THE VISN 5 MIRECC MATTERS

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BREAKING MIRECC NEWS!

Two new MIRECCs were recently approved by the VA Central Office. The VISN 6 MIRECC, located in Durham, NC, will focus on postdeployment mental illness. Specialists in Posttaumatic Stress Disorder will work with Readjustment Counseling Service and the Department of Defense to prevent, diagnose, treat, and rehabilitate the spectrum of deployment-related disorders. The focus of the new VISN 19 MIRECC, located in Denver, CO, will be suicide prevention. National experts in suicide, cultural anthropology, and biological psychiatry will be studying the psychological markers of suicide proneness. The VISN 5 MIRECC wishes the staff of these new endeavors great success.

NEW CLINICAL CORE ASSOCIATE DIRECTOR

We are pleased to announce that Richard Goldberg, PhD, has accepted the position of Associate Director of the VISN 5 MIRECC Clinical Core. Dr. Goldberg is a psychologist and Assistant Professor at the University of Maryland School of Medicine, in the Department of Psychiatry. He has been a research investigator within the VA Capitol Health Care Network MIRECC since its inception in 1999, when he also served as the first Assistant Director of the Education Core. Dr. Goldberg's clinical and research experiences have focused on improving the quality of psychiatric and medical care available to people living with serious mental illnesses. He was the recipient of a National Alliance for Research on Schizophrenia and Depression (NARSAD) young investigator award in 1998. In 2001, Dr. Goldberg was awarded an NIMH Career Development Grant to study the quality of somatic care among adults with serious mental illness. He is also a co-investigator on several health services and clinical intervention studies being conducted within both VISN 5 and the University of Maryland, Baltimore. In addition, he is actively involved in psychiatry and psychology training and helps administer the University of Maryland/VAMHCS Consortium Psychology Internship Program. Dr. Goldberg is committed to integrating research and education into service delivery, and as such is very excited about taking on the position of Associate Director of the VISN 5 MIRECC Clinical Core.

We also want to acknowledge the efforts of Brian Kirkpatrick, MD, who has been the Acting Associate Director of the Clinical Core for the past several months. We appreciate his taking on this critical role and the contributions that he has made during this time.

MIRECC CLINICAL PSYCHOPHYSIOLOGY LAB

Data collection is now underway in the new MIRECC Clinical Psychophysiology lab. The lab, under the direction of MIRECC investigator Sarah Morris, PhD, is located on the 6th floor of the Baltimore VA Medical Center and is equipped to collect multiple physiological measures. The primary measures used in the lab are event-related brain potentials (ERPs). ERPs are derived from recordings of the electrical activity of the brain that occurs in response to stimuli in the environment and internal cognitive and perceptual events. ERPs are unique among brain measures because they reflect the actual activity of neurons and allow the examination of events that happen on a millisecond timescale, in contrast to techniques such as functional MRI and Positron Emission Tomography (PET) which rely on changes in blood flow in the brain that occur over longer periods of time. Muscle activity and heart rate can also be measured in the lab and we will soon have the capacity to record eye movements. This lab is equipped with a NeuroScan system which can be used to record ERPs from 32 locations on the scalp, which allows researchers to approximately localize the source of the ERP activity in the brain. The lab consists of two adjoining rooms, one of which is outfitted with a video monitor, response buttons, and chair for the subject to sit while data collection takes place. In the second room, experimenters monitor the collection of the data, stimulus presentation and participant behavior. A wide range of experimental paradigms may be implemented using visual and auditory stimuli as well as complex learning and problem-solving tasks.

The overarching goal of the work that will be done in this lab is to use measures that have typically been confined to experimental psychopathology experiments in studies that are directly related to clinical phenomena and interventions. For example, we have recently received VA Rehabilitative Research & Development (RR&D) funding (PI: Sarah Morris, PhD) to investigate whether an ERP measure related to self-monitoring, which has been found to be diminished in patients with schizophrenia, is related to performance on traditional neuropsychological tests, and whether it can be normalized in patients with

schizophrenia when they implement a behavioral strategy designed to enhance self-monitoring. A second RR&D-funded study (PI: Dwight Dickinson, PhD) will incorporate ERPs as measures of change in schizophrenia by examining whether an intensive cognitive remediation intervention focused on audiovisual perceptual processing and working memory is accompanied by selective changes in components of the ERP that index early, preattentive auditory responding and/or later, "top down" processing, Additionally, data collection is underway in a study of learning in schizophrenia. This study uses an innovative experimental paradigm developed by Holroyd and Coles (2002) to track changes in brain activity related to learning. Participants are asked to learn picture-response pairings by attending to feedback about the accuracy of their responses. In healthy subjects, during the early trials of this task, an ERP is generated when participants are shown feedback that their response is incorrect, but not when they are told that they responded correctly. As the picture-response pairs are learned over subsequent trials, the error-related negativity occurs earlier and is generated following the execution of responses, but not by the presentation of feedback. It is thought that this pattern of changes in the error-related negativity is related to prefrontal dopamine activity. This is, to our knowledge, the first time this paradigm has been used to study learning in schizophrenia and this work is a central component of a developing center grant to study new ideas about dopamine in schizophrenia that has been submitted for NIMH funding (P.I. Jim Gold, PhD). Finally, Gunvant Thaker, MD, is installing equipment to record eve movements in the lab. This will give us the unique capacity to examine eye movement dysfunction, a possibly phenotypic marker of schizophrenia, and brain activity simultaneously. We plan to examine ERPs related to self-monitoring while individuals with schizophrenia perform eye movement tasks in order to better understand these deficits and their utility as potential targets for treatment. Anyone who is interested in

learning more about the lab is invited to contact Sarah Morris, PhD, at 410-605-7000, ext. 4732.

CONGRATS ARE IN ORDER!

Nina R. Schooler, PhD, was elected councillor of the Collegium Internationale Neuro-Psychopharmacologicum, an organization of leading researchers who study both basic and clinical applications of drug therapy for the treatment of serious mental illnesses. Dr. Schooler, a MIRECC researcher located at the Washington, DC VAMC, conducts efficacy and effectiveness studies on pharmacological and psychosocial treatments for schizophrenia.

Alan S. Bellack, PhD, our MIRECC Director, has received funding from the National Institute on Drug Abuse for a 5-year grant to extend his work on treating substance abuse by people with severe mental illness. The project is a randomized clinical trial in which the treatment developed by Dr. Bellack and his colleagues in the MIRECC will be compared to a supportive treatment as usual control condition. A significant problem with any treatment for dual disordered patients is getting them to participate in treatment. A major component of this study will be to evaluate an innovative new strategy to increase the likelihood that patients will become engaged in treatment. The procedure involves: a) time-limited (6-week) case management to help solve problems and deal with roadblocks to participation in the community, and b) partnering with concerned significant others, people the subject has a positive relationship with and who can help motivate him or her to come to treatment sessions. The study will be conducted at VAMHCS and in community agencies in the Baltimore area.

WELCOME TO NEW MEMBERS OF THE VISN 5 MIRECC TEAM

Seth Himelhoch, MD, MPH, is a University of Maryland School of Medicine psychiatrist who

will be working with the MIRECC on health services research projects. He received his medical degree at the University of Michigan School of Medicine and completed his residency training in general psychiatry at the University of California, San Francisco. From 2001-2003 he was a Fellow in the Robert Wood Johnson Clinical Scholars Program at Johns Hopkins School of Medicine where he concurrently received a Masters Degree in Public Health. Dr. Himelhoch's clinical and research experiences have focused on access to care and treatment of co-occurring psychiatric and drug use disorders among individuals with HIV. He is currently the Director of Mental Health and Substance Abuse Services at the University of Maryland School of Medicine's HIV clinic, The Evelyn Jordan Clinic.

Eric Slade, PhD, joined the faculty of the Department of Psychiatry at the University of Maryland, School of Medicine in July, and is a health economist who will be collaborating with the MIRECC on health services research projects. Prior to joining the University, he was a faculty member at the Johns Hopkins University, Bloomberg School of Public Health. While there, he conducted research on use of mental health services, the effects of health insurance coverage on service use, employment among adults with schizophrenia, and the determinants of childhood behavioral problems. His current research interests include effects of financing arrangements on the distribution of service costs, cost-effectiveness of mental health care, and effects of psychotropic medications on service use and employment outcomes.

Joanna Strong Kinnaman, PhD, joined the MIRECC as a Post Doctoral Fellow in Advanced Clinical Psychology following the completion of her internship at the University of Maryland School of Medicine/VA Maryland Health Care System Consortium. She recently received her doctorate in clinical psychology from Virginia Commonwealth University where her research primarily focused on psychiatric inpatient populations, mental health treatment program evaluation, and computerized assessment. Dr. Kinnaman will be working on various MIRECC research projects related to treatment for duallydiagnosed schizophrenia patients with Dr. Alan Bellack and Dr. Melanie Bennett, as well as examination of work-related psychosocial interventions for veterans with severe mental illness with Dr. Wendy Tenhula.

Paula Gonce, MA, BCBA recently joined the MIRECC as a research assistant. Her Master's degree is in Applied Behavior Analysis and she is a Board Certified Behavior Analyst. Paula worked for nearly 10 years at Kennedy Krieger Institute with both children and adults with behavioral problems including aggression, selfinjury, food refusal, food selectivity, and noncompliance. She will be working as a study therapist for the Treatment of Alcohol Use Disorders in Schizophrenia and the Behavioral Treatment of Drug Abuse in SPMI Patients studies, as well as playing an integral part in the on-going Points Incentive Program (PIP) at the Perry Point VAMC.

Shyon Loo, MS, joined the MIRECC as a research assistant after completing his graduate studies in Clinical Psychology at Loyola College in Maryland. He will be conducting neuropsychological and psychosocial assessments for several research projects, and assisting the MIRECC staff with the data management.

UPCOMING EVENTS

Maryland Schizophrenia Conference

November 16, 2004

Martin's West 6817 Dogwood Road Baltimore, Maryland

This program is intended for psychiatrists, psychologists, and mental health professionals, including social workers, nurses, and therapists/counselors. By attending this conference, attendees will develop a better understanding of various topics related to schizophrenia, including co-morbidity, antipsychotics, polypharmacy and evidence-based practices.

For program information and fees, go to http://www.mdschizconf.org.

Understanding and Treating PTSD in Women

May 16, 2005 Sheraton Inner Harbor Hotel, Baltimore

This one-day conference will bring together nationally known experts to discuss the latest developments in the treatment of civilian and military-related PTSD in women. The attendees will understand the concepts relevant for comorbid substance use in women with PTSD and assess common physical health issues reported by women with PTSD.

For more information, please contact Kim Gordley, Chesapeake Health Education Program (CHEP), at <u>LRNEESGORDLK@LRN.VA.GOV</u>, or (410) 642-2411 x5403.

National MIRECC Conference

June 5-8, 2005 New Orleans, Louisiana

Management of Violence in the Psychiatric Setting

October 14, 2005 Meeting site to be determined

This one-day conference will bring together nationally known experts to discuss the latest developments in the pharmacological and behavior management of violence in the psychiatric setting.

For more information, please contact Kim Gordley, Chesapeake Health Education Program (CHEP), at <u>LRNEESGORDLK@LRN.VA.GOV</u>, or (410) 642-2411 x5403.