

PROGRESS IN PSYCHIATRY

UF

MAY 2017



UF

Department of Psychiatry

College of Medicine

UNIVERSITY OF FLORIDA



From the desk of the Chair

Dear Friends and Alumni of the University of Florida Department of Psychiatry,

We are thrilled to share with you some exciting new developments in our clinical, research and teaching missions and some of the special events of the past year.

In 2016–2017 we made great strides in integrating and expanding our clinical programs to provide greater access to such life-changing treatment options as ECT and co-managed inpatient treatment for patients with complex medical and psychiatric comorbidities.

We also are developing a proactive consultation model for patients receiving care in the UF Department of Emergency Medicine and on UF Health medical and surgical units.

The past year also brought innovative research efforts, including the launch of a new Center for OCD, Anxiety and Related Disorders and the start-up of our research initiative at the Florida Recovery Center, both buoyed through generous philanthropic support.

We continue to offer exceptional educational opportunities for psychiatric residency training, as well as specialty training in addiction, child and adolescent psychiatry, community psychiatry, forensics, geriatrics and neuromodulation. Our innovative online education program further expands our teaching reach.

Finally, we are proud to continue a legacy of community service, inspired by our unforgettable colleague, Dr. Richard Christensen.

Thank you for taking the time to catch up with our programs — we look forward to hearing from you.

Regina Bussing, MD, MSHS, DFAPA, DFAACAP

[Donald R. Disney Chair in Psychiatry](#)
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2016 UF Health Science Center 5th Annual Celebrating Distinction Ceremony (left to right) Drs. Carol Mathews, Regina Bussing, Scott Teitelbaum and Herbert Ward honored with endowed professorships and chairs

EDITORIAL TEAM

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Neuromodulation: An old lifesaving treatment finds new techniques

In the UF Department of Psychiatry's neuromodulation program, patients who have lost hope can find it again. The program, which began in 2009 and used electroconvulsive therapy, or ECT, to treat patients with intractable major depressive disorder, has expanded and grown, and now represents one of the few places in the country where individuals who have not responded to traditional forms of treatment can find relief.

The program now has a freestanding ECT center, and includes a unit dedicated to treating individuals with complex psychiatric and medical illnesses, a transcranial magnetic stimulation (TMS) program, and a deep brain stimulation (DBS) program. The neuromodulation team includes Drs. Brent Carr, Chief of ECT services; Richard Holbert, Director of the TMS program and Co-Director of the Brain Stimulation Center; Khurshid Khurshid, Louis Solomon, who directs inpatient ECT services; and Herbert Ward, the Kaine Professor of Psychiatry and Director of the Brain Stimulation Center, which provides DBS.

ECT is a well-known and time-tested form of treatment, and was first used for depression in 1938. It remains one of the most effective forms of treatment available

for intractable or severe depression, as well as for depression in the elderly or in those with medically complex problems. TMS and DBS are more recent additions to the neuromodulation program's toolkit. TMS, which is a noninvasive treatment that requires no anesthesia and uses an electromagnetic coil to stimulate specific parts of the brain, was first approved as a depression treatment by the FDA in 2008. It uses an electromagnetic coil to induce a small electric current to stimulate parts of the brain that may not be functioning properly in patients with depression. DBS was approved by the





FDA in 2002 to treat Parkinson's disease, and subsequently has been shown to be effective for the treatment of intractable obsessive compulsive disorder (OCD), Tourette syndrome (TS), and major depression.

"When ECT is delivered to appropriately selected patients, depression rapidly dissolves," Carr said. "It is extremely safe and well tolerated, and the side effects are minor. And at this time, there is no treatment that can outperform its effectiveness."

Physicians in the neuromodulation program administer an average of 60 ECT and 15 TMS treatments per week, and the numbers are growing. The number of individuals treated with DBS are somewhat smaller, but also expected to grow in coming years. The department's physicians are also conducting research to determine what other conditions or patient populations might respond to these types of treatments. Indications

being studied include obsessive-compulsive disorder, smoking cessation, adolescent depression, and insomnia.

Patients who might be appropriate for ECT, TMS, or DBS may come directly to the UF neuromodulation services for evaluation, or they may be referred by their primary care physician or a community psychiatrist. Patients who are good candidates for these treatments have generally tried other treatments without success, and are in need of something that can pull them out of deep depression or even prevent them from taking their own lives.

"We've seen lives saved. We've seen people get back to their daily functioning, get back to work and get back to their family life," Holbert said. "No matter your depression, there is hope and these treatments offer hope. We're there and we want to do everything we can to help." 

Leadership: Joseph McNamara named chief of Medical Psychology



Joseph McNamara, PhD, has been named the new chief of the division of Medical Psychology in the UF Department of Psychiatry. He brings to the position a wealth of experience in clinical psychology, education and leadership, and a vision for working with the talented division faculty to strengthen the mission areas of patient care, education, research and service.

One of his main areas of focus will be to ensure that patients in the community, around the state and across the U.S. are aware of and have access to the excellent care and diverse services of the division, which already enjoys a good national reputation.

“Something that’s very important to me is increasing our outreach so that we are better able to serve the community,” McNamara said.

The psychologists in the division work hand-in-hand with psychiatrists and other health professionals to develop and implement effective treatment plans for patients with a range of disorders, including obsessive compulsive disorder (OCD), eating disorders, anxiety, autism spectrum disorders, disruptive behavior disorders, and many other areas. Specialty programs include the OCD program, the Parent-Child Interaction Therapy Program and the Eating Disorders Program. The recently established Center for OCD, Anxiety and Related Disorders is an embodiment of the division’s vision. As Co-Director, Dr. McNamara has a key role in the Center, helping to bring together clinicians and researchers from the many divisions and departments of psychology at UF to advance research and facilitate patient care.

McNamara earned his doctorate in both developmental psychology and counseling psychology at the University of Florida. While

in graduate school, he had the opportunity to work in a range of practice settings, including counseling centers, psychiatric facilities and hospitals. His interest in OCD blossomed when he joined the psychiatry department.

His leadership in the department includes service as interim chief and associate chief of Medical Psychology, clinical director of the OCD program, and program director for Online Education.

McNamara will guide the division as it expands its provision of evidence-based behavioral health services to adults, children and families. The division also plays a key role in education at UF, teaching graduate students from multiple UF programs, medical students, interns, psychiatry residents and child psychiatry fellows. The division’s robust research program, which is integrated into the clinical services, reflects the diversity of interests of the faculty, with a common theme of improving treatment outcomes by optimizing and tailoring the delivery of care to individuals and families.

“I was lucky enough to train in the Division of Medical Psychology throughout my graduate program. My experiences within the Division not only served as a cornerstone of my professional identity, but often set me apart from my peers in terms of comfort and experience with severe psychopathology,” said Amanda Balkhi, Ph.D., a recent graduate from the Clinical and Health Psychology graduate program at UF. “The truly outstanding component that sets the Division apart from other training sites is the focus on mentorship and consultation, not only with psychologists and psychology trainees, but also with the attending and resident physicians in child psychiatry. I can’t speak highly enough of my experience there.” 



Psychiatrists at the hospital bedside: Consultation-Liaison Service

Patients admitted to the hospital for a medical illness sometimes have a co-occurring psychiatric illness that, if untreated, can hinder treatment and recovery. To combat this all-too-common problem, the UF Department of Psychiatry offers a Consultation-Liaison (CL) Service, which focuses on providing psychiatric care to medically ill patients in the medical and surgical units.

In this two-pronged approach, the consultation services focus on treating individual patients, whereas the liaison services focus on helping providers in other specialties build their proficiency in identifying and handling issues that may arise.

“Our main goal is to help the patient get through their inpatient stay in the smoothest way,” said Consultation-Liaison Service Chief Dr. Angela Camacho. “We help improve the quality of care overall, because we are trained and equipped to deal with medically complex patients.”

Camacho, who joined the department one year ago, specializes in psychosomatic medicine, a psychiatry subspecialty that focuses on assessment and management of psychiatric manifestations in medically ill patients. Psychosomatic medicine specialists are also trained to conduct psychotherapy and crisis interventions, and administer medications for issues such as anxiety and depression. Camacho is the first with that specialty to lead the UF Psychiatry Consultation-Liaison program.

During the past year, the psychiatry department has taken important steps towards a proactive integrated consultation program. To more effectively address high rates of co-occurrence of psychiatric and substance use disorders, the addiction consult service was co-located with the general CL service. To identify service and training needs, Camacho joined with medical teams in hospital rounds to see patients, and with morning safety huddles to identify behavioral management problems. Also key to ensuring smooth patient discharge to appropriate accom-

modations has been the co-location of our psychiatric inpatient intake service and consult services. Part of a strategic effort to bring together people who do similar things, all these teams now share office space, facilitating effective communication and improving patient care. The team also includes a social worker whose role is to help with consult follow up, to make the services more efficient.

The service also advances the department’s education mission, giving psychiatry residents and medical students a unique learning opportunity to take part in joint consultation rounds with psychiatry and substance use disorder services, and review medically complex cases.

“Not taking care of the mental health needs of patients who are admitted can prolong hospitalization and increase the risk of readmission,” said Psychiatry Department Chair Dr. Regina Bussing. “A high quality consultation-liaison service is something that definitely has a good return on investment.”

And the program has been yielding dividends in terms of improved patient care and increased proficiency among providers, with the potential for significant cost savings for the health system. Providers report greater satisfaction with psychiatric consultations, and increasingly request training on a variety of issues such as how to best call for a consult, how and when it is appropriate to invoke involuntary psychiatric admission proceedings, and how to proficiently assess patient decision-making capacity. These trainings can increase provider efficacy, thereby reducing consult services demands.

“We’re seeing evidence that our colleagues in the medical and surgical specialties are interested in bringing this collaborative approach to the care of their patients, and not just thinking of us as someone that you call when you have a really big problem on your hands,” Bussing said. 



Battling substance use disorders: Recovery is possible

Substance use disorders are a growing public health concern, affecting almost 21 million people in the United States, according to the National Survey on Drug Use and Health. Opioid use disorders, in particular, have come into sharp national focus because of a spate of overdose deaths, including those of noted actor Philip Seymour Hoffman and legendary singer Prince.

But recovery is possible, with proper treatment tailored to individual needs.

The 2016 “Facing Addiction in America: The Surgeon General’s Report on Alcohol, Drugs and Health” noted that there is a pervasive sense that substance use disorders are a moral failing, rather than the chronic illnesses they are. Then-Surgeon General Vivek Murthy called for a treatment approach similar to that for other chronic diseases such as heart disease, diabetes and cancer. The chronic disease management model has four stages, namely, identification and early intervention, stabilization, clinical management and patient self-management.

The UF Health Florida Recovery Center (FRC) is leading the way in treatment, providing best-available, effective, evidence-based care for patients from around Florida and across the U.S. Part of the University of Florida Department of Psychiatry, FRC has a stellar record of treating professionals who need a place to get their lives back on track.

“Most psychiatry departments don’t have a facility on campus that can treat people like this,” said Medical Director Dr. Scott Teitelbaum, the Pottash Professor in Psychiatry and Neuroscience.

More than half of the FRC’s patients are professionals from across the U.S., including physicians, nurses, judges, and attorneys. This highlights one of the basic facts of this disease: It can affect anyone.



DR. SCOTT TEITELBAUM



DR. WILLIAM GREENE

Treatment options at the Florida Recovery Center include detox, partial hospitalization and intensive outpatient treatment. These varied levels of care ensure that each patient receives an individualized treatment plan. Treatment for co-occurring mental health disorders is also a key part of care, which is provided by physicians who are board certified in addiction medicine and/or psychiatry. Other providers such as psychologists, counselors and social workers offer expertise in anxiety and mood disorders, neuropsychological testing, cognitive behavioral therapy, 12-step facilitation and other areas. Some providers are themselves in recovery, allowing for a deeper, shared understanding of what patients are going through, and the chance to serve as role models.

The Florida Recovery Center's patient care is complemented by the Psychiatry Department's strong basic science, clinical research and education programs in substance use disorders. The Center gives medical students, residents and fellows a training and health care experience that can't be easily found elsewhere, and offers patients quality treatment in a clinical research setting at an academic health center. The recently launched Pottash FRC research initiative will integrate quality of care and outcomes studies into our nationally recognized treatment facility. These research efforts will help identify what aspects of treatments give patients the best chances at recovery. Having information about what constitutes evidence-based treatment, and what is not essential for recovery is important as patients choose where to go for help. Getting the right kind of treatment can make the difference between recovery and continued suffering.

"Many patients we encounter go on to sustain recovery indefinitely and really turn their lives around," said addiction psychiatrist Dr. William Greene. "We get to see people when they've just hit rock bottom and we get to help transform them back into healthy, happy functioning members of society. To get to be a part of that recovery journey in patients' lives is a blessing and a joy." 

To learn more about the UF Health Florida Recovery Center, call (855) 265-4FRC or (855) 265-4372, or visit www.floridarecoverycenter.ufhealth.org.



SERVICE 

BELOVED PSYCHIATRIST'S LEGACY LIVES ON

The embodiment of unconditional love, is how a former patient describes Dr. Richard C. Christensen.

Tragically, his life was cut short in November 2015 when he was hit by a motor vehicle while out for a morning run. On that fateful day, he was doing what he did best — serving others. He had traveled to the nation of Zambia to help build homes with Habitat for Humanity International for people who were less fortunate.

Closer to home, Dr. C., as he was affectionately known by many, worked in underserved communities in Florida. His community psychiatry practice took him out of the clinic and onto the streets, where he cared for people with mental illness who are homeless.

“He was incredibly compassionate, and he dedicated his work and his life and his career to taking care of the homeless,” said Dr. Jacqueline Hobbs, Vice Chair for Education in the UF Department of Psychiatry. “I always say he’s an angel. He was just an amazing human being, and I miss him terribly.”

A pioneer of “street psychiatry,” Christensen worked at Jacksonville’s Sulzbacher Center, which provides services for people who are homeless or at risk of becoming so. There he served as director of Behavioral Health Services and worked on the “HOPE team,” riding around town so he could treat people where they were. He was the medical director for a federally funded initiative to treat people who were chronically homeless and who had co-occurring disorders. And he developed an integrated psychiatry-primary care initiative based at UF Health.

An accomplished teacher, he was a professor of psychiatry in the UF Department of Psychiatry, twice — in 1996, and posthumously in 2016 — earning the Hippocratic Award conferred by UF College of Medicine graduating students to a faculty member who, to them, represents the ideals of what a physician should be. Christensen also earned the UF College of Medicine Exemplary Teacher Award in 2011, 2012 and 2013. He was a prolific researcher, publishing more than 100 peer-reviewed articles, book chapters and reviews.

His legacy continues through numerous projects and community service initiatives organized by coalitions of family members and friends, as well as former students and colleagues from the University of Florida and the Sulzbacher Center.

The Christensen Memorial Project, established by the UF Psychiatry Department under the leadership of Chair, Dr. Regina Bussing, has launched a three-pronged effort in Christensen's honor to showcase, through his life and work, the importance of having compassion, serving the underserved through psychiatry and ministering to people who are homeless. The project's components are, a compilation of nuggets of wisdom from Christensen, a model medical ethics curriculum and a teaching website.

"He was blessed with that beautiful gift of putting words on paper that would touch your heart and soul," said Christensen's wife, Kathy Christensen, who is deeply involved with the project.

The "Christensen Pearls," a pocketbook created and released in Summer 2016, pulls together learning aids Dr. C. created for

medical students and published. The book contains short articles with helpful mnemonic devices, and a table of psychiatric medications started by Christensen and finished by his former student, Dr. Ana Turner. The book also features remembrances and artwork created by former patients, alongside warm recollections from former colleagues.

"The exemplary manner in which he lived life was a daily lesson in and of itself," said Tory Wilcox, a Sulzbacher counselor who worked with Christensen for 13 years and helped shape the project.

The model ethics curriculum, completed in April 2017, includes Christensen's writings along with original content from other UF Psychiatry Department faculty. Drs. Cara Yergen, Joseph Thornton, and Jacqueline Hobbs and editorial assistant Caroline Nickerson have been instrumental in this portion of the project. This multimedia offering incorporates filmed clinical vignettes, and memorial art produced by friends and family under the guidance of recreational therapist Maggie Hannon.

Finally, a teaching website with a launch date of August 2017 will serve as a living repository of Christensen's work. The site will be interactive and constantly updated with information that will be of value to patients, students, faculty and the general public.

"Anyone who knew Dr. Christensen remains transformed by the heart-to-heart connections he established," Bussing said. "For those who only know of him, our memorial project keeps alive his legacy of caring, advocating and instilling hope." 





SERVICE



Helping Hands

S E R V I N G T H E G A I N E S V I L L E C O M M U N I T Y

In the middle of downtown Gainesville sits a green-and-white house that is the medical home of many of the city's residents who are homeless.

This is Helping Hands free clinic, where patients come for general medical, women's health, and mental health care. Dr. Jacqueline Hobbs, Vice Chair for Education and Residency Training Director, and Dr. Mariam Rahmani, Child and Adolescent Psychiatry Fellowship Director, unfaithfully volunteer in the women's mental health clinic on Thursday evenings. Dr. Louis Solomon, UF Health Psychiatric Hospital Inpatient Unit Director and Inpatient ECT Director, goes on Monday afternoons, and has done so for the last 15 years.



"For me, it's having the opportunity to help people who are the most unfortunate in our community," he said. "Patients can come to Helping Hands, be seen by a doctor, or even for that matter, a couple of doctors and be assured that when they leave, they'll have the medication that they need. That's always a big struggle for people who are homeless, because they don't always have the money to pay for the medications and sometimes they can't even get to a doctor's office."

Always dressed in his trademark blue scrubs, Solomon is part of a small army of volunteer physicians, physician assistants, nurse practitioners, registered nurses, social workers, psychiatry residents and fellows, medical students, undergraduate students and other community members who give of their time and expertise to help their neighbors.

UNIVERSITY OF FLORIDA DEPARTMENT OF PSYCHIATRY

“As a community, we need to take care of ourselves, and that includes those who are homeless, not just those with insurance,” said Rahmani, who has been volunteering since 2012. “Patients are really nice, and very appreciative.”

Helping Hands Clinic was started 27 years ago by late UF Psychiatry faculty member Dr. Richard Christensen in collaboration with Veterans Affairs staffers Cynthia and Randy Stacey and a number of other medical providers. The clinic first operated at a local Salvation Army lodge before moving to its new location. Over the years, it has served an estimated 5,000 people during more than 20,000 visits. Most patients live on the streets or at Grace Marketplace shelter. In addition to medical care and prescription medications, there is also the opportunity to shower and participate in group discussions of interest.

For UF Psychiatry faculty, serving at the clinic is also a chance to teach to new generations of physicians and students, by example, about serving the most vulnerable with humility and compassion. Solomon tells trainees that no matter one’s profession, a good goal is to do pro-bono work for those in the community who can’t afford to pay for your services.

In turn, the psychiatry residents and fellows who serve at the clinic get a unique opportunity to see the same patients over relatively long periods, sometimes years. This contrasts with their formal training program, in which they may see patients in a given practice setting for just a few weeks or months at a time before having to move on to new patients in a different setting. By working with the same patients over time, the trainees gain a deeper understanding of various medical issues, how they develop, and how people are able to deal with their illnesses successfully or unsuccessfully.

“Things take time. People don’t change their living conditions or their mental health in a matter of weeks or months,” Solomon said. “Because of long-term follow-up, you get a chance to watch people do the things that they need to do to improve their life.”



Dr. Chris Ong, a resident physician, volunteered at Helping Hands as an undergraduate and during medical school. With Solomon’s encouragement, he started again when he became a resident. His experience at Helping Hands has helped him understand the importance of community psychiatry, and given him the desire to incorporate it into his future practice.

“It taught me that being there for the patients, listening and being present, you’re already more than halfway there toward taking care of them,” Ong said. “Even if they’re going through the toughest of the tough and you can’t completely put yourself in their shoes, they just appreciate your being there.”

Helping hands also helps build bonds among the Psychiatry faculty, as they serve shoulder-to-shoulder.

“I get to volunteer with some amazing, compassionate people,” Rahmani said. “I also get to connect with some of my colleagues that I don’t see that frequently during the regular work hours.” 



RESEARCH



ABCD STUDY: Games help track how young brains grow

Electronic games don't always have the best reputation. Banned in the classroom and shunned as a waste of time, they often are seen as enablers of bad habits. But at the UF Department of Psychiatry, games have become a research tool as essential as books and lab equipment. The NIH-funded Adolescent Brain Cognitive Development study, or ABCD Study, enrolling approximately 10,000 children across 21 US sites, is using specialized tests in the form of puzzles and brain teasers on iPads to help track how girls' and boys' brains develop through childhood and into adolescence. The children also play the games while inside an MRI machine that captures images of both brain activity and structure, making it possible to track changes as the youngsters grow up.

"This is the first study of its kind, studying brain development all the way from adolescence and into young adulthood" said research coordinator Robert Prather, a 2017 winner of the UF Health Science Center Superior Accomplishment Award.

The ABCD Study is now recruiting children ages 9 to 10 for the UF site. Study leaders Professors Sara Jo Nixon of the Department

of Psychiatry and Linda Cottler of the Department of Epidemiology, were awarded \$4.5 million to monitor 400 kids in Alachua and surrounding counties.

Game-playing while inside an MRI machine, in conjunction with careful clinical tests could help reveal still unknown details about the various stages of social, emotional, cognitive, and physical development during adolescence. As the children grow and adopt different lifestyles, the study will also examine how various behaviors, including use of substances such as cigarettes, alcohol, or marijuana, affect the brain.

"The ABCD study is a truly unique opportunity to examine the separate and interactive effects of biological, psychological, and social factors that influence development through adolescence" Nixon said. "It is very exciting that the University of Florida and our surrounding communities are participants in this landmark study."

The UF study started welcoming participants in February 2017. Parents and children complete questionnaires about mood, feelings about school and friends, and other topics.

In addition to questionnaires, the children also play the study games, which measure things like motor skills, attention, memory, and learning. MRI brain scans are completed every other year.

After their first study visit, children and parents will have a check-in phone call every six months, and return for study visits once a year. The games element keeps the study fun for these energetic, inquisitive participants, and helps create a fun environment to which participants want to return.

"It's critical that the kids stay in the study as they grow, because the best way to study and understand development is to track it long term over the years" said site coordinator Sarah Reaves.

As the children grow, so will the study. Questions will change based on what is age appropriate as children grow into adolescents and young adults. In the end, the ABCD Study will help provide comprehensive, nationally representative answers to longstanding questions about biological and behavioral development during adolescence. 🧠

For more information about the ABCD Study or to enroll, call 352-279-7333, email ABCD@health.ufl.edu or visit www.abcdstudy.org

UNIVERSITY OF FLORIDA DEPARTMENT OF PSYCHIATRY

Research Excellence: New UF Center for OCD, Anxiety and Related Disorders

A research center launched recently by the UF Department of Psychiatry is taking a multidisciplinary approach to understanding and improving treatment outcomes for Obsessive Compulsive Disorder (OCD) and other mental health disorders. The new UF Center for OCD, Anxiety and Related Disorders will foster national and international collaborations, starting with researchers from across the UF campus who are tackling these disorders from different angles.

“One of the opportunities at UF is that there are multiple campuses, multiple colleges, lots of expertise,” said Center Director Dr. Carol Mathews, Vice Chair for Strategic Development and Brooke Professor of Psychiatry at UF. “The idea kind of formed to create a center that would really bring people together in this collaborative way to help increase what’s being done and make it more effective, more expansive and more impactful.”

Up to two percent of the U.S. population has OCD, a chronic disorder characterized by uncontrollable recurring thoughts and behaviors, with half of those cases classified as severe, according to the National Institute of Mental Health. Many more have anxiety disorders — 18 percent of the adult U.S. population. These disorders typically begin in childhood, making their early identification and treatment even more important.

Potential cross-UF collaborations include projects with the College of Veterinary Medicine to determine the impact of animal hoarding on animals and humans, with the College of Journalism and Communications to see how patients receive and



understand information about genetic testing, and with the College of Medicine’s Department of Obstetrics and Gynecology to examine prenatal and perinatal OCD symptoms among both mother and fathers. The Colleges of Pharmacy, Liberal Arts and Sciences and Public Health and Health Professions are also already involved with the center, which will take advantage of existing expertise, and recruit expert faculty and trainees in areas that are not yet represented.

The center, which is co-directed by Joseph P. McNamara, Chief of Medical Psychology and Herbert E. Ward, Vice Chair for Clinical Affairs and Kaine Professor of Psychiatry, will serve as a virtual research home for a cohesive, international group of investigators conducting leading edge research in the field. The overall direction the research takes will be driven by the interests, expertise and collaborative efforts of members. Current overarching themes include determining what abnormalities in brain function under-

lie these disorders, illuminating the nature and influence of environmental and genetic factors, and improving treatment outcomes.

Though the center’s focus is mainly research, the goal is to bridge research and clinical care, as demonstrated by several recent initiatives, including a therapeutic day camp for children with OCD and anxiety disorders that will take place in the summer of 2017, and a study in the child psychiatry clinics examining how genetic testing may improve treatment outcomes for children with OCD, depression, or anxiety disorders.

“You’re limited in how much you can do when you’re working by yourself,” Mathews said. “So really coordinating the efforts and the individuals and providing an infrastructure and impetus to grow beyond individual laboratories into a collaborative effort is really important if we’re going to become internationally recognized and really make a difference.” 



Training The Next Generation Of Psychiatry Research Scientists

The UF Psychiatry Department has basic science research programs in a number of areas, including substance use disorders, autism, neuroimaging and traumatic brain injury. Trainees, including graduate and undergraduate students and postdoctoral fellows are key to the success of these research programs led by department faculty.



For example, research in the laboratory of Barry Setlow, PhD, uses behavioral, pharmacological, biochemical, electrophysiological, and optogenetic approaches to reveal the mechanisms of cognition and motivation, and how they are impaired in pathological conditions including substance use and advanced age. One line of this work is focused on determining how chronic exposure to drugs of abuse (including cocaine and cannabis) causes long-lasting impairments in decision making, memory, and emotional regulation, as well as pharmacological strategies for treating these impairments. Other work is focused on neurobiological mechanisms responsible for age-related cognitive impairments, as well as development of novel approaches (both pharmacological and through stimulation of peripheral nerves) for enhancing cognition. All of this research is conducted by a team of highly-motivated trainees (undergraduates, graduate students, and post-doctoral fellows) and technical staff, in collaboration with faculty colleagues across several departments at UF. 🧠



New NIH-Funded Study Could Improve Understanding Of Nicotine’s Role In Tobacco Smoking

Cigarettes contain the highly addictive chemical nicotine, and a new UF Department of Psychiatry study aims to investigate whether lowering nicotine levels in tobacco can make cigarettes less addictive.

Funded by a grant from the National Institutes of Health (NIH) and the U.S. Food and Drug Administration (FDA), the study will use cigarettes specially designed to contain low, medium and high levels of nicotine to examine whether reducing the nicotine content in tobacco could make adolescents less likely to start or keep smoking, and whether it would be easier for adult smokers who have nicotine use disorder to quit.

“Most people work on just nicotine, but we have been investigating the effect of tobacco smoke exposure on the brain for more than 10 years,” said principal investigator Adriaan Bruijnzeel, an Associate Professor in the department. “It’s important to study the effects of nicotine in tobacco smoke, because smoke contains many compounds that amplify the effects of nicotine, or are rewarding by themselves”.

Bruijnzeel’s research group was the first to show, through animal studies, that passive exposure to tobacco smoke leads to nicotine dependence. This animal model allows for evaluation of potential new treatments for smoking cessation.

If the study finds that lower levels nicotine are not as addictive as higher levels, the FDA could take this into account in setting limits on how much nicotine cigarettes may legally contain. 🧠



Online Education: New Frontiers in Psychiatry

Recognizing the need for well-trained professionals in a variety of fields to help meet the growing national need for substance use disorder treatment, the UF Department of Psychiatry launched its online Graduate Certificate in Addiction and Recovery in 2014. The aim is to provide formal post-baccalaureate training for people interested in the field, equipping them with the knowledge and skills they need to go on to pursue certifications such as the Certified Addiction Professional (CAP) credential offered by the Florida Certification Board.

The program is one of several online education offerings in the department, and helps fulfil the mission to educate not just physicians and physicians-in-training, but a broader cross-section of trainees. The strong engagement with online education is in keeping with the pioneering spirit of the department, which was the first in the nation, 20 years ago, to institute a mandatory addiction medicine rotation for every medical student.

“Our online programs harness the expertise of our department faculty in the areas of basic science, patient care and education, creating a unique virtual collaboration that makes for a rich learning experience for students,” said Czerne Reid, PhD, a Lecturer and Program Director for Online Graduate and Certificate Programs.

Students who take the undergraduate programs are generally interested in pursuing careers in medicine or other health professions. On the graduate side, the Addiction and Recovery certificate was launched with the understanding that to effectively tackle this

major public health issue, training was needed not just for physicians, but also for allied health and paraprofessionals and others who work in — or desire to work in — various roles in the field.

Students have come from diverse professional, personal and geographic backgrounds. Some are physicians, nurses, counselors and other health care practitioners. Several nonmedical professions are also represented, and some people enroll in the program for personal or family reasons. Students have logged in from as far away as China and the Middle East, and closer to home in Florida and across the U.S.

The program equips students with an understanding of the history and neurology of the disease, the principles and practice of effective evidence-based treatments, and the coordination of care.

The undergraduate and graduate online programs also provide new and unique teaching opportunities for department faculty and doctoral students, and the opportunity to conduct educational research.

“Online education helps us to reach far beyond the physical boundaries of our campus,” said Joseph McNamara, PhD, Chief of Medical Psychology and Program Director for Online Undergraduate Education in the department. “It increases schedule flexibility for both students and faculty and more importantly, creates opportunities for people to interact in ways that enhance experiential and interactive learning.” 



EDUCATION

Educational scholarship and professional engagement: APA and FPS

Promoting scholarly activity and professional engagement among physicians-in-training is one of the key areas of focus for the University of Florida Psychiatry Department Residency Training Program. UF Psychiatry residents are encouraged to work on projects throughout the year and given support to attend and present their work at national, state and local meetings. Residents also present case reports on interesting issues they've encountered during clinical practice.

Sharing their findings on a national stage through professional meetings helps trainees hone their presentation and communication skills, and ultimately, helps them become more well-rounded physicians.

"It's a really good educational experience," said Dr. Jennifer Davis, PGY-3 and chief resident. "In addition, the lectures at the meetings are really helpful, and we have good opportunities

to network with faculty and residents from different programs across the country and with psychiatrists from the community."

Over the years UF residents have had a strong showing on the roster of presenters at the American Psychiatric Association (APA) annual meeting, the signature professional event in the field, and its state-level counterpart, the Florida Psychiatric Society (FPS) annual meeting. Of about 40 residents in the UF program, 10 to 15 attend the APA each year. This is significant, as many programs around the country do not send residents to the meeting.

"Students, residents and faculty who are coming in from other programs and seeing how many we have, they're always very impressed," said Dr. Jacqueline Hobbs, Residency Training Program Director and Vice Chair for Education. "It's not about showing off or anything, but this is really cool that we can get so many people involved in

our national professional organization."

At the FPS meeting this year, three residents presented, and two co-presenters earned second place in the statewide John E. Adams Award competition.

The projects that residents work on and present allow them to delve into and think deeply about a topic, read the literature and add to the existing body of knowledge. Each year all residents complete projects in the area of quality improvement and patient safety in psychiatry. Projects have included such topics as risk factors for falls among hospitalized patients, depression among psychiatry residents, as well as metabolic monitoring of patients who are taking antipsychotic medication, and assessment of whether use of long-acting versions of those medications can prevent readmission to the hospital.

At the meetings, residents take advantage of a host of workshops and talks on a range of relevant topics, and to network and establish bonds with other trainees and mentors in the field. It helps them broaden their horizons, and see examples of what they can do with their career, and paths they can take, whether it's academic, purely clinical or involving administrative leadership.

To amplify the impact of the conferences, for the past few years, the psychiatry department has organized a residency retreat at the FPS meeting, where trainees can spend time together away from the work setting. This year's retreat focused on how to think about getting your first job. Two former chief residents gave talks to help residents learn about practical issues such as how to evaluate a job contract, negotiations, and the differences between various practice settings such as academic, private and community-based medical centers.

"I think it's really nice for us to be able to interact with each other in this way," Davis said. "We organize a big dinner together. We always have a lot of fun there in a more casual setting." 



GROUNDBREAKING NEWS

Psychiatry joins primary care in new ambulatory care building

On Monday May 8, UF Health broke ground for a multispecialty medical office facility at its Springhill complex. The department of psychiatry is excited to be co-located with primary care clinics from family medicine and internal medicine, an ideal springboard for further collaborative care efforts. “Springhill Two” will be directly behind the existing building, which houses our adult psychiatry outpatient clinic; and adjacent to UF Health Shands Psychiatric Hospital on 39th Avenue. The addition and location of this new facility will allow the department of psychiatry to better serve our patients by bringing all our psychiatric services to one mental health campus. The new state-of-the-art building will house child and adolescent psychiatry, medical psychology, and the clinics associated with the Center for OCD, Anxiety, and Related Disorders. We are excited that this new facility will give patients enhanced access to our evidence-based treatments such as exposure therapy, parent-child interaction therapy, and transcranial magnetic stimulation. The \$36 million, 72,000-square-foot building is slated to be completed in August 2018. 🏗️

We’d love to hear from you!

Send us your comments and suggestions. You can drop a letter in the mail, email us, call or engage with us on social media. Here’s how to reach us:

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In the UF Department of Psychiatry, we work diligently through patient care, basic and clinical research, education and service to better understand and meet critical mental health care needs.

Join us.

Private philanthropy is often the “spark” that ignites new and novel discovery. Gifts to the Department of Psychiatry have had a major impact on our program and made a difference in the lives of the patients and families we serve. Your support is key to continuing the progress we’ve made, and to new discoveries that lie ahead.

You may direct your financial contribution to support the following:

Richard C. Christensen, M.D.
 Visiting Lecture Fund #F020281

Psychiatry Residency Education and Scholar Fund #F016499

Child and Adolescent Psychiatry Fund #F003357

UF Community Psychiatry Program #F008425

General gift opportunities

To learn how you can make a difference, please contact Tom Malstrom, Director of Development for the Department of Psychiatry, at 352-294-8671 or tmalstrom@ufl.edu. You may also mail your tax-deductible donations to:

UF Psychiatry
 University of Florida Foundation
 PO Box 100386
 Gainesville, FL 32610



Blast from the Past

Take a look at this photo. Do you see anyone you know? If you think you can identify at least 10 people, tweet us your answer @ufpsych and you may win a prize from the UF Psychiatry Department. Bragging rights go to anyone who can identify more than 10 people in the photo.



Puzzle Fun

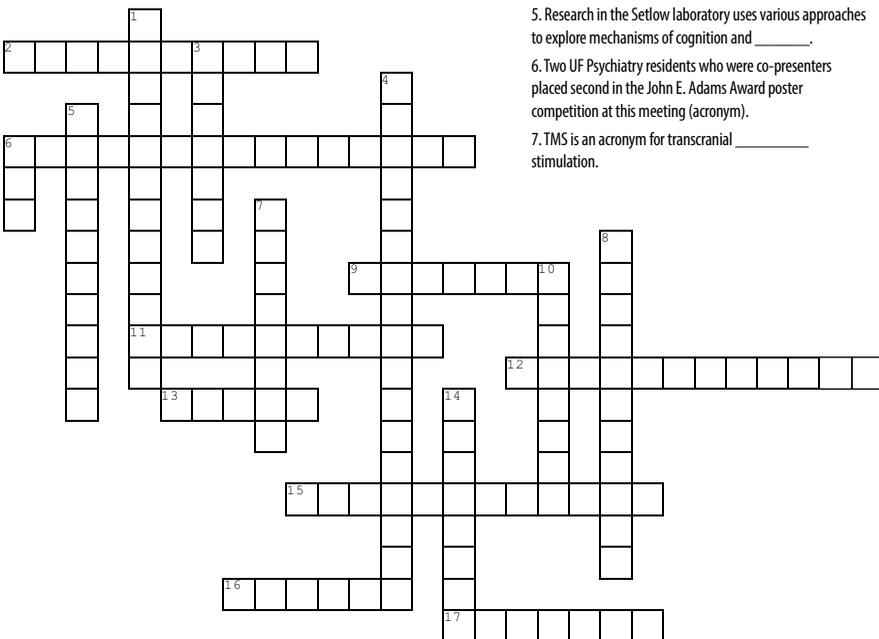
Down

1. Name of clinic where Gainesville residents who are homeless can receive mental health care.
3. Dr. Angela _____ is a specialist in psychosomatic medicine and Chief of the Consultation-Liaison Services
4. ECT is an acronym for _____ therapy.
5. Research in the Setlow laboratory uses various approaches to explore mechanisms of cognition and _____.
6. Two UF Psychiatry residents who were co-presenters placed second in the John E. Adams Award poster competition at this meeting (acronym).
7. TMS is an acronym for transcranial _____ stimulation.

8. Dr. Richard _____'s legacy of services to others continues through numerous projects spearheaded by his family, friends and colleagues.
10. Dr. Adriaan Bruinjeel's new NIH grant is to investigate the role of _____ levels in tobacco smoking.
14. Dr. Joseph _____ is the new chief of the Medical Psychology Division.

Across

2. The _____ Brain Cognitive Development study uses specialized tests in the form of puzzles and brain teasers to help track brain development.
6. The UF Health _____ Center is a nationally renowned provider of care for people who have substance use disorders.
9. Name of UF Psychiatry Department physician who has volunteered at the Helping Hands free clinic for the last 15 years.
11. ECT and TMS are effective treatments for people who have hard-to-treat _____.
12. The UF Psychiatry _____-Liaison Services work with medical and surgical teams to help stabilize patients who have a co-occurring psychiatric illness until they can go into psychiatric treatment.
13. Dr. Regina Bussing is the _____ of the UF Department of Psychiatry.
15. Drs. Scott Teitelbaum and William Greene treat patients who have _____ disorders (two words).
16. The UF Graduate Certificate in Addiction and Recovery is part of the Psychiatry Department's _____ Education program.
17. Dr. Carol Mathews is the founding director of the new Center for OCD, _____ and Related Disorders, and Dr. Joseph McNamara and Dr. Herbert Ward are the co-directors.



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