

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

Adults with OCD Can Benefit from Exposure Therapy When Common Drug Treatment Options Fail



Dr. McLean

Dr. Foa

Carmen McLean, PhD was the lead author and **Edna B. Foa, PhD** the senior author of a new study showing that patients with obsessive-compulsive disorder (OCD) can improve their symptoms significantly by adding exposure and response prevention therapy (EX/RP) to their treatment regimen, when common drug treatment options have left the patients with clinically significant symptoms. The study was published online in November 2015 in the *Journal of Clinical Psychiatry*. The results of the study were collected as part of a National Institute of Mental Health (NIMH) grant awarded to Dr. Foa from Penn and Helen Blair Simpson, MD, PhD from Columbia University.

EX/RP is a type of cognitive behavior therapy in which the patient is asked to confront triggers that give rise to their obsessional distress and at the same time to refrain from performing the rituals in response to these obsessions. A previous study compared the effects of adding risperidone, pill placebo, and up to 17 twice-weekly therapist-led sessions of EX/RP to medication for OCD. In a November 11, 2015 Penn Medicine news release, Dr. McLean said, "We gave patients with significant symptoms, despite being on serotonin reuptake inhibitor (SRI) medication, EX/RP, risperidone, or placebo to augment their response to the SRIs. Those who received EX/RP showed significantly more reductions in OCD symptoms and depression than those who received risperidone or placebo, as well as significantly more increases in insight, quality of life, and social function, after only eight weeks."

The new study included 32 patients who crossed over to receive 17 weeks of EX/RP treatment after not benefitting sufficiently from risperidone. Evaluation at 12 and 16 weeks showed significant symptom improvement, with 25 (78 percent) patients completing treatment; 17 (53 percent) of them were classified as treatment responders and 11 (34 percent) classified as excellent responders at a 32-week follow-up evaluation. The remaining patients required medication changes during the follow-up period, which enabled them to shift to excellent-responder status.

This new paper adds to the large body of research that shows the benefits of EX/RP for patients with OCD. In the Penn Medicine news release, Dr. Foa, who is the creator of EX/RP and the PI on the grant, said, "We want patients to know that there is another option, if drug treatments have failed them. The therapy can be life-saving, if patients are aware of it." In a November 16, 2015 Philly.com article, Dr. Foa summarized the results of the new and prior studies, "If you have a choice between taking risperidone and doing exposure and response prevention to augment your response to SRIs medication, you are better off doing exposure and response prevention. You are

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Departmental Goings On

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not only more likely to improve, but also you don't have the side effects that risperidone has."

Dr. McLean is Assistant Professor of Clinical Psychology in Psychiatry and a member of the Center for the Treatment and Study of Anxiety (CTSA) in the Department of Psychiatry at Penn. Dr. Foa is Professor of Clinical Psychology in Psychiatry and Director of the CTSA. Additional Penn Psychiatry authors at the CTSA include **Laurie J. Zandberg, PsyD** and **Joseph K. Carpenter, BA** (now at Boston University).

View the November 11, 2015 Penn Medicine news release at - http://www.uphs.upenn.edu/news/News_Releases/2015/11/ocd/

View the November 16, 2015 Philly.com article at - <http://mobile.philly.com/beta?wss=/philly/blogs/healthcare&id=350576141>

Celebrating Dr. Charles O'Brien



Anna Rose Childress, PhD;
Charles P. O'Brien, MD, PhD;
Barbara O'Brien

On November 12, colleagues, friends, and family gathered to dedicate a portrait of **Charles P. O'Brien, MD, PhD**, a member of the Department of Psychiatry since 1969 and one of the most prominent addiction researchers in the world. Dwight L. Evans, MD, Ruth Meltzer Professor and Chair of the Department of Psychiatry, and Anna Rose Childress, PhD, Research Professor of Psychology in Psychiatry, contributed remarks at the event, followed by Dr. O'Brien. President Amy Gutmann sent a very warm letter that was read by Dr. Evans during the ceremony. Also, the Penn Glee Club gave a surprise performance with some appropriate music about Dr. O'Brien's work on campus alcohol policy. His grandson, Eric, is an alumnus of the Penn singing group. Highly acclaimed artist John Boyd Martin painted the portrait and attended the festivities.

Over the past 30 years, Dr. O'Brien has made many important discoveries and contributions that have become the standard of care in addiction treatment across the globe. Aside from developing medications to treat alcohol, opioid, and cocaine dependence, his work has also increased the understanding of the clinical aspects of addiction and the neurobiology of relapse.

Dr. O'Brien was elected to the Institute of Medicine (IOM) of the National Academy of Sciences in 1991. His many other national and international honors, too numerous to mention all here, include the Nathan B. Eddy Award for research on addiction from the College on Problems of Drug Dependence (2003), Sarnat International Prize for Mental Health from the IOM (2010), Jellinek International Award for Alcoholism Research (Canada; 2012), James B. Isaacson



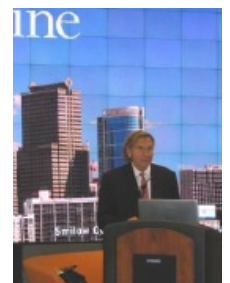
Dr. O'Brien's extended family (to Mrs. O'Brien's left is Evan O'Brien, MD, a Penn medical school graduate)

Award from the International Society for Biomedical Research on Alcoholism (Japan; 2012), Medal of Chevalier (Knight) of the French National Order of the Legion of Honor (France; 2013), and the Lifetime Science Award from National Institute on Drug Abuse (2015). Dr. O'Brien has advised the national government on drug policy for decades, and was the President of the American College of Neuropsychopharmacology and the Association for Research in Nervous and Mental Disease.

Dr. O'Brien is the Kenneth E. Appel Professor of Psychiatry in the Department of Psychiatry at Penn and Vice Chair of the Department. He is also the Founding Director of the prestigious Center for Studies of Addiction (CSA). The CSA, established in 1971, is a clinical research and treatment center for addictive disorders. It conducts research on the etiology and pathogenesis of addictions, as well as clinical trials of pharmacologic and psychotherapeutic treatments for a variety of addictive disorders. Under Dr. O'Brien's leadership, CSA served as a national and international resource for the empirical validation of assessment and treatment methods and training in these methods, and in the dissemination of knowledge to the addictions treatment and research communities.



Charles P. O'Brien, MD, PhD; Barbara O'Brien; Karl Rickels, MD; Aaron T. Beck, MD; James L. Stinnett, MD; Arthur K. Asbury, MD (Neurology); Anna Rose Childress, PhD



Department Chair
Dwight L. Evans, MD

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 - <http://www.med.upenn.edu/psych/news.html>.)

Long Nights in a Sleep Lab



Dr. Dinges



Dr. Goel

The work of **David F. Dinges, PhD, Namni Goel, PhD**, and their colleagues was featured in an October 19, 2015 *Wall Street Journal* article that explored ongoing sleep research at the Sleep and Chronobiology Laboratory at Penn. The article highlighted two participants who are part of a study investigating responses to sleep loss and searching for biomarkers that could predict which people are more vulnerable to the effects of sleep. Chronic insufficient sleep is linked to a wide number of medical disorders, from diabetes and obesity to high blood pressure, and an increased risk of death. "We have to add sleep to this crazy world," Dr. Dinges emphasized in the article. "And if we can't stop short sleeping, the question is: how do we optimize the ability to tolerate [sleep loss], what are the effects of this and how do we reverse it, stop it and alter it?"

A study led by Dr. Goel aims to see if people respond equally to two different types of sleep deprivation – acute, total sleep loss (going 36 hours without sleep) compared to chronic sleep deprivation (just four hours of sleep between 4 a.m. and 8 a.m. for five nights). Preliminary results indicate that the answer is yes. "There are huge individual differences. [But] if you are resilient to total sleep loss, you are resilient to being chronically sleep-deprived or if you're vulnerable to one, you are vulnerable to the other," Dr. Goel said.

Dr. Dinges is Professor of Psychology in Psychiatry and Director of the Division of Sleep and Chronobiology in the Department of Psychiatry at Penn, and Dr. Goel is Research Associate Professor of Psychology in Psychiatry at Penn.

View the October 19, 2015 *Wall Street Journal* article at - <http://www.wsj.com/articles/long-nights-in-a-sleep-lab-1445272717?tesla=y>

After Trauma, Helping Children and Adolescents Heal



Steven J. Berkowitz, MD was featured in an October 29, 2015 *Inside Penn Medicine* article about how to help children and adolescents make sense of and move beyond horrifying events like school shootings and stabbings. An expert on youth trauma, Dr. Berkowitz told the publication, "In these kinds of situations, the psychological casualties usually outnumber the physical casualties." For instance, after a large-scale event at a school, all of the kids, not just those who were injured, are affected. He noted the symptoms of psychological distress that the children might experience, including trouble sleeping, intrusive thoughts about the incident, mood swings - and, in some cases, post-traumatic stress disorder (PTSD) or depression. Despite the fears of both children and their parents, however, Dr. Berkowitz advised parents to send them back to school and return to their normal routine. "One of the most important things," he said, "is to get back on the horse."

Dr. Berkowitz is often asked for his advice on the best approaches to treatment and healing when tragic events occur affecting children, their parents, and the entire local community. "There will be a range of responses," he said. "Some kids will recover independently and some will need considerable professional help. It's important after a truly devastating event like this to make sure that the whole community is recovering. Children, particularly the youngest ones, really rely on their parents to mediate this type of experience - and, as you can imagine, many of the parents have been symptomatic and completely overwhelmed."

Dr. Berkowitz is a co-developer of the Child and Family Traumatic Stress Intervention (CFTSI), a unique four-session intervention, provided within 45 days of a child's exposure to a potentially traumatic event (PTE). CFTSI seeks to enhance two crucial factors that help to prevent trauma - social or familial support and coping skills. The goal is to improve communication between an affected child and his or her caregivers, which ultimately increases the caregiver's support of the child. At the same time, it provides the

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After Trauma, Helping Children and Adolescents Heal

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child with the skills needed to effectively manage symptoms.

Dr. Berkowitz is Associate Professor of Clinical Psychiatry and Director and Founding Director of the Penn Center for Youth and Family Trauma Response and Recovery in the Department of Psychiatry at Penn.

View the October 29, 2015 *Inside Penn Medicine* article at - <http://news.pennmedicine.org/inside/2015/10/after-trau.html>

Exercise: It's Good for the Body and the Brain!



Mahendra T. Bhati, MD was interviewed in an October 30, 2015 *HUPdate* article about the physical and mental benefits of exercise. "Exercise is one of the most under-prescribed and under-utilized treatments we have," said Dr. Bhati. "Multiple studies have shown exercise to help a wide range of mental conditions, including anxiety, depression and even dementia." Why does exercise work? Dr. Bhati said that exercise had the same benefits as antidepressants for many people without the side effects.

Dr. Bhati recommended that people follow the American Heart Association guidelines - exercise three times a week for at least 30 minutes, and break a sweat. "My advice: Do something that you enjoy, that gets your heart rate up and makes you feel good," he said. Dr. Bhati is Assistant Professor of Clinical Psychiatry in the Department of Psychiatry at Penn.

View the October 30, 2015 *HUPdate* article at - http://news.pennmedicine.org/inside/2015/10/exercise-its-good-for-the-body-and-the-brain.html?utm_source=Penn+Medicine++Department+of+Communications+Email+Subscription&utm_campaign=7663782e78-HD_INSIDE_RSS_EMAIL_CAMPAIGN&utm_medium=email&utm_term=0_1532cea8b5-7663782e78-175498037

Hearing Voices, and Living with Them



Paul M. Grant, PhD was quoted in an October 31, 2015 *Philadelphia Inquirer* article about the hearing voices movement, which normalizes and de-stigmatizes the experience of hearing voices in order to promote more satisfying living. Dr. Grant - a developer of recovery-oriented cognitive therapy for schizophrenia, which he has helped to implement in the City of Philadelphia and other large mental health systems - said that cluster analysis of anti-psychotic trials shows that only about 20 percent of patients respond well to antipsychotic medicines. This means that many individuals with schizophrenia who hear voices will continue to hear them despite optimal dosing and adherence. The hearing voices movement, he said, has done those individuals a "world of service" by connecting

them with others who have similar experiences, which achieves the overarching recovery goal of helping them feel less alone. Dr. Grant is Research Assistant Professor of Psychology in Psychiatry in the Department of Psychiatry at Penn.

View the October 31, 2015 *Philadelphia Inquirer* article at - http://articles.philly.com/2015-10-31/news/67883017_1_voices-schizophrenia-movement

To Get Better Sleep, Maybe Try Staying Awake



Michael Perlis, PhD was quoted in an October 21, 2015 *New York* magazine "Science of Us" article about sleep restriction therapy, a component of cognitive behavioral therapy specifically for insomnia (CBT-I). Sleep restriction therapy seeks to establish a more continuous and longer period of nightly sleep by first restricting it, at least for a time. Research provides evidence that this therapy is equal to, or better than, medication in helping people overcome their insomnia. Further, only CBT-I exhibits lasting effects when treatment is discontinued. In fact, some 50 percent of treatment responders, following treatment, no longer meet criteria for Insomnia Disorder. Dr. Perlis explained that the reason why sleep restriction (and CBT-I in general) works may be as simple as old-fashioned classical conditioning. With sleep restriction, there is enough "sleep pressure" to allow patients to fall asleep quickly and to stay asleep for the given sleep period. In turn, regularly being asleep in bed allows traditional cues for sleep (bedtime, bedroom, bed, etc.) to eventually elicit the physiology of sleepiness and sleep. The flip side of this explains why insomnia can be so hard to get over, too - too many panicked, sleepless nights (regularly being awake in bed) is thought to elicit the physiology of wakefulness. Patients regularly report this phenomenon, when they say "I fall asleep on the couch when I am not trying to and instantly wake up the moment I walk into the bedroom."

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To Get Better Sleep, Maybe Try Staying Awake

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Dr. Perlis is Associate Professor of Psychology in Psychiatry and Director of the Penn Behavioral Sleep Medicine Program in the Department of Psychiatry at Penn.

View the October 21, 2015 *New York* magazine "Science of Us" article at - <http://nymag.com/scienceofus/2015/10/get-better-sleep-maybe-try-staying-awake.html#>

Awards and Honors

Dr. Weiss Honored by American Academy of Psychiatry and the Law

Dr. Weiss receives the
2015 Golden Apple Award

Kenneth J. Weiss, MD was awarded the 2015 Golden Apple award by the American Academy of Psychiatry and the Law (AAPL, pronounced "apple") at its annual meeting in Fort Lauderdale, Florida on October 22, 2015. The award is given to a senior member of the organization who has made significant contributions to forensic psychiatry. AAPL is an organization of psychiatrists dedicated to excellence in practice, teaching, and research in forensic psychiatry. Founded in 1969, AAPL currently has more than 1,500 members in North America and around the world. Dr. Weiss is Clinical Professor of Psychiatry in the Department of Psychiatry at Penn.

Dr. Kampman Receives Award from Philadelphia Psychiatric Society

Dr. Kampman receives the
Publication Award

Kyle M. Kampman, MD received the Publication Award from the Philadelphia Psychiatric Society (PPS) on November 6, 2015 at the Society's Benjamin Rush Gala in Merion, Pennsylvania. This honor is given to non-PPS members for articles directed to non-psychiatrists in Pennsylvania. Specifically, Dr. Kampman was recognized for his major contribution to the 2015 *American Society of Addiction Medicine (ASAM) National Practice Guideline for the Use of Medications in the Treatment of Addiction Involving Opioid Use*. The guideline outlines the importance of medications – Methadone, Buprenorphine, and Naloxone – in the treatment of opioid use disorder and also identifies evidence-based psychosocial treatments. Dr. Kampman is Professor of Psychiatry in the Department of

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 in the designated locations. The next lectures are listed below. For more information about Grand Rounds and the 2015-16 schedule, please visit - <http://www.med.upenn.edu/psych/rounds.html>

January 28, 2016**Neuroimaging****Speaker: Theodore Satterthwaite, MD, MA**

Assistant Professor of Psychiatry
Neuropsychiatry Section
Director, Imaging Analytics, Center for Neuroimaging
in Psychiatry
Department of Psychiatry
Perelman School of Medicine at the University of Pennsylvania

Location: BRB II/III Auditorium

February 11, 2016**Neuroimaging****Speaker: David C. Glahn, PhD**

Professor of Psychiatry
Department of Psychiatry
Yale University School of Medicine
Location: BRB II/III Auditorium