UNIVERSITY OF LOUISVILLE
CONTINUING MEDICAL EDUCATION & PROFESSIONAL DEVELOPMENT

Progress in the Treatment of Mental Disorders
11/5/2021

This activity was created to address the professional practice gaps listed below:

• Utilizing advanced knowledge of alternatives and/or newer treatment strategies for patients with severe or treatment resistant depression.

• Recognizing detailed use of evidence-based treatments for PTSD.

• Receiving skills in combining psychotherapy, nutritional interventions, and other needed therapies in treatment of eating disorder

• Using current treatment strategies when in working with youth who have been impacted by the pandemic.

• Recognizing research and clinical recommendations for evidence-based treatment of patients with substance use disorders.

• Utilizing case formulations to develop treatment strategies for mental disorders.

1. Please respond regarding how much you agree or disagree that the gaps listed above were addressed.

	Disagree			Agree
Participating in this educational activity changed your KNOWLEDGE in the professional practice gaps listed above. [38-3.76]	(0)	(1) 2.63%	(7) 18.42%	(30) 78.95%
Participating in this educational activity changed your COMPETENCE in the professional practice gaps listed above. [38-3.55]	(0)	(2) 5.26%	(13) 34.21%	(23) 60.53%
Do you feel participating in this educational activity will change your PERFORMANCE in the professional practice gaps listed above? [38-3.55]	(0)	(2) 5.26%	(13) 34.21%	(23) 60.53%

2. Please elaborate on your previous answers. (25)

While this is great information and has increased my knowledge base, it will be more difficult to change my performance in my setting.

increased understanding of the mechanics of providing prolonged exposure to PTSD patients

thinking about new approaches for both treatment resistant depression and for PTSD

The final 3 goals listed were not addressed at all, or if addressed, were addressed only fleetingly

I learned a great deal about virtual reality as a treatment method

Fantastic conference with focus on PTSD, Eating Disorders, and complicated medication management

I learned a lot today.

I UNDERSTAND MUCH MORE ABOUT PE IN TREATING PTSD. I LEARNED MORE ABOUT TREATMENT OF EATING DISORDERS.

comprehensive update for several mental health issues

I learned a great deal about use of virtual reality in the treatment of PTSD

Excellent presentations. Relevant to clinical practice.

Viewing PTSD as a disorder of avoidance. Reviewing recent research on the effectiveness of Prolonged Exposure Therapy, and Network informed personalized treatment of eating disorders.

I was trained in CPT back in 2007, PE 2015 and this PE presentation was a great refresher

More informative for outpatient practice rather than hospital work.

With my patients, the last year has brought past trauma to the surface, and I found the presentations very informative, and inspiring to study further!

Work in Community Mental Health. All three presentations are pertinent info for providing care.

I learned more effective ways to understand and treat my patients with PTSD

The lectures were very detail oriented and full of knowledge and in my opinion, were based upon evidence based medicine

Great information, presenters could be a little more engaging.

PTSD and Eating D/o presentations were informative. Psychopharmacology presentation went from general principals to just rapid fire naming of meds, which was not very informative.

I now know where to refer eating disorders in the area.

great training!!!

It was helpful to learn more about exposure therapy and EMDR.

helped understand the evidence behind various medication combinations for depressions

Learned great deal about virtual reality therapy for PTSD

3. Please evaluate the effectiveness of the following speakers in improving your knowledge, competence and/or performance. (Poor = 1, Excellent = 4)

	Poor	Fair	Good	Excellent
Maurizio Fava, M.D. [38-3.18]	(2) 5.26%	(5) 13.16%	(15) 39.47%	(16) 42.11%
Cheri A. Levinson, Ph.D. [38-3.79]	(0)	(0)	(8) 21.05%	(30) 78.95%
Barbara O. Rothbaum, Ph.D. [38-3.89]	(0)	(0)	(4) 10.53%	(34) 89.47%

4. Please elaborate on your previous answers. (25)

Very knowledgeable speakers!

Great presenters all.

all presenters are clearly experts and provided the most up to date Evidenced based treatment knowledge

All were excellent. Dr Rothbaum's first presentation was one of the most interesting I have ever attended.

I am not a prescriber.

All of the speakers were excellent.

All 3 speakers were outstanding. Dr Rothbaum is a true expert in her field.

They were knowledgeable and conveyed information clearly.

DR. FAVA'S PRESENTATION WAS BIT OVER MY HEAD AND VERY DRY. HAD TROUBLE STAYING FOCUSED. DRS. LEVINSON AND ROTHBAUM CONTRIBUTED GREATLY T MY CLINICAL EXPERTISE AND UNDERSTANDING ABOUT HOW EBP VARIATIONS ON TREATMENT.

wonderful speakers today

All of the speakers were excellent

All were knowledgable in their fields.

All the presenters are very knowledgeable. Levinson and Rothbaum were energetic in their deliveries.

DR Rothbaum was clearly knowledgeable. Dr Levinson shared information that I will use here at VA with my pts.

Interesting presentations on the use of VR in treatment of PTSD. Interesting presentation on treatment of eating disorders.

As an LCSW, Dr. Fava's lecture was a bit too jargon laden for me, the others were able to give broad concepts with enough detail to spur greater study.

All three presenters VERY enthusiastic about sharing. Only wish the talks could have been over a longer times frame; lots of info in a short period.

All speakers were good communicators and provided new information for treating my patients with depression, eating disorders and PTSD

I enjoyed the lecture from all the lecturers

Information was great, but presented very dry in some cases.

Enjoyed presentations by Dr Levinson and Dr Rothbaum.

I am not a prescriber so not as interested or able to use Fava's info.

speakers were excellent

excellent presentations. top notch

Excellent speakers

5. Please identify a change that you will implement into practice as a result of attending this educational activity (new protocols, different medications, etc.) (31)

different medications

New protocols for Eating disorders, using immersion therapy

The idea that IOPs with ED via telehealth will allow me to recommend this service. I have been hesitant to do that in the past.

I am now aware that there is a resource for eating disorders tx here in Louisville: a very difficult thing to find.

I feel I have a better understanding of the potential use of Mirapex and will read more so that I can begin offering it more frequently in outpatient and inpatient settings.

more confidence in educating and treating my pt's. with PTSD and with eating disorders. excellent validation for my approaches in treating TRD

talk with clinic about using d-cycloserine before PE.

gain further PE training

Use of exposure therapy

Consider different treatment strategies with clients with PTSD

More with eating disorder referrals and more PTSD exposure therapies

Do better screening for PTSD.

MORE FOCUS ON PE.

understand that PTSD is a disorder of avoidance

Awareness of sensitivity of sensation as an aspect of an eating disorder (fear of feeling bloated, etc.)

Consider different treatment strategies for clients with PTSD

Education and utilization exposure based therapy. Reflect on augmentation strategies TRD. Reinforce boundaries and cutoffs with BMI when working with patients with Eating Disorders.

Screening all patients for eating disorder and possible PTSD.

Will us the TIPS Dr R shared, some of which I may have done in past when using PE. But now have clearer view

Consider use of neutraceuticals as disjunctive meds in depression

I will be taking a more in-depth trauma history at first assessment.

How I view PTSD therapy. Treatment options for eating disorders.

I'm going to continue to research and learn how to utilize exposure therapy with my PTSD patients

I see a lot of ED in my setting, so being more aware of resources and trying to make sure to utilize the treatment breakdown for successful transitioning will be a change we make.

More knowledge re how to proceed with PTSD therapy.

Stronger re experience

I will look to expand the questions in an initial interview to assess eating disorders.

Knowhow of new treatment options available that I can use or request.

N/A

the combination of buspar and melatonin was one i had never heard of before, and the evidence seemed compelling

different medications for PTSD

6. How certain are you that you will implement this change?

(37)

Certain (19-51.35%)

Very Certain (14-37.84%)

Maybe (4-10.81%)

7. What topics do you want to hear more about, and what issues(s) in your practice will they address? (27)

practical treatments for grief, body image issues, and anxiety. Practical use of ACT with eating disorders

Treatment of Panic Disorder (with agoraphobia)

OCD and anxiety disorders

mood disorders- bipolar d/o and medications and treatment strategies

More psychotherapy directed topics

depression in women connected to health issues, e.g. post-partum, miscarriage, abortion, menopause, fertility struggles

TREATMENT PROTOCOLS FOR DIFFERENT KINDS OF PTSD - EG WARFARE VS. SEVERE CHILDHOOD ABUSE.

what can we do for kids whose parents are addicted, living with the parents or having been removed

Behavioral addictions.

Bipolar disorder- pharmacology and nonpharmacology treatments

medication assisted psychotherapies

How to effectively deal with the racism and sexism in our cultures inflicting PTSD on the targets of racism and sexism. What structural changes will be required.

Any training on depression and treatment of TRD is good to have.

Briefer Therapeutic interventions that can be more beneficial in hospital environments.

I would appreciate a workshop focusing on Differential diagnosis - I have over the last few years gotten numerous patients that I believe have been misdiagnosed as unipolar depressed or bipolar, and have been given psychotropics accordingly, and have responded poorly, had many hospitalizations, etc.

Treating negative symptoms of schizophrenia; many folks in care feel "stuck"

I would like to learn how to understand and treat my patients with PTSD who also experience dissociative episodes

Personality Disorders

Depression and anxiety- is it more prevalent now? or do we just recognize it more than before?

Anxiety and Substance Abuse Treatments.

Bipolar and borderline

bipolar depression

child psychotherapy

N/a

EMDR for trauma and anxiety

sleep disorders, meditation and mental health

mood disorders;

8. Were the patient recommendations based on acceptable practices in medicine?

(38)

Yes (38-100.00%)

10. Do you think the presentation was without commercial bias?

(38)

Yes (37-97.37%)

No (1-2.63%)

11. If you answered No on the above question, please list the topics that were biased? (1)

Books promoted.

12. Please provide any additional comments you may have about this educational activity. (14)

Excellent conference.

I am not interested in so much detailed information about studies done, the way they are structured, ect. I'm more interested in the results of the study and hands on interventions based on those results.

Look forward to next years conference

Thanks for another great conference! I look forward to these every year and learn so much!

I APPRECIATE THE DISCLOSURES OF EACH PRESENTER.

Thank you, a wonderful and successful effort during difficult times, really appreciate you all!!

Excellent conference...thank you

Thank you for another excellent conference.

These were very informative presentations.

Nothing additional was glad to be able to attend the entire presentation, as it was on point and informative

I have had the opportunity to attend many of the Center's annual conferences, and I consider this years to be among the most excellent! Thank you

Thanks you so much. I learned a lot and look forward to reviewing the materials and seeking more info.

Very grateful for these excellent opportunities each year to learn more from experts in the field

I know you cannot do anything about it- but in person trainings are so much more beneficial. I look forward to attending in the future!

As one of the participants of this educational activity, we want to encourage you to implement those ideas that were appropriate to your healthcare environment.

This evaluation is confidential and no individual will be identified by this office (Continuing Medical Education and Professional Development). It will only be used for quality improvement.

We look forward to seeing you at future University of Louisville events. Thank you very much.