In This Edition

Going Global: UM Faculty Take Their Expertise Abroad

Medicine Reimagined at New Lennar Foundation Medical Center

Recently Funded Research and Faculty Awards
With a myriad of changes occurring both nationally and locally, the department and the school is abuzz with activity. We received a record-breaking number of resident applications—more than 1200. Of these, we interviewed approximately 110 of the very best resident applicants. We just completed the match process and look forward to welcoming our new first-year psychiatry residency class of 16 this summer. Not only are the quality of the applicants phenomenal, but we are particularly delighted to see the consistent increase in the number of medical school graduates who are choosing psychiatry as their specialty. Our new class is diverse in every way, which will, I am sure, lead to another superb group of researchers and psychiatrists. The rankings of Departments of Psychiatry in terms of research funding from the National Institutes of Health (NIH) were released and we are pleased to have moved up two positions to #25 in the nation (with $10,540,641) among the 120+ medical school Departments of Psychiatry and #1 among the seven medical schools in Florida. At a time in which only a small minority of research grant proposals actually receive funding, this is quite an achievement and a tribute to our superb faculty. Particular kudos to Drs. Czaja, Loewenstein, Brothers, Kumar, Stephen Weiss, Deborah Jones Weiss, Jope and Beurl for their recent research awards. With the number of awards continuing to rise, we look forward to continuing to climb in our national rankings.

We are very fortunate to be one of the few departments in the school that can boast its own External Advisory Board (EAB) comprised of national leaders who support our department both philanthropically and in the community, helping us achieve a number of research and educational projects. The board is chaired by Susan Racher and Harley Tropin, Esq. and we will welcome a few new members to the board in the coming months. Alfredo Frohlich, a board member, hosted the department’s inaugural golf tournament at Turnberry Isle last October and we raised $170,000. We will hold our Second Annual Golf Tournament on October 27, 2017 at the same site and hope to outdo our previous success.

Our faculty continue to receive national and international recognition for their research. Dr. Sara Czaja and her CREATE team were the recipients of the American Psychological Association’s inaugural award for Interdisciplinary Research. Several of our faculty are members of the highly prestigious American College of Psychiatrists and this year Drs. Samir Sabbag and Jeffrey Newport were...
elected into membership. I was humbled to receive the Julius Axelrod Award for mentorship from the American College of Neuropsychopharmacology last December.

Our faculty continue to write a column for the Miami Herald on mental health every two weeks and the response from the community has been fantastic. The department is engaged in a number of new initiatives and potential new partnerships, and with these the development of new clinical service delivery and research programs that are so desperately needed in South Florida. As these transpire, we will be rolling them out to the community in a thoughtful and comprehensive fashion. This will entail the recruitment of much-needed additional faculty, relative to the demand for clinical services.

At a time of some uncertainty concerning healthcare in general and mental health care in particular, we will continue our efforts to attain parity on the one hand while increasing the availability of mental health services on the other.

As always, I look forward to working with you in the months and years ahead.

Sincerely,
Charlie

Dr. Charles B. Nemeroff, Leonard M. Miller Professor & Chairman, Department of Psychiatry and Behavioral Sciences (center), former UM Medical School Dean Dr. Pascal Goldschmidt (left), and Dr. Spencer Eth, participated in the annual American Foundation for Suicide Prevention’s Out of the Darkness Walk.
Dr. Judith Regan’s Journey Through the World of Child Psychiatry

Judith Regan is an Associate Professor of Psychiatry, Director of Child and Adolescent Inpatient Services, and Director of Child and Adolescent Crisis Stabilization Services here at UM. Holding an M.D., J.D. and M.B.A., she has leveraged her education into an impactful career helping one of our most vulnerable populations. She graciously found the time to answer some of our most pressing questions about the field of child and adolescent mental health.

Talk a bit about your background—you have law, business and medical degrees. How did your career evolve into child psychiatry?
I became interested in Child Psychiatry and developmental theory early in my psychiatry residency program at the University of Louisville. I had several key mentors who helped me nurture my interests during my child and adolescent psychiatry fellowship at Vanderbilt University. My earliest years as a faculty member were enhanced by my training at the St. Louis Psychoanalytic Institute in both adult as well as child and adolescent psychoanalysis. This was an incredibly rewarding period as I was immersing myself both in clinical care and teaching and continued training in psychoanalysis. I’m thrilled to be back in an academic setting as an Associate Professor here at UM.

The AACAP estimates there are only about 8,300 child psychiatrists in the country, while there are 15 million kids who need one. This equates to one psychiatrist for every 1,807 children. What does this mean for the future of child/adolescent mental health and how do we combat it to make sure those in need receive treatment?
To improve the lives of children and adolescents suffering with mental illnesses, we need an appropriate workforce in place and alternative models to promote early intervention and prevention services. Encouraging medical students and general psychiatry residents to enter child and adolescent psychiatry training is one of the main ways to do this. Another excellent way is to encourage the collaboration between pediatric primary care and mental health care. Oftentimes, pediatricians are the first physician to see a child or adolescent in need. Increasing their ability to obtain additional education access to consultation from a child and adolescent psychiatrist would be extremely beneficial in widening the workforce. Many nurse practitioners and physician assistants are becoming more specialized and have the abilities to work closely with child and adolescent psychiatrists through oversight of their clinical work with children.

We hear a lot about evidence-based treatment (EBT). Can you explain what this is?
EBTs are treatments based directly on scientific evidence. Most EBTs have been studied in several large-scale clinical trials, involving thousands of patients and a careful comparison of the effects of EBTs vs. other types of psychiatric treatments. Numerous multi-year studies have shown that EBTs can reduce symptoms significantly and improve the lives of children and adolescents.

We know that the brain is not mature until at least our 20s. How do you determine the best course of action for a child whose brain is still developing but is experiencing signs or symptoms of a mental health disorder?
It can be difficult for a parent to distinguish signs of a potential problem from normal childhood behavior. Young children often lack the vocabulary or developmental ability to explain their concerns to their parents, and an adolescent’s behavior may be misconstrued as a normal developmental stage.
As a result, many children who could benefit from treatment may not receive it. It is typically up to the adults in a child’s life to identify whether the child has a mental health concern and obtain the needed treatment. In addition, concerns about the stigma associated with mental illness, the use of certain medications, and the cost or logistical challenges of treatment might also prevent parents from seeking care for a child who has a suspected mental illness.

Some warning signs that a child might have a mental health condition include: mood changes, intense feelings, behavioral changes, difficulty concentrating, unexplained weight loss, physical symptoms, self-harm behaviors and substance use.
What should a parent do if he/she thinks their child may be struggling with a mental health disorder?

If a parent is concerned about their child’s mental health, they should consult their child’s pediatrician. The pediatrician is the healthcare provider who in most instances has been aware of the child’s ongoing development from birth. A parent may also want to consider talking to their child’s teacher, or close family members to see if other caregivers have noticed any changes in the child’s behavior.

Mental health conditions in children are diagnosed and treated based on signs and symptoms plus how the condition affects the child’s daily life. There are no simple tests to determine if something is wrong. To make a diagnosis, the child’s pediatrician or teacher might recommend that the child be evaluated by a specialist, such as a psychiatrist, psychologist, social worker, psychiatric nurse, mental health counselor or behavioral therapist. It’s imperative to remember that with the proper help and treatment, the child can thrive and lead a successful life.

simply reflect those underlying abnormalities. Related to this stigma is the notion that treatments in psychiatry do not work or that people with mental illness should be able to fix themselves. Regardless, in the last decade, more and more science and education has occurred and some of this stigma directed toward mental illness has lessened. This trend should continue.

The second issue is that the demand for mental health treatment has continued to overwhelm the services that are available in the many communities. Mental illnesses affect one out of every five people. The rate of depression alone exceeds all cancers combined, and heroin addiction has become an epidemic across the U.S. Acknowledging that the costs of not treating psychiatric illnesses far outweighs these interventions is imperative.

We need to redesign mental health care delivery in the U.S. to rely on a better integration among mental health disciplines, better reliance on evidence-based care, and stronger ambulatory integrated programs.

What is your vision for the Department of Psychiatry and its role in the community?

I want to master the skills of child psychiatric diagnosis, work to improve the processes of psychiatric practice, and successfully educate my patients so they are empowered to choose a healthy lifestyle. As I continue to gain clinical experience in the child psychiatric profession, I also hope to be involved in improving the processes we use every day. These include improving best practices in the clinic or hospital, participating in clinical trials, providing leadership in the teaching of residents and medical students, improving broader healthcare policies in the community and staying active in the legislative process as it relates to the development of healthcare laws across the state.

Child psychiatry is an optimistic specialty. Children are at a stage in their life when psychiatrists can make a significant difference changing the course of their lives.

Dr. Judith Regan (L) and Samantha Richter join the fun at the Faculty vs Residents softball game at the annual departmental picnic!
ife expectancy has increased markedly in the last century and so has the level of functioning of older people in general. There are several likely reasons for this change, including reductions in smoking, improved diet, and, importantly, an increased appreciation for the benefits of physical and mental exercise.

Last October, Dr. Phil Harvey took his expertise in this field and attended Bergamo Scienza in Bergamo, Italy. The event is a free, two-week festival with a goal of making science accessible to everybody, especially young people and schools.

As a featured speaker, Dr. Harvey adapted his presentation for Italian society, and covered topics including healthy aging and Cognitive Remediation Training (CRT; sometimes known as “brain training.”) CRT is a systematic, structured program of training and education aimed at enhancing cognition.

“CRT has received a flurry of recent interest, likely because of some very positive results for improving cognitive functioning in healthy older people as well as improving the response of people with severe mental illness to psychosocial interventions such as job skills training. These treatment gains have been very persistent over time and may even reduce the risk of developing age-related conditions such as dementia,” Dr. Harvey explained.

As we age, many of us will notice subtle changes, sometimes in our appearance or our ability to remember things as clearly as we once did. This concept of cognitive aging is a lifelong process that occurs in all humans, though with variability between and within each individual. Some cognitive domains remain the same, while others improve or decline. Engaging in CRT is one way to harness our cognitive abilities and improve the ones that are at risk for age-related decline.

Today and tomorrow’s older adults are better educated, more diverse, healthier and more active than previous generations.

“In addition, several studies have shown that exercising leads to very positive brain health results. These studies have shown a direct correlation between exercise calories burned and brain volume. All forms of exercise, including walking, have this benefit. You don’t need to run a marathon to exercise enough to have a healthier brain.”

There is substantial potential for better mental and physical fitness in old age and multiple strategies to enhance successful aging:

- CRT
- Heart-healthy diet
- Physical exercise
- Manage stress
- Remain socially engaged
- Adequate sleep
- Maintain your sense of humor!

Philip D. Harvey, Ph.D. is Leonard M. Miller Professor of Psychiatry and Behavioral Sciences, Chief, Division of Psychology. (L) Dr. Harvey addresses the crowd at Bergamo Scienza.
Dr. Ihsan Salloum Dives Into Concept of Person Centered Medicine at International Congress in Spain

In November 2016, Dr. Salloum traveled to Madrid, Spain for the 4th International Congress of Person Centered Medicine, jointly hosted by the International College of Person Centered Medicine (ICPCM) and Francisco de Victoria University. The year’s theme was Person Centered Medical Education and the Goals of Healthcare.

As a Board Director for ICPCM, Dr. Salloum served on the organizing committee and was an invited speaker. He joined dozens of other participants—physicians, nurses, psychologists, social workers, pharmacists, policymakers, educators, students, and more—for three days of lectures, roundtables, workshops and brief oral and poster presentations.

The earliest roots of person-centered medicine can be found in ancient civilizations, both Eastern and Western, which tended to conceptualize health broadly and holistically. This notion is reflected in the encompassing definition of health inscribed in the constitution of the World Health Organization (WHO, 1946). Also noticeable in medical traditions from those early civilizations—and currently experiencing a revival in today’s practice of medicine—is a personalized approach to health care.

Last year, Francisco de Victoria University graduated its first medical student class educated according to person centered medicine principles. One of the most intriguing aspects of the conference was in witnessing how a progressive medical school designed its curriculum for medical education to integrate modern scientific advances with strong humanistic principles.

PCM is particularly relevant to Dr. Salloum’s work at UM, as he focuses on developing effective treatment interventions for patients with complex comorbidities of mood disorders and addictive disorders. As shared during his workshop, Dr. Salloum explained, “Social disadvantage, poverty, disasters, individual and political violence and traumas severely augment what is already a substantial challenge to mental health care. A broader approach to psychiatric care, such as the person-centered integrated diagnostic model, aims to promote health as a state of physical, mental, socio-cultural and spiritual wellbeing—addressing the totality of the person.”

As another congress participant quoted at the conference, “science is essential but humanism is the essence.”

Ihsan Salloum, M.D., M.P.H. is Professor, UM Department of Psychiatry and Behavioral Sciences; Chief, Division of Alcohol and Drug Abuse: Treatment and Research; Director, Addiction Psychiatry Fellowship Program. Dr. Salloum and colleagues recently published a book on this topic entitled Person Centered Psychiatry. Springer International Publishing, Switzerland, 2016.

Dr. Salloum chaired the Workshop on Clinical Complexity and Contextualization.
The end of 2016 brought new beginnings for the University of Miami Health System, when The Lennar Foundation Medical Center opened on December 5 for its first 150 patients. After years of planning and developing the innovative concept for this new patient experience, witnessing building’s completion was tremendously rewarding.

“This is a monumental day for the University of Miami,” Steven M. Altschuler, M.D., senior vice president for health affairs and chief executive officer of the University of Miami Health System, told those who had gathered for the event. “It is truly a transformational moment in the history of the University of Miami Health System, and it’s also the start of a new vision for health care in South Florida. This is a facility, this is a concept that really thinks about the patient first.”

In this new vision for health care, the patient experience is transformed into a journey of being well. Each space in The Lennar Foundation Medical Center is intuitively planned, imaginatively designed and instinctively positioned to treat, heal, enhance and soothe patients.

The Lennar Foundation Medical Center offers specialized, individualized care for the entire community including primary care, outpatient surgery, women’s and men’s centers, cardiology, neurology, oncology, ophthalmology, otolaryngology, sports medicine, physical therapy and soon to be psychiatry.

More information about the LFMC can be found at www.humanbeingwell.com

Representing UM’s resilient spirit, a 244-piece glass installation of the ibis hangs in the new Center.

Donors who choose to support the LFMC are given the opportunity to name an ibis. Visit miami.edu/uplifting for details.

The building was made possible by a $50 million gift from The Lennar Foundation.
The Staff Stars column highlights the commitment and accomplishments of an individual in the Department of Psychiatry and Behavioral Sciences. Nominations may be submitted to Samantha Richter at psychiatry@miami.edu. Please include a brief description of the nominee’s job responsibilities and why you believe they should be the next Star!

How long have you been at the U?
I have been working at UM for ten years.

Have you always worked in the Department of Psychiatry & Behavioral Sciences?
Yes, since I was hired at UM. This is the only department I have worked for and I love it. I still look forward to coming to work every day. Prior to working here at UM, I had my own Practice Management Consulting firm and worked as a Jr. Administrator for Baptist Health.

Tell us about your role as Senior Clinical Practice Manager.
The role of a Clinical Practice Manager is never boring. Essentially, I am responsible for making sure the daily business practice of the outpatient clinics run smoothly. I am responsible for making sure our clinicians receive proper training in billing and compliance documentation and ensuring our department is compliant with the University’s infection control and quality assurance policies. I train staff and clinicians on Medical Records and HIPAA (Health Insurance Portability and Accountability Act) compliance. I am a “people person” and really enjoy being part of a team and helping others.

Did you pursue an education that prepared you for your current position?
Yes—I studied Health Care Management at FIU School of Business. I would love to find the time to study nursing in order to further my job responsibilities with Patient Quality Assurance.

Where are you from originally?
Bucaramanga, Colombia; say that 10 times fast!

What are some of your favorite hobbies?
I love reading—I am a total bookworm. I enjoy cooking and entertaining for friends and family. I recently returned to my passion for running and set a personal goal to run a 5K by the end of this year. I find serenity anywhere near the water.

I love going to the beach just before the arrival of a hurricane. The pull of the ocean water is amazing to watch.

Is your family here in Miami with you?
Working in Psychiatry, we know the importance of a support system. I am married and have two boys. My son Dylan is a pre-med student and my stepson Marc is studying education. Actually, I have a third, four-legged son, named Pimpon. He is a shih-tzu.

Words to live by?
“You are here to make a difference in the life of a stranger.”

We are thrilled to recognize Patty’s commitment to the UM Department of Psychiatry and Behavioral Sciences and are grateful for her continued hard work to keep our clinical practice running smoothly!
Alfredo Frohlich joined our External Advisory Board in 2016. Originally from Bogota, Colombia, he moved to Miami 20 years ago. A financial advisor by trade, his professional skillset served him well when he generously offered to host the First Inaugural Golf Tournament for the Department of Psychiatry and Behavioral Sciences last year. A tremendously successful event that raised $170,000, he’s already planning the 2017 Tournament. Alfredo touts autism and the Victory School as other causes he supports. He’s also a philatelic collector, exhibitor, and judge, and, unsurprisingly, an enthusiastic golfer. Learn more about one of our newest board members, and why mental illness is a cause close to his heart.

**Why did you decide to host the 2016 Inaugural Golf Tournament?**
I had previous experience organizing several successful charity golf tournaments to raise funds for causes I believe in. The world moves fast and mental wellness is an increasingly important area that needs our attention. Given my experience and how well the other events turned out, I believed I could do it again for the Department of Psychiatry, and I’m happy to say it worked!

**Why did you decide to join the EAB?**
I have always been interested in psychiatry and there are people close to me who have struggled with their own mental wellness. I’ve seen that the most critical factor in helping these people has been receiving the best possible combination of treatment and therapies; unfortunately this can take weeks, months, even years. I found out about the wonderful work Dr. Nemeroff and his team were doing, and asked about opportunities to get involved. Then I joined the Board.

**What are some of your goals for the board?**
I hope that through our activities, we can bring awareness to the community and ensure that people—and especially people in need—know that there is excellent help available in Florida, where 9% of the population have a serious mental illness. We know that the brain is our most complex organ. Much more research is needed to determine the most efficacious treatments for these disorders, especially depression, which affects more than 300 million people worldwide. The best way we can help perpetuate the science is by continuing to raise funds for scientists conducting meaningful research.

**What specific mental disorders would you like to see tackled?**
I’m particularly interested in depression, anxiety and suicide prevention.

**What do you see as the biggest barrier to ending stigma associated with mental disorders?**
Information—and the lack of it.

**What would you say to a person who might be struggling with a mental illness?**
Seek help in UM’s Department of Psychiatry. The earlier you get help, the sooner treatment can start working. It is possible to lead a normal, productive life.

**What advice would you give to caregivers, families and friends of people living with a mental illness?**
Get informed, educated about the particular illness. Don’t be shy. Speak with all of the different people who might be willing to share their resources and experiences. Of course, seek professional care. Doctors and psychiatrists can advise on how best to cope with the diagnosis and behave with the patient so they feel supported.
Recently Funded Grants

A Non-pharmacological Intervention for Patients with Alzheimer’s Disease and Family Caregivers
Funded by NIH; PIs Dr. Czaja and Dr. Loewenstein

A Personalized Health Behavior System to Promote Well-Being in Older Adults
Funded by NIH; PI Dr. Czaja

ACT Study: Augmenting Cognitive Training in Older Adults
Funded by NIH; PI Dr. Czaja

CART Study: Collaborative Aging (in Place) Research Using Technology
Funded by NIH; PI Dr. Czaja

Brain Amyloid Load and Novel Cognitive Measures in Diverse Ethnic Groups
Funded by FLDOH; PI Dr. Loewenstein

Precision-based Detection of Mild Cognitive Impairment in Older Adults
Funded by FLDOH; PI Dr. Curiel

A Consortium to Study Precision-based Computerized Assessment for the Detection of Mild Cognitive Impairment in Older Adults
Funded by FLDOH, Ed and Ethel Moore AD Research Program; PI Dr. Curiel, Co-I: Dr. Crocco

A Non-pharmacological Intervention for Patients with Alzheimer’s Disease and Family Caregivers
Funded by National Institute on Aging; PIs Dr. Czaja and Dr. Loewenstein, Co-I: Dr. Crocco

Faculty Awards

Dr. Sara Czaja

Provost’s Funding Award
Dr. Sara Czaja, Leonard M. Miller Professor Department of Psychiatry and Behavioral Sciences, Director, Center on Aging

Inaugural recipient of the American Psychological Association’s Prize for Interdisciplinary Team Research Center for Research and Education on Aging and Technology Enhancement (CREATE), directed by Dr. Sara Czaja

Scholar for STAHR Program
Dr. Samir Sabbag, Assistant Professor of Psychiatry and Behavioral Sciences

Dr. Samir Sabbag

National Alliance for Research on Schizophrenia and Depression (NARSAD) Grant
Dr. Richard Jope, Professor of Psychiatry and Biochemistry

2017 APOS Outstanding Education and Training Award
Dr. Bill Pirl, Chief of Psychiatric Oncology

2016 Julius Axelrod Mentorship Award
Dr. Charles Nemeroff, Leonard M. Miller Professor and Chairman, Department of Psychiatry and Behavioral Sciences

Dr. Bill Pirl

International Congress Behavioral Medicine (ICBM) Lifetime Achievement Award
Dr. Stephen M. Weiss, Professor of Psychiatry and Behavioral Sciences

Child PRI TE Fellow
Dr. Nils Westfall, Chief Child and Adolescent Psychiatry Fellow

Please submit your achievements to Samantha Richter at psychiatry@med.miami.edu to be included in future issues!
What to Do & Where to Go

For a Mental Health Emergency, CALL 911 if you believe someone is in danger of hurting themselves or others.

University of Miami Hospital (UMH) Mental Health Admissions/ER 305.689.4444
Jackson Behavioral Health Hospital Triage 305.355.7332

Silver Alert
If your loved one has gone missing, please CALL 911 immediately. Silver Alert is a statewide initiative to involve the public in locating a cognitively impaired person who has gotten lost driving or while on foot. For more information visit florida silveralert.com.

Office Numbers
Main Psychiatry Appointment Scheduling 305.355.9028 *Option 1
Chairman’s Office 305.243.6400
Jackson Behavioral Health Hospital 305.355.9028 *Option 2
University of Miami Hospital 305.689.1352
Boca Raton 561.939.4044
Child & Adolescent 305.355.7077

Soffer Clinical Research Center 305.243.2301
Courtelis Center 305.243.4129
Deerfield Beach 954.571.0117
Center on Aging 305.355.9081
Brain Fitness Pavilion 305.355.9080 *English, Option 3
Memory Disorders Clinic 305.355.9065

More than 350 people gathered to hear Dr. Elizabeth Crocco, Director of the Memory Disorders Clinic, give a presentation on memory, cognition, and new activities and studies taking place at the Center on Aging.

Mission Statement

The University of Miami Leonard M. Miller School of Medicine Department of Psychiatry and Behavioral Sciences is committed to:

Conduct research that deepens our understanding of the development, pathophysiology, and prevention of psychiatric illness and the nature of human behavior, and apply this knowledge to the development and delivery of more effective, evidence-based treatments.

Offer comprehensive treatment and consultation to our patients, their families, and the community.

Provide outstanding mental health education and multidisciplinary training to the next generation of healthcare providers and investigators.

DIRECTCT
Diversity
Integrity
Responsibility
Excellence
Compassion
Creativity
Teamwork