

**National Institute of Mental Health  
Alliance for Research Progress  
January 19, 2007  
Washington, D.C.**

**Overview**

The National Institute of Mental Health (NIMH) held its Winter Alliance for Research Progress (The Alliance) Meeting on Friday, January 19, 2007 at the Marriott Metro Center Hotel in Washington, D.C. The major topics of this sixth meeting of the Alliance were children's mental health and the current state of therapeutic interventions for mental illnesses. The meeting served as an opportunity for participants to 1) hear about exciting new mental health research; 2) discuss important information on changes in the field and topics of public interest; and 3) network with colleagues and discuss issues relevant to them as stakeholders. Invitees included representatives from national voluntary organizations representing patients and their families. Thomas Insel, M.D., NIMH Director, served as the meeting facilitator. Comments were also provided by the Honorable Sue Myrick (R-NC), U.S. House of Representatives, during the working lunch. Please see the attached agenda for information on speakers.

**Major Themes**

**State of the NIMH**

Dr. Insel updated attendees about changes within NIMH since the group's last meeting in July 2006. He discussed the enactment of the NIH Reform Act of 2006 (authorizing legislation) and recent advances in the area of genetic research. Dr. Insel told participants about work being done to map the points of variation between the DNA of healthy people and those suffering from mental disorders. These efforts will enhance our understanding of how gene variability contributes to risk for developing disorders such as schizophrenia, bipolar disorder, or autism. Dr. Insel spoke briefly about the completion, in late December, of studies supported by the Wellcome Trust that could identify common risks for bipolar disorder and schizophrenia and the significance of NIMH contributions to several genetic databases.

**Effective Interventions in Foster Care**

Dr. Patricia Chamberlain described research using the Multidimensional Treatment Foster Care (MTFC) Model and its impact on the mental health of children and young adults in foster care in Oregon and California. Dr. Chamberlain's research focuses on providing an alternative to placing delinquent children in group homes or residential care facilities. The objectives of the project included improving youth outcomes through simultaneous and well-coordinated treatments in the family, school, and peer groups; and teaching new skills to the children and families while ensuring that these skills are reinforced in a family or home setting. Dr. Chamberlain noted the importance of treating children in the environment in which they live and the negative effects of returning them to a setting where the behaviors and skills learned in treatment cannot be reinforced. The MTFC was designated a Blueprint for Violence Prevention Model and Best Practice by the Center for the Study and Prevention of Violence at the University of Colorado at Boulder. Dr. Chamberlain also discussed the challenges of implementing the MTFC in other research communities. The MTFC has been implemented in 40 states, the United Kingdom, and Sweden.

**Remission of Mother's Depression and Psychopathology in their Children: 12-Month Outcomes**

Dr. Myrna M. Weissman discussed her study that examined how treatment for and subsequent improvement in a mother's depression affected the mental health of her child. She opened by stating

that many studies have shown that “women in their child-bearing years are at the highest risk for depression and that the children of depressed mothers have more psychiatric disorders than children of non-depressed mothers.” The study found that there was an overall decrease in the children’s own psychiatric symptoms over the course of the 12-month follow-up period and that improvement was significantly associated with the mothers’ remission rates; children of mothers who remitted had a greater reduction in psychiatric symptoms; and children of early remitting mothers (within 3-6 months of treatment) had the most positive outcomes of those in the study. Additional information on this study can be found at [http://www.nimh.nih.gov/press/stard\\_child.cfm](http://www.nimh.nih.gov/press/stard_child.cfm).

### **Transition to Adulthood Research**

Dr. Joel Sherrill told Alliance members about an effort by NIMH to encourage research on refining and testing interventions in service delivery models for youth transitioning to adulthood. Dr. Sherrill referenced data from the National Comorbidity Survey Replication Study suggesting that many mental illnesses begin early in life—with about half beginning by age 14 and three-fourths by age 24—and that many of these disorders persist into adulthood<sup>1</sup>. He described discontinuities in service streams and care during this critical transitional period as well as the unique considerations that should be taken into account when developing or testing interventions and service models for individuals during this time. Dr. Sherrill noted that the effort places specific emphasis on addressing gaps in service delivery and supporting research that will look at ways to help people access care. NIMH also encourages studies that focus on serious mental illness (i.e., chronic, impairing, and multi-problem conditions) and incorporating outcomes that are relevant to multiple stakeholder perspectives.

### **A View from Capitol Hill**

Congresswoman Sue Myrick talked frankly with Alliance members about a family member’s diagnosis of bipolar disorder and how mental illnesses are often misunderstood by the general public. She also noted that there are many people in Congress who are supportive of funding for research and discovery for all diseases and encouraged Alliance members to join together with other groups focused on mental health to promote a unified agenda on Capitol Hill.

### **New and Improved Treatments**

Dr. Hussein Manji updated Alliance members on recent findings with respect to the development of rapidly acting antidepressants. Dr. Manji said that although there are several traditional treatments for depression, “they are far from adequate” due to the lag time necessary to determine their effectiveness. He explained that a depressed individual could go untreated or partially treated for up to three months, and that the risk of suicide often increases during this period when it is unclear if the patient is responding to treatment. Dr. Manji described promising studies that point to the potential for developing fast-acting antidepressant medications. Current antidepressants routinely take eight weeks or more to exert their effects in patients—a major drawback of these medications. A recent NIMH-funded study found that people with treatment-resistant depression experienced relief in as little as two hours following a single intravenous dose of ketamine. Although ketamine itself has side-effects that render it impractical for wide usage, understanding its mechanism of action could lead to the development of new medications. More information on these studies can be found at <http://www.nimh.nih.gov/press/ketamine.cfm>.

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<sup>1</sup> Kessler, Ronald C; Berglund, Patricia; Demler, Olga; Jin, Robert; Merikangas, Kathleen R.; Walters, Ellen E. Lifetime Prevalence and Age-of-Onset Distributions of DSM-IV Disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*. Vol 62(6) Jun 2005, 593-602.

## **NIMH Clinical Trials Network**

Dr. Grayson Norquist and Dr. Phil Wang discussed the NIMH Clinical Trials Network. NIMH is providing infrastructure support to maintain three large networks of investigative clinical teams that have evolved from the recent NIMH practical clinical trials on major depressive disorder, schizophrenia, and bipolar disorder. The networks comprise over 60 sites throughout the United States with continual outreach and engagement to diverse groups of patients and families with mental illnesses. Dr. Norquist discussed lessons learned from the NIMH Practical Clinical Trials and how to utilize this knowledge when developing new studies for the network. He told Alliance members about the importance of using the information from the trials to ensure “that we are taking care of the people that we see everyday.” Dr. Wang discussed the infrastructure and future of the network. He also told Alliance members about a request for information (RFI) soliciting suggestions for areas upon which the networks should focus. Information on each of the NIMH practical clinical trials can be found online – Treatment for Adolescents with Depression Study ([TADS](#)); Systematic Treatment Enhancement Program for Bipolar Disorder ([STEP-BD](#)); Sequenced Treatment Alternatives to Relieve Depression ([STAR\\*D](#)); and Clinical Antipsychotic Trials of Intervention Effectiveness ([CATIE](#)).

## **Discussion**

During the discussion periods, participants had the opportunity to direct comments and questions to Dr. Insel, and to engage all of the presenters in discussion on pressing needs in the mental health field. Below is a summary of the major topics discussed.

A cross-cutting issue identified by all participants was the difficulties experienced by families as their children transition from youth into adulthood, including the challenges of seeking treatment during this critical phase of life. Attendees were pleased to hear that funds will be set aside for successful applications that propose to study these issues. Participants also shared their views on the topics that the Institute might consider funding under this effort, including (1) early identification and treatment of people showing prodromal symptoms of a mental illness; (2) hormonal impact on young people during the transition years and the related risk for depression; (3) issues related to access to care for this group; (4) identification of early markers that may predict risk for developing disorders; and (5) anti-stigma education for children and transition-aged youth; and (6) workforce development for providers. Dr. Insel recommended attendees preview the NIMH Middle School Curriculum – <http://science-education.nih.gov/customers.nsf/MSMental>

Attendees were intrigued by the discussion of the use of ketamine to facilitate an immediate and sustained antidepressant effect, but questioned its use as a treatment due to the fact it is also a drug of abuse. Dr. Manji noted that the ketamine dosages used in the studies were markedly lower than the dosage used in situations of abuse. Due to side effects, it is unlikely that ketamine will be used widely as a treatment. Dr. Insel told participants that the exciting element of this area of study is that it suggests that there might be a new pathway to target for treatment development.

In response to the presentations on the Clinical Trials Network, Alliance members suggested that the trials be opened to collaborations with other NIH institutes, Health and Human Services Agencies, and possible international partners who have an interest in the research areas. Participants noted that collaborating with other Institutes or Agencies could be beneficial to NIMH in a variety of ways, including sharing expenses, increasing the knowledge base in genetic biomarkers, and expanding our understanding of comorbidity because people with mental illnesses often suffer from various other illnesses as well.

Dr. Insel concluded the meeting by restating some of the key messages discussed throughout the day. He thanked Alliance members for sharing their views and emphasized that these meetings are an important component of the Institute's priority-setting activities, as they serve as a means of consulting with the American public about NIMH's progress and future directions. Participants were pleased with NIMH for developing an informative meeting agenda that highlighted research advances and issues related to child mental health, and for convening a meeting that allowed them to voice the concerns of their organizations, interact with NIMH staff, and network with colleagues.

### Photographs



Speakers (L to R): Dr. Norquist, Dr. Manji, Dr. Insel, Dr. Weissman, Dr. Chamberlain, Dr. Wang, and Dr. Sherrill



Dr. Insel with the Honorable Ms. Myrick (D-NC)



Alliance members



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National Institute of Mental Health  
**NIMH Alliance for Research Progress**  
*Winter Meeting*

January 19, 2007

Marriott Metro Center  
Washington, DC

<b>8:00–8:30 am</b>	<b>Registration &amp; Continental Breakfast</b>	
<b>8:30–9:00 am</b>	<b>Welcome and State of the NIMH</b>	<b>Thomas R. Insel, MD</b> <i>Director, NIMH</i>
	<b>CHILDREN’S MENTAL HEALTH</b>	
<b>9:00–10:30 am</b>	<b>Effective Interventions in Foster Care</b>	<b>Patricia Chamberlain, PhD</b> <i>Senior Scientist, Oregon Social Learning Center</i>
	<b>Treating Mothers to Improve Child Mental Health</b>	<b>Myrna M. Weissman, PhD</b> <i>Professor of Epidemiology and Psychiatry, Columbia University College of Physicians and Surgeons</i>
<b>10:30–11:00 am</b>	<b>Break and Networking</b>	
	<b>DIALOGUE</b>	
<b>11:00–11:30 am</b>	<b>Priority Setting: Transition to Adulthood Research</b>	<b>Joel Sherrill, PhD</b> <b>Discussion Leader</b> <i>Chief, Child and Adolescent Psychosocial Intervention Research Program, NIMH</i>
<b>11:30–12:00 pm</b>	<b>Group Discussion</b>	<b>Alliance Participants, NIMH Director, and NIMH staff</b>
<b>12:00–1:30 pm</b>	<b>Lunch The View from Capitol Hill</b>	<b>The Honorable Sue Myrick (R-NC)</b> <i>US House of Representatives</i>
	<b>CURRENT STATE OF INTERVENTIONS</b>	
<b>1:30–3:00 pm</b>	<b>New and Improved Treatments</b>	<b>Husseini Manji, MD</b> <i>Chief, Laboratory of Molecular Pathophysiology and Director, NIMH Mood and Anxiety Program</i>
	<b>Implications of Clinical Trials for Everyday Practice Dialogue</b>	<b>Grayson Norquist, MD</b> <i>Professor &amp; Chairman, University of Mississippi Department of Psychiatry and Human Behavior</i>
<b>3:00–3:45 pm</b>	<b>Development of the NIMH Clinical Trial Network</b>	<b>Philip S. Wang, MD, Dr. PH</b> <b>Discussion Leader</b> <i>Director, Division of Services &amp; Intervention Research, NIMH</i>
<b>3:45–4:30 pm</b>	<b>Q&amp;A Wrap-up</b>	<b>Alliance Participants, NIMH Director, and staff</b>

**Alliance for Research Progress  
2007 Winter Meeting Participant List**

Jerilyn Ross, M.A., L.I.C.S.W.  
Anxiety Disorders Association of America

Susan Resko  
Child & Adolescent Bipolar Foundation

Sheila McDonald, J.D.  
Child and Adolescent Bipolar Foundation

Anne Teeter Ellison, Ed.D.  
Children and Adults with Attention  
Deficit/Hyperactivity Disorder

David Shern, Ph.D.  
Mental Health America

Andrew Sperling  
National Alliance for Mental Illness

Melissa Plotkin, M.S.L.S.  
National Association of Anorexia Nervosa and  
Associated Disorders

Lynn Grefe  
National Eating Disorders Association

Thomas Bryant, M.D., J.D.  
National Foundation for Mental Health

Ann Michaels  
National Foundation for Mental Health

Marion Crawford Kiley  
National Foundation for Mental Health

Linda Whitten Stalters, M.S.N., A.P.R.N.  
National Schizophrenia Foundation

Patricia Perkins, J.D.  
Obsessive Compulsive Foundation, Inc.

Sylvia Lasalandra  
Postpartum Support International

Sherry Marts, Ph.D.  
Society for Women's Health Research

Jerry Reed, M.S.W.  
Suicide Prevention Action Network (SPAN  
USA)

Valerie Porr, M.A.  
TARA National Assoc for Personality  
Disorder

Marcela Gaitan, M.P.H., M.A.  
The National Alliance for Hispanic Health

Elridge Proctor, M.P.A.  
Tourette Syndrome Association

Christina Pearson  
Trichotillomania Learning Center

**Speakers**

Patricia Chamberlain, Ph.D.  
Oregon Social Learning Center

Husseini Manji, M.D.  
NIMH

Grayson Norquist, M.D.  
The University of Mississippi Medical Center

Joel Sherrill, Ph.D.  
NIMH

Philip Wang, M.D., Ph.D.  
NIMH

Myrna Weissman, Ph.D.  
Columbia University and New York State  
Psychiatric Institute

**NIMH Staff Attendees**

Jean Baum  
Alison Bennett  
Beth Bowers, M.S.W., M.Div.  
Cheryl A. Boyce, Ph.D.  
Linda Brady, Ph.D.  
Joanne Collins  
Amy Beth Goldstein, Ph.D.  
Marlene Guzman  
Della Hann, Ph.D.  
Samantha Helfert, M.L.S.  
Thomas Insel, M.D.  
Christine Kaucher  
Susan Koester, Ph.D.  
Roger Little, Ph.D.  
Ernest Marquez, Ph.D.  
Eve Moscicki, Sc.D., M.P.H.  
Richard Nakamura, PhD  
Jean Noronha, Ph.D.  
Mary Partlow  
Jane Pearson, Ph.D.  
Phyllis Quartey, M.P.H  
Matthew Rudorfer, M.D.  
Agnes Rupp, Ph.D.  
Joanne Severe  
Patrick Shirdon, M.S.  
Michael Schoenbaum, Ph.D.  
David Shore, M.D.  
Jane Steinberg, Ph.D.  
Ellen Stover, Ph.D.  
Susan Swedo, M.D.  
Farris Tuma, Sc.D., M.H.S.  
Gemma Weiblinger  
Daisy Whittemore  
Tricia Zarfoss