

2016 FALL NEWSLETTER

INSIDE THIS ISSUE:

<i>Research Study Underway</i>	2
<i>Building Hope series 2016-17</i>	2
<i>Measurement-enhanced Care Works</i>	3
<i>Anti-Suicide Campaign</i>	3
<i>NNDC Annual Meeting</i>	4
<i>Depression Center Associate Director Appointed</i>	4

“There is a growing recognition that medicine should encompass not only treatment of symptoms, but also promotion of well-being.”
 ...Dilip V. Jeste, MD

Conference Registration:
<http://bit.ly/16depression>
 UofL Physicians, Nurses, Residents, Students: Free;
 Non UofL Healthcare professionals: \$100

TENTH ANNUAL UOFL DEPRESSION CENTER CONFERENCE: EXPANDING HORIZONS FOR TREATMENT OF MENTAL DISORDERS

DEPRESSION CENTER ANNUAL CONFERENCE TO FEATURE TALKS ON MINDFULNESS AND POSITIVE PSYCHIATRY

The annual conference of the University of Louisville Depression Center is the major CME activity in mental health in this region. This year, we are very fortunate to have recruited a stellar group of speakers, including one of the world’s top experts on mindfulness-based treatments for mental disorders and a leading authority on successful aging and positive psychiatry.

Dr. Willem Kuyken, Director of the University of Oxford Mindfulness Center, will lead off the 2016 conference with a public presentation, Wednesday, October 19, that will help laypersons and clinicians learn about the powerful methods of mindfulness-based cognitive therapy. On Friday, October 21st, the Professional Conference will feature talks and interactive sessions by Dr. Kuyken and Dr. Dilip Jeste, a past-president of the American Psychiatric Association and renowned geropsychiatrist, as well as a diverse program of lectures, workshops, and discussion groups.



Dr. Jeste, Senior Associate Dean at the University of San Diego Medical School, is the director of two institutes focused on aging (Stein Institute for Research on Aging and Hartford Center for Excellence in Geriatric Psychiatry.)



Friday, 10/21/16, Professional Conference, 8 am-4:30 pm

Keynotes:

“Bipolar Disorder in the Life Cycle: Dilemmas and Opportunities”

- Jennifer Le, MD,*, Jesse H. Wright, MD, PhD*

“Mindfulness-based Cognitive Therapy for Depression Across the Lifespan”

- Dr. Kuyken

“Positive Psychiatry: Its Time has Come”

- Dr. Jeste

Workshops:

“Schizophrenia and Aging: Surprises and Paradoxes”

- Dr. Jeste

“Mental Health Needs of LGBTQ Youth”

- Emma Sterrett, PhD*

“Saving Lives: Evidence-based Treatment for Reducing Suicide Risk”

- Stephen O’Connor, PhD*

“Compassion”

- Dr. Kuyken

“CBT & Pharmacotherapy for Psychosis: A Combined Approach”

- Catherine Batscha, DNP, RN*

“Concussed? Understanding Head Injuries & Their Aftermath in Children & Adolescents”

- Chris Peters, MD*

* Drs. Le, Wright, Sterrett, O’Connor, Batscha, and Peters are University of Louisville faculty members

U OF L DEPRESSION CENTER

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Alice Tasman

Allan Tasman

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Jim Williamson

LINKS TO LOCAL MENTAL HEALTH ORGANIZATIONS

National Suicide Prevention Lifeline
1-800-273-8255—visit
www.suicidepreventionlifeline.org

American Foundation for Suicide Prevention (AFSP) - visit www.afsp.org
for Louisville local chapter

Depression and Bipolar Support Alliance (DBSA) - visit
www.DBSALouisville.org

National Association for Mental Illness-Louisville—visit
www.namilouisville.org

Mental Health America of Kentucky—visit www.mhaky.org

NEW RESEARCH STUDY IN PRIMARY CARE IS UNDERWAY

Could technology help more primary care patients get the help they need for depression? A new study funded by the National Institute of Health is trying to answer this question. Researchers from the UofL Depression Center are studying the effectiveness of computer-assisted cognitive-behavior therapy in primary care patients with depression. The study is led by Dr. Jesse Wright, Director of the UofL Depression Center, who helped develop the computerized treatment program used in the research.

Previous research by Dr. Wright and his associates at the UofL and other universities has shown that computer-assisted cognitive-behavior therapy (CCBT) is just as effective as standard cognitive-behavior therapy (CBT) despite reducing time with a therapist by up to two thirds. The goals of CCBT are to make therapy more efficient (reduce reliance on long visits to a therapist), lower the cost of treatment, and provide broader access to effective therapy. Earlier research that demonstrated effectiveness of CCBT was done in mental health settings.

The new study marks an important advance in CCBT research. Primary care patients from three clinics (two urban and one rural) associated with the Department of Family and Geriatric Medicine at the UofL are randomly assigned to receive CCBT or treatment as usual. The CCBT program includes use of a computer program (*Good Days Ahead*) specifically designed for treatment of depression in addition to weekly phone calls (for 12 weeks) from a therapy coach. The coach helps the patient apply cognitive-behavior therapy skills in everyday life.

This research is an example of collaborations that are promoted by the UofL Depression Center. Coinvestigators include Drs. Becky Antle and Lesley Harris from the Kent School of Social Work, Jason Wells and Renee Girdler



from the Department of Family and Geriatric Medicine, and Tracy Eells from the Department of Psychiatry and Behavioral Sciences.



BUILDING HOPE 2016-17 SERIES:

October 19, 2016
"Mindfulness Unpacked"
- Willem Kuyken, PhD
(The Clifton Center, 6 p.m.)

November 15, 2016
"Transcending Trauma: Healing After Traumatic Life Events"
- Stephen O'Connor, PhD
(Second Presbyterian Church, 7 p.m.)

January 17, 2017
"Coping with Anxiety in Today's World"
- Jesse Wright, MD, PhD, and
Cathy Batscha, DNP, RN
(Second Presbyterian Church, 7 p.m.)

February 21, 2017
"Addiction and Its Effect on Families"
- Erika Ruth, MD
(Second Presbyterian Church, 7 p.m.)

March 14, 2017
"Understanding Grief"
- David Casey, MD, and
Zachary Sager, MD
(Second Presbyterian Church, 7 p.m.)

April 18, 2017
"Helping a Child with Depression"
- Chris Peters, MD
(Second Presbyterian Church, 7 p.m.)

* Drs. Le, Wright, Sterrett, O'Connor, Batscha, and Peters are UofL faculty members

WORKING TO REDUCE THE SUICIDE RATE IN LOUISVILLE

UofL Depression Center members Stephen O'Connor and Jesse Wright are part of the Humana-sponsored **Bold Goals Against Suicide** workgroup that aims to reduce the rate of suicide in Louisville. The first ever **Bold Goals Against Suicide Summit will be held at Spalding University on November 9 and 10** and will kick-start efforts to dramatically improve implementation of suicide prevention strategies throughout the city. The intent of the Summit is to bring together a variety of stakeholders who impact health care delivery throughout Louisville. November 9 is the major day for policy discussion and learning about the vision of the Bold Goals Against Suicide effort. The first speaker will be Becky Stoll, LCSW, Vice-President of Crisis and Disaster Management at Centerstone and a champion of the Zero Suicide in Health and Behavioral Health Care initiative. Given the recent affiliation between Centerstone and Seven Counties, Becky is a natural fit to speak to the audience of policy makers, administrators, clinicians, and others who will be in attendance at the summit. The second speaker is Kevin Hines, who is a suicide prevention and mental health advocate, storytell-

er, and filmmaker. Kevin has a remarkable gift for communicating an honest and brave message about his own experience as a suicide attempt survivor, having survived a jump from the Golden Gate Bridge, featured in the documentary, *The Bridge*.

In the afternoon of November 9, Becky Stoll, Kevin Hines, Kelly Gannon, MBA, LCSW, (Seven Counties Chief Operating Officer), and Dr. O'Connor will each provide training in an aspect of the Zero Suicide in Health and Behavioral Health Care initiative. Dr. O'Connor's focus will be on the implementation of screening and assessment approaches for suicide prevention that can be applied in a variety of real-world clinical settings. November 10 will consist of an all-day training in Mental Health First Aid, which is a set of skills in mental health management

that can be applied with relative ease and provides a foundation for employees to support the zero suicide efforts within their organizations.

At UofL, Drs. O'Connor and Wright are working with other faculty in the Department of Psychiatry and Behavioral Sciences to begin implementing many of the clinical practices included in the Zero Suicide in Health and Behavioral Health initiative. UofL faculty interact with patients in a variety of settings; our goal is to standardize the use of empirically-supported approaches to screening, assessment, and intervention while utilizing the talent and experience of the clinicians working in each unique setting. By raising the standard of care for suicide prevention across our medical campus, we will help contribute to the larger Bold Goals Against Suicide efforts, as well as meet the raised expectations for suicide prevention recently mandated by The Joint Commission.

<https://www.eventbrite.com/e/bold-moves-against-suicide-summit-tickets-27340560352>

MEASUREMENT-ENHANCED CARE WORKS

Evidence continues to mount that measurement-enhanced care improves outcome of treatment of depression. A study from Beijing, China found that measurement-enhanced care more than doubled the rate of remission. And a recent review by Dr. John Fortney and associates in the journal *Psychiatric Services* concluded that measurement-enhanced care leads to robust improvements beyond those achieved with routine care for depression.

What is measurement-enhanced care? The key elements of measurement-enhanced care are: 1) use of standard self-rating scales at each clinic visit; 2) results of the rating scales are provided to clinicians and patients at each session; 3) results are used to make decisions on treatment. Although the three steps in measurement-enhanced care are straight-forward, they are not taken in most clinical settings. Many reasons for not using measurement-enhanced care have been given: "It would take too much time....We don't have the system to get the ratings done....It wouldn't make a difference, so why go to the effort."

Now that research has debunked the myth that measurement-enhanced care isn't worth the effort, the UofL De-



pression Center taking action to adopt this form of care as standard practice. Supported by a gift from an anonymous donor, the UofL Depression Center is partnering with the National Network of Depression Centers (NNDC) to establish a digital system for patients to complete four standard rating scales (measuring depression, anxiety, manic symptoms, and suicidal thinking) on iPads prior to each clinic visit. The results are immediately available to clinicians and patients at the start of the treatment session.

Experiences with measurement-enhanced care at the UofL Depression Center have been highly favorable. Typically clinicians and patients view the symptom ratings at the beginning of each session. If good progress has been made, the treatment plan is probably on target. But if progress is stalled or other concerns are revealed, problems are addressed so the patient can get on a positive track to recovery.

The NNDC sponsored measurement-enhanced care initiative has over 2,500 patients enrolled to date. Over the next two years, the goal is to have at least 20,000 patients in the USA benefitting from this measurement-enhanced care system. As an early adopter of measurement-enhanced care, the UofL Depression Centers is helping lead the way in improving treatment for mood disorders.

UofL Depression Center

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Follow Dr. Wright on Twitter
@jesswrightmd
and get the latest tips on
mental health and wellness



GIVING TO THE DEPRESSION CENTER

Making a tax-deductible gift
to the UofL Depression Cen-
ter is easy.

You may mail your donation
to 401 E. Chestnut Street
Ste. 610

Louisville KY 40202

Or go online to

www.louisville.edu/giving



The University of Louisville Depression Center provides an interdisciplinary, multi-faceted approach to depression treatment through clinical services, research, and community and professional education. And through its involvement with the National Network of Depression Centers, the UofL Depression Center is part of a comprehensive and far-reaching effort to develop newer and more effective therapies. Together we are building the knowledge to improve the treatment of depression, bipolar illness, and related problems.

.....Building Hope!



DR. STEPHEN O'CONNOR APPOINTED ASSOCIATE DIRECTOR OF DEPRESSION CENTER



Stephen O'Connor, Ph.D., a nationally recognized expert in the identification, assessment, and treatment of suicidal individuals has been appointed Associate Director of the UofL Depression Center. After receiving his doctoral degree from the Catholic University of America, he completed his training with an internship and fellowship at the University of Washington in Seattle. Over the past 15 years, he has worked with the creators of two evidence-based treatments for suicidal individuals – Marsha Linehan, who developed Dialectical Behavior Therapy, and David Jobes, developer of the Collaborative Assessment and Management of Suicidality. Dr. O'Connor is leading the UofL Depression Center's initiatives on suicide risk reduction. His research is funded by the American Foundation for Suicide Prevention. Dr. O'Connor finds any excuse to be outside, with a special appreciation for the rock climbing and hiking in the Red River Gorge.

NEWS FROM THE NATIONAL NETWORK OF DEPRESSION CENTERS ANNUAL MEETING

The National Network of Depression Centers (NNDC) Annual Meeting, held in Denver on September 12-14, brought together clinicians and researchers to learn about cutting edge treatments that have potential for improving the course of mood disorders. The University of Louisville is a founding member of the NNDC.



The UofL was represented by David A. Casey, M.D., Allan Tasman, M.D., Jesse H. Wright, M.D., Ph.D., and Stephen S. O'Connor, Ph.D. Drs. Tasman and Wright serve on the Board of Directors, and Dr. Tasman is the Treasurer of the NNDC. Dr. Wright presented on "Computer-assisted Cognitive-Behavior Therapy for Depression: Progress and Opportunities," and three scientific posters were displayed by the Louisville group.

This year's meeting focused on technological advances in mental health care, improving depression treatment in primary care, and novel designs in research. Collaboration among the members of the NNDC is fostering large-scale research and clinical enhancement throughout the USA.

<http://www.nndc.org>