

Investing in the Mental Health of NYC

Department of Psychiatry & Behavioral Health

Pet Therapy

By Robin Kerner, MD

She doesn't have a medical degree, but everyone's favorite therapist on Clark 8 is Magic, the therapy dog. Nicknamed "Magic the Wonder Dog" by the patients who love her, she visits the unit weekly with her owner, Dr. Robin Kerner, Director of Quality Initiatives and Outcomes for our department. A growing body of research supports the use of animal-assisted therapy and in watching Magic do her work on the unit, it's easy to see the healing impact she has on patients. "Interacting with her changed my mood," said a patient. Another offers, "She knows exactly how to act to make you feel better and calm."

Animal-assisted therapy has been going on at St. Luke's-Roosevelt for several years through its collaboration with the Good Dog Foundation. Currently, there are 10 pet therapy teams visiting throughout our hospital. As a graduate of Good Dog, Magic is an official SLR volunteer and proudly wears her hospital ID badge when on the job. To become a Good Dog Team, Dr. Kerner and Magic had to complete a course of obedience and therapy dog training, as well as be cleared by her veterinarian.

Every year Magic celebrates her birthday with the patients and staff on Clark 8. They initiate and plan the event, complete with homemade dog biscuits. Magic is one lucky dog!



Magic the Wonder Dog and her owner Dr. Robin Kerner

Addiction Lecture Great Success

Petros Levounis, MD, Director of the Addiction Institute of New York, spoke to a mixed audience of clinicians and members of the community about the genetic, psychological and social reason for addiction, as well as the current trends in interventions and treatments.

As a Forward Looking Department We have Created a New Logo to Take Us into the Future:

Investing in the Mental Health of NYC

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St. Luke's
Roosevelt

University Hospital of
Columbia University College
of Physicians & Surgeons

Continuum Health Partners, Inc.

Investing in the Mental Health of NYC

Department of Psychiatry & Behavioral Health

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St. Luke's and Roosevelt Hospitals

Department of Psychiatry and Behavioral Health
1090 Amsterdam Avenue, New York, NY 10025
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The Department of Psychiatry and Behavioral Health at St. Luke's and Roosevelt Hospitals is the largest not-for-profit provider of mental health and addiction services in New York City. Since 1954, we have dedicated ourselves to providing comprehensive services that enable individuals to improve their overall quality of life.

Please help us further our mission by making a contribution today. Your gift will enhance our continued efforts to provide the highest quality, compassionate care to all of our patients.

Yes, I/we want to support the important work of St. Luke's and Roosevelt Hospitals' Department of Psychiatry and Behavioral Health by making a contribution of:

\$1,000 \$500 \$250 \$100 \$50 \$25 Other _____

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I wore “the” apple T-shirt yesterday. Almost everyone who past me read it. A few people stopped to ask about the programs, what I did at STL, etc. I was quite proud...

- Lois Dorman, MPA, Corporate Program Manager



Alison Rangel (Staff Occupational Therapist), Avis Evans (Clark 8 Nurse Manager)

Department of Psychiatry and Behavioral Health Media Coverage 1st Quarter

PRINT

Westside Spirit “Art with A Heart”

Our Town “Art With A Heart”

NY Times - April 17, 2007 “Revolving Door for Addicts Adds to Medicaid Cost”

NY Times - April 23, 2007 letter to the Editor Dr. Richard N. Rosenthal

TV

Fox 5 Morning Show with Mike and Juliet “Panic Attacks” with Dr. Rosenthal and Sue Fenton

Fox News Channel - Dr. Jennifer Hartstein PsyD, Clinical Director The Discovery Center Child and Family Institute
“How to Choose a Summer Camp for Your Child”

WEB

OR Live - “The Prevalence and Treatability of Mental Disorders”, May 15, 7-8 P.M.

www.or-live.com/stlukes/1866

Daily News Blog - OR Live Link

100hats.com “Should You See a Shrink” Dr. Robin Kerner

RADIO

XM Radio - “Addiction Institute Gambling Lecture”

Dr. Petros Levounis

NAMI Walks

By Maria Vinnitskaya, Program Manager Psychiatry
with Letter From Dr. Richard Rosenthal

Every journey begins with that first step. And so, early morning, Saturday May 12, 2007, team St. Luke’s-Roosevelt made their first step with NAMI Walks. We joined dozens of other teams in a 5 kilometer walk to raise funds for awareness about our country’s need for a world-class treatment and recovery system for people with mental illness. This was the first-ever NAMI Walks New York City and the turn-out was phenomenal. Social workers, doctors, nurses, administrators, and patients united for a common cause. Under strong leadership of our team captains: Irene Zombek, Susan Palmgren, and Jeni Dulek, team St. Luke’s-Roosevelt was able to recruit 35 walkers.

Dear Colleagues: The “NAMI walks” event was a real success. This past sunny Saturday morning, over 800 hundred advocates: consumers, family members, providers and others gathered at South Street Seaport, rallied, and then walked 5 kilometers to the midpoint of the Brooklyn Bridge and back. They visibly demonstrated the value of hope and recovery from mental illness and the value of de-stigmatizing psychiatric disorders. Through corporate sponsorship and grassroots fundraising, we have raised over \$2500 for NAMI. The St. Luke’s - Roosevelt team, the third largest in the event, was an important part of the project: our commitment, energy, and caring showed and we are proud that our staff shared in advocacy with our patients. I especially extend appreciation to our organizers: Jennifer Dulek, Susan Palmgren, and Irene Zombek. Their skills were invaluable in making our efforts the success that they have been. More over, in addition to the numerous patients we walked with, we want to recognize the clinical, administrative, and support staff (and friends and family!) who participated in this important city event: Ann Marie Cushing, Jennifer Dulek, Lirone Eichbaum, Avis Evans, Lydia Haywood, George Joel, Florence Levy, Steve Lipton, Hunter McQuiston, Debbie Morgan, Susan Palmgren, Paula Pillone, Alison Rangel, Adrianna Rodriguez, Helaine Royo, Lee Shapiro, Rosalynd Ventura, and Maria Vinnitskaya. This was a great day for New Yorkers touched by mental illness and it was a proud day for our Department. Once again, thank you and congratulations!

JUST IN...

You and your supporting cast were fabulous. I can't think of a better way to help people understand what is mental illness and how it is successfully treated. I think you did a real public service.

Paul Lurie, Founding Chair of Board of The Family Institute, Chicago

Launch of New Web Site

The Department of Psychiatry and Behavioral Health has recently launched its state of the art comprehensive website with links to all department programs for both patients and clinicians. The easy to use web site includes a quick referral guide as well as links to the Addiction Institute, Child and Family Institute and the Women's Health Project.

www.slrpsych.org

Chairman's Message

I'll take this opportunity to review some of the recent accomplishments of the Department of Psychiatry and Behavioral Health, and to discuss where we're headed. First, we are maturing as a Department, and I want to thank each and every one of you for your dedication to your work, compassion towards your patients, and support for our efforts as a Department to integrate, to develop and to prosper.

Regarding transitions, I wish to thank our outgoing Director of Training and Education, Scott Masters, MD, for almost 7 years of indefatigable and focused leadership in building the Department's training programs. Scott has simply done a stellar job in forging a first-rate residency training program—something we will

Live Webcast - Raising Awareness of the Prevalence and Treatment of Mental Illness

By Elizabeth Dowling, Media Relations manager Continuum Health Partners

More prevalent than cancer or diabetes, mental disorders rank first among illnesses causing disability in the United States. Depression and alcohol disorders cost our employers over \$265 billion annually. The Department of Psychiatry and Behavioral Health at St. Luke's and Roosevelt Hospitals addressed these issues in a live webcast, Tuesday, May 15th at 7:00 pm ET from St. Luke's Hospital. The broadcast aimed to raise awareness of the prevalence and treatment of mental disorders, hoping to de-stigmatize myths about these issues through open dialogue and discussion. The live webcast focused primarily on three of the most common mental health afflictions: anxiety, mood disorder and substance abuse - three illnesses which affect millions of lives. In any given year within the U.S. population, age 18 and over, 11% will suffer from some form of anxiety, while 9% will face a mood disorder and another 9% will struggle with addiction. As any illness, it is not only those stricken that suffer, but also their family, friends and colleagues. A panel of clinicians was assembled - along with patients to discuss their experiences in treating, living with, and overcoming these illnesses.

Included in the expert panel were Richard N. Rosenthal, M.D., Professor of Clinical Psychiatry, Columbia University College of Physicians & Surgeons and Chairman, Department of Psychiatry at St. Luke's and Roosevelt Hospitals; Petros Levounis, M.D., Assistant Professor of Clinical Psychiatry, Columbia University College of Physicians & Surgeons and Director of Addiction Institute of New York at St. Luke's Roosevelt, and Jeanne Cummings, N.P., a Psychiatric Nurse Practitioner at St. Luke's and Roosevelt Hospitals' Outpatient Clinic. The group also participated in a live e-mail session to answer any questions viewers had regarding these issues and other related topics.

Since 1954, St. Luke's and Roosevelt Hospitals' Department of Psychiatry and Behavioral Health Services has been a major provider of mental health care services offering 35 unique programs to treat various mental illness within the diverse communities of New York City.

all continue to be very proud of. I welcome our incoming Director of Training and Education, Prameet Singh, MD. Prameet comes to us from Beth Israel Medical Center, where he has built and refined a major training program in Addiction Psychiatry. He is a sharp thinker, a superb clinician, a wonderful mentor, and quite the gentleman. I hope you have the opportunity to meet with him before too long.

2006 was another banner year in our continuing development as a clinical and academic center of excellence. Under the leadership of Ramon Solhkhah, MD, we were awarded 2 Contracts of \$2.2 million to implement Child & Family Clinic Plus clinical programming, which will include new behavioral health screening services to the school system and child protective services. We were also licensed for further expansion of our Home and Community Based Waiver program. In further

exciting news, we are planning to open 61 new inpatient child & adolescent beds. This will add an important level of service to our continuum of care for children and adolescents, as well as improving our opportunities for teaching and research. At the Addiction Institute, we plan to open a new Addiction Psychopharmacology clinic, under the leadership of Petros Levounis, MD.

On the training side, in 2006 we obtained full 5-year accreditation of our General Psychiatry Residency Training Program, again thanks to the leadership of Scott Masters, MD and his colleagues. In addition, we obtained full 3-year accreditation of our new Psychosomatic Medicine Fellowship and are just in the process of implementation, with a start date of July 1, 2007 for our first two Psychosomatic Medicine fellows. Hats off to Mel Gilbert,

(Continued on Pg. 2) →

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MD, chief of our new Division of Psychosomatic Medicine, for the persistence and vision to makes this happen.

We continue to expand our development and marketing efforts. We have created a brand and shortly, you should see our new banner "INVESTING IN THE MENTAL HEALTH OF NEW YORK CITY" on all our printed and web-based materials, as well as at the entrance to our administrative offices. Our development Committee is active and quickly learning the ropes: We had our first-ever fund raiser "Art With a Heart" on February 15th, which raised money to place art on our inpatient units. Donations are continuing to flow into the Department to help us with our strategic goals. Following this, we presented our first live webcast on May 15th, a great success. We presented issues about the prevalence and treatment of mental disorders. Patient volunteers, family members and staff, including our own Susan Fenton, and Jeanne Cummings, NP, Petros Levounis, MD and Galina Mindlin, MD did a terrific job of getting the message across about the need to identify mood, anxiety and substance use disorders, and to seek effective help.

Our research portfolio is continuing to expand under the guidance of our research director, Deborah Haller, PhD. Our newest recruit is Zafar Sharif, MD, a superb educator and scientist, who will be joining us in July to expand our research into schizophrenia-continuum disorders. We are quite excited to have Dr. Sharif coming on board both to conduct research and to teach our trainees.

On Monday, May 28 we experienced a fire in 411 West 144th Street, which put all of our clinical and educational business in that building off-line indefinitely. Fortunately, we are mostly up and running in a host of different temporary locations. The way the team assembled and executed a very complex and interdependent set of maneuvers over the first week after the fire was flawless and quite inspiring. Our departmental and hospital administrators worked deftly with everyone and marshaled Facilities, Real Estate, IT, Telecom, Housekeeping and many other non-clinical departments to get the job done. I want to acknowledge the hard work and persistence of our Departmental Director, David Wyman, MPA in spearheading the magnificent emergency effort.

We have finally been approved to go forward with the TIER upgrade to the workflow system. This means that the roll-out of our electronic medical record will bring in the rest of our outpatient programs including the Addiction Institute and the Child & Family Institute, and all the inpatient services of the Department. I think that this transition will make a large difference in our ability to track our clinical care, demonstrate our impact on patients, and implement quality improvement projects.

We are a forward-looking department. We act as strategically as we are able in order to provide cutting-edge care, to give the highest quality education to our trainees, and to conduct the most clinically-relevant research. Stay tuned: The next year or two should provide even more impressive demonstrations of our continuing expansion into clinical and academic significance.



This year the Department of Psychiatry and Behavioral Health is honored to have 3 President's Award Recipients

Jeanne Cummings, RN, NP, Adult Outpatient Psychiatry Clinic Staff

Ronald Lonesome, MD, Unit Chief of Clark 6

Shilpa Taufique, PhD, Assistant Clinical Director of CARES

Jeanne Cummings, RN, NP has been employed by St. Luke's Roosevelt Hospital Department of Psychiatry as a Psychiatric Nurse Practitioner since October 2000. Since that time her compassionate connection with those who suffer, her skillful care of difficult and complex psychiatric illnesses, her ongoing commitment to improve her expertise, her innovative use of that expertise to develop new programs for patient care, her administrative and organizational knowledge have led her to deliver superior care in an efficient manner, making her an integral and beloved member of the Adult Outpatient Psychiatry Clinic staff.

Ronald Lonesome, MD in his role of Unit Chief of Clark 6 Inpatient detoxification Unit,

promotes cooperation and understanding in treating patients with addiction and mental health problems. He skillfully guides conflict and problematic situations toward productive resolution. An outstanding leader, Dr. Lonesome fosters an atmosphere where his team can work effectively for the patients.

Shilpa Taufique, PhD is Assistant Clinical Director of Comprehensive Adolescent Rehabilitation and Education Service (CARES), a day program treating teens with substance abuse and/or mental health issues. She is a talented clinician, providing individual, family and group therapy. Shilpa is constantly searching to improve the program and always willing to take on special projects if they are of therapeutic benefit to the teens CARES serves.

Child & Family Clinic Plus

By Meredith Katz, MPA Program Manager

The Child & Family Institute was the recent recipient of a large New York State Office of Mental Health grant, totaling over \$4 million per year. This new initiative is designed to enhance and expand outpatient mental health services for children and their families for three high risk populations: middle and high school students, children involved with Administration for Children's Services (ACS) Preventive programs (i.e. early or mild child welfare involvement), and children enrolled in public day care or Head Start programs. The program is structured around emotional wellness screening, comprehensive evaluations, evidence-based interventions, and in-home visits. According to Bonnie Siegel, LCSW, Assistant Clinical Director of the Child and Adolescent Psychiatry OPD, Child and Family Plus "will allow us to serve children and families in a more natural environment, either in schools or at home."

Investing in the Mental Health of NYC

Department of Psychiatry & Behavioral Health

“Art With A Heart Program”

By Susan Fenton, Director of Special Projects



Sue Fenton (Director of Special Projects), David Wyman (Administrator Behavioral Health Services), Lindsley Borsodi (Member Dept. of Psychiatry & Behavioral Health Art Advisory Board) Richard N. Rosenthal (Chairman), Diane Brown (RxArt President)

In 2006, the Department of Psychiatry and Behavioral Health at St. Luke’s and Roosevelt Hospitals in New York City launched a new initiative to bring original art to the walls and halls of inpatient and outpatient treatment areas.

A growing body of research suggests that art reduces anxiety and stress in a hospital setting. The positive distraction that art provides promotes healing while giving patients a chance to engage in non-clinical dialogue with staff. As an added benefit, on a psych unit, the art therapist can run discussion groups with patients about their various interpretations of the art.

The entire healthcare environment should offer a recuperative compliment to the care provided by clinicians. Up to now art work has been historically overlooked and under funded. We in the department of psychiatry are looking to create settings that we’d want for our friends and family.

The following is a list of the organizations and artists that we are currently working with on that mission:

The Creative Center works with artists who are survivors of cancer, to provide art therapy for patients at the bedside as well as original artwork for hospital settings. Several pieces with nature themes have been purchased to be placed on patient floors at Roosevelt Hospital.

RxArt promotes healing through exposure to original art in patient, procedure and exam rooms. Diane Brown, founder of Rxart, believes that exposure to art is therapeutic and that art captures the imagination. The inpatient unit walls at Roosevelt will become a gallery of contemporary art in 2007. Through donations from artists and funds raised by the department, we hope to complete this project in 2007 and move on to St. Luke’s sites.

Paul Lurie is a Chicago based photographer of rural settings in the Midwest and abroad. His art incorporates natural light and color. Art donated by the artist and funds raised by the department will help us to beautify the outpatient behavioral health areas of the hospital.

Dina Herrmann who resides in Putnam County states: “Through my paintings, my intention is to provide a conduit for positive energy and to bring about an uplifting experience of joy.” Dina has donated *Blue Velvet* to the 7th Floor Inpatient Unit at Roosevelt Hospital.

Patients hospitalized for mental disorders usually have sufficient severity of the illness afflicting them that they can’t care for themselves or be cared for in the community. This is due to either impulses or actions that might be dangerous to self or others, inability to care for oneself, or severe disorganization of one’s regular faculties, such as orientation to time, eating and sleeping, and social connections.

For patients who are hospitalized, in addition to their illness, there is frequently demoralization- feeling like one is fighting an uphill battle, feeling isolated, feeling that life has become grey and grim. In addition to medication, psychotherapy, and activities, therapy aimed at stabilizing illness and promoting reintegration, the physical context in which care is delivered can support and build morale.

In this sense, the artwork can add a great deal to the environment of a patient’s recovery. Beautiful art sends a specific message: there is tangible evidence of beauty right in front of you. In addition, the fact that real art is on display means that we not only care for those we treat, but that we value them. Art, because of it’s capacity to evoke often transcendent feelings, promotes reconnection to the world. Richard N. Rosenthal



Sue Fenton (Director of Special Projects), Ken McMillan (Senior Director of Development)

Research Update

By Deborah Haller, Director of Behavioral Science Research Unit

Buprenorphine studies at St. Luke's Roosevelt Hospital Center:

The Division of Clinical Research, Department of Psychiatry, is conducting several randomized clinical trials that employ Buprenorphine, a mixed agonist/antagonist drug that helps people get off heroin and prescription pain medications such as Oxycontin and Vicodin. Buprenorphine has been used both for taper (detox) and maintenance purposes. It is available in drug treatment programs and through a network of physicians who have been trained in its use. The studies described below are exciting because they address specific populations of opioid abusers (youth, prescription opioid abusers, chronic pain patients) and/or test novel means of drug delivery (i.e., implants under the skin). Below is a brief description of 3 studies and how to contact the Principle Investigator to learn more about them. For information about other clinical research studies being conducted by our Faculty, contact the Behavioral Science Research Unit at 212 523-5232.

1.ADS2 (Lisa Marsch, PI). This innovative project, funded by the National Institute on Drug Abuse (NIDA), provides

Buprenorphine and intensive individual/family counseling to opioid dependent (both heroin and opioid analgesics) adolescents and young adults ages 13-24. During Phase 1, patients receive a Buprenorphine taper over a 2-month period at which point they become eligible for Phase 2; Phase 2 provides Naltrexone to help prevent relapse. Treatment is free of charge and patients also receive vouchers for remaining opioid-free during the trial; vouchers may be traded for goods and services such as X-Box, sneakers or iPods. The goal of this study is to determine best clinical practices for helping teens and young adults to get off opioids. For more information about the study or to make a referral, please call: 212 636-1252.

2.CTN-0030 (Deborah Haller, PI). The goal of this NIDA-funded Clinical Trials Network (CTN) study is to learn if adding drug counseling improves treatment outcomes for analgesic abusers who are undergoing an office-based Buprenorphine taper. CTN studies are conducted in "real world" drug treatment programs, this one at the Addiction Institute of New York (Roosevelt Hospital). To participate, patients must be 18 years of age or over and dependent on opioid analgesics (i.e., pain medication such as Oxycontin or Vicodin). Pain patients who want to discontinue their use of pain medication may be eligible if their doctors agree; the study also welcomes individuals who use opioid analgesics for

recreational purposes. During Phase 1, patients will be given a 1-month Buprenorphine/Naloxone taper, with or without intensive (2X per week) drug counseling. Those who require more time to stabilize may become eligible for Phase 2, which is 4 months in duration and also includes Buprenorphine/Naloxone with or without counseling. Medical evaluation, medication and drug counseling are provided at no cost to the participant. Compensation for completing research measures also is available. For additional information about the study or to make a referral, please call: 212 523-8245.

3. Pro-805 (Richard N. Rosenthal, PI) is an industry-sponsored (Titan Pharmaceuticals, Inc.) multicenter trial of Probuphine in patients with opioid dependence (both heroin and opioid analgesics). Patients between the ages of 18-65 who undergo an induction with Buprenorphine sublingually for at least 3 days will become eligible for randomization to implantation (under the skin) with Probuphine, a long-acting form of Buprenorphine, or a placebo matrix for a 24-week trial. Patients will be seen and compensated for up to 90 visits, including 18 study visits for counseling and laboratory work, and 60 visits to obtain urine for toxicology. For more information, please call: 212 523-5366.

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