

PENN PSYCHIATRY PERSPECTIVE



Perelman School of Medicine at the University of Pennsylvania | Department of Psychiatry

Ideas, Suggestions, and News!

We welcome your ideas, suggestions, and news about your activities for stories or announcements in Penn Psychiatry Perspective, the eNewsletter of the University of Pennsylvania Department of Psychiatry. Our goal is to offer useful and interesting news to readers and highlight our many outstanding faculty, programs, and services. Please submit your recommendations to psychweb@mail.med.upenn.edu.

*Dwight L. Evans, MD
Ruth Meltzer Professor and Chair*

Departmental Goings On

Cognitive-Behavioral Therapy for Child Anxiety Confers Long-Term Protection from Suicidality



Courtney Benjamin Wolk, PhD was the lead author of a new study that found that patients who did not respond to cognitive behavioral therapy (CBT) for anxiety in childhood had more chronic and enduring patterns of suicidal ideation at 7 to 19 years after treatment. This study, published in the March 2015 issue of the *Journal of the American Academy of Child & Adolescent Psychiatry* (published online on December 17, 2014), adds to the literature that suggests that successful CBT for childhood anxiety confers long-term benefits. "This study underscores the importance of the identification and evidence-based treatment of youth anxiety," said Dr. Wolk in a March 2, 2015

Penn Medicine news release.

The relationship between anxiety disorders in children and adolescents and the emergence of later depressive disorders is well established. But, few studies have established evidence for an independent relationship between anxiety and the range of suicidal behaviors, including suicidal ideation, plans, attempts, and completed suicides or the impact of CBT treatment for anxiety in childhood and adolescent years on later suicidality. This is the first study to demonstrate the protective function of successful evidence-based treatment for childhood anxiety disorders on suicidal ideation in late adolescence and adulthood.

Dr. Wolk and her colleagues looked at 66 patients who were treated for anxiety, particularly separation, social or generalized anxiety, as children, who agreed to be followed for years after treatment. At seven to 19 years after treatment, treatment response was found to significantly predict lifetime suicidal ideation, such that treatment non-responders were more likely to have experienced suicidal ideation. In fact, every patient who reported thinking about suicide in the past 12 months or past two weeks was among those who had not responded to CBT.

Dr. Wolk is a Post-Doctoral Fellow at the Center for Mental Health Policy and Services Research (CMHPSR) in the Department of Psychiatry at Penn. She was joined in the study by senior author **Rinad Beidas, PhD**, also a member of the CMHPSR, and by Philip C. Kendall, PhD from Temple University.

View the March 2, 2015 Penn Medicine news release at - http://www.ups.upenn.edu/news/News_Releases/2015/03/wolk/

The study was also covered in a March 4, 2015 *Psych Central* article - <http://psychcentral.com/news/2015/03/04/cbt-for-kids-anxiety-can-have-lasting-benefits/81925.html>

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Departmental Goings On

PBHMind Asks the Expert About “Pediatric Eating Disorders”: C. Alix Timko, PhD



C. Alix Timko, PhD is a Clinical Psychologist at the Eating Disorder Assessment and Treatment Program in the Department of Child and Adolescent Psychiatry and Behavioral Sciences at The Children’s Hospital of Philadelphia. Dr. Timko will be presenting at the upcoming PBHMind symposium “Evidence-Based Practices for Pediatric Eating Disorders” on

Monday, May 4, 2015. To hear more from Dr. Timko, be sure to register for the May 4 PBHMind symposium (<http://www.pbhmind.com/>).

PBHMind: What is one thing a mentor shared with you that “stuck”?

Dr. Timko: In one of my earliest training experiences, a mentor said to me that as a mental health clinician it is important to be the calm in the storm. That is, illness of all kinds can throw an individual and his/her family into chaos. Parents are trying to cope with something new and scary, adolescents or children are ill and may not understand everything that is happening. It can feel like a hurricane. It is my job to stay calm, focused, supportive. If I get caught up in the storm, my ability to support the family is compromised. The need to be calm in the storm has stuck with me after all these years.

PBHMind: What is the best part of your job?

Dr. Timko: The best part of my job is to be out of a job. I love it when I am not needed anymore. To work with a family and have the child be healthy, seeing him or her smile, grow taller, talk about friends, and get on with life and not ever need to come back to my office again. That is the best part.

PBHMind: What is the most common question colleagues/parents ask about youth with eating disorders and how do you normally respond?

Dr. Timko: I think that there is a tie for the most common question. The first is “what caused this?” and the second is “doesn’t my child need to want to get better?”

In terms of what caused this – my answer is usually that eating disorders are complex illnesses that likely have multiple causes. The only thing we can say for sure is that there is a strong genetic component and that they (the parents) did nothing to cause this. We can hypothesize about what exactly may have

caused their child’s particular eating disorder; however, the reality is that we may never know if we have correctly identified factors or if we have even identified everything that may have contributed to the development of the eating disorder. Even if we did, we have no time machine and can’t go back and change things. What we can do is identify what is keeping the eating disorder going and/or making it more difficult to get better. Once we identify these maintaining factors – we can target those in treatment and help facilitate recovery and prevent relapse.

Which leads to the second question – “do they have to want to get better?” The answer to that one is “no.” Children or adolescents with anorexia often display anosognosia – or the inability to recognize when one is ill. Furthermore, by their very nature – eating disorders disrupt a child/adolescent’s normal development and impairs their ability to make healthy and autonomous decisions. Because of that, children and adolescents are not always able to want to get better. If they are and they do want to – wonderful! If they are not capable of it and don’t want to – parents can still get them healthy. You don’t wait for a drowning person to decide to stop drowning before you save them.

PBHMind: What tips do you have for mental health clinicians who are just starting out?

Dr. Timko: One of the most important things to do is find a mentor – someone who can help support you in professional development, provide feedback and support about your work with families. Continue to seek out professional development – there are a number of good local and national professional conferences. Staying connected to a peer group can help with professional development and can make you feel less alone when navigating the day-to-day issues of a new career. Finally, self-care. We always recommend it to families – but we forget how important it is to do for ourselves.

PBHMind: What ways do you see inaccurate and hurtful representations of mental illness in your field and how can we combat this stigma?

Dr. Timko: Eating disorders can be sensationalized in the media. There is often a great deal of mis-information about them. Eating disorders are not a choice. Children and adolescents don’t wake up in the morning and decide to have a life threatening illness. They are not vain disorders that only women who want to look a certain way have. Eating disorders are equal opportunity illnesses. Girls and boys can develop

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Departmental Goings On

PBHMind Asks the Expert About “Pediatric Eating Disorders”: C. Alix Timko, PhD

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them, individuals of all ethnicities can develop them. Getting better is not as easy as “just eating.” It is hard work that comes with a great deal of anxiety, stress, and discomfort. Eating disorders are not “silly” disorders and children and adolescents who have them are not doing it for attention. All eating disorders have severe medical, social, and psychological consequences. Anorexia has the highest mortality rate of all psychiatric illnesses. Children and adolescents die from eating disorders. If not treated quickly, eating disorders can become severe and enduring. More information about the seriousness of eating disorders, the fact that they are not disorders of choice, and that they are as complicated and life threatening as other illnesses needs to get out there. There are wonderful parent and advocacy groups who try to get the word out about eating disorders, their treatment, and to combat stigma. We need to do more to support them and to spread the word and combat some of the stereotypes that are out there.

News and Announcements

In the News

Penn Department of Psychiatry faculty are highly acclaimed experts in their chosen fields, often contacted by local, national, and international media outlets for their knowledge about topics of immediate interest. In this section, we provide just a brief sample of the many recent interactions that our faculty have with the press. For a more complete listing, please visit Penn Psychiatry In the News - <http://www.med.upenn.edu/psych/news.html>.

Brain Protein Tied to Alzheimer’s Spotted in Young Adults



Yvette I. Sheline, MD was interviewed in a March 2, 2015 *HealthDay* article about a new study indicating that brain plaque buildup, long linked to the onset of Alzheimer’s disease, has been identified in the brains of men and women as young as 20. Dr. Sheline, who was not involved in the study, highlighted the “complicated” nature of the findings and stressed that the conclusions were based on just a handful of brain samples. They also were confined solely to plaque growth in a specific part of the brain and neuron type, she noted. “Nonetheless, it is interesting that amyloid accumulation could occur so early in the basal forebrain,” she said. Dr. Sheline is Professor of Psychiatry, Radiology, and Neurology and Director of the Center for Neuromodulation in Depression and Stress (CNDS) in the Department of Psychiatry.

View the March 2, 2015 *HealthDay* article at –

<http://consumer.healthday.com/senior-citizen-information-31/misc-aging-news-10/brain-protein-tied-to-alzheimer-s-spotted-in-young-adults-696997.html>

Overcoming Jet Lag



Namni Goel, PhD commented in a March 1, 2015 article in *Lucky* about ways to overcome jet lag. Among the tips she offered, Dr. Goel suggested, “If you’re traveling east - New York to Paris, let’s say - start going to bed and waking up earlier a few days before. If you’re traveling west - as in New York to L.A. - go to bed and wake up later.” She also noted the importance of exercise in addressing issues related to traveling involving crossing several time zones. “Go for a run if you’re tired when you land, instead of taking a nap,” she told the interviewer. Dr. Goel is Research Associate Professor of Psychology in Psychiatry.

View the March 1, 2015 *Lucky* article at - http://images.burrellesluce.com/image/6270KC/6270KC_3025

News and Announcements

In the News

Guns in the Home Raise Suicide Risk



Anthony L. Rostain, MD, MA discussed the connection between the availability of guns in the home and suicide risk in a March 12, 2015 *Philadelphia Inquirer* article. Penn epidemiologist Douglas J. Wiebe, PhD has found that the risk of suicide is three times higher for people who have a gun in the home than for people without guns. Firearms and suicidal ideas are a particularly nasty mix, experts say, because guns are so much more lethal than other methods. There is no chance for second thoughts. The recent suicide by a suburban Philadelphia teenager has again brought the relationship between guns and suicide to public attention. Dr. Rostain told the *Philadelphia Inquirer* that teenagers can easily be “overwhelmed by negative emotions” and have trouble seeing the future when the present looks bleak. He and others said that young people may also have less control than adults over impulsive thoughts. Dr. Rostain said he had talked with many young patients at Children’s Hospital of Philadelphia (CHOP) who survived a suicide attempt and were glad they did. “The number-one thing they’ll say is they were just trying to get out of a bad situation they found themselves in,” he said. “The only thing they were thinking is, ‘I’ve got to get out of this.’”

Dr. Rostain is Professor of Psychiatry and Pediatrics at Penn and Co-Founder and Medical Director of the Penn Adult ADHD Treatment and Research Program in the Department of Psychiatry.

View the March 12, 2015 *Philadelphia Inquirer* article at - http://articles.philly.com/2015-03-12/news/60013408_1_suicide-risk-suicide-prevention-suicide-attempts

Awards and Honors

Regional, National, and International Honors

Honorary Degree for Dr. Raine

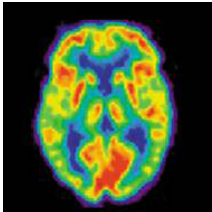


Adrian Raine, PhD received an honorary degree in January 2015 from the University of York in England for his “significant contribution to society.” In summarizing his career contributions, the University cited his “prolific research into the neurobiological and biosocial causes of violent crime.” Dr. Raine is a world-renowned expert in the neurobiological causes of antisocial and violent behavior in children and adults, as well as the potential for preventing future crime and the neuro-ethical implications of this effort. He is the Richard Perry University Professor of Criminology, Psychiatry, and Psychology. A Penn Integrates Knowledge (PIK) professor, he holds appointments in Penn’s School of Arts & Sciences and Penn’s Perelman School of Medicine.

For additional information, see the March 3, 2015 *Almanac* at - <http://www.upenn.edu/almanac/volumes/v61/n25/honors-other-things.html>

News and Announcements

Announcements



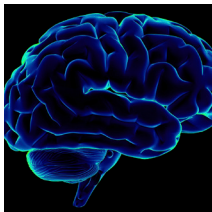
There is Still Time to Register for the 2015 Penn Medicine Neuroscience Center Symposium!

The Penn Medicine Neuroscience Center (PMNC) would like to invite you and your colleagues to the upcoming symposium, "Genetics of Brain Disorders," on Friday, May 8th, 2015 from 9:00 am to 5:00 pm in the Smilow Center for Translational Research. This one-day symposium will feature internal speakers from the Penn Neuroscience community and external guest speakers Joseph G. Gleeson, M.D. (The Rockefeller University) and Jack M. Parent, M.D. (University of Michigan Medical School), as well as poster presentations. Breakfast and lunch are provided and there will be a reception following the event. The Symposium is free and open to all, but registration is required. To view the agenda or to register, please visit http://www.uphs.upenn.edu/neuroscience-center/education/pmnc_symposium.html.



Summer 2015 Dates Announced for Group Coaching Program for Adults with ADHD

Come learn essential time-management, organizational, and planning skills through the University of Pennsylvania's Adult ADHD Treatment & Research Program. Discover how mindfulness can help you manage stress and improve your attention and focus. For more information, please visit http://www.med.upenn.edu/add/adhd_group.html.



New PBHMind Courses Announced

PBHMind's first course of 2015, "Evidence-Based Practices for Pediatric Eating Disorders," will be presented on Monday, May 4th, 2015 and features lectures from the faculty of The Children's Hospital of Philadelphia and the University of Pennsylvania, including C. Alix Timko, PhD, Katherine K. Dahlsgaard, PhD, Rebecka Peebles, MD, and Laurel A. Weaver, MD, PhD. In June, three of Penn's top cognitive-behavioral therapists discuss conducting CBT for challenging cases. Visit the PBHMind website for more information or to register - www.pbhmind.com/.

Upcoming Events

Department of Psychiatry Grand Rounds

Department of Psychiatry Grand Rounds are held from 12:00 noon to 1:00 pm on the designated dates. All Grand Rounds for the 2014-2015 academic year will be held in the BRB Auditorium. The next lecture is listed below. For more information about Grand Rounds and the 2014-15 schedule, please visit - <http://www.med.upenn.edu/psych/rounds.html>. To join our email listserv, please send an email to nataliec@upenn.edu.

April 23, 2015

Stinnett Honorary Lecture

Speaker: Charles L. Raison, MD
Professor, Department of Psychiatry, College of Medicine
Barry and Janet Lang Associate Professor of Integrative
Mental Health
John and Doris Norton School of Family and Consumer
Sciences
University of Arizona

May 21, 2015

Elizabeth Weller Memorial Lecture

Speaker: Boris Birmaher, MD
Endowed Chair in Early Onset Bipolar Disease
Professor of Psychiatry
University of Pittsburgh School of Medicine
Director of the Child and Adolescent Anxiety Program
Co-director of the Child and Adolescent Bipolar Program
Western Psychiatric Institute and Clinic of UPMC