



# MIND MATTERS

Department of Psychiatry Newsletter, Calgary  
Spring 2014

## From the Department Head

As spring arrives, there is renewed anticipation about the recruitment of the permanent director of the Mathison Centre for Mental Health Research and Education. With three excellent candidates, whose interests cover a variety of psychiatric disorders (mood, anxiety and psychosis), we look forward to the committee's decision for this critical role in the department. On behalf of the Department of Psychiatry, I would like to thank Dr. Sam Weiss from the Hotchkiss Brain Institute for his diligence in pursuing the best candidate for this director position.

The Canadian Academy of Child and Adolescent Psychiatry, the Mathison centre and the Department of Psychiatry will be greeting and thanking six-time Olympic medalist Clara Hughes for her tireless efforts in helping to reduce the stigma of mental illness, as she passes through Calgary on her Big Ride supported by Bell Canada. Clara's personal knowledge of the effect of mental illness on clients and their families has helped to transform the perception of these disorders.

On March 11, a town hall meeting was held to introduce the new suite of outpatient services at the Foothills Medical Centre. The programs offer evidence-based care in mood, anxiety and psychosis, with early intervention in all. Emergency outreach services will also continue as an important part of our tertiary care services. Thank you to the new clinical medical directors for their ongoing work in facilitating the introduction of these programs.

Congratulations to Dr. Brienne McLane, the recipient of a Helios scholarship, which will facilitate her fellowship training in neuropsychiatry at the University of British Columbia, as well as the University of Calgary. Her great potential was recognized early in our residency training program, and we are pleased that she plans to join the growing cadre

of neuropsychiatrists in our department upon her return.

One of our neuropsychiatrists, Dr. Zahinoor Ismail, has also recently secured a GFT position in geriatric psychiatry and healthy brain aging. He will collaborate with members of the Hotchkiss Brain Institute and Campus Alberta Neuroscience in his research endeavours. The Hotchkiss Brain Institute was very supportive of this position and helped secure funding from the Alzheimer Society of Calgary. Dr. Ismail is our first academic psychiatrist in this newly recognized Royal College specialty. Congratulations to all of our psychiatrists who have been successful in their subspecialty exams in geriatric, child and adolescent, and forensic psychiatry.

Congratulations to Dr. Rob Tanguay, winner of a resident research award at the recent Alberta Psychiatry Association (APA) meeting in Banff. His research was done in collaboration with neurosciences at both the University of Calgary and the University of Western Ontario and was entitled, "Changes in Mental Health with Opioid Analgesia in the Chronic Non-Cancer Pain Population".

*Continued on page 2*

### In this Issue

Inpatient Division Update.....	2
Awards .....	3
Ethics & Psychiatry .....	4
Postgraduate Education .....	5
Undergraduate Education .....	6
Mathison Centre Update .....	7
Researcher in Profile .....	8
Research Updates.....	9
Littmann Research Day.....	11
Remembering Colleagues.....	12
EMPATHY Project.....	13
Department Curling Bonspiel .....	14
Events .....	16



The residents have shown tremendous participation at both the APA and Sebastian Littmann Research Day.

I was pleased to hear that the Child and Adolescent Psychiatry curling team won the best costume award again this year, demonstrating clearly they are the best at 'dress up'. However the Curldashians team also deserve honourable mention. Thanks to everyone who organizes and attends these events regularly and facilitates camaraderie in our department.

*Submitted by Dr. Beverly Adams*

## Inpatient Division Update



Dr. Arlie Fawcett  
Section Chief, Psychiatry Inpatient Services

I am writing to introduce myself since taking over the position of section chief of psychiatry inpatient services on October 1, 2013. I would also like to update you on some things that have been happening within the division.

Many of you know me from my long-time work in Alberta Health Services. I was a Holy Cross intern and member of medical staff at the Calgary General Hospital, and later at the Peter Lougheed Centre. I have worked in forensic psychiatry and spent the bulk of my clinical time caring for outpatients with severe and persistent mental illness. I have also been honored to provide clinical teaching for psychiatric residents for the past 25 years, so many of you are dear to me from the time we spent working on formulation and interview skills. For the last several years I have been involved with the Peter Lougheed Centre medical staff, the Alberta Psychiatric Association and the Alberta Medical Association.

Through these years of experience, I have discovered a few causes that are dear to me: I would love to see our system become easier for patients to navigate, particularly for those individuals who are frail or have cognitive impairments. We have made significant improvements in these areas in the last couple of years, but I hope to see this progress continued. I am also very concerned about the issue of physician engagement and would like to help our physicians feel more engaged and valued, as though they are active members of a team.

In terms of an inpatient update, the most significant event in the last six months is the move of the adult inpatient unit 23 from the Foothills Medical Centre to unit 45 at the Rockyview General Hospital on March 12, 2014. This was a complicated logistical task that was months in the planning. The move happened almost seamlessly, and I am immensely grateful to all the staff who worked so hard to make this happen. This is positive for the system in that it is a net gain of six new beds, and in particular three new high-observation beds that are so desperately needed. In a few months' time unit 23 will reopen as a 14-bed adolescent unit, which will greatly ease the pressure on the Alberta Children's Hospital emergency department and service units.

The inpatient units continue to deal valiantly with overcapacity issues as the busy spring season has started. There are also on-call issues, particularly large numbers of uncovered nights, and we are endeavoring to support our colleagues as best we can. I appreciate how hard everyone is working and acknowledge that this is a very challenging situation. The addition of the South Health Campus has been wonderful in many ways, but it has stretched our capacity to deliver services as well.

Inpatient consultation liaison continues to deliver consistent service to the medical units. This is a challenging area and we appreciate the efforts of this group.



Consultation liaison continues to have an expanding number of people doing outpatient work. Over the last couple of years, several psychiatrists have become 'embedded' in medical clinics, particularly neurology. This is an exciting development, as patients benefit from the comprehensive, seamless care, and the psychiatrists involved find the collaborative environment stimulating and satisfying.

Another exciting event within consultation liaison was the retreat for everyone providing perinatal care city-wide. Perinatal care falls under several different divisions: adult, child, obstetrics and pediatrics; as such, it has been somewhat of an 'orphan' service, and there have been varying levels of resources and services provided in different areas of the city. The retreat sought to bring these individuals together, to support each other and to discuss a more streamlined entry point for patients. I commend staff providing perinatal services for their hard work and dedication to this challenging yet rewarding group of patients.

The psychiatry emergency departments at all four hospitals continue to be very busy. The introduction of the parallel process approximately one year ago has had a few glitches, but overall it seems to have improved the level of care, shortened wait times and provided patients with a higher-quality experience as they navigate through emergency. Our challenge continues to be a shortage of beds overall, particularly high-observation beds and short-stay beds. I commend everyone who is working so hard to deal with these challenges and providing high-quality clinical care in trying circumstances.

In closing I would like to thank everyone who has welcomed me in this new post. It has been daunting for me at times, as there has been much to learn in this large portfolio. It is wonderful to reconnect with so many people whom I have not seen in a long time, and equally wonderful to meet so many new people. I look forward to continuing to work with you and welcome your ideas and feedback.

Thanks again for the warm welcome you have shown me.

*Submitted by Dr. Arlie Fawcett*

## Awards

**Dr. Brienne McLane**  
Helios scholarship

This award will facilitate Dr. McLane's fellowship training in neuropsychiatry at the University of British Columbia, as well as the University of Calgary.

**Dr. Janet de Groot**

Association of Faculties of Medicine of Canada (AFMC) May Cohen Equity, Diversity and Gender award

Dr. de Groot was honoured for her work in the Faculty of Medicine in founding the office of Equity and Professionalism, leading a social accountability task force, educating to reduce unconscious bias in search and selection at a faculty level, and initiating reflective career development sessions for basic science graduate students and junior faculty. She has also collaborated on the development of the Equity and Diversity Audit Tool.

**Peter Lougheed Centre Short Stay Unit**  
Gold Couch Award

Awarded by the University of Calgary, Department of Psychiatry residency program to the best clinical teaching unit in Calgary.



# Mental Health, Ethics and Psychiatry

*When I finished residency and became a staff psychiatrist, I immediately became aware that I was full of uncertainties about the right thing to do. Should I write a second certificate and block that patient's right to autonomy so that he is better protected from harm, or let him leave and take the risk he might indeed commit suicide? Should I activate that person's personal directive, preventing her from going to the home she loves and forcing her into seniors' housing? Can that person refuse the treatment or does that person lack the ability to make an informed decision? These decisions affect not only me and my patients, but also families, staff and the community. Complex cases often create divisions among staff and family, and result in conflict because of differing values and perspectives on patients' unique circumstances.*

I realised that I didn't have a comprehensive framework for examining patients' issues. So when I had the opportunity to be part of a conference panel discussing "difficult decisions in geriatric psychiatry" in the 1990s, I leaped at the chance, especially as an ethicist was on the panel. The experience was fascinating and opened my eyes to seeing a problem from multiple perspectives before making a decision. In simple terms, an ethicist looks at a person's autonomy against his safety and the good versus harm that will result from contrasting decisions on treatment. However, we have to apply the same analysis to the people who may be affected by such decisions: family, staff and the community all have a right to safety too.

When the mental health ethics committee was set up in Calgary, I volunteered to go through the training and sit on the committee. Since then I have attended a number of ethics consultations and they have been fascinating. When everyone who attended the consultation had a chance to share their thoughts, the issues often turned out to be

something not thought of at the start; everyone realized that the problems were multifaceted. A consultation never gives directives, but attempts to document the issues on the table and examine the benefits and disadvantages of all possible courses of action. This process is complex, but it is often easier for the treatment team to feel they are making the best decision in difficult circumstances. I intend to stay involved with the committee, who would love to have more psychiatrists, including residents, participate. If you are interested in learning more, feel free to email me; I would be happy to chat. Please contact the mental health ethics program if you think an ethics consultation would be useful. Doing so is not an admission of failure or a time to be judged, but an opportunity to present the issues, explore all options and develop an appropriate course of action. To contact the committee or arrange a consultation, call Connie Mahoney at 403-875-9639.

*Submitted by Dr. Stuart Sanders*  
stuart.sanders@albertahealthservices.ca





# Postgraduate Education Update

The psychiatry residency program is on its way to another successful year. In March, our postgraduate education program was matched with some of the best national medical graduate applicants during the annual Canadian Resident Matching Service (CaRMS) process. Our program broke all past records for numbers of applications (97 total, 24 local). We are looking forward to welcoming seven new residents to our program this summer: Krystyna Banas, Erin Girard, Qasim Hirani, Paul Ratti, Caley Shukalek, Lindsey Ward and Kim Williams. Psychiatry postgraduate programs across Canada did well meeting their application targets, with only three mid-sized programs not filling all their allotted spots. Thank you to the faculty for joining the residents at the welcome luncheons, our CaRMS committee for their excellent work and to everyone who contributes to the education of our undergraduate trainees (including many of our own residents).

Our department has also been supporting numerous visiting psychiatry residents from Ottawa, Vancouver and Edmonton. The breadth of training offered to these residents this academic year has surpassed all previous academic years, including the equivalent of 12 months of training in psychosis, forensics, women's health, outpatients and neuropsychiatry. This training is an excellent way to support programs across Canada and to potentially recruit future colleagues. Thank you to Drs. Don Addington, David Tano, Lisa Gagnon, Darcy Muir and Aaron Mackie for going that extra mile!

Spring also means certifying exams. We wish the five residents preparing for late-May and early-June exams every success. We also welcome Dr. Cindy Baxter, who has graciously taken over the role of exam chair from Dr. Arlie Fawcett, and Dr. Blair Ritchie, who has assumed the Addictions training director role in the residency program from Dr. David Crockford. We're crossing our fingers that this year our practice exams are not impeded by floods, and are planning two dates this spring to examine our 17 second- and third-year students.

The Residency Training Committee continues to support the opening of new rotations at South Health Campus. To date we have approved both inpatient and outpatient rotations and have already begun to train residents in those areas. Child rotations will begin on unit 56A in July of this year and a consultation liaison rotation is being planned. In light of the ten first-year residents going through psychiatry emergency at the Rockyview General Hospital with Dr. Lisa Harpur in the next academic year, Dr. Toba Oluboka has graciously agreed to also provide training in this area to emergency and public health residents in the upcoming year.

The Royal College of Physicians and Surgeons will be in Calgary in February 2015 for an external review of all programs. As we go through our policies and procedures to prepare for this review, we'll be looking at new and broader evaluations, clarifying expectations and exploring ways to continue to meet the national standards.

Congratulations to Brienne McLane, who recently received one of the five new Helios scholarships for physicians pursuing additional clinical training outside of the Calgary zone and planning to return to Calgary, thereby enhancing our clinical expertise. Brie will be leaving us for a one-year fellowship in neuropsychiatry in Vancouver.

Final-year residents are preparing for their exams. This year marks the first time the written portion (on April 1) will be solely multiple choice questions. The PDM / Objective Structured Clinical Examination (OSCE) portion will continue in its past format in Ottawa May 12–14; results will be released approximately two weeks after the PDMs. Please join me in wishing Rhea Balderston, Amanda Berg, Eric Fung, Darren Leung, Brie McLane, Kanwal Mohan, Tom Stark and Manrit Takhar the best of success in their exams. We are thrilled to know the remaining graduates plan to stay in Calgary for practice and share their knowledge with their upcoming colleagues.

*Submitted by Dr. Jordan Cohen*



# Undergraduate Education Update

Spring marks the wrap-up for Course VII and the beginning of the new year for clerkship. Course VII preliminary feedback was very favourable and kept the course as one of the highest-ranked courses in the medical school, particularly in terms of teaching styles. We experienced some transitional difficulties with introducing the Diagnostic and Statistical Manual of Mental Disorders (DSM) 5, which we expect will be notably easier to address next year.



Medical trainees at the Betty Ford Institute

Spring electives also continue to reflect the status of psychiatry with 19 two-week electives arranged between March 3 and April 11. Our thanks go to the faculty who supported these electives—Drs. Stephen Boucher, Lisa Gagnon, Claire Hart, Seema Hussain, Zahinoor Ismail, Fereshteh Jalali, Monique Jericho, Aaron Mackie, Rup Padya, Thomas Raedler, Paul Reinhardt, Rory Sellmer, Reilly Smith, Bernard Sowa and Will White.

As mentioned in the previous newsletter, early clerkship electives continued the tradition of collaborating with the Norlien Foundation to support one-week electives at the Betty Ford Institute coupled with a second week working on one of the local psychiatry units. In response to the very high level of local interest for this elective, we broke away from the University of Alberta this year and managed to fill the ten spots locally, with eight clerks and two psychiatry residents (Carmen Guenther, PGY-1, and Ster-

ling Sparshu, PGY-4). Mandatory clerkship rotations start on April 14; final numbers have 159 clerks for training, with an average of 20 clerks per six-week block. Spring also marks the end of the fiscal year; faculty who participated in clerkship this past year can expect a stipend pro-rated against past payments.

Local first-year students have requested summer placements for the four weeks spanning July 7 to August 1. Undergraduate Medical Education (UME) has reduced summer block from six weeks to four weeks—the freed two weeks will move to elective time during clerkship. Enquiries for visiting electives for the fall and winter starting September 15 are already flowing in; if you would like to take an elective clerk, please let Pauline (403-944-1271) know.

UME has invited Pauline and me to participate in this year's Applied Evidence-Based Medicine (also known as Med 440) electives fair in April. We look forward to meeting eager students at our booth and sharing opportunities for learning, as well as hearing feedback from past placements.

I'd also like to congratulate our five successful local CaRMS applicants for "matching to" our residency program. Such a strong local contingent is a testament to the superb teaching and experiences in our department for medical students, including the collaboration of faculty and residents with the school's Psychiatry Medical Interest Group (PMIG), communications teaching, Med 440 supervision and summer block clinical electives. Keep up the excellent work!

You may have heard that the search is underway for a new associate dean of undergraduate medical education to replace Bruce Wright at the end of June; I'm happy to say that there are several strong candidates. Other recent changes in UME include the appointments of Dr. Kevin Busche to Assistant Dean of Pre-clerkship and Dr. Pam Veale to Assistant Dean of Clerkship. Drs. Busche and Veale have been historically strong supporters of undergraduate education, and I'm very happy to see them in these roles.

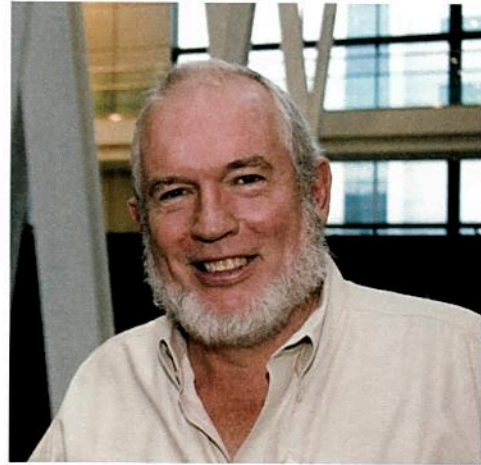
*Submitted by Dr. Nancy Brager*



# Mathison Centre Update

In February, I was very pleased to accept the role of Interim Director of the Mathison Centre for Mental Health Research and Education. The Mathison centre was launched in March 2012, made possible by a \$10 million investment from Mr. Ronald P. Mathison, President and Chief Executive Officer of Matco Investments Ltd. With a focus on research and training for youth, the Mathison centre aims to improve the understanding of brain mechanisms of mental disorders and the risk factors and treatments of these disorders. I must thank Dr. Don Addington, the first interim director, for establishing the centre's operating principles and guiding the work for the first 18 months.

My main task is to ensure the effectiveness of the investigator-initiated research funding programs, Mathison educational programs (rounds, journal clubs, Achievers in Medical Science program) and other activities initiated over the last 18 months. I also hope to enhance the visibility of the centre and its activities. To this end I have developed an 'Investigator of the Month' program to profile the recent research findings of either a faculty member or trainee. This research will be presented to Mr. Mathison and will also be circulated within the centre, posted on our website and included in the Department of Psychiatry newsletter. Additionally, I plan to run a Mathison centre 'science café', where a bench scientist and clinician will present a variety of topics. Finally, I plan to launch a community engagement program, including presentations by centre members (faculty and trainees), at public venues such as schools.



Dr. Andrew Bulloch  
Interim Director

I recognize that it will be important to reinforce existing links between the centre and the Department of Psychiatry, the Department of Psychology, the Mental Health Commission of Canada and the bench scientists from the Hotchkiss Brain Institute. One aspect of this initiative will be to support the campus-wide Youth Mental Health Day.

The centre is growing steadily: we currently have 15 faculty, 24 graduate students, 9 postdoctoral fellows, 21 research assistants and coordinators, and 3 administrative assistants. Each person is equally important for our success, and I look forward to working with all of them.

*Submitted by Dr. Andrew Bulloch*



Visit the Department of Psychiatry website today at [www.ucalgary.ca/psychiatry](http://www.ucalgary.ca/psychiatry) for information and updates on the following:

- Rounds Schedules
- Continuing professional development events
- Fellowship information
- and more...



# Researcher in Profile

## Dr. Natalia Jaworska, Post-Doctoral Fellow



The bulk of my work as a post-doctoral fellow at the Mathison Centre for Mental Health Research and Education focuses on better understanding the neural underpinnings of depression, as well as the cognitive and clinical features accompanying the disorder. This interest can be traced to my undergraduate thesis (University of Alberta,

Edmonton), which reviewed the neurobiological theories of depression. Continuing on this trajectory, my Master of Science (Dalhousie University, Halifax) research examined brain features and behaviours in an animal model of depression. While animal work allows people to address research questions that are not possible in humans, I ultimately felt that a disorder as complex (and as human) as depression should be studied in humans. As such, my PhD project (University of Ottawa) assessed brain electrical activity in depressed individuals before and throughout antidepressant drug treatment. So, what did I learn? First, psychiatric research is complex, with few clear-cut findings. Second, the profiles (that is, brain and clinical features) differ of those patients who do or do not respond to treatment. Third, gender differences exist in mood disorders (I even observed this in gerbils!).

My work at the Mathison centre—under the mentorship of Drs. Glenda MacQueen and Frank MacMaster—focuses on the use of neuroimaging (for example, magnetic resonance imaging [MRI]) to better understand the structural and functional brain correlates of depression. Specifically, I have been involved in the Canadian Biomarkers in Depression (CANBIND) study. CANBIND is a multi-site, cross-Canada initiative with the goals of determining which features (that is, brain structure/function, genetic/molecular, clinical and/or cognitive data) distinguish depression and specific depression subtypes, and determining which features help predict antidepressant treatment outcome. Data from the CANBIND study (lead by Dr. MacQueen at the University of Calgary) will be pooled from all sites across Canada in order to accomplish these goals. This multi-modal analytic

approach is likely our best bet for understanding a disease as complicated and variable as depression.

I have also examined the effects of aerobic exercise on the brains of depressed young adults. Although this study can be challenging (getting depressed individuals to exercise is no small feat), it is gratifying to see patients improve. I am also involved in several other projects, one of which uses repeated transcranial magnetic stimulation (rTMS) to stimulate the brains of depressed youth. I am currently assessing brain structural and functional data to examine if rTMS modifies these features. I have also examined the influence of age of disorder onset and childhood trauma on brain structure and cortex thickness (the brain's outer cell layer) in depressed adults—work carried out in collaboration with Dr. Raj Ramasubbu at the Mathison Centre for Mental Health Research and Education.<sup>1</sup> Finally, I have participated in a project assessing mental health services and initiatives at post-secondary campuses in Alberta and across Canada. Interestingly, it appears that although most schools provide basic mental health services, few evaluate the effectiveness of these services.<sup>2</sup>

Clinical research in psychiatry mandates extensive collaboration in order to better understand mental illness, and this approach is one of the most enjoyable and rewarding aspects of research for me. Going forward I would like to explore the influence of gender on the biological features of mental illness; I also hope to study brain profiles in individuals with complex, and typically more treatment-resistant, mental illness. Finally, I would like to examine the influence of psychotherapy on the brain in mental illness—a research domain that to date has been under-explored.

Ultimately I feel that the prevention, diagnosis and management of psychiatric problems such as depression require more targeted, collaborative and creative solutions than those currently in place. The researchers at the Mathison centre are contributing to making this a reality.

*Submitted by Dr. Natalia Jaworska*

<sup>1</sup> Jaworska N, et al. The influence of age of onset and childhood trauma on cortical thickness in major depressive disorder. *Biomed Res Int* (In Press). <sup>2</sup> Heck E, Jaworska N, et al. The state of mental health services at post-secondary institutions across Alberta. *Can J Psychiatry* (In Press).



# Research Updates

## The Effects of Aerobic Exercise on Young Adults with Depression

Principle investigators Dr. Frank MacMaster and Dr. Glenda MacQueen are seeking participants for a pilot study examining the influence of aerobic exercise on clinical symptoms, cognitive function and brain structure and function (focusing on the hippocampus) in depressed young adults. They are specifically recruiting individuals 18–24 years of age with depression or suspected depression, who are not currently taking antidepressants. Participants will receive a comprehensive psychiatric evaluation, close monitoring of clinical symptoms and will engage in 12 weeks of exercise (three times per week) under the care of fitness experts and researchers. Imaging and blood draws will also be carried out as part of the study. For further information please contact [brain.neuroboost@gmail.com](mailto:brain.neuroboost@gmail.com).



## Recent publications and grants

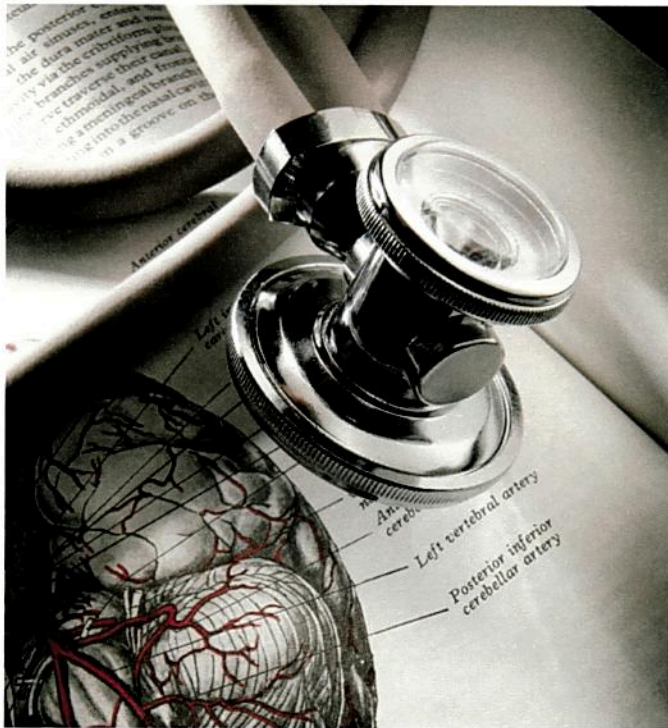
### Dr. Zahinoor Ismail

Ismail Z, Fischer C. Emerging concepts in geriatric psychiatry: an update on the canadian academy of geriatric psychiatry annual scientific meeting. *Can Geriatr J*. 2013 Mar 5;17(1):2-4. doi: 10.5770/cgj.17.121. eCollection 2014 Mar.

Porsteinsson AP, Drye LT, Pollock BG, Devanand DP, Frangakis C, Ismail Z, Marano C, Meinert CL, Mintzer JE, Munro CA, Pelton G, Rabins PV, Rosenberg PB, Schneider LS, Shade DM, Weintraub D, Yesavage J, Lyketsos CG; CitAD Research Group. Effect of citalopram on agitation in Alzheimer disease: the CitAD randomized clinical trial. *JAMA*. 2014 Feb 19;311(7):682-91. doi: 10.1001/jama.2014.93.

Jalal H, Ganesh A, Lau R, Lysack J, Ismail Z. Cholinesterase-inhibitor Associated Mania: A Case Report and Literature Review. *Can J Neurol Sci*. 2014 Mar;41(2):278-80.

Dr. Ismail was a successful Co-PI in the CIHR Catalyst Grant competition: Secondary Analysis of Neuroimaging Databases "Neuroimaging Correlates of Delusions in Alzheimer's Disease and Related Dementias" \$98,390 Principal Investigators: Fischer C, Ismail Z, Millikin C, Schweizer T. Co-Investigators: Lix L, Munoz D, Shelton P, Smith E.





## Psychopharmacology Research Unit

The Psychosis Clinical Trial Unit has expanded its scope and has been renamed the Psychopharmacology Research Unit (PRU). The focus of the PRU will continue to be leadership in schizophrenia clinical trials. However, we will accept clinical trial invitations for other indications in psychiatry of both adults and adolescents. We welcome interested physicians to participate in our clinical trial programs.

The PRU collaborates with physicians and staff in outpatient psychiatry to provide patients with options and additions to their current treatment. Patients involved in clinical trials' protocols have access to treatment benefits that include the following:

- Opportunities to benefit from treatment not otherwise available,
- More frequent monitoring and check-ups than can be offered in psychiatric outpatient clinics, and
- A thorough assessment that includes a physical workup and overall mental status assessment using the latest assessment tools available (depending on the study protocols). The information abstracted from these assessments is shared with the patients' clinicians for continuity of care and collaboration.

### EnVivo Study

The PRU is currently involved in the EnVivo study. This is a randomized, double-blind, placebo-controlled, parallel, 26-week, phase 3 study of two doses of an alpha-7 nicotinic acetylcholine receptor agonist (EVP-6124) or placebo as an adjunctive pro-cognitive treatment in schizophrenia subjects on chronic stable atypical antipsychotic therapy. Thomas Raedler, MD (primary investigator), Beverly Adams, MD (co-Investigator)

#### Why is this trial being conducted?

- Currently there are no approved or otherwise readily available pharmacological agents to adequately treat cognitive impairments that frequently affect patients with schizophrenia, and
- Cognitive impairment in patients with schizophrenia represents a substantial burden to affected individuals, their families and society.

#### Who is eligible to participate in this trial?

Patients must fulfil the following criteria:

- Be between 18 and 50 years old,
- Reside in a stable living situation,
- Have an identified informant (support person),
- Have a medical diagnosis of schizophrenia for at least three years with illness in a non-acute phase, and
- Be treated with a stable dose of an atypical antipsychotic drug (other than clozapine) for at least eight weeks prior to the study.

For more information about this study, the research program or referrals for patients, please contact Dr. Thomas Raedler at [thomas.raedler@albertahealthservices.ca](mailto:thomas.raedler@albertahealthservices.ca) or the Clinical Trials Coordinator, Geri Anderson, at 403-210-6903 or [geri.anderson@albertahealthservices.ca](mailto:geri.anderson@albertahealthservices.ca).



# Sebastian K. Littmann Research Day

The 27th annual Sebastian K. Littmann Research Day was held in the Kinsman Learning Centre at the Alberta Children's Hospital on March 14, 2014. The keynote speaker was the internationally renowned neuroscientist, Dr. Joel Kleinman, who was until recently at the National Institute of Mental Health. Dr. Kleinman presented on the genetic neuropathology of schizophrenia.

The event program featured presentations by Arjun Dhoo-par and Dr. Thomas Raedler on endothelial dysfunction in depressive disorders and Aisha Shaukat (working with Dr. Oloruntoba Oluboka and Dr. Glenda MacQueen) on the development of a new rating scale for depression in bipolar disorder.

Health services research was prominent at the event as well:

- Dr. Rosalyn McAuley presented an evaluation of the adoption of the parallel process in the Foothills Medical Centre emergency room,
- Sandy Berzins and Lindsay Guyn, two researchers at the Calgary Counselling Centre, presented an outcome assessment entitled "Measuring Depression Outcomes in Community Practice",
- Brian Marriot presented an economic evaluation of recent changes to the Assured Income for the Severely Handicapped (AISH) program,

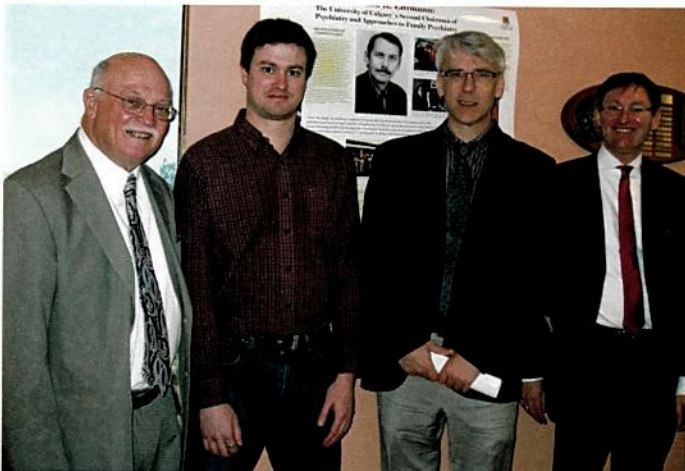
- Drs. Priscilla Liu and Jassandre Adamyk-Simpson spoke about patient engagement in research,
- Keltie McDonald presented epidemiological research on bipolar disorder,
- Isabelle Vallerand presented on the risk of mortality associated with depression in primary care, and
- Dr. Kirsten Fiest presented validation data for depression rating scales in people with epilepsy.

There was, of course, plenty of clinical content during the day—Dr. Ray Purdy presented case-report data on limbic encephalitis, Igor Yakovenko spoke on pathological gambling, and Drs. Karl Tomm, Shari Couture and others made several presentations on family therapy. Dr. Lisa Buchy, a post-doctoral fellow, made a presentation on the PREDICT study: a major study looking at the predictive association of drug use on outcomes in patients clinically at high risk of psychosis.

The day also featured poster presentations on a wide variety of topics, ranging from psychosocial adjustment in neurological conditions to the long-term outcomes of concussions.

Information on the 2014 Research Day and on the 2015 event will be posted at [www.psychiatryresearchday.ca](http://www.psychiatryresearchday.ca).

*Submitted by Dr. Scott Patten*



Joel Kleinman, Stephen Pow, Scott Patten, Thomas Raedler



Leanne Foust, Rachel Grimminck, Mike Papirny, Karen Duncalf, Ben Grintuch, Brooke Duncan



## Remembering Colleagues



Dr. Patrick Conway  
October 9, 1926 - April 1, 2014

### Dr. Patrick (Paddy) Conway

Paddy was born in the small town of Ballivor, County Meath, Ireland. His parents were teachers, who were able to foster Paddy's bright mind from an early age. He chose to pursue medicine at the University College Dublin, where he met and married Mary, also a doctor.

In 1955 Paddy moved to Canada, where he worked as a family doctor in Newfoundland for five years. Not surprisingly, Paddy's interest in medicine and human behaviour attracted him to the specialty of psychiatry. He became a Canadian-qualified psychiatrist in Saskatoon before moving to Calgary, where he worked at all three Calgary hospitals of the time. However, he is particularly remembered for his time at the Holy Cross Hospital, where he was chief of the Department of Psychiatry and head of the medical staff.

Paddy was a marvelous psychiatrist; his sharp intellect and common sense made him a superb problem solver, and these skills were complimented by his kindness, compassion and generosity. He drew great admiration from everyone around him, and was particularly supportive as a mentor to the junior psychiatrists who came to work at the Holy Cross Hospital.

Paddy and his wife Mary had a very rewarding life together. He was the proud father of six children and many grandchildren, a full-time physician and a part-time rancher.

I can think of no more fitting tribute to his memory than these words from Hamlet – "we shall not look on his like again".

*Submitted by Dr. John Ryan*

### Dr. Jessica Lyons

In January our department lost one of its young colleagues, Dr. Jessica Lyons, to cancer. Jess was a deceptively quiet woman with an inner strength that led her to take on many challenges in her young life. Who else among us would walk into an overseas residency program midway through training at the still-tender age of 28 and take on the establishment for its treatment of students? Jess not only advocated for her peers in Adelaide, Australia, but she also encouraged other Canadians training on that continent to return to Canada to complete residency.

Jess had remarkable insight into the challenges of daily life and took a direct interest in the lives of people around her. This caring attitude made her perfect for perinatal health as an advocate for infants, as well as a strong and involved parent for her son, Kalen. Even in her final days, Jess continued to give emotional support to her colleagues and friends, which attests to her generous character. She could read a person well and skipped platitudes to let her personality shine



Dr. Jessica Lyons  
November 22, 1978 - January 11, 2014



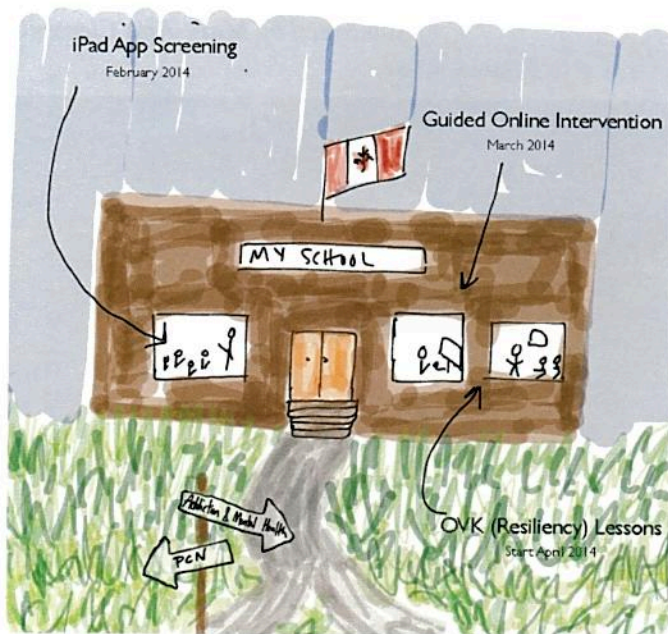
through, making time spent with her a highlight in people's day. Those who knew her will miss her immensely.

On behalf of Jess's husband, Dr. Jimmy Vantanajal, and her closest friends in our department, thank you to those who generously contributed to the tribute fund for Jess. Jimmy plans to use these funds towards Kalen's education.

*Submitted by Pauline Burgess*

## EMPATHY Project Update

A cross-ministry, multi-sectoral pathway for youth



### iPad App Screening

Screening with an iPad application of all middle and high school students was completed in March. A 50-question screen was created based on the following tools:

- CRAFFT for substance use
- Hospital Anxiety & Depression Scale
- PHQ-A for depression
- Rosenberg for self esteem
- Kid Screen for quality of life

Data analysis on the screening results has begun. Early data shows that 10–20% of students are having thoughts of suicide or self-harm.

### Resiliency Lessons

All middle school students are completing a 16-module resiliency program (based on concepts of cognitive behavioural therapy), which is facilitated by coaches— staff who are experienced with youth and mental health.

### Guided Online Interventions

After screening, students who are identified as vulnerable to mental health issues will be given guided online interventions, such as the following:

- This Way Up for depression and anxiety
- SPARX for depression and anxiety
- Breaking Free Online for alcohol and drug use

Coaches, who are embedded in the schools, will work one-on-one with students to go through the intervention. Students requiring further support will be linked to community services such as the Patient Care Network or Addiction and Mental Health.

For more information regarding the Addictions & Mental Health Strategic Clinical Network and other projects, contact Andrea Allen at [andrea.allen@albertahealthservices.ca](mailto:andrea.allen@albertahealthservices.ca).

*Submitted by Marti Rustulka, Project Manager,  
Addiction and Mental Health Strategic Clinical Network*



## 9th Annual Department Curling Bonspiel

The Department of Psychiatry's 9th annual curling bonspiel was held on March 31, 2014. Dr. David Tano hosted this event at the Calgary Winter Club. 36 curlers participated in the event and 50 people enjoyed supper afterwards. Although a smaller crowd than usual participated this year, it was likely due to the American Psychiatric Association's Conference being held the weekend prior to the bonspiel. In the future we will schedule the curling event a few weeks away from the conference to encourage a better turnout.

Thank you to everyone who came out to the event this year. We hope to see you all at the 13th annual golf tournament scheduled for September 8, 2014, at the Hamptons Golf Club.

A very special thank you to Drs. Aaron Mackie, Claire Hart, Dave Tano, Leanne Owens, Lori Hogg, Michael Trew, Rory Sellmer, Roy Turner, Thomas Raedler and Will White for sponsoring residents to attend this event.

*Submitted by Mary-Ann Clements*



Highest scoring team  
Miguel Heller, Trevor Pirlot, Carla Atkinson



Most honest team: The Happy Hippies  
Jayson Williams, Fay Schneider, Sheryl Hibbert & Sandra Junor



Best dressed: Hurry Arrrrd! Adolescent Psychiatry Pirates  
Jordan Cohen, Leanne Owens, Sam Chang, Blair Ritchie



Best team name: Darrin and the Phoenicopteriphobics  
Nathan Finkbeiner, Dave Pocock, Darrin Leung & Rob Tanguay





Curl Dashians  
Angela Sedgwick, Joanne Knox, Michele Hampton &  
Rhonda Law



The Farmer's Wife & the Three Blind Mice  
Tim Ayas, Darcy Muir, Tashi Kinjo & Margaret Oakander



Brains on Fire on Ice  
Brienne McLane, Will White & Mike Szymczakowski



Curl Power  
Colleen Karran, Monica MacKinnon, Monica Veness &  
Lundi LaVictorie



Psychiatry Rocks  
Benjamin Grintuch, Alex Di Ninno & Mary McRae



Freudian Sweeps  
Stephanie Hyder, Roy Turner & Brooke Duncan



## Events

### Women's Mental Health Day Conference

**Friday, May 23**

MacEwan Conference & Events Centre,  
Main Campus  
University of Calgary

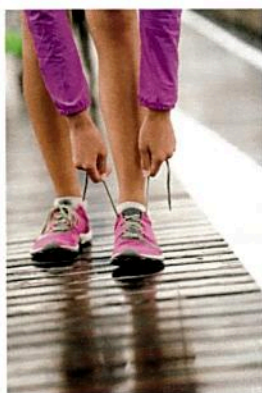
[www.ucalgary.ca/psychiatry/files/psychiatry/WMHD\\_Flyer14.pdf](http://www.ucalgary.ca/psychiatry/files/psychiatry/WMHD_Flyer14.pdf)

### Shopper's Drug Mart Run for Women

Supporting the Women's  
Mental Health Clinic at the  
Foothills Medical Centre

**Sunday, May 25**

[www.runforwomen.ca](http://www.runforwomen.ca)



### Addiction Day & Networking Fair

**Friday, May 30**

MacEwan Conference & Events Centre,  
Main Campus  
University of Calgary

[www.addictionday.ca](http://www.addictionday.ca)

### Department of Psychiatry 13<sup>th</sup> Annual Golf Tournament

**Monday, September 8**

Hamptons Golf Club

Mind Matters is distributed to psychiatry medical staff and faculty, psychiatry residents, program directors and section chiefs, Alberta Health Services executives, and psychiatry support staff.

Submissions & Inquiries:

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Phone (403) 944-8913 Fax (403) 270-3451

[www.ucalgary.ca/psychiatry](http://www.ucalgary.ca/psychiatry)