

South Central MIRECC Communiqué

A publication of the Mental Illness Research, Education, and Clinical Center

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"Closing the efficacy-effectiveness gap"

Bringing an Idea to Life: A Clinician's Experience in the MIRECC Clinical Partnership Program

Janet Gearin, RN, BSN, MS, Tulsa, Oklahoma

My name is Janet Gearin, and I am a Clinical Specialist in the Behavioral Medicine Service (BMS) in Tulsa, Oklahoma. The BMS has been located within a CBOC, until recently when it was relocated into another building that is approximately four miles from the CBOC and 50 miles from the VA in Muskogee. Both facilities provide medical support for our BMS and also serve as our primary source of referrals. Although my article is not about the BMS, our remoteness and less than adequate clinical support were factors in our applying to the MIRECC for a Clinical Partnership Grant. It has been over two years ago when I and three other colleagues were asked to submit a proposal to the MIRECC by our Service Chief, Dr. Madhu Koduri. The intent was twofold: get our BMS more staff support and encourage clinical staff to do clinical evaluation. I must also be completely forthright at this point in relating that I and my three colleagues did "brainstorm" as requested by Dr. Koduri and believed that the conceived "idea" we originated was all that would be required of us. Our job was done when we completed the MIRECC research proposal forms. Now I will proceed to the rest of the story.

Our idea was approved by the MIRECC, or I would not be authoring this article. The initial response from the MIRECC brought us many kudos and willing support. We were amazed at the reception our idea garnered! We saw it as a rather simple one that was not particularly unique, innovative or pioneering (which seemed to be the way others perceived our proposal). We had muddled through the brainstorming process using only our collective 120+ years of clinical experience and thoughts of potential solutions to problems that we had identified in the clinical area over these many years. We are not research folks, especially when you consider that the last experience we had with research was in our graduate or doctoral programs, some 15-30 years ago. After such an exuberant reception from MIRECC we now learned that our duties were nowhere close to being over. It seems that one of us needed to be the PI, as in Principal (not Private) Investigator. Okay, so I volunteered still thinking and believing that this was **not** so big of a job. Since research is a step-by-step process, the MIRECC offered to work with us and take us through those steps. After much discourse we learned that we must do some work on our proposal and develop our ideas so that we could submit this to the IRB (Institutional Review Board) and R&D (Research and Development) Office and get their approval to proceed. We were assured that such approval came easily and relatively quickly. At this point we are feeling a bit overwhelmed with the needs for our time and wondering how all this work will get done. Thank you MIRECC for providing us with a grant that allowed for a Project Coordinator and a clerical position, otherwise we would have been seeking medical attention for ourselves.

Over the next few months, we worked together and with the support and help of the MIRECC we put together our materials, ideas, timelines . . . all that "research stuff" and submitted it to the IRB and R&D Office. Well, let me tell you the next 8 months were agonizing as our little project had nothing but problems getting through the IRB and R&D. There are far too many stories to tell but suffice it to say that here in Tulsa we do not talk about the IRB and R&D. Please, don't let me misrepresent those two groups, because they do a great service and their need is clearly to protect research participants. But due to our inexperience and naivety, we simply had difficulty communicating and suffered great delays as a result. When finally we got approval to start the project, we had lost a year of our timeline. Which brings me to tell you how incredibly wonderful and supportive the folks at the MIRECC were and are. They continued to be encouraging throughout all of our troubles, and when we found out how much time we had lost, they quickly stepped in with an extension.

So here we are now; gathering our data and piloting our little program with our patients. There have been some glitches. There have been some things that we wish we would have done differently. Getting patients to work with us has not always been smooth and/or easy. Again, we have been extremely grateful to have a Project Coordinator who was willing to put in hours and hours of work and be persistent in getting subjects to be involved with the project. We are not sure if the data are going to fully support our idea but we realize it is a great start and that despite the "hoops and hurdles" we have enjoyed the journey.

After 30 years of being a clinician, I have realized that I have had many "brainstorms" over the years. I have often wondered if some would have worked. One of the positives of being in this MIRECC Clinical Partnership Program has been being able to take one of my brainstorms and evaluate its effectiveness. I know there are many like me and my cohorts in the field. We see the patients, we see the problems, we experience the effects and, somehow, we never are involved in the resolution process. We think we have ideas that might help or may even resolve the problem completely. Somewhere in Heaven there certainly must be a huge cloud that is filled with lost, forgotten, and/or never created ideas. I would strongly encourage you to consider trying out one of those ideas you have been holding onto for years. If you think of your ideas as rain from that huge cloud, the possibilities of good are limitless. It takes a bit of time and a bit of work, but the benefits are great.

In closing I would also add that doing research in the clinical area is a process that takes time. Although it is a very worthwhile endeavor, you must also look at time constraints and support you will need when doing investigative work. We clinicians still had to see patients and take care of business in the clinical setting. To carry off this project, a Project Coordinator is essential, especially if you are like my team and are limited in experience. Working with the MIRECC in the Clinical Partnership Program has been quite rewarding and a great learning experience for all of us. I would encourage you to seek out an opportunity to bring work with the MIRECC, especially if you have one of those ideas in the clouds.

After the Storms: Employee's Guide to Managing Stress

The fourth program in the *After the Storms* series, "Employee's Guide to Managing Stress," was broadcast February 27, 2006. Rebroadcast of the program will occur on Channel 1, VA Knowledge Network and the Content Delivery Network (CDN) on the following dates and times:

March 7,	10:30 AM ET
March 10,	6:00 PM ET
March 14,	9:30 AM ET
March 15,	8:30 PM ET

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After the Storms (continued from page 2)

In this program, two displaced employees from the New Orleans VA Medical Center – Ms. Holliday and Ms. Mavis – describe their experiences during and after the hurricanes. They will talk about some of their difficulties over the past six months and how they have managed to cope. The involvement of family and friends is mentioned frequently. Also, two employees from the Michael E. DeBakey VA Medical Center – Ms. Dawkins-Oliver and Dr. Arlinghaus – describe how their facility responded to the needs of displaced employees and how this experience has affected them. They report feeling gratified to be able to help fellow VA family members.

Following this presentation, Dr. Jackson-Triche made general comments and discussed the important of social support for health coping. If you have topics, issues, or questions that you would like addressed in these programs, please contact Michael.kauth@med.va.gov.

This series is sponsored by the MIRECC, the South Central VA Health Care Network (SCVAHCN), and the SCVAHCN Mental Health Product Line, in collaboration with the National Centers for PTSD and VA Employee Education System (EES).

Books of Interest Available to Clinicians

The MIRECC has a limited number of copies of these books that we are making available to VISN 16 mental health clinicians at no cost. If you would like a copy of one or both books, please email your request to Dr. Michael Kauth at Michael.kauth@med.va.gov. Include your complete postal address for shipping.

Traumatic Stress

Michelle Sherman, PhD, and DeAnne Sherman have published a book titled, *Finding My Way: A Teen's Guide to Living with a Parent Who Has Experienced Trauma*. This book is intended to provide adolescents with accurate information about traumatic stress, as well as to normalize stress reactions, encourage open communication, support healthy coping, and offer hope. For more information about this book, go to www.seedsofhopebooks.com or 800-901-3480.

Dr. Sherman is Co-Chair of the MIRECC Families Studies Team and Director of the Family Mental Health Program at the Oklahoma City VA Medical Center. She is also a Clinical Associate Professor at the University of Oklahoma Health Sciences Center.

Depression

Maga Jackson-Triche, MD, Kenneth B. Wells, MD, MPH, & Katherine Minnium, MPH, co-authored a book in 2002 titled, *Beating Depression: The Journey to Hope*. Written for consumers, the book presents expert advice and guidance on how to find a mental health professional, what medications and psychotherapy approaches are available, as well as effective skills to manage depression. The forward is written by former First Lady Rossalyn Carter, and the book has received excellent reviews from both clinicians and consumers. For more information about this book, go to www.amazon.com.

Dr. Jackson-Triche is Site Coordinator for the New Orleans MIRECC office; Director of the Mental Health Product Line, New Orleans VA Medical Center; and Professor, Tulane University School of Medicine.

Web Presentation on Affective Modulation of Pain

The MIRECC *Bringing Science to Practice* web-based conference series presents **James L. Rhudy, Ph.D.**, on the "Affective Modulation of Pain Processing in Substance Abusing Veterans,"

March 16, noon to 1:00 PM CT. Dr. Rhudy Assistant Professor at The University of Tulsa. Dr. Rhudy's work broadly spans issues in Health Psychology. However, a majority of his work is focused on determining how psychological factors, specifically emotion, can engage endogenous circuitry known to alter pain processing in the central nervous system. Dr. Rhudy's research uses laboratory-based, experimental methods to measures pain and nociceptive (neural processing of pain) processes from physiological responses.

The PowerPoint slides for Dr. Rhudy's presentation can be downloaded from a VA-networked computer at http://vaww.visn16.med.va.gov/mirecc.htm beginning March 15. The live audioconference can be accessed March 16 at **1-800-767-1750**, access code **45566#**. This presentation is accredited for 1.0 hour of discipline-specific continuing education by the VA Employee Education System. For additional information about this program, contact Randy.burke@med.va.gov

Fellowship Videoconference Series on Research & Methodology

The VA Special Fellowship Program in Advance Psychiatry and Psychology hosts a series of excellent videoconferences on research and methodology. The current series runs through June 2006. These programs are intended for junior investigators and research trainees. Non-MIRECC Fellows are welcome to attend. To join a videoconference, contact Dr. Ruth O'Hara, Director, Special Fellowship Hubsite, at roh@stanford.edu or 650-493-5000 x63620 well in advance of the program to determine how and where your local site can view the conference. You can also join the program on audio-only and follow the slides from your desktop.

Special Fellowship Videoconferences

March 15: Meta Analyses and Effect Sizes

Time: 1:00 – 3:00pm EST, 12:00 – 2:00 pm CST, 11:00-1:00pm MST, 10:00am – 12:00pm PST Presenter: Helena Kraemer, Ph.D., Professor of Psychiatry and Biostatistics, Department of Psychiatry, Stanford University

April 5: Challenges in Implementing Novel Approaches in Mental Health Research

Time: 1:00 – 3:00pm EST, 12:00 – 2:00 pm CST, 11:00-1:00pm MST, 10:00am – 12:00pm PST Presenters: Scott Cardin, Ph.D., MIRECC Psychology Fellow, Houston VA, Baylor University

Eric Kuhn, Ph.D., MIRECC Psychology Fellow, Palo Alto VA, University of California at San Diego

April 19: Mental Health and Comorbidities: A Translational Research Model

Time: 1:00 – 3:00pm EST, 12:00 – 2:00 pm CST, 11:00-1:00pm MST, 10:00am – 12:00pm PST Presenters: Tom Tomcho, Ph.D., MIRECC Psychology Fellow, Philadelphia VA, University of Pennsylvania at Philadelphia, John Stricker, Ph.D., MIRECC Psychology Fellow, San Diego VA, University of California at San Diego

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Fellowship Videoconferences (continued from page 4)

May 3: Data Transformation Approaches and the Importance of Centering

Time: 1:00 – 3:00pm EST, 12:00 – 2:00 pm CST, 11:00-1:00pm MST, 10:00am – 12:00pm PST Presenter: Helena Kraemer, Ph.D., Professor of Psychiatry and Biostatistics, Department of Psychiatry, Stanford University

May 17: <u>Behavioral Treatment Approaches in Mental Health: Examples from Smoking Cessation Programs</u>

Time: 1:00 – 3:00pm EST, 12:00 – 2:00 pm CST, 11:00-1:00pm MST, 10:00am – 12:00pm PST Presenters: Andrea Weinberger, MIRECC Psychology Fellow, West Haven VA, Yale University

Jessica Cook, MIRECC Psychology Fellow, Seattle VA, University of Washington

June 7: Time Analysis and the Limitations of Repeated Analysis of Variance

Time: 1:00 – 3:00pm EST, 12:00 – 2:00 pm CST, 11:00-1:00pm MST, 10:00am – 12:00pm PST Presenter: Helena Kraemer, Ph.D., Professor of Psychiatry and Biostatistics, Department of Psychiatry, Stanford University

EES LIVE SATELLITE BROADCAST Wednesday, April 5, 2006, 1:00 – 2:30 p.m., ET, Channel 1

The Employee Education System, St. Louis Resource Center, in collaboration with the Office of Mental Health Services is pleased to announce an upcoming satellite broadcast titled: *Translating the Mental Health Strategic Plan into Action*. Participants will have the opportunity to learn how the mental health strategic healthcare plan can be translated into strategic action. To view a full description, handouts, and rebroadcast schedule for this event, please go to: http://vaww.sites.lrn.va.gov/vacatalog/cu detail.asp?id=21206.

New MIRECC Publications from June to December 2005

Below is a partial list of new publications by South Central MIRECC personnel during the last half of 2005. MIRECC personnel are identified in bold text. For more information, please contact the principal investigator directly.

PUBLICATIONS

Al Jurdi, R., Pulakhandam, S., **Kunik, M.E.**, & **Marangell, L.B.** (2005). Late-life mania assessment and treatment of late-life manic symptoms. *Geriatrics*, 60(10), 18-23.

Arlinghaus, K., Shoaib, A., & Price, T. Neuropsychiatric assessment. (2005). In Silver, J., McAllister, T., & Yudofsky, S. (Eds.), *Textbook of traumatic brain injury*. American Psychiatric Publishing, Inc.: Washington, D.C.

- **Blevins, D.**, Preston, T. A., & Werth, J. L. (2005). Characteristics of persons approving of physician-assisted death. *Death Studies*, 29, 601-623.
- Burgess, A., **Kunik, M.E.**, & **Stanley, M.E.** (2005). Chronic obstructive pulmonary disease assessing and treating psychological problems in patients with COPD. *Geriatrics* 60(12), 18-21.
- Cully, J.A., Gfeller, J.D., Heise, R.A., Ross, M.J., Teal, C.R., & Kunik, M.E. (2005). Geriatric depression, medical diagnosis, and functional recovery during acute rehabilitation. *Arch Phys Med Rehabil* 86(12), 2256-2260.
- **Cully, J.A.**, **Graham, D.P.**, & Kramer, J.R. (2005). A two-item screen for depression in rehabilitation patients. *Archives of Physical Medicine and Rehabilitation*, 83(3), 469-472.
- **Cully, J.A.**, Molinari, V.A., **Snow, A.L.**, Burruss, J., Kotrla, K.J., & **Kunik, M.E.** (2005). Utilization of emergency center services by older adults with a psychiatric diagnosis. *Aging Ment Health, March*, 9(2), 172-176.
- Goeree, R., Farahati, F., Burke, N., Blackhouse, G., O'Reilly, D., **Pyne, J.M.**, & Tarride, J.E. (2005). The economic burden of schizophrenia in Canada in 2004. *Current Medical Research and Opinions*, 21(12), 2017-2028.
- **Graham, D.P., Cully, J.A., Snow, A.L.,** Massman, P., & Doody, R. (2005). The Alzheimer's Disease assessment scale cognitive subscales: Normative data for older adult controls. *Alz Dis Assoc Disord, Oct-Dec;* 18(4), 236-40.
- **Graham, D.P., Kunik, M.E.**, Doody, R., & **Snow, A.L**. (2005). Self-reported awareness of performance in dementia. *Brain Res Cogn Brain Res, September*, 25(1), 144-152.
- Haidet, P., Kelly, P.A., Chou, C., & The Communication, Curriculum, and Culture Study Group (Babu, V., Blatt, B., Bentley, S., Fortin, V.I.A.H., Gordon, G., Gracey, C., Harrell, H., Hatem, D., Helmer, D.A., Inui, T., Kuebeler, M., Makoul, G., Paterniti, D.A., Perkowski, L., Richards, B.F., **Snow, A.L.**, Souchek, J., & Wagner, D.). (2005). Characterizing the patient-centeredness of hidden curricula in medical schools: Development and validation of a new measure. *Academic Medicine, January*, 80(1), 44-50.
- **Harris, K.M., Larson, S., & Edlund, M.J.** (2005). Use of prescription mental medications and attendance at religious services. *Psychiatric Services, April, 56(4), 396.*
- **Kauth, M.R.** (2005). Revealing assumptions: Explicating sexual orientation and promoting conceptual integrity. *Journal of Bisexuality*, *5*(4), 79-105.
- **Kauth, M.R., Sullivan, G., & Henderson, K.L.** (2005). Best practices: Supporting clinicians in the development of best practice innovations in education. *Journal of Psychiatric Services, July, 56*(7), 786-788.

- **Kunik, M.E., Cully, J.A., Snow, A.L.,** Souchek, J., **Sullivan, G.**, & Ashton, C.M. (2005). Treatable comorbid conditions and use of VA health care services among patients with dementia. *Psychiatr Serv, January, 56(1),* 70-75.
- **Kunik, M.E.**, Roundy, K., Veazey, C., Souchek, J., Richardson, P., Wray, N.P., & **Stanley, M.A.** (2005). Surprisingly high prevalence of anxiety and depression in chronic breathing disorders. *Chest, April, 127(4),* 1205-1211.
- Martinez, M., & Kunik, M.E. (2006). The role of pharmacotherapy for dementia patients with behavioral disturbances. In Loboprabhu, S.M., Molinari, V., & Lomax, J.W. (Eds.), *Support the Caregiver in Dementia: A Guide for Health Care Professionals*. Johns Hopkins University Press: Baltimore.
- **Orengo, C.A.**, Fullerton, L., & **Kunik**, **M.E.** (2005). Safety and efficacy of testosterone gel 1% augmentation in depressed men with partial response to antidepressant therapy. *J Geriatr Psych Neur*, *March*, *18*(1), 20-24.
- Roundy, K., Cully, J.A., Stanley, M.A., Veazey, C., Souchek, J., Wray, N.P., & Kunik, M.E. (2005). Are anxiety and depression addressed in primary care patients with chronic obstructive pulmonary disease? *Prim Care Companion J Clin Psychiatry* 7(5), 213-218.
- Scheibel, R.S., **Pearson, D.A.,** Faria, L.P., Kotrla, K.J., Aylward, E., Bachevalier, J., & **Levin, H.S.** (2003). An fMRI study of executive functioning after severe diffuse TBI. *Brain Injury*, *17*(*11*), 919-930.
- **Sherman, M.D.** (2006). Updates and five-year evaluation of the S.A.F.E. Program, A family psychoeducational program for serious mental illness. *Community Mental Health Journal*, 42(2).
- **Sherman, M.D.**, & Carothers, R.A. (2005) Applying the readiness to change model to implementation of family intervention for serious mental illness. *Community Mental Health Journal*, 41(2), 115-127.
- **Sherman, M.D.**, Faruque, H., & **Foley, D.** (2005). Family participation in the treatment of persons with serious mental illness. *Psychiatric Services*, *56*(*12*), 1624-1625.
- Sherman, M.D., Sautter, F., Lyons, J., Manguno-Mire, G., Han, X., Perry, D., & Sullivan, G. (2005). Mental health treatment needs of cohabiting partners of veterans with combat-related PTSD. *Psychiatric Services*, 56(9), 1150-1152.
- **Sherman, M.D.**, & Sherman, D.M. (2005). Finding my way: A teen's guide to living with a parent who has experienced trauma. Beavers' Pond Press: Edina, MN.
- **Sherman, M.D., Zanotti, D.K.**, & Jones, D.E. (2005). Key elements in couples therapy with veterans with combat-related PTSD. *Professional Psychology: Research and Practice, 36(6), 626-633.*
- **Snow, A.L.**, Dani, R., Souchek, J., **Sullivan, G.**, Ashton, C.M., & **Kunik, M.E.** (2005). Comorbid psychosocial symptoms and quality of life in patients with dementia. *Am J Geriatr Psychiatry, May, 13(5),* 393-401.
- **Snow, A.L., Kunik, M.E.**, Molinari, V.A., **Orengo, C.A.**, Doody, R., **Graham, D.P.**, & Norris, M.P. Accuracy of self-reported depression in persons with dementia. *J Am Geriatr Soc, March*, *53*(*3*), 389-396.

- Snow, A.L., O'Malley, K., Kunik, M.E., Cody, M., Beck, C., Ashton, C.M., Bruera, E., & Novy, D. (2004). A conceptual model of pain assessment for non-communicative persons with dementia. *Gerontologist*, *Winter*, 44, 807-817.
- **Snow, A.L.**, Rapp, M.P., & **Kunik, M.E.** (2005). Pain management in persons with dementia: BODIES mnemonic helps caregivers relay pain-related signs, symptoms to physicians and nursing staff. *Geriatrics*, *May*, 60(5), 22-25.
- **Stanley, M.A.**, & **Kunik, M.E.** (2005). (Editorial) Anxiety in primary care: a frontier for mental health services research. *Med Care, December, 43(12),* 1161-1163.
- Taber, K.H., Shaw, J.B., **Loveland, K.A.**, **Pearson, D.A.**, Lane, D.M., & Hayman, L.A. (2004). Accentuated Virchow-Robin spaces in the centrum semiovale in children with autistic disorder. *J Compu Assist Tomogr*, 28(2), 263-268.
- **Tan, G.,** Hammond, C., & Gurrala, J. (2005). Hypnosis and irritable bowel syndrome: A review of efficacy and mechanism of action. *American Journal of Clinical Hypnosis*, 47(3), 161-177.
- **Tan, G.**, Jensen, M., Thornby, J., & Anderson, K. (2005). Ethnicity, control appraisal, coping, and adjustment to chronic pain among black and white Americans. *Pain Medicine*, 6(1), 18-28.
- **Tan, G.**, Jensen, M., Thornby, J., & Anderson, K. (2005). Ethnicity, control appraisal, coping, and adjustment to chronic pain among black and white americans. *Pain Medicine*, 6(1), 18-28.
- **Tan, G.**, **Nguyen, Q.**, Anderson, K.O., Jensen, M., & Thornby, J. (2005). Further validation of the chronic pain coping inventory, *Journal of Pain*, *6*(1), 29-40.
- Tavakoli-Tabasi, S., **Rowan, P.**, Abdul-Latif, M., **Kunik, M.E.**, & El-Serag, H.B. (2005). Utility of a depression score to predict candidacy for hepatitis C virus therapy in veterans: a prospective longitudinal study. *Aliment Pharmacol Ther*, *February*, *21*, 235-242.
- Veazey, C., Aki, S.O.E., Cook, K.F., Lai, E.C., & **Kunik, M.E.** (2005). Prevalence and treatment of depression in Parkinson's Disease. *J Neuropsychiatry Clin Neurosci*, 17(3), 310-323.
- Wells, K., & **Sullivan, G.** (2005, Oct 3). Healing storm victims' mental health, A massive federal effort is needed to treat the psychological wounds of the survivors of Katrina and Rita. http://www.nynewsday.com/news/opinion/nyc-vptrkn4452790oct03,0,5648817.story
- Whitney, J.A., **Kunik, M.E.**, Molinari, V.A., Lopez, F.G., & Karner, T.X. (2004). Psychological predictors of admission and discharge global assessment of functioning scale scores for geropsychiatric inpatients. *Aging Ment Health, November*, 8(6), 505-513.



March Conference Calls 1-800-767-1750

Please note: The March 15th and April 19th Program Assistant Conference Calls have been moved up to 1:30pm CST (in lieu of our regular 2:00pm). The dial-in number and access code will remain the same. The change is for March and April calls <u>only</u>.

- 6—Education Core, 2:00 PM CT, access code 16821#
- 6—Access Group, 2:00 PM CT, access code 97738#
- 8—Neuroimaging Group, 9:00 AM CT, access code 24394#
- 14—Directors Call, 3:00 PM CT, access code 19356#
- 15—Neuroimaging Group, 9:00 AM CT, access code 24394#
- 15—Program Assistants, 1:30 PM CT, access code 43593#
- 22—Neuroimaging Group, 9:00 AM CT, access code 24394#
- 21—Substance Abuse Team, General, 1:00 PM CT, access code 23400#
- 28—Directors Call, 3:00 PM CT, access code 19356#

The next issue of the *South Central MIRECC Communiqué* will be published April 3, 2006. Deadline for submission of items to the March newsletter is March 28. Urgent items may be submitted for publication in the *Communiqué Newsflash* at any time. Email items to the Editor, Michael R. Kauth, Ph.D., at Michael.Kauth@med.va.gov or FAX to (601) 364-1395.

South Central MIRECC Internet site: www.va.gov/scmirecc/

SC MIRECC intranet site: vaww.visn16.med.va.gov/mirecc.htm

National MIRECC Internet site: www.mirecc.med.va.gov