 and died in Washington, USA in January, 2009. Much too short a time he was with us.

He was one of those rare people who could see the forest and the trees at the same time. A first rate clinician, a critical thinker and a person who would call you at one in the morning because he had an idea he wanted to challenge. And, also because he hardly ever seemed to sleep.

Although to his Canadian peers Vivek's name is tied to Halifax, he was truly a global citizen. Medical school at KMC in Mangalore, post-graduate psychiatry training at the National Institute of Mental Health and Neuroscience in Bangalore, the MRC Psych completed in Ireland and then work in Glasgow and Edinburgh, Scotland prior to coming to Canada in 1992.

I first met Vivek in Edinburgh, at the Young People's Unit of the Royal Edinburgh Hospital. Who was this crazy guy who started meetings at 0914 and 1137 hours? I was working at the Brain Metabolism Unit and "clinically slumming" so as to continue adolescent psychiatry work while eye-deep in research. Vivek came to our walk up tenement flat for "tea" the first week we worked together, and never complained that all he got was tea. It was only much later that we learned that in Scotland "tea" meant a light dinner — and he was probably famished. Oh well, we made up for that many times over in subsequent years.

After Dalhousie had lured him to Canada — thanks to **Drs. Alistair Munro, Herb Orlik and Aidan Stokes**, Vivek settled into his child and adolescent psychiatry work like a duck takes to water. Never satisfied with simply doing what was expected, he took to doing what was needed. And as we all know, in our discipline, regardless of where we are, doing what is needed is a big job. Vivek worked to help reorganize and revitalize the child and youth mental health services in Nova Scotia. He developed the mood disorders program at the IWK Health Centre and embedded research into ongoing clinical care. Vivek believed in collaboration and community



and worked hand in glove with parents, community groups and organizations (for example: Reaching Out and the Metropolitan Immigrant Services Association) and young people — all together with the goal of improving the lives of those touched by mental illness. Academically he co-lead the development of the bipolar research program at Dalhousie and translated his success in that initiative to national and international leadership in that area. He played a major role in establishing the first youth mental health chair in Canada. Nationally he directed his considerable talents to the work of the Academy, particularly to the Journal and the scientific program. His list of academic papers and books serve as reminders of his groundbreaking research work and scholarly pursuits. His roster of patients — young people and families who found optimism and success in spite of illness serve as living reminders of his dedication and commitment to others. His many students, colleagues and collaborators serve as continued examples of the breadth and continuation of his efforts and ideas.

Vivek moved from Dalhousie to become Global Senior Director of CNS, Pain and Translational Medicine with J and J in Princeton New Jersey. There he continued his contribution to expanding our horizons in pharmaco-therapeutics for young people suffering from mental disorders. Even when away however he kept in touch, always interested in who was doing what and how things were going.

There never was a discussion that Vivek would pass on, and the more heated the better. And the topic did not matter. From cricket (which he was passionate about) to arcane cinema to history or cultural anthropology he brought his wide

knowledge to bear alongside his enthusiastic curiosity about everything and everybody. Many an enjoyable evening was spent with Viv and friends — a bottle of wine or three — and hours of the cut and thrust of respectful debate. “Come on over for a meal” was one of his favourite callouts. That meant not only be prepared to sample some fantastic cuisine but be prepared to settle in for some kind of chat.

Vivek met Shalini in 1973 when she was an undergraduate psychology student in Mangalore. They married and had two children — Sidhardth and Smitha. Sid is now a lawyer with Olswang in London, UK and Smitha puts her MPH to good

use with the British Heart Foundation. Sid and his wife Joanne have a young child — he is almost six months old now. He was the apple of Vivek’s eye. I never saw Viv so grin-faced as when he talked about his grandson. According to Shalini, he has just started on solid food this week. Seems he is getting ready to sink his teeth into life and take a big bite of it. Just like his grandpa.

“There will come a time when we are gone and who we have been and what we have done will be as if we have never been there.”

“Maybe, but maybe not.”