

A LETTER FROM THE CHAIR

Greetings,

It is my great pleasure to share with you this 2016 edition of our annual newsletter. As you will see in our logo, at the institutional level, we have changed our branding to **Michigan Medicine**, to strengthen our emphasis on the tripartite mission that keeps the medical school in the top 10 across the country.

Among the highlights for the Department this year: the opening of our brand new Nyman Family Unit for Child and Adolescent Mental Health and Wellness and the expansion of our ECT/Neuromodulation program into new space. Our efforts to implement a broader integrated behavioral health program in our primary care network have us participating as full partners in population health initiatives for the health system. These complement the continued strength in our specialty programs, many of which have outreach activities to special populations. Our excellent Psychiatry Patient and Family Advisory Council has provided perspective and input on many of these initiatives.

We have sustained the very high regional ranking of our residency and fellowship programs; our training for psychology post-docs and social work post-graduates continues to be outstanding. You will meet some of our trainees featured in these pages.

Many research highlights are included in this year's newsletter. In addition, Department faculty have been very active in the development of the Clinical Trials Support Units. The newest unit: Behavior Function and Pain, is co-led by Medical Directors Susan Murphy, ScD, OTR (cross-appointed in Psychiatry), and Stephan Taylor, M.D., also one of our Associate Chairs for Research.

All of this work is carried out in partnership with colleagues, both within and outside of the department, and at other institutions. As always, our progress is accelerated and amplified by the support of alumni and friends of the department like you. We are so grateful for your interest and for your support. We invite you to partner with us to continue the success and growth of Michigan Psychiatry.

Best wishes for a healthy and fulfilling New Year,



Gregory W. Dalack, M.D.



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PROGRAM UPDATES

Department of Psychiatry Collaboration with the U-M Injury Center

Injury is a serious public health issue, which can include: motor vehicle crashes (and other transportation-related injuries), substance abuse, violence, elderly falls, sports injury, acute care, prescription drug overdose, and much more. Centers for Disease Control and Prevention (CDC) researchers estimate that nearly 200,000 Americans die from injury each year. It is the leading cause of death for people ages one to 44 in the U.S. and the total cost of injuries and violence in the U.S. was \$671 billion in 2013.

In 1987, the CDC began funding Injury Control Research Centers (ICRCs) to study ways to prevent injuries and disabilities. Injury Centers conduct and translate research focusing on injury control, and they also serve as training centers for future researchers and information centers for the public. Research in these centers is designed to be interdisciplinary, incorporating the fields of medicine, engineering, epidemiology, law, criminal justice, behavioral and social sciences, biostatistics, public health, and biomechanics. **The University of Michigan Injury Center** was funded as part of a five-year grant beginning in 2012; currently, it is one of nine funded centers in the United States.

The mission of the U-M Injury Center is to conduct and translate injury research into practice and policy to reduce the burden of injuries across the nation.

U-M Psychiatry Department faculty serving in key leadership roles in the U-M Injury Center include Dr. Maureen Walton, Professor of Psychiatry, who is the co-lead for the Research Core and Principal Investigator of the “SafERteens Translation Study” and Dr. Amy Bohnert, Associate Professor of Psychiatry, who is a content lead for Prescription Drug Overdose and is Principal Investigator of the “Brief Prescription Opioid Overdose Intervention Study.” Both Drs. Walton and Bohnert serve on the Center’s Internal Advisory Committee.

SafERteens Translation Study

With prior funding from the National Institute on Alcohol Abuse and Alcoholism (NIAAA), Dr. Maureen Walton, Professor, Department of Psychiatry, and Dr. Rebecca Cunningham, Director, Injury Center and Professor of Emergency Medicine, conducted a trial including single session motivational interviewing and cognitive behavioral therapy based interventions addressing youth violence and alcohol use among adolescents in an urban-based emergency department.

Patients aged 14 to 18 who ended up at the emergency department at Hurley Medical Center in Flint, MI, for any medical illness or injury were screened to participate. Youth that self-reported both past-year alcohol use and aggression were enrolled. Overall, findings for the therapist intervention revealed that intervention participants showed significant reductions in violence and alcohol consequences (see detailed findings in the box above) relative to the control condition.

3 MONTHS

Intervention participants reported significant reductions in peer aggression, peer victimization, and violence.

6 MONTHS

Intervention participants reported significant reductions in alcohol-related consequences.

12 MONTHS

Intervention participants reported significant reductions in peer aggression and peer victimization.

Cost analyses show that if this project was further implemented, annually, over 4,000 violent events or consequences could be prevented, totaling nearly \$72,000 in potential savings.

As part of Injury Center funding, the team is currently conducting a translation study to implement the SafERteens intervention (see www.saferteens.org) into routine clinical care among at-risk adolescents in the emergency department at Hurley Medical Center in Flint, MI.

Brief Prescription Opioid Overdose Intervention Study

Between 1999 and 2009, the rate of prescription opioid overdose deaths increased by 293 percent in the United States. Although prescription opioid overdose is a national concern, there is a shortage of interventions designed to prevent or reduce opioid overdose risk behaviors.

The Injury Center provided funding for Dr. Amy Bohnert to conduct the “Brief Prescription Opioid Overdose Intervention Study” to develop and test the efficacy of a motivational interviewing intervention to reduce opioid misuse and overdose risk behaviors among individuals who reported prescription opioid misuse.

Dr. Bohnert and her team found that a single half-hour session with a trained therapist during an emergency room (ER) visit was enough to motivate people who misused prescription opioid painkillers to reduce their use, as well as their riskiest behaviors. The ER was the setting of choice because about half of ER visits involve pain, and nearly one-third of emergency patients in the U.S. receive treatment with prescription painkiller medication. Emergency room visits also offer a crucial “teachable moment” that has been thought to be valuable for changing behavior.

The interviewing technique used, called motivational interviewing, has been shown to help people reduce their use of tobacco, drugs and alcohol, or to lose weight. Motivational interviewing helps people understand the risk that their drug use poses to



Maureen Walton, Ph.D.
Professor of Psychiatry



Amy Bohnert, Ph.D.
Associate Professor of Psychiatry

them, and the factors that can increase that risk, such as drinking alcohol or taking certain other drugs such as benzodiazepines, while they are on pain medications.

Over 2,700 patients between the ages of 18-60 were screened to determine which individuals reported use of opioids for nonmedical reasons. Those screened for use of opioids for nonmedical reasons were randomly assigned into two groups.

One group received the usual care and brochures about how to prevent or respond to overdoses and how to find local resources for treatment and suicide prevention. The other group had a session with a trained therapist, in addition to receiving these resources. Then, the researchers followed up with all the patients six months later — and most of the 206 people who took part in both groups agreed to fill out a follow-up survey.

In the end, those who went through a motivational interview session had a 40.5 percent reduction in behaviors that raised their risk of an overdose, on average, compared with a 14.7 percent reduction among those who didn't get the session. They also had a 50 percent average reduction in nonmedical use of opioids, compared with 39.5 percent reduction in the comparison group. These results were published in *Drug and Alcohol Dependence* in 2016.

VA Trainee Poster Session

On Tuesday, June 7, 2016, the VA held Mental Health Grand Rounds Trainee Poster Presentations. Dozens of staff and faculty from all across the VA attended the session. The top three poster presenters who were then asked to give a presentation were:

Rachel Bucy, LMSW, for her study titled, **“Responding to Suicidal Ideation in an Observational Cohort Study.”**

Karina Drake, M.D., for her study titled, **“Assessing Senior Residents Confidence in Evaluation and Managing Dementia.”**

Julie Gass, MS, and **David Morris, MS**, for their study titled, **“Examining Characteristics of Smokers with a Co-Morbid Substance Use Disorder in a Treatment-Seeking Sample.”**



Dr. Ken Adams reviews a poster from the Program on Positive Aging with Geropsychiatry Fellow, Karina Drake, right, and Psychology Intern, Dede Ukueberuwa, left.



From L to R: Gregory Dalack, M.D., Jamie Winters, Ph.D., Brian Martis, M.D., and Mark Lyubkin, M.D., discuss a study on PTSD.

PROGRAM UPDATE

The Fatherhood Engagement Project: INTERVENTIONS IN DETROIT

When Dayna LePlatte, M.D., joined the Department of Psychiatry faculty during summer 2014, Jennie Jester, Ph.D., addiction research scientist noted that they had similar interests. They both had a passion for research involving substance abuse, early intervention, child development, as well as research collaborating with community partners. Both were members of The Detroit Community-Academic Urban Research Center (Detroit URC). Detroit URC seeks to effect change which improves the health and well-being of the community, employing a variety of research approaches.

Research has proven that children have better outcomes when they have an engaged father, whether or not the father is living with the child. Working together with community based partners in Detroit, Drs. LePlatte and Jester designed the *Fatherhood Engagement Project* to implement an intervention program for fathers with young children in Detroit to improve their parenting involvement and skills. Next, the duo sought funding for the project.

In February 2016 the Fatherhood Engagement Project successfully competed for a Michigan Institute for Clinical & Health Research (MICHR) TeamWorks grant. The MICHR TeamWorks funding was intended for new collaborative health research projects that would bring together an academic partner and at least two community partner organizations. The MICHR TeamWorks group is using a partnership approach to research known as community-based participatory research (CBPR) which involves community members and academic researchers in all aspects of the research process. It enables all partners to contribute their expertise, with shared responsibility and ownership; and, it integrates the knowledge gained with action to improve the health and well-being of community members. There is a commitment to feed back the data found from the Fatherhood Engagement Project to MICHR, as well as interpret, and disseminate findings to the Detroit community.

Drs. LePlatte and Jester will lead their research team to compare outcomes on parenting self-efficacy, stress and depression in fathers in the intervention group, with fathers in a matched comparison group drawn from an existing database of other fathers in Detroit. The comparison group will receive time and attention from the facilitator as well as group sessions, but will not receive the parenting intervention.

The hypothesis is that fathers in the intervention group will experience an increase in parenting self-efficacy, decreased stress and possible decreased depressive symptoms. In addition, there is the potential for positive effects on mental and physical health for the fathers' children. Mothers may also be positively affected, through improved relationships with the fathers, better co-parenting and decreased stress.



Dr. Dayna LePlatte
Child and Adolescent
Psychiatrist



Dr. Jennie Jester
Associate Research
Scientist

About the Experts

Dr. LePlatte is a child and adolescent psychiatrist who works with patients at the University of Michigan Depression Center and U-M student-athletes at the Briarwood Medical Center. She also engages in various collaborative care programs, and has been involved in teaching, mentoring of medical students, residents, and fellows.

Dr. Jester, associate research scientist in the department has spent much of her career studying predictors of child behavior problems in children of alcoholics and the developmental trajectories of alcoholism in adults using data from the Michigan Longitudinal Study, under the direction of Dr. Robert Zucker. In addition, she has previously been Principal Investigator on a pilot study to provide an attachment-based intervention for substance-abusing mothers and their young children. She is also currently working with Dr. Kate Rosenblum and Dr. Maria Muzik to evaluate infant mental health home visiting services in Michigan.

About the Community Partners

Drs. LePlatte and Jester are collaborating with three community partners, Matrix Human Services, Friends of Fathers, and Junupa. These partners will be crucial players as the work unfolds.

MATRIX HUMAN SERVICES serves the most vulnerable in the metropolitan Detroit community and empowers individuals and families to enhance the quality of their lives and achieve self-sufficiency. They operate in more than 40 Detroit locations and provide services to more than 25,000 individuals and families annually.

FRIENDS OF FATHERS is dedicated to coaching and educating fathers in effective parenting skills and management of family and life issues. Since 2007, the organization has assisted more than 2,000 men in becoming better fathers, parents, employees and citizens.

JUNAPA is a training, facilitating, and consulting company that specializes in staff development, and program strategy for organizations serving low-income fathers and families. Junupa facilitators are committed to improving the outcomes of vulnerable fathers, families and communities through collaboration and community engagement. Lima Pereira, the principal owner of Junupa, will co-facilitate the intervention groups with Joseph Farley, president of Friends of Fathers.

PROGRAM UPDATE

Our GLOBAL Reach

The University of Michigan Department of Psychiatry reaches far beyond the State of Michigan. Our research impacts and influences clinical care on a much larger scale, touching far corners of the globe. Below we highlight a few sample collaborations of work being done in Ukraine, China and Ghana.

NIH Fogarty International Center: Substance Abuse in UKRAINE

Over the past 10 years **Dr. Bob Zucker** and colleagues in the University of Michigan Addiction Center (UMAC) have been involved in a program in Ukraine to enhance the country's scientific knowledge about substance abuse, and assist in the development of early intervention techniques to identify and alleviate it. Ukraine is a country whose rate of alcohol use is fifth highest in the world, and where drug abuse is one of the country's major public health burdens.

The program is funded by the NIH's Fogarty International Center and receives additional support from the National Institute on Alcohol Abuse and Alcoholism and from the National Institute on Drug Abuse. It hosts junior and mid-career psychiatrists for a year of mentored research in Ann Arbor and annual workshops about research methodology are also carried out in different cities in Ukraine. Research collaborations are developed both within Ukraine and between Ukrainian investigators and members of UMAC. Despite Ukraine's recent internal conflict, the program has been able to continue and deepen relationships and collaborations with Ukrainian investigators in Kiev, Kharkiv, and Vinnytsia.

New work, of considerable interest to the government has been done to survey levels of substance use in Ukrainian youth as early as age eight. This has never been done before and officials are excited to see the findings and then begin to plan programming to address the recently discovered but quite significant patterns of early substance use. Two years ago, **Dr. Maureen Walton** joined the program as Co-Director and in addition to program planning, has played a major role in implementing the early intervention programming that will address this early heavy substance use among the nation's youth.

Collaborations in CHINA

The Intern Health Study is a longitudinal cohort study that assesses stress and mood in medical interns at institutions around the country, enrolling over 3,000 new interns each year. The Intern Health Study is supported by the National Institute of Mental Health, the University of Michigan Depression Center and the Taubman Medical Institute. **Dr. Srijan Sen**, Frances and Kenneth Eisenberg Professor of Depression and Neurosciences with the Department of Psychiatry, leads this study.

In a pilot arm of the project involving 70 incoming intern physicians at Peking Union Medical College Hospital, the team found promising participation rates (74 percent), and an increase in depression rates with internship comparable to U.S. interns. These findings were based on Chinese interns serving in 2015-16. In the next stage, collaboration with Shanghai Jiao Tong University and Peking Union Medical College, the team is using the internship model to identify mobile electronic signals that predict depressive mood under stress. This work addresses interns serving between 2016 through 2018.

Improving Outcomes for Adults with HIV/AIDS and Substance Abuse:

In 2010, the Joint Institute for Translational and Clinical Research was launched to foster collaborations between Michigan Medicine and Peking University Health Sciences Center (PUHSC). Last year, **Drs. Frederic Blow** and **Mark Ilgen** received notification of selection for an award from the Joint Institute for the first project to focus on mental health. This research will build on the shared expertise in both institutions on drug and alcohol research and will examine new strategies to improve treatment outcomes for adults with HIV/AIDS, substance use and chronic pain. The new project has the dual goals of generating novel pilot data on intervention strategies for HIV/AIDS patients with substance use disorders and pain in both countries while also developing an infrastructure to support future collaborations between the University of Michigan Addiction Center and PUHSC on addiction-related research.

Dr. Michelle Riba Leads SmartHealth Consult GHANA

The Department of Psychiatry is working with Dr. Gordon Donnir, head of the Department at Komfo Anokye Teaching Hospital, to set up a partnership in Ghana regarding mental health, building on the relationship forged by OB/GYN and Family Medicine here at the University of Michigan. Dr. Donnir visited Michigan in June of 2016 and while in town, he met with several faculty across the University and toured both the adult and pediatric inpatient facilities and the Rachel Upjohn Building. Dr. Donnir leads SmartHealth Consult Ghana. SmartHealth is a psychological and behavioral risk management consultancy that provides holistic approach to mental health issues affecting working class professionals and other individuals who may seek services. **Dr. Michelle Riba** is leading our team in this collaboration. Drs. Sammy Ohene and Jacob Plange-Rhule of The Ghana College of Physicians and Surgeons are also key collaborations in this endeavor.

The Nyman Family Unit for Child and Adolescent Mental Health and Wellness

On April 4, 2016, the Nyman Family Unit for Child and Adolescent Mental Health and Wellness opened its doors to receive young patients through the age of 17. This 16,000 square foot unit which is part of C.S. Mott Children's Hospital has been providing state-of-the-art inpatient treatment for children and adolescents suffering from psychiatric illness since opening. The unit includes 16 beds (12 of which are private), views of U-M's Nichols Arboretum, a sensory room, a Michigan-themed gym, and numerous calming spaces for both group sessions and for private family sessions.

Until recently, the pediatric inpatient psychiatry unit was located in the former Mott hospital facility, now the University Hospital South. The new unit's close proximity to Mott's full cohort of pediatric medical staff will allow more medically acute patients — those recovering from self-injury or a serious eating disorder, for example — to receive seamless, coordinated treatment.

Patients admitted medically and recommended to be transferred to an inpatient unit won't have to move far, which immediately feels less stigmatizing than being taken to an entirely different area of the hospital, says Bernard "Ben" Biermann, M.D., Ph.D., child and adolescent psychiatry inpatient director and clinical assistant professor of psychiatry.

"This unit represents a very deep commitment to creating a place that really, truly meets the needs of these children," said Sheila Marcus (M.D. 1983, Residency 1988, Fellowship 1991), clinical professor and director of the Child and Adolescent Psychiatry Section.



In Memoriam

Kenneth Silk, M.D.

This past April our department lost a beloved colleague, mentor and friend to so many, Dr. Kenneth Silk. Dr. Silk began his University of Michigan career in 1975 as an instructor at the Ann Arbor VA Hospital. He transitioned to working within the Department of Psychiatry in the early 90s, where he held various posts and garnered many accolades and awards until he retired in 2014. Notably, Ken created the Personality Disorders team at Michigan's Ambulatory Care Clinic to specialize in the care of patients with moderate to severe personality disorders, Ken's specialty. Ken's work impacted many — undergraduate and graduate students, medical students, nurses, community and U-M patients, faculty, staff and their families. Ken will be remembered both locally and internationally as an outstanding clinician, scholar and expert in the treatment of patients with Borderline Personality Disorder.



His family has established an annual lectureship, honoring his memory. The inaugural Kenneth R. Silk Lecture will take place on October 18, 2017 at the Rachel Upjohn Building in Ann Arbor. Dr. John Gunderson will be leading a department-wide workshop titled, "Good Psychiatric Management of Borderline Personality Disorder." Stay tuned for more details.

Message from Department Chair, Dr. Gregory Dalack:

"Ken's impact as faculty member, clinician, researcher, educator and administrator over decades at Michigan has been immense. He has touched so many of us and so many lives of patients, residents, students of all kinds. He was a leader in the Michigan Psychiatric Society and American Psychiatric Association, and internationally known for his expertise in our understanding and treatment of personality disorders. His smile and sense of humor were the extra seasoning he brought to every encounter, lightening the mood as he enlightened us. He will be sorely missed."

Stan Berent, Ph.D.

On March 10, 2017 at 3:30 pm (remarks at 4:00 pm) The Neuropsychology Program in the Department of Psychiatry will be dedicating their conference room in memory of Stanley Berent, Ph.D., who passed away in 2015. Dr. Berent completed his Ph.D. at Rutgers, under Albert Silverman, M.D., a past Chair of Psychiatry. Dr. Berent started his career at the University of Virginia before coming to Michigan in 1979. He founded Neuropsychology Programs at both medical centers. At Michigan, he developed exceptional and wide ranging neuropsychological research and clinical programs and one of the strongest centers for postdoctoral training in the country. Dr. Berent served on multiple university and national committees including Chair of U-M Senate Assembly. The Neuropsychology Program is located at 2101 Commonwealth, Suite C, Ann Arbor MI 48105 and RSVP's can be sent to sjaustin@umich.edu.

Melvin Guyer, Ph.D., J.D.

In 2016, we also marked the passing of Dr. Mel Guyer. Dr. Guyer will be remembered for his scholarly contributions over many years, and especially for his role as teacher, scholar and mentor in the Forensic Psychiatry Fellowship program.

Sampling of High Impact Articles

The work of our faculty is high impact in many ways. Here we highlight three examples from 2016:

Shelly Flagel, Ph.D., and collaborators had a study published in the **Proceedings of the National Academy of Sciences** in April titled, "Genetic background and epigenetic modifications in the core of the nucleus accumbens predict addiction-like behavior in a rat model." The study found that differences in vulnerability to cocaine addiction and relapse are linked to both inherited traits and epigenetics.

Research conducted by Chandra Sripada, M.D., Ph.D., and his group found that imaging done to measure development of a child's brain networks may help to identify early signs of attention difficulties and, potentially, attention deficit hyperactivity disorder. This research, titled, "Growth Charting of Brain Connectivity Networks and the Identification of Attention Impairment in Youth" appeared in the May issue of **JAMA Psychiatry**.

The **WeCareAdvisor** was included in the **2016 National Alzheimer's Plan Act (NAPA)** update, which is put together by the U.S. Department of Health and Human Services. It was included in the section dedicated to "Enable Family Caregivers to Continue to Provide Care while Maintaining Their Own Health and Well-Being." WeCareAdvisor was developed by Helen Kales, M.D., who Directs the Program for Positive Aging.

Faculty BRIEFS



Frederic C. Blow, Ph.D.

Frederic C. Blow, Ph.D., joined the faculty in 1986. He is Professor and Director of the Addiction Center in the Department of Psychiatry, and Research Scientist at the Department of Veterans Affairs Center for Clinical Management Research at the Ann Arbor VA Healthcare System. Additionally, since 2001 he has been the first National

Huss/Hazelden Endowed Research Chair for Substance Abuse in Older Adults at the Butler Center for Research at the Hazelden Betty Ford Foundation. He is a career researcher and educator in the field of alcohol and substance use screening, interventions, and treatments. His areas of research expertise include alcohol and drug brief interventions in healthcare settings, eHealth interventions, substance abuse prevention, substance abuse screening and diagnosis for older adults, serious mental illness and concurrent substance abuse, mental health services research, and implementation of evidence-based substance abuse and mental health practices.

Dr. Blow has been the principal investigator on numerous federal, state and foundation grants, has published over 350 papers and chapters, and several books. He has had continuous funding from the NIAAA since 1988, and extensive funding from NIDA, VA, NIMH, and the Department of Defense during the same period. Dr. Blow has led several federally-funded international and US training grants focused on substance misuse and abuse. The large body of his work has been directed to providing the research base and training scholars and clinicians alike. He has received a number of awards in recognition of his accomplishments, including the Annual Clinical and Health Services Research Award and the League of Research Excellence Award, both from the University of Michigan Medical School, and the Distinguished Mentor Award from the University of Michigan Center for Health Research.



Mary Heitzeg, Ph.D.

Mary Heitzeg, Ph.D., joined the U-M faculty in 2004. She is Associate Professor of Psychiatry and also serves as Adjunct Associate Professor of Psychology with the College of LS&A. Dr. Heitzeg has been conducting research on brain development in children, adolescents and young adults for

more than 10 years. Her research is focused on understanding the relationship between brain functioning and mental health and how it changes from childhood to early adulthood.

Dr. Heitzeg has recently been leading a new initiative being funded by the NIH, called the Adolescent Brain Cognitive Development Study (ABCD). The University of Michigan is one of 21 sites across the nation participating in this landmark study. The ABCD study is following approximately 10,000 children beginning

at ages nine to ten, before they initiate drug use, through the period of highest risk for substance use and other mental health disorders. Scientists across the nation are tracking exposure to substances (including nicotine, alcohol, and marijuana), academic achievement, cognitive skills, mental health, and brain structure and function using advanced research methods. The goal of the study is to better understand how the brain develops and matures over time. The team will identify contextual factors (such as family dynamics, social supports, peer influences and neighborhood characteristics) that impact these relationships to shape healthy or unhealthy outcomes.



Nasuh Malas, M.D., M.P.H.

Nasuh Malas M.D., M.P.H., joined the U-M faculty in August 2014 and is currently Assistant Professor in the Division of Child and Adolescent Psychiatry. Dr. Malas is the Director of the Pediatric Consultation-Liaison Psychiatry at C.S. Mott Children's Hospital. He also serves as faculty for the Michigan Child Collaborative Care (MC3) Program,

providing telepsychiatry and education to primary care providers throughout the state of Michigan. Prior to joining as faculty at the U-M, Dr. Malas completed medical school at the University of Wisconsin-Madison. During this time, he also completed a Masters in Public Health and a certificate program in the Maternal Child Health Leadership in Neurodevelopmental Disabilities Program. During his first year as faculty, Dr. Malas also obtained international training as a Motivational Interviewing Network Trainer (MINT) in 2014.

Since joining as faculty, Dr. Malas has been active in growing clinical care, collaboration, and scholarship at the interface of pediatric medicine and psychiatry. Dr. Malas has been involved in education across both pediatric medicine and psychiatry and has been a leader in wellness education in the pediatric residency program. He has mentored several trainees in projects focusing on pediatric delirium screening and management, residency training in motivational interviewing, debriefing after negative outcomes, and reducing stigma and barriers to psychiatric care in medical settings.

Based on his experience and expertise, Dr. Malas has taking a more active role in clinical guidelines in pediatric delirium, somatization, and agitation/aggression at a national level. Dr. Malas currently serves on several national groups including the Physically Ill Child Committee, Emergency Psychiatry Subcommittee, and Pathways in Clinical Care Workgroup through the American Academy of Child and Adolescent Psychiatry.

Trainee PROFILES



Lauren Gerlach, PGY-6
Western University of Health Sciences
(2011)

Why did you choose Michigan?

Many factors drew me to Michigan, but ultimately, after my interview it was a visceral sense that this is where I wanted to be.

I realized the people I met here were kind, supportive, and accessible. As I knew I was eventually interested in pursuing geriatric psychiatry, the strength of the fellowship program as well as an aligned research interest and mentorship with Dr. Kales were all big parts of my decision. If I needed anything else to “seal the deal”, even my grandfather (a lifelong Buckeye fan who completed all of his medical training at Ohio State) admitted this program was the best. Six years later, I know I have made the right decision.

What is your current focus?

I am currently in my second year of a combined research and clinical fellowship in geriatric psychiatry. My clinical time is currently spent between an outpatient continuity clinic and the inpatient consultation service at the VA. My research is focused on health services generally looking at trends in psychotropic medication use among older adults, treatment adherence in later life depression, and unintended consequences of FDA drug safety warnings.

Has anyone or anything in particular inspired you?

I believe “people make the place” and the greatest part of Michigan for me has been the people. I have been fortunate to have many clinical, research, and teaching mentors throughout my training. There have been countless attendings, social workers, psychologists, and nurses who have all contributed to my education, inspired me, and helped me to become a better psychiatrist. During the past two years of fellowship the entire geriatric psychiatry section and Program for Positive Aging have been incredibly supportive, encouraging, and motivating. You truly feel that people are rooting for you here and invested in your success.

What is most rewarding about your work?

We have a special privilege caring for individuals and their families often during the most difficult times in their lives. In geriatrics I find the wisdom, the life story, and the resiliency shown by patients and their families to be inspiring.

What have you learned that has surprised you?

Moving here from Los Angeles I truthfully did not anticipate just how much I would enjoy living in Michigan. Ann Arbor really is a special place that balances most of what you want from a city while still maintaining small town charm.

What future direction do you see for your career?

As I finish my fellowship training I plan to continue a career in academic geriatric psychiatry focused on health services research, resident and medical student education, and care of older adults in the outpatient and consultative setting.



Lisa Tseggay, PGY-1
Baylor College of Medicine
(2016)

Why did you choose Michigan?

Michigan is far from my hometown in Texas. But, I was drawn to the program by the quaintness of Ann Arbor, the friendliness and confidence of the residents, and the

impressive reputation of the program. I was also excited by the 6-month psychotherapy mentorships.

What is your current focus?

As an intern, my current focus is to build my knowledge base in psychiatry. I've been able to do this through an abundance of clinical experiences with a diverse patient population displaying a wide range of psychopathology.

Has anyone or anything in particular inspired you?

My father has inspired me. He too is a physician and he completed part of his training in a country where he did not know the language, yet he ended up at the top of his class. His perseverance and work ethic throughout his medical training, even with two young children in tow, motivates me every day of residency.

What is most rewarding about your work?

The doctor-patient relationship is particularly sacred in psychiatry. The opportunity to learn about my patients in a way that other clinicians might not and the chance to help them to become functional in their day-to-day lives is something that I have found quite rewarding.

What have you learned that has surprised you?

The residency program is very responsive to the needs of its residents. This is something that is often advertised on interviews. But, here at Michigan, they really carry it out! We meet with a class adviser once a month to discuss how things are going on rotations and bring up any concerns. Changes are made quickly and our education improves significantly as a result!

What future direction do you see for your career?

I am undecided. However, I am considering pursuing a child and adolescent psychiatry fellowship so that I will have the chance to work with both children and adults as well as their families.

Thank you to Dinah Ross for nearly 50 years of service!

Dinah began her career in the Department of Psychiatry in 1968. We are fortunate that she stayed with us ever since, rising to the position of Faculty Affairs and Talent Manager. Among her many roles, she has been the administrative lead for our Departmental Appointment and Promotions Committee, overseen the massive process of selecting and credentialing new faculty, coordinated the faculty promotion process, and been one of our main points of contact with the Dean's office. For faculty joining the department or transitioning out to new adventures, she has been the cheerful, attentive face of Michigan Psychiatry, and for all of us, an integral member of the Department.

Alumni PROFILE

Dr. Monica Starkman: *clinician, researcher, and novelist*

Dr. Monica Starkman is a proud alumna of the University of Michigan Medical School, class of 1963, and the University of Michigan Department of Psychiatry residency program which she completed in 1972. For many decades Dr. Starkman pursued her primary passions, with a long and fulfilling career of NIH-funded research; clinical activities as the founding director of the Psychiatry Program in Consultation-Liaison Psychiatry, and teaching. She is now an Associate Professor of Psychiatry, active emerita, and member of the Depression Center at U-M. She also just published her first novel, titled, "The End of Miracles." We sat down with her to catch up.

Dr. Starkman, tell us about your upbringing and how you decided to go into psychiatry.

I was born and raised in Manhattan. My parents were both from Eastern Europe. Yiddish was my first language, I learned English on the streets. My father was a scholar of Yiddish literature. He was a journalist, an essayist, and a lecturer. He had a wonderful library filled with many English books. One of these books was "The Interpretation of Dreams" by Sigmund Freud which I read as a teenager and found to be fascinating.

I went to excellent public schools in New York City. I had a wonderful junior high school science teacher, and she inspired my interest in science. I went on to graduate from the Bronx High School of Science in 1955. My high school had a unique environment for the time: boys and girls were treated equally as potential scientists. From there, I went on to major in biology at Brandeis University.

During the summers I worked at Mount Sinai back in New York as a technician in the thyroid diagnostic and treatment center. Part of my job was to obtain data about patients coming the next day by looking through their charts on the medical units and bringing back specific information. Reviewing charts was my favorite part of the job. After some time, the head physician of the unit talked to me about going to medical school, and I was shocked. I thought I was heading for a job as a technician in a research lab, and never imagined such a career path for myself.

As I thought about it more, I went ahead and applied to medical school and was accepted at New York University. When I married after my first year there, I transferred to the University of Michigan. At each school, only eight percent of the class was female.

I then completed a rotating internship at Saint Joseph's Hospital in Ann Arbor, and was the only woman among that year's group of interns. During this internship we rotated through the emergency room, OB/GYN, medicine, and more. I remember being accosted by the chief resident the morning I started surgery with the



warning: "You'll have to stand for five hours in the OR, and if you can't do that, you should say so right now." By the end of the rotation, he was assigning me to close up the incisions.

After my internship I became interested in human genetics and completed a two year fellowship in that field. At this point I realized that I needed to train in a clinical specialty. Psychiatry was on the cusp of adding an intriguing biological component, and was especially appealing.

What did you focus on during residency?

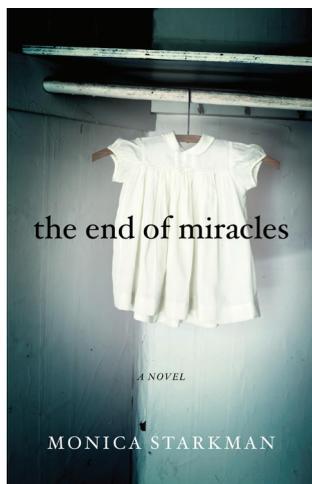
During residency, the department brought in the famed Dr. Herbert Spiegel to teach us hypnosis. Afterwards, another resident and I did an experiment: he ran an EEG machine while I self-hypnotized myself. The striking EEG changes seen during the trance state were an excellent demonstration of how psychological experiences translate into biology. This theme became my career interest: studying the mind-body relationship.

Tell me about your research career.

The Labor Room: Much of the research I did was based on clinical work. For example, I completed a study on women's psychological reactions to the new technology of fetal monitoring occurring in the labor room. It turned a peak experience of women into being in an intensive-care-like setting, with attached belts and equipment emitting constant beeping sounds.

Norepinephrine/epinephrine: Patients with panic attacks have physical symptoms that are similar to those of patients with a pheochromocytoma, a usually-benign tumor that intermittently secretes too much of these hormones. At the time, a required part of the workup of panic attack patients was checking these hormone concentrations to rule out this other condition. I compared patients with panic attacks to patients with pheochromocytomas, obtaining hormone levels and their specific symptoms during an attack to determine if certain symptoms might differentiate between the two conditions. (We found headaches rare in panic attacks but frequent with phoe secretory episodes.)

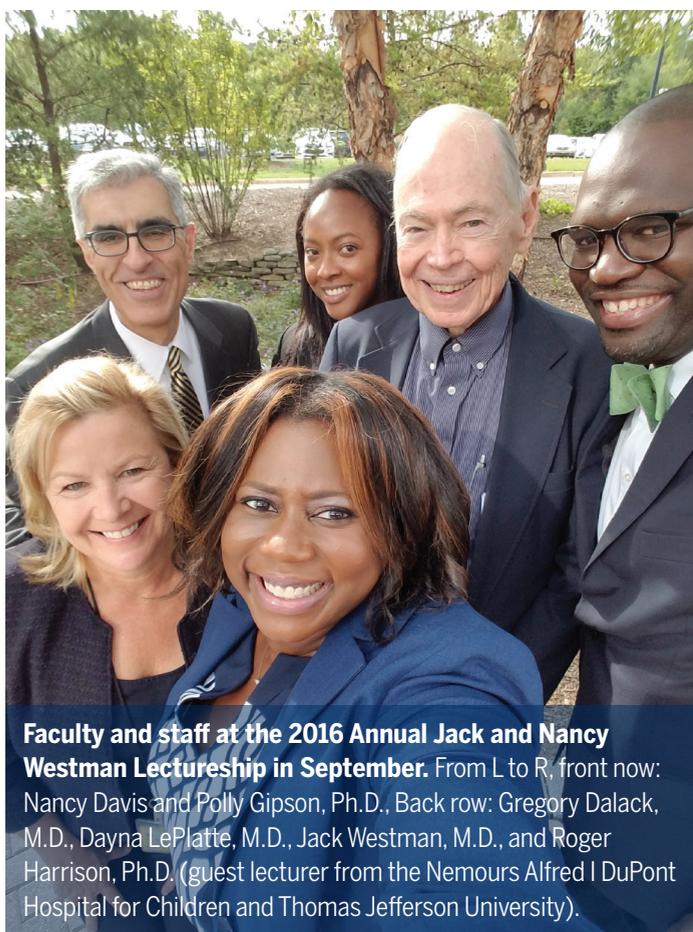
Cortisol: People who are seriously depressed have disruptions of cortisol concentrations and rhythms. I studied this from the other direction, examining whether elevated cortisol concentrations and disruptions in its circadian rhythm could elicit the depressive syndrome. I studied patients with Cushings Disease, who have chronic exposure to high cortisol concentration for several years prior to diagnosis. Most of them did develop a full depressive syndrome. With RO1 funding from the NIH, I expanded these studies to include structural and functional MRI's both before and after the treatment brought the hormones back to normal collaborations: early on, I realized that I would need to put together a multidisciplinary group of researchers to do these studies, since no one person can master all the techniques needed. Fortunately, our Department of Psychiatry and the University of Michigan had superb people who responded with interest and creativity and became valued and inspiring collaborators. In our department, I partnered with Drs. Bruno Giordani and Stan Berent for the neuropsychological components, Dr. Jim Shipley on sleep studies, and Dr. Scott Langenecker on MRI studies. For the pho/panic studies, colleagues were Drs. Ollie Cameron and Randy Nesse. Lucky me to have such collaborators!



Tell us about your first novel, "The End of Miracles."

I always wanted to bring my love of the arts and science together. From an early age I had studied music, music theory, and composition at the Juilliard Conservatory on weekends. But it is my novel that interweaves my medical and artistic interests. The story was sparked by consultations/therapy I did with two women with false pregnancies (pseudocyesis). Inpatient scenes reflect my experiences on our units as a resident, and chapters involving outpatient therapy reflect our work as clinicians. Over the decades I worked on the book when time permitted, studying novels by excellent authors

to see how they solved the problems I was running up against as I wrote. Happily, the novel is being highly praised by both reviewers and readers. It is also an International Book Awards 2016 Finalist in literary fiction. More information about the novel can be found online at Amazon: The End of Miracles.



Faculty and staff at the 2016 Annual Jack and Nancy Westman Lectureship in September. From L to R, front now: Nancy Davis and Polly Gipson, Ph.D., Back row: Gregory Dalack, M.D., Dayna LePlatte, M.D., Jack Westman, M.D., and Roger Harrison, Ph.D. (guest lecturer from the Nemours Alfred I DuPont Hospital for Children and Thomas Jefferson University).



SAVE the Date!

MAY 10

25th Annual Albert Barrett Neuroscience Lecture
with David Van Essen, Ph.D.
Washington University in St. Louis

MAY 31

28th Annual Albert J. Silverman Research Conference
with Paul Holtzheimer, M.D.
Dartmouth Hitchcock Medical Center

SEPTEMBER 27

4th Annual Jack and Nancy Westman Lectureship in Family and Community Psychiatry
with Guy Diamond, Ph.D.
Drexel University



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