



Mind|Matters

Department of
Psychiatry
Newsletter
Calgary Zone
Fall 2017

Message from the Department Head, Dr. Beverly Adams

Welcome back to another academic year. I hope you enjoyed the great summer weather. Welcome to Daniel Kopala-Sibley, an academic psychologist and Mathison hire starting in October and to Alex McGirr, who works in both animal and human neurostimulation starting in November.

Congratulations to Dr. Nady el-Guebaly who received the Order of Canada for his work in addition psychiatry. Nady has achieved an international reputation in this field and it is an amazing tribute to his contributions. Frank MacMaster has written a chapter in our "Big Book" - Kaplan and Sadocks Comprehensive Textbook of Psychiatry entitled "Neuroimaging in Psychiatric Disorders of Childhood". This is another incredible achievement for our Department. I would also like to thank Dr. Susan Carpenter for her tireless advocacy for the PDD (Persons with Developmental Disabilities) population over her many years of service.

Meetings continued over the summer to bring in the AMHSP (Academic Medicine Health Service Program) for the Department of Psychiatry. This is an incredible opportunity to grow the department and achieve our mission of academically informed and integrated care.

I look forward to greeting you at our annual Fall Social on Thursday October 26th at the Radisson Hotel & Conference Centre.



Dr. Nady el-Guebaly

About the Order of Canada:

Created in 1967, the Order of Canada, one of our country's highest civilian honours, recognizes outstanding achievement, dedication to the community and service to the nation. Close to 7 000 people from all sectors of society have been invested into the Order. Their contributions are varied, yet they have all enriched the lives of others and have taken to heart the motto of the Order: DESIDERANTES MELIOREM PATRIAM ("They desire a better country"). Appointments are made by the governor general on the recommendation of the Advisory Council for the Order of Canada.

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New & Noteworthy

Community discussion focuses on how to improve mental health programs for Indigenous youth

Mathison Centre symposium emphasizes need to integrate Indigenous insights into search for solutions

By Josephine Adda, Mathison Centre

What mental health challenges do Indigenous youth face? Are there strategies that practitioners can adopt in their day-to-day work with Indigenous youth? How can traditional ways of knowing be helpful in understanding mental health among this population? These and other questions were central to a recent symposium organized by the Mathison Centre for Mental Health Research and Education.

Mental Health Week, celebrated across Canada May 1-7, was a week to reflect on various aspects of mental health and share insights with the community. On May 3, the Mathison Centre hosted a public symposium, Honouring the Past and Embracing the Future: Mental Health and Indigenous Youth, in partnership with the Mental Health Commission of Canada (MHCC). The event convened speakers and an all-Indigenous panel to share their experiences, insights and recommendations on mental health among Indigenous youth.

Highlights included a panel discussion moderated by Dr. David Swann, MLA, and a presentation from First Nations high school students who spoke about their experiences in adopting the MHCC's HEADSTRONG, an evidence-based mental health anti-stigma program. The symposium was open to the public and attracted more than 230 attendees from the community.

The Mathison Centre's Mental Health In Our Community (MHIOC) initiative is the hub for various activities to engage with the community on mental health topics. MHIOC is "all about fostering widespread understanding about mental illnesses, the brain, and behaviour, thereby helping to reduce



misperceptions, negative attitudes and stigma towards mental illness," says Andrew Bulloch, deputy director of the Mathison Centre at the Cumming School of Medicine.

Indigenizing Mental Health

Honouring the Past and Embracing the Future: Mental Health and Indigenous Youth falls under the Mathison Centre's MHIOC initiative. The event adds to ongoing dialogue on the prevalence of mental health issues among the Canadian population. One in five Canadians will be affected annually by a mental illness — and most of these illnesses begin during childhood and adolescence. Conditions like depression and anxiety affect the entire well-being of a person, and the friends and family members who support them.

"Mental illness does not exist in a void; the cultural dimension needs to be recognized and leveraged for better outcomes," said Bulloch, speaking to the impetus for the symposium. He emphasized the need for mental health workers to integrate Indigenous insights into their efforts in exploring solutions for Indigenous youth.

Sharing insights into how mental health workers and allied professionals can indigenize mental health services, programs, systems and delivery to benefit youth, Karlee Fellner, assistant professor at the Werklund School of Education, set the tone for the

day by highlighting the need to do away with deficit narratives through decolonizing trauma and health of Indigenous people. According to her, this can be done by "undoing the colonial systems, the colonial ways of thought" in the context of mental health of youth. She added, "That's what re-storying is about."

Fellner stressed that the practice of "pathologizing individuals" with mental health concerns only leads to labelling of groups such as Indigenous youth who practitioners exist to serve.

Cultural issues are key to mental health and well-being

Moderating the panel, Swann reiterated that cultural issues are seminal to the mental health and well-being of people. Swann, who practised as a family physician for many years, added, "If we don't know their background, we know in medicine that we really can't connect. And the first role of a family doctor is to take a history."

Mathison Centre Strategic Planning Process

On May 26, the Mathison Centre held a strategic plan retreat of full and associate members, students, staff, special guests and the leadership of the Centre. The retreat was a culmination of various feedback and consultations received from stakeholders. A detailed five-year plan has been outline and is in the process of finalization for sharing with our community partners. Stay tuned.

New Leadership Updates for the Mathison Centre

The Mathison Centre is pleased to announce some leadership updates at the beginning of the 2017/2018 academic year.

Deputy Director, Dr. Tamara Pringsheim

Dr. Pringsheim takes over from Dr. Andrew Bulloch as Deputy Director of the Mathison Centre.

Members of the all-Indigenous panel agreed that listening to youth is the foremost skill that practitioners need to cultivate in their day-to-day work with Indigenous youth.

To find out more about the MHIOC initiative of the Mathison Centre, contact josephine.adda@ucalgary.ca. To support MHIOC and other Mathison Centre initiatives, contact laureen.jensen@ucalgary.ca.

Led by the Hotchkiss Brain Institute, [Brain and Mental Health](#) is one of six strategic research themes guiding the university towards its Eyes High goals.

Tamara is an Associate Professor and leads the Tourette Syndrome and Pediatric Movement Disorders Program at the Alberta Children's Hospital. She is also Leads of the Canadian Alliance for Monitoring Effectiveness and Safety of Antipsychotic Medications in Children (CAMESA).

As Deputy Director, Tamara will work closely with Dr. Arnold and the leadership team in advancing the vision and mission of the Mathison Centre. Among other responsibilities, she will play a vital role in advancing the Centre's community knowledge transfer efforts. Congratulations to Dr. Pringsheim on her new role.

Education Director, Dr. Andrew Bulloch

Dr. Bulloch takes on the newly created role of Education Director of the Mathison Centre. Andy has served as Deputy Director and previously as Interim Director. He has been instrumental in building partnerships with the community as

inaugural Chair of the Mathison Centre Community Connections Committee (MC4). In his new role as Education Director, Dr. Bulloch will work with Dr. Arnold and the leadership team in advancing the education component of the mission of the Mathison Centre. A key aspect of his role will be to work with the Mathison Trainee Organization to further trainee engagement and participation. Congratulations to Dr. Bulloch on his new role.

Mathison Centre Researchers join the Royal Society of Canada's The College of New Scholars, Artists and Scientists

Mathison Centre members Stephanie Borgland and Matthew Hill have been named among an incoming cohort of 70 members of the Royal Society of Canada's The College of New Scholars, Artists and Scientists. The College is a handpicked selection of top mid-career scholars and artists in Canada. *Congratulations to Matt and Stephanie.*

Mathison Centre Researchers lead efforts to publish Canadian Schizophrenia Guidelines

The Canadian Schizophrenia Guidelines were published in the September issue of the Canadian Journal of Psychiatry. The project, led by Dr Tamara Pringsheim and Dr Donald Addington, was funded by a research grant from the Mathison Centre.

The guidelines comprise the entirety of the September issue of the journal, and consist of 10 articles covering assessment, pharmacotherapy, psychosocial therapy, clinical high risk populations, co-existing substance use disorders, children and youth, community treatment, and physical health and drug safety. Congratulations to Tamara and Don.

Mathison Centre in the News

Our centre has received notable public media attention recently through the work of our researchers. Examples of these include

- Global News Calgary interview of Dr. Donald Addington on the development of schizophrenia into early adulthood - https://globalnews.ca/news/3361546/why-parents-should-watch-for-symptoms-of-schizophrenia-in-adult-children/?mc_cid=86ce21ec56&mc_eid=c77c1016c6&mc_cid=09b372a648&mc_eid=c77c1016c6
- CBC interview of Rebecca Haines-Saah on the legal age of access to cannabis - http://www.cbc.ca/player/play/920672835849?mc_cid=86ce21ec56&mc_eid=c77c1016c6&mc_cid=09b372a648&mc_eid=c77c1016c6
- CTV Calgary morning live monthly segments by Sheri Madigan, PhD on various topics centred around child development

Update from CanREACH

CanREACH - The Canadian Research and Education for the Advancement of Child Health (CanREACH) is a program devoted to promoting pediatric mental health literacy in primary care through education and training. Exciting news from CanREACH with regards to program and the difference it is making was published in the MindMatters Winter 2017. To continue to that update, the Department of Psychiatry may be interested to learn

that the CanREACH program, was recently published in a high ranking medical journal: Evidence-Based Medicine. This is a big success for this program, but also to our health care system. This research is one of the first, if not the only incident, in the literature whereby medical education is objectively measured. We invite you to access the paper "Mental health literacy in primary care: Canadian Research and Education for the Advancement of Child Health (CanREACH)" at: <http://ebm.bmj.com/cgi/content/full/ebmed-2017-110714>

New & Noteworthy

Psychopharmacology Research Unit (PRU)

As the Medical Director of the Psychopharmacology Research Unit (PRU) I would like to give you a brief update on the recent activities of our clinical trials unit. Our unit participates in clinical research with novel compounds that are being developed for psychiatric disorders (phase II and phase III). We also participate in post-market studies to assess the effects of new medications under real-life clinical circumstances (phase IV).

First of all we would like to thank you for your ongoing support of our program. With your help we were able to recruit several participants for our clinical trials program.

Completed Clinical Trials:

The Real Life Assessment of Abilify Maintena® (**ReLiAM**) study is a phase IV study (ClinicalTrials.gov identifier: NCT02131415). This non-interventional prospective cohort study follows subjects with schizophrenia, who are being switched to Abilify Maintena®, for two years. This study was being conducted at Foothills Medical Centre and South Health Campus. As per the decision of the sponsor (Lundbeck Canada), this study was terminated on January 31, 2017. The data is currently being analyzed and will be presented at an investigators' meeting on October 21, 2017. Toba Oluboka, MD, David Crockford, MD and Rory Sellmer, MD, served as co-investigators for this clinical trial.

Current Clinical Trials:

We are currently participating and recruiting for the following clinical trials. Please feel free to discuss potential participants with us on a case-by-case basis.

The **NaBen Study** (Adaptive Phase II Study to Evaluate the Safety & Efficacy of Sodium Benzoate as an Add-on Treatment for Schizophrenia in Adolescents; ClinicalTrials.gov identifier: NCT01908192) assesses the effects of sodium benzoate, a well-known food-additive, on symptoms of schizophrenia in adolescents with schizophrenia between the ages of 12 and 17 years. At higher doses, sodium benzoate

acts as an enzyme-inhibitor and is thought to improve the function of the NMDA glutamatergic receptor. Beverly Adams, MD and Iliana Garcia-Ortega, MD serve as co-investigators.

We are expecting to be approved for a similar clinical trial with the same compound in adults with treatment-refractory schizophrenia, including subjects treated with clozapine, over the next few months.

ADVANCE Study:

Vortioxetine is a new multimodal antidepressant that is approved by Health Canada for the treatment of Major Depressive Disorder (MDD) in adults. The ADVANCE-studies compare the efficacy of vortioxetine with fluoxetine, an older SSRI-antidepressant, and placebo in the treatment of pediatric and adolescent depression. In addition to pharmacological treatment all subjects will also be offered a Brief Psychological Intervention (BPI). Iliana Garcia-Ortega, MD and Chris Wilkes, MD serve as co-investigators.

The ADVANCE-studies focus on *depressed pediatric patients* age 7 – 11 (Interventional, Randomized, Double-blind, Placebo-controlled, Active Reference (Fluoxetine) Fixed-dose Study of Vortioxetine in Paediatric Patients Aged 7 to 11 Years With Major Depressive Disorder (MDD); ClinicalTrials.gov identifier: NCT02709655) and *depressed adolescents* age 12 – 17 (Interventional, Randomized, Double-blind, Placebo-controlled, Active Reference (Fluoxetine) Fixed-dose Study of Vortioxetine in Paediatric Patients Aged 12 to 17 Years With Major Depressive Disorder (MDD); ClinicalTrials.gov identifier: NCT02709746).

We also received approval for the *open-label extension study* (Long-term, Open-label, Flexible-dose, Extension Study of Vortioxetine in Child and Adolescent Patients With Major Depressive Disorder (MDD) From 7 to 18 Years of Age; ClinicalTrials.gov identifier: NCT02871297). Subjects will be eligible to participate in this extension study after they complete the initial study.

Future Clinical Trials:

We are planning to participate in clinical trials with a focus on prodromal psychosis (Attenuated Psychosis Syndrome APS) and relapse prevention in schizophrenia. We will provide an update once we receive ethics approval for these clinical trials.

We continue to rely on your support for our clinical trials program. You can obtain additional information on current studies by accessing the web-site of the Psychopharmacology Research Unit (www.ucalgary.ca/pru). Please feel free

to contact Thomas Raedler (thomas.raedler@ahs.ca), Geri Anderson (Geri.Anderson@ahs.ca) or Tara Morash (tlmorash@ucalgary.ca) by email or phone (403.210.6903) if you wish to have more information about one of these studies, or if you wish to refer a patient for possible participation.

We are always looking for clinical investigators to participate in clinical trials. Please feel free to contact our study-team for further information.

Thomas J Raedler, MD

Mathison Misfits Ride for Brain Research

Lisa Buchy and Rose Swansburg recently participated in a Bike Tour fundraiser in Panorama, BC to raise both funds and awareness for neurological and mental health research. This bike tour is an annual event hosted by The Branch Out Neurological Foundation (<http://www.branchoutfoundation.com>).

Branch Out raises funds for neuroscience research, supporting summer students, graduate students, and principle investigators to make discoveries that will improve the quality of life for patients diagnosed with neurological disorders. This year alone, the bike tour raised \$300,000. Branch Out has previously supported

Mathison trainees including Keon Ma and Yamile Jasau. Being passionate about the work they do to understand the neuroscience of mental health disorders, Rose and Lisa rode in the Branchy Bike Tour 2017.



How did it go?

Nobody was eaten by grizzly bears. On Friday June 16th Rose and Lisa loaded up the Subaru and drove out to Panorama, BC. A quick stop at Marble Canyon had the girls talking to strangers about their cool new jerseys, featuring a custom designed Mathison Misfits logo to represent the team-spirited neuroscience research done at the Mathison Centre for Mental Health Research & Education. Knowing they were about to ride a ridiculously long distance – 80 km – for a phenomenal cause, the two got to bed early, but were way too excited for the adventure ahead...

Race Day!

Energy was high at the Panorama Mountain Resort 7am breakfast with riders making new friends and wishing everyone Good Luck. There was an atmosphere of excitement and comradery. As this bike tour was a first



for Lisa and Rose, both will admit they were a little intimidated by the 80 km distance down Panorama Mountain and around Lake Windermere.

Super athletes could circle Lake Windermere twice and ride back up the mountain for a 160km distance, or a large majority of riders chose to ride a 100km distance which went back *up*

Panorama Mountain. Neither of these super distances were a goal for Rose or Lisa, as late entries to the Bike Tour meant a restricted training time, but the energy was so high and inspirational throughout the day that Rose actually pushed herself back up the mountain to cross that 100km finish line! It was a grind folks. There were a couple of points of intense pain that had Rose questioning her life choices, but every time she encountered another rider the energy was so high and positive that it really inspired her all the way back up the mountain.

Dr. MacMaster was the Keynote Speaker at the post-race banquet dinner to emphasize the amazing work his lab does as part of the Mathison Mental Health Centre. The talk largely focused on showcasing the impressive result of a clinical trial using Transcranial Magnetic Stimulation (TMS) in Major Depressive Disorder, quoting participants who said TMS literally saved their lives. Dr. MacMaster explained how understanding the biology of a neurological disorder allows us to design targeted treatment interventions, using a novel TMS intervention in Tourette's Syndrome as an example.

One of the highlights of the entire weekend was how incredibly grateful every person was for every other person. Dr. MacMaster thanked the riders for

supporting neurological research, expressing sincere gratitude for the capital raised and the conversations initiated to support individuals and reduce stigma surrounding neurological and mental health disorders. The riders thanked the scientists, with firm handshakes and deep emotion. The incredible volunteers thanked all of the riders for pushing their limits to Ride for

Brain Research, and the riders thanked the volunteers for their outstanding support. The entire weekend was full of gratitude and hope for a brighter future, *Brains at their Best.*

Other Highlights

The Branch Out Foundation hosted a social media contest on race day, and Rose won! Check out [#BranchyBikeTour](#) on Instagram to see some incredible pictures from the event. Little red riding hood and the wolf rode 100km on a tandem bike, winning best dressed for the event. A team of 6 cowboys also rode tandem bikes in wranglers and cowboy boots. Clearly this bike tour is a fun event to attend! Frank and family *finally* made it to BC, experiencing incredible wildlife including ram, moose and a grizzly bear! Welcome to beautiful BC Dr. MacMaster, we hope you enjoyed your visit!

Thank you so much to both the Mathison Centre and the Department of Psychiatry for the support to participate in this Branchy Bike Tour event. The Mathison Misfits had an incredible weekend, and intend to participate again next year with an even larger team to further promote neurological and mental health research. Thank you to all of the participants for being so inspirational, we look forward to seeing you again next year!



New & Noteworthy

ADHD IN WOMEN: From Puberty to Peri-Partum

Sara K. Binder, MD, FRCPC

Women experience a number of hormonal fluctuations throughout their lifespan. During puberty, PMS, pregnancy and post-partum significant changes occur in hormonal levels of estrogen, progesterone and prolactin. These hormones are known to influence levels of key neurotransmitters that are necessary for neuro-cognition, executive functioning, mood regulation and impulse control. Girls and women with ADHD struggle to regulate cognition, affect and impulsivity due to inconsistent levels of dopamine and norepinephrine. During hormonal fluctuations occurring during the menstrual cycle, pregnancy and post-partum, ADHD symptoms may become more impairing due to the down-regulation of dopamine and norepinephrine by ovarian hormones. This results in further functional impairment. When we consider the impact on learning, relationships, academic, occupational and psychosocial functioning throughout a woman's lifespan it is imperative that we better understand and manage ADHD in women.

In childhood, more boys than girls are diagnosed with ADHD at a rate of 9:1. By adulthood the prevalence of ADHD is close to 1:1. Males are more likely to suffer from disorders presenting early in development such as Learning Disorders, ADHD, and Oppositional Defiant Disorder. Females are more likely to develop emotional disorders in adolescence including Major Depressive Disorder, Anxiety disorders and Eating disorders. Females with ADHD are more likely to present with internalizing symptoms (such as withdrawal, loneliness, obsessions, phobias) and comorbid Depression and Anxiety. When presenting to primary care clinicians and mental health clinicians they are more likely to be treated for the depressive or anxious symptoms than ADHD. This may be in part due to their ability to develop better coping strategies to mitigate their symptoms. In large part it is likely due to ongoing under-recognition and under-diagnosis of ADHD. It is important for clinicians to consider comorbid and/or underlying ADHD in young women. Strong academic performance should not rule out an ADHD diagnosis.



Females with ADHD are more likely to present with internalizing symptoms (such as withdrawal, loneliness, obsessions, phobias) and comorbid Depression and Anxiety. When presenting to primary care clinicians and mental health clinicians they are more likely to be treated for the depressive or anxious symptoms than ADHD. This may be in part due to their ability to develop better coping strategies to mitigate their symptoms. In large part it is likely due to ongoing under-recognition and under-diagnosis of ADHD. It is important for clinicians to consider comorbid and/or underlying ADHD in young women. Strong academic performance should not rule out an ADHD diagnosis.

Some studies indicate that girls with ADHD show greater intellectual impairment, lower hyperactivity & lower externalizing behaviours (ie outward expression of distress). In an Australian study of 2404 children, girls had more somatic complaints whereas boys had poorer school functioning. Boys tend to exhibit more externalizing behaviours including hyperactivity and impulsivity. This may be related to the rise of striatal dopamine receptors in males paralleling early motor symptoms of ADHD. The higher rates of ADHD in boys than in girls may be explained by prominent hypermobility, impulsivity, aggression and disruptive behaviours which are more likely to present for treatment. Girls tend to present with more symptoms of inattention resulting in a much later diagnosis of ADHD as they tend to “fly under the radar.”

In exploring gender differences between adolescent boys and girls with ADHD, girls were found to have lower self-efficacy and poorer coping strategies. They tend to have higher rates of Depression and Anxiety with fewer externalizing behaviours. For those with hyperactive and impulsive symptoms there was found to be a greater risk of unplanned pregnancies and sexually transmitted illnesses.

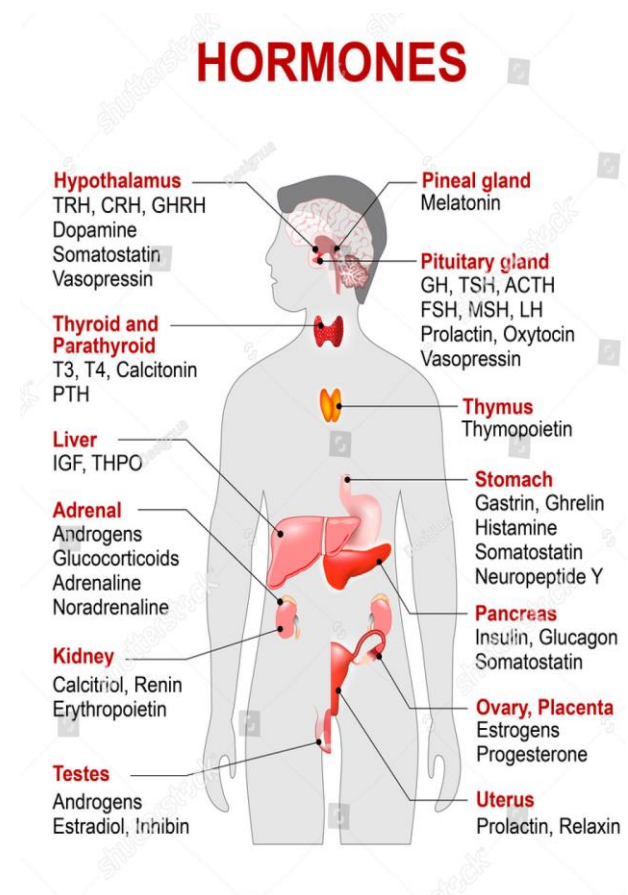
Hormones and hormonal fluctuations have a significant impact on symptoms of ADHD. The reward system is implicated in ADHD due to its response to levels of Dopamine. The reward system is modulated by hormones during the menstrual cycle. During mid-follicular phase (unopposed estrogen), the reward system is augmented. Estrogen appears to modulate dopamine in the reward system. This may impact cognitive functions, affective states and vulnerability to drug abuse.

Estrogen plays an important role in the development and plasticity of midbrain dopamine neurons. An fMRI study of healthy females (mean age 29y) showed correlations between ovarian steroids (estradiol/progesterone) and neural activity in the amygdala, hippocampus and cortex. These areas are key in decision making, emotional regulation and social behavior. Changes in these hormones may modulate pre-existing impairment observed in ADHD. During the follicular phase (high Estrogen), women experience a greater response to stimulants. Clinical evidence suggests worsening of symptoms pre-menstrually (increased progesterone). The differential response to stimulant drugs in the presence of estrogen suggests ADHD medications may need to be titrated throughout the menstrual cycle for optimal symptom control.

Another key transitional time for most women occurs during pregnancy and post-partum. Many women experience increased distractibility entering motherhood. Neurocognitive changes have been subjectively observed during pregnancy. "Pregnancy Brain"- complaints of memory impairment and poor concentration are common to most pregnant women. Changes in sex hormones are hypothesized to cause impaired cognition. Women assessed in the 3rd trimester and postpartum compared with non-pregnant women were found to have lower verbal memory and processing speed scores. Elevated prolactin levels are associated with worse executive functioning including verbal memory and processing

speed. Increased levels of Prolactin during pregnancy lead to decreases in Dopamine. Dopamine is required for executive functioning. Individuals with ADHD are known to have a paucity of dopamine receptors in the prefrontal cortex. Therefore, women with ADHD may be more vulnerable to neurocognitive worsening during pregnancy. Symptoms of ADHD may become more severe during the peri-partum and result in significant functional impairment.

More women are entering reproductive years who have been diagnosed and are being treated for ADHD. No guidelines currently exist to inform treatment of ADHD during pregnancy and lactation. Stimulants are classified as "Category C" for use in pregnancy. In utero exposure to stimulants raises concerns regarding fetal growth. However, stimulants do not appear to be associated with major congenital malformations. Weighing the risks and benefits of treatment is of utmost importance in determining use of all psychotropic medications in pregnancy.



There is limited data on breastfeeding and stimulants. Conceivably, exposure in breast milk could impact infant growth and sleep. In a report of 3 mothers taking Dexedrine there were no adverse events reported. Bupropion is a good alternative to stimulants during pregnancy and lactation. It is also helpful for comorbid Depression and smoking cessation. As with other antidepressant medications it is considered "Category C" in terms of safety. Reports however are reassuring showing birth defect rates similar to the general population rate.

As with all psychotropic medications, none of the ADHD stimulant medications have been formally studied during pregnancy. Therefore, none of these medications can be classified as Category A, or safe, during pregnancy. However, ADHD long acting stimulant medications have not shown clear risk in early pregnancy. If a woman's functioning is severely impaired without stimulants it is likely prudent to continue treatment during pregnancy.

To minimize the impact on the fetus one may consider lower dosing or prn use for driving &/or potentially high-risk situations. Additionally, discontinuing the medication prior to 28 weeks will guard against the risk of a slight decrease in birth weight. Alternatively, a switch to Bupropion may sufficiently address symptoms during pregnancy and lactation. In concert with any medications, non-pharmacological strategies are extremely important to manage symptoms regardless of biological management.

In order to effectively manage ADHD in women it is imperative to have an understanding of the significant impact of hormonal fluctuations on neuro-cognition, affect regulation and impulse control. By educating women and their caregivers it is hoped that women with ADHD will experience improved symptom management and less functional impairment throughout their lifespan.

Who's New?

Welcome to the Department of Psychiatry!

Leanne Foust



Dr. Leanne Foust was born and raised in a small farming community located between the two largest lakes in Manitoba. After completing her Bachelor of Science in Mechanical Engineering (University of Manitoba), she pursued a ten-year career in petroleum engineering. She eventually made her way to medical studies, completing Medical School and Psychiatry Residency at the University of Calgary. She is looking forward to joining the Outpatient Psychiatry Team at the Northeast Clinic in both the Primary and Community streams. She will also enjoy a monthly visit to the rural community of Vulcan, Alberta, where she will provide outpatient psychiatry services. In her spare time, she enjoys spending time with her husband, Stephan, and her family and friends, where activities such as sailing, scuba diving, skiing, hiking, camping, gardening, cooking, and movie-watching are always on the agenda.

Research



Investigator of the Month (September 2017)

Ruth Leonora Diaz

BSc Industrial Engineering, BSc Psychology (Honours), MSc Epidemiology

Department of Community Health Sciences, Cumming School of Medicine, University of Calgary

Life is a journey filled with unexpected turns...and, I have always believed it is our job to be flexible enough, and open-minded enough to take on the challenges with an open and grateful heart...

I came to Canada from Columbia, South America to learn a new language and to explore a new culture. While life in Canada has brought joys in many ways, it also has brought a lot of challenges. I had to steer away from my engineering training to look for other options.

Motivated by personal experiences, and intrigued by how the psychosocial environment can influence the development of mental illnesses, I enrolled in the BSc in Psychology at the University of Calgary in 2009; and then in the MSc in Epidemiology at the University of Calgary in 2013. I completed my MSc thesis under the supervision and mentorship provided by Dr. Scott Patten and with the guidance and support of my committee members, Dr. Andrew Bulloch, Dr. Bejoy Thomas and Dr. Tolulope Sajobi. My MSc thesis focused on the association between immigration status and depression in Canada. The results were presented at the Canadian Academy of Psychiatric Epidemiology (CAPE) annual conference and at the 30th Annual Sebastian K. Littmann Research Day, where I received an award for best oral presentation given by a graduate student. In addition, a manuscript was submitted for publication.

My MSc was an interesting journey filled with a lot of opportunities to learn both academically and personally. I am extremely grateful for the words of encouragement, the guidance and the opportunities to explore new things provided by Dr. Patten and Dr. Bulloch which played an important role in my success and professional growth. Thanks to Dr. Patten's support, I was able to propose an independent project which allowed me to learn new methodologies that are being used to analyze big data such as electronic health records. Also, I am fortunate to be part of The Mathison Centre for Mental Health Research & Education which allowed access to symposiums, psychiatric rounds, conferences and special events that enhanced my academic training. The Mathison Centre's trainee organization facilitated academic, social events and volunteer opportunities that helped me feel connected not only to other trainees, but also to the community. Attending the Hotchkiss Brain Institute's seminars broadened my perspective on the biological factors that can

Research

Publications

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Mele B, Holroyd Leduc J, Smith E, Pringsheim T, Ismail Z, Goodarzi Z. 2017. Detecting anxiety in individuals with Parkinson's Disease: A Systematic Review and Meta-analysis, *Neurology*, in press

Grants

\$98,000.00 M.S.I Foundation, Edmonton, Alberta, Canada. Goodarzi Z, Holroyd Leduc, Ismail Z, Smith E, Pringsheim T. Improving Care for those with Dementia or PD and Comorbid Depression or Anxiety (July 2017- June 2019)

\$20,000 University of Calgary Clinical Research Fund Grant. Anti-neuronal cell surface antibodies in treatment resistant schizophrenia. Ismail Z (PI), Colijn M, Fritzler M (Sept 2017-2019)

\$76,000.00 M.S.I Foundation, Edmonton, Alberta, Canada. 2017-2019. Fiest, KM, Davidson J, Ely EW, Ismail Z, Stelfox HT. Patient and Family Centered Delirium Measurement in the Critically Ill. (July 2017-June 2019).

\$20,000 HBI Pilot Funds competition. Goodarzi Z, Holroyd Leduc J, Ismail Z, Smith E. Improving the detection of depression and anxiety for those experiencing dementia or PD (May 30 2017-April 30 2018).

\$49,913 CIHR SPOR. Fiest KM, Ely EW, Ismail Z, Stelfox HT. Delirium Assessment in the Critically Ill: A Patient and Family-Centered Approach

\$20,000 Calgary Centre for Clinical Research. Fiest KM, Ely EW, Ismail Z, Stelfox HT. Validating Screening Tools for Delirium Subtypes in the Critically Ill. (May 2017-May 2019) Pilot funding to validate current delirium screening tools to identify subtypes of delirium in the critically ill. These funds allowed preliminary data gathering to inform the larger CIHR grants for detection of delirium in ICU patients. I contributed to the grant writing and protocol for this study.

Dr. Oakander (Principal Investigator) and team Pharmacist Dr Amin Rajwani have been awarded a \$10,000 grant through Addiction and Mental Health Strategic Clinical Network for the project - "A review of current literature on electronic nicotine delivery systems (ENDS) to develop resources that will help health care professionals become more effective in counseling the psychiatric patient addicted to tobacco smoking and wanting to use ENDS as a harm reduction strategy".

Dr. Oakander (Project Lead) and the team at Sunridge just completed the project "Skill for the Journey to Wellness" with a \$28,663.25 grant from Chief Medical Office/Calgary Zone Medical Affairs Quality Improvement Initiative.

Recognitions

Congratulations to the following individuals!

Dr. Denis Morrison has been appointed as the Forensic sub-specialty residency Program Director.

Dr. Nady el-Guebaly received the Order of Canada for his contributions to Addiction's Mental Health.

Dr. Frank MacMaster wrote a chapter for the new Kaplan and Sadock's Comprehensive Textbook of Psychiatry (10th edition, 50th anniversary) is out. The title is "*Neuroimaging in Psychiatric Disorders of Childhood*".

Dr. Margaret Oakander was awarded the PLC/CGH Medical Staff Association 2016 clinical Teaching Award for her contribution to teaching with Psychiatry and Family Practice residents.

Dr. Abdel-Keriem was elected to Fellowship of the College by the Nominations Committee.

Dr. Rob Tanguay's new appointments:

- Provincial Medical Advisor, ODT e-Preceptorship Program.
- Professional Development, Concurrent Capability & Problem Gambling.
- Provincial Addiction & Mental Health, Alberta Health Services.

The Mathison Misfits rode for Brain Research in Panorama BC in June, The whole event raised \$300,000

Doug Carnochan was awarded "Nurse of the Year" for the College of Registered Psychiatric Nurses of Alberta.

2017 Preceptor Awards from the Residents

Silver Couch Award - **Dr. Darren Leung**
Humanism in Psychiatry - **Dr. Marie Claire Bourque**
Change Maker in Psychiatry – **Dr. Rory Sellmer**
Rookie of the Year – **Dr. Rosalyn McAuley**
Multidisciplinary Team Award – **Mr. Curtis Dorval**
Dedicated Years of Service - **Dr. Tim Yates** and **Dr. David Miyauchi**

Annual Awards Presented at Fall Social 2017

Perinatal DBT Skills Team

Jessica Lyons Psychiatry Award

for outstanding work in the area of perinatal mental health.

Not Criminally Responsible Team

Dr. Keith Pearce Award

for outstanding creativity & innovation with clinical practice.

Adult Day Hospital Team

Award for Excellence in System Transformation

for commitment and dedication to improving access and creating efficiencies that improve patient care.

CAAMP Psychiatric Emergency Services

Excellence in Acute Care Award

for commitment and dedication in patient care.

Regional Housing Program Team

Excellence in Mental Health Care by a Community Program Award

for commitment and dedication to patient care.

Dr. Iliana Garcia Ortega

Patrick Conway Award

for outstanding contributions to Mental Health by an International Medical Graduate.

Anna Habermel

deVries-Mason Trailblazer Award

for outstanding contributions in Geriatric Mental Health.

Events

UME Annual Retreat

October 27, 2017 8:00 am - 4:00 pm

Calgary Zoo

To RSVP, contact Nancy.Colp@ahs.ca

Issues of Substance Conference 2017: Addiction Matters

November 13, 2017 - November 15, 2017 Calgary, Alberta, Canada

Please visit the conference website for registration, program and updated information: <http://www.cclt.ca/Eng/newsevents/Issues-of-Substance-Conference/pages/d...>

9th Canadian Conference on Dementia (CCD) November 2-4 2017

Toronto, Ontario, Canada

The Canadian Conference on Dementia is a biennial national conference dedicated to advance knowledge on dementia in scientific research and clinical care. Over 2 and half days you will engage with eminent researchers and renowned scholars on cutting edge topics in dementia.

For more

information: <http://www.canadianconferenceondementia.com>

Psychotherapy Day 2018

February 2, 2018

Hotel Alma, Calgary, Alberta Health Services

About Course Content

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About Registration

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Mathison Centre for Mental Health Research Day 2018 (formerly Youth Mental Health Day) March 12, 2018

Annual flagship event under the theme "Neurostimulation in Mental Health". We will feature keynote speaker Dr. Antonelli Bonci and speakers Dr. Vikaas Sohal, Dr. Stephanie Ameis and Dr. Alex McGirr to present different perspectives on the topic.

For up to date events including Grand Rounds please visit:
<http://ucalgary.ca/psychiatry/calendar>

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

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Department of Psychiatry

THE MATHISON CENTRE
for MENTAL HEALTH RESEARCH & EDUCATION