Healing the Pain
Program helps veterans recover from trauma

ALSO INSIDE...
Faculty Updates
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Touchdown for HOPE
OUR MISSION To acquire and refine medical and scientific knowledge and then to apply it through education and clinical service toward high-quality, evidence-based treatment of people suffering from mental illnesses.

OUR VISION To be international leaders advancing the diagnosis and treatment of psychiatric disorders.

AS MANY OF YOU KNOW, my role as chair of the Department of Psychiatry and Behavioral Neuroscience is one of several I fill at the UC College of Medicine. I am also the college’s senior associate dean for research, leading Dean Thomas Boat’s research cabinet, and vice president of research at UC Health.

These roles are appropriate, given the department’s strong research profile. Investigators in the department are national leaders in their fields in basic and clinical neuroscience, with generous support from grants by federal agencies—particularly the National Institutes of Health—private foundations, industry and contributions from private individuals.

As with the department, the prestige of an institution tends to follow its research successes. With that in mind, the research cabinet has been working over the past year to develop a strategic plan for research to guide the college for the next five years.

While progress has been made, continued careful planning and strategic decision making will be crucial to future success.

Key strategies for the College of Medicine include:
- A focus on translational science.
- Enhancement of critical infrastructure.
- Development of new funding streams.
- Initiation of effective and aggressive faculty development.
- Increased collaboration with key partners, especially Cincinnati Children’s Hospital Medical Center.

Research investment in the College of Medicine will be made in programs that are strong, dominant or unique, or those critical to future success. I consider many of the Department of Psychiatry and Behavioral Neuroscience’s research programs to be in those categories.

As a core facility, the Center for Imaging Research, led by Jing-Huei Lee, PhD, is vital to UC’s research mission. You’ll read about it in this issue, along with an article on our outstanding Posttraumatic Stress Disorders Program, a national leader in research and treatment under the direction of Kathleen Chard, PhD.

These articles, along with the rest of the newsletter, are intended to help keep you connected with the Department of Psychiatry and Behavioral Neuroscience. With the strained national economy and struggles of our federal government to collaboratively tackle significant economic problems, the funding streams for all academic health centers, including ours, are dwindling and at high risk.

Clinical reimbursement will decrease under health reform; research funding is constantly being threatened; state support is down; endowment income has been down and remains at risk with a volatile market; and finally, the poor economy dampens philanthropic contributions. Consequently, more than ever, the UC Academic Health Center and our department need your ongoing support.

We appreciate your continued support and hope that you will continue to follow our progress on our website (www.psychiatry.uc.edu) and with these letters.

Best Wishes,

Stephen M. Strakowski, MD
The Dr. Stanley and Mickey Kaplan Professor and Chairman
Department of Psychiatry and Behavioral Neuroscience
Senior Associate Dean for Research, College of Medicine
Vice President of Research, UC Health
Nasrallah to Receive APA Honor
Henry Nasrallah, MD, vice chair for education and training, will receive a Special Presidential Commendation at the American Psychiatric Association annual meeting May 18-23 in San Francisco. Nasrallah will be honored for his support of the organization Saturday, May 18, at the Convocation of Distinguished Fellows in the Moscone Center. The American Psychiatric Association, founded in 1844, is the world’s largest psychiatric organization. It represents more than 33,000 psychiatric physicians from the United States and around the world.

Warren Liang Award Created
As a result of a gift by Warren Liang, MD, professor emeritus of psychiatry, the Department of Psychiatry and Behavioral Neuroscience has created the Warren Liang Award for Psychiatry Excellence, to be awarded to a senior medical student at the College of Medicine Honors Day ceremony each year. Liang served as psychiatry residency training director from 1994 to 2008 and was a leader in providing psychiatric care to persons with HIV/AIDS. This year’s Honors Day, at which members of the graduating class are hooded, is Saturday, May 18.

University Hospital Renamed University of Cincinnati Medical Center
University Hospital is now University of Cincinnati Medical Center. UC President Santa Ono, PhD (second from left), and UC Health President and Chief Executive Officer Jim Kingsbury (fourth from left) announced the name change at a news conference Dec. 10, 2012. Ono said the change more closely links the university and the UC Academic Health Center with its primary teaching hospital. Kingsbury said the new name is vital to UC Health’s vision of becoming recognized as a national leader in solving complex medical problems.

UC Surpasses $1 Billion Goal in Fundraising Campaign
The University of Cincinnati announced Feb. 20 that it surpassed the $1 billion goal of its Proudly Cincinnati campaign. More than 91,000 individual and corporate donors—including alumni, staff, community partners, corporations, foundations and friends of the university—helped UC reach the $1 billion mark four months ahead of the campaign’s June 2013 deadline.

“Raising $1 billion is a truly remarkable achievement, and we should take a moment to reflect and celebrate and, above all, to thank those who have supported us so generously,” said UC President Santa Ono, PhD. “The key to this fundraising success, though, is not simply that we raised the money, but the impact it will have on everything from experiential learning to opportunities to study abroad.”

The Proudly Cincinnati campaign is continuing through June 30, 2013, with an additional goal of reaching 100,000 total donors.

Mood Disorders Symposium in May
The third annual Mood Disorders Symposium, “Bipolar Disorder: A Comprehensive Update,” will be held Saturday, May 4, at UC Health Drake Center. Continuing education credit is available. For more information, contact Barbara Dimmitt at 513-558-4866 or Barbara.Dimmitt@uc.edu.

To advance the diagnosis and treatment of psychiatric disorders through education and clinical services, we are forming a community advisory board. If interested, please contact Kathy Nullmeier at 513-558-6769 or kathy.nullmeier@uc.edu.

Updates
An Ally for Veterans in Recovery From Trauma

Spend some time with Kathleen Chard, PhD, at the Cincinnati Department of Veterans Affairs (VA) Medical Center facility in Ft. Thomas, Ky., and it’s obvious how much she cares about her patients. As she leads a tour of the space occupied by the Posttraumatic Stress Disorder (PTSD) and Anxiety Disorders Division, she’s greeted with enthusiasm by patients and staff alike. Returning the greetings with equal enthusiasm, she demonstrates how important the program is to the well-being of the thousands of veterans who have been successfully treated during her nine years at the center.

As director of the PTSD and Anxiety Disorders Division, Chard is responsible for a sprawling program that is well suited to the quiet Ft. Thomas campus about 8 miles from the main VA campus near the University of Cincinnati (UC) College of Medicine, where Chard is an associate professor of clinical psychiatry. Its components include both outpatient and residential (seven-week) PTSD programs for men and women, plus an intensive eight-week residential program for veterans with traumatic brain injury (TBI)/PTSD and telehealth services to VA clinics throughout Ohio. Male and female military veterans of all eras are eligible for services at VA facilities, and the trauma does not have to be confined to their years in the military.

It’s a program that has grown into a national model since Chard arrived on the scene in 2004, bringing her enthusiasm and knowledge to a centrally located area ripe for transformation.

“When I was hired, we had a 10-person clinic and a 12-person men’s residential program that was half full. One of the things we quickly decided to do was get that residential program to the point where we’d have more people.

A THERAPIST’S PATH:
KATHLEEN CHARD, PhD
I was a kid whose best friend’s mother was a child psychiatrist. And my mother, in her ultimate wisdom of trying to make sense of that for me, said, “She talks to kids all day about their problems.” And because I love kids, I thought, “What better job in the whole wide world?”

What evolved from that was I wanted to help the ones who were hurting the most, and that would be the ones who had been through some sort of traumatic stress incident.

Only through a series of evolutions in graduate school was I able to move toward adults. A professor came to me one day and said, “I’ve got a 22-year-old; I have no one else to see her. You’re the trauma expert in the room, even though you work with kids. I want you to see her.” And I never looked back.

I ran a child sexual abuse adult survivor clinic at the University of Kentucky before coming to UC in 2004. I grew up in Cincinnati, so it was like coming home.
PTSD and Anxiety Disorders Division

- a staff of more than 30
- outpatient and residential programs
- established the third women's residential program in the nation (2007)
- offered the first traumatic brain injury/PTSD program in the nation (2011)

coming in. And then I realized, 'There's nowhere for women with PTSD to go in this area.' So in January of 2007 we became the third women's residential program in the nation—the others were bookends on the coasts."

Still, Chard was well aware of unmet needs for veterans. Traumatic brain injuries—invoking sudden damage to the brain caused by an outside force to the head—had emerged as the “signature wound” of U.S. soldiers in Iraq and Afghanistan. “We decided in 2010 it was time to start looking at traumatic brain injury,” she says. “So we opened a TBI program in 2011 (construction was completed in 2012) that became the first traumatic brain injury/PTSD program in the nation.”

In the meantime, that 10-person clinic grew to a staff of more than 30 as the program expanded to meet demand. “Fifty percent of our patients come from outside of this network,” Chard says. “We treat active duty, reserve and guard. I’ve had a Marine flown over from Afghanistan, treated in our program and sent back. We also had a young woman from Ramstein Air Base in Germany who was told she couldn’t continue in her career because her PTSD was getting in the way. She wanted a career in the military, and after treatment here she was able to make the career choice she had always wanted and continue in the military."

Looking to the future, Chard is confident that her program can handle the demands created by continuing U.S. military involvement in world hot spots. “If we get a referral, we’ve got an opening,” she says. “The VA has done an outstanding job of getting ahead of the curve. We’ve always had space when needed here.”

ABOUT PTSD

According to the National Institute of Mental Health, posttraumatic stress disorder (PTSD) is a type of anxiety disorder that some people get after seeing or living through a dangerous event. People who have PTSD may feel stressed or frightened even when they’re no longer in danger. Anyone can get PTSD at any age. This includes war veterans and survivors of physical and sexual assault, abuse, accidents, disasters and many other serious events. Symptoms of PTSD fall into three main categories: Re-experiencing the event, such as flashbacks; avoidance, such as lacking interest in normal activities; and hyper-arousal, such as difficulty concentrating or startling easily.

TYPES OF PTSD THERAPY

The PTSD and Anxiety Disorders Division at the Cincinnati Department of Veterans Affairs (VA) Medical Center emphasizes evidence-based treatments—those that have been well researched and have been shown to work for treating a specific condition such as PTSD. Course-of-treatment decisions are made on a case-by-case basis following discussion between the patient and treatment providers.

Cognitive Processing Therapy (CPT): A cognitive-behavioral therapy that focuses on thoughts and feelings. The focus is on identifying how traumatic experiences changed the patient’s thoughts and beliefs and how the patient’s thoughts influence current feelings and behaviors. Patients identify and challenge unhelpful thoughts through structured therapy sessions and practice assignments.

Kathleen Chard, PhD, is co-author of the CPT military/veteran manual and the national CPT implementation director for the Department of Veterans Affairs.

Prolonged Exposure (PE): A cognitive-behavioral treatment that focuses on decreasing symptoms of PTSD by addressing the common causes and treatments in four ways—education about treatment and common reactions to trauma, breathing retraining, in vivo (“in real life”) exposure and imaginal exposure. The therapy allows patients to work through painful memories in a safe and supportive environment and engage with activities they have been avoiding because of the trauma.

Virtual Reality Exposure Therapy (VRET): A type of Prolonged Exposure, this therapy involves a computer simulation of settings that are triggers for PTSD episodes. For example, the patient—seated at a video terminal and wearing headphones—could experience the sights, sounds, weather and level of violence of a combat situation. The therapist, seated at a computer nearby, replicates the experience and can even add smells and vibrations via special software.

DIVISION’S ROLE IN RESEARCH AND TREATMENT

Chard is one of three co-investigators of a 17-site VA Cooperative Studies Program study that will compare Cognitive Processing Therapy with Prolonged Exposure in an effort to predict which is more likely to benefit certain patients.

The division also offers first-stage treatment for veterans with PTSD and co-occurring alcohol or drug problems, traumatic nightmare therapy, a PTSD educational group, PTSD coping skills, PTSD women’s group and couples therapy.

As for PTSD treatment itself, “What I hope to see is more people acknowledging that we need to get to PTSD earlier,” she says. “And motivational enhancement will be important, to help people not only get ready to go through trauma therapy, but also to stay with it.”
Center for Imaging Research Puts Focus on Discovery

Located deep within the University of Cincinnati’s Medical Sciences Building, the UC Center for Imaging Research (CIR) isn’t the easiest place to find at the Academic Health Center. But making that effort can pay invaluable dividends for investigators on the medical campus and beyond.

“This is a core facility not just for the College of Medicine but also for the entire university,” says Jing-Huei Lee, PhD, the CIR’s director. “We are here to serve people and help them with their research of the human body and physiology.”

The CIR’s centerpiece is a 4.0 Tesla Varian Unity INOVA Whole Body MRI/MRS system, which permits visualization and measurement of human anatomy, organ function and organ chemistry in human subjects. “This is not a clinical machine; it’s a research-dedicated machine,” Lee says.

Magnetic Resonance Imaging (MRI) uses the magnetic properties of hydrogen and its interaction with both a strong external field and radio waves to produce highly detailed images of the human body. The body’s high water content—about two-thirds by weight—provides the MRI device an opportunity to image the concentration of hydrogen protons, providing insight into tissue variations.

A strong magnetic field—measured in units of Tesla—is necessary for MRI. Most clinical MRI units are 3.0 Tesla or below; the CIR’s 4.0 Tesla machine is one of only a handful of such machines in the United States, Lee says.

Key personnel at the CIR hold faculty appointments in the Department of Psychiatry and Behavioral Neuroscience (Lee is also on the Biomedical Engineering faculty) and are involved in a wide variety of research projects, including the study of brain metabolism, motor learning, schizophrenia, bipolar disorder, depression and cognitive assessment.

“We primarily focus on the brain, but other organ systems can be studied as well,” Lee says.

The CIR charges hourly rates for use of the facility. Investigators who do not have funding and wish to obtain pilot data for a research proposal can apply to the CIR’s Scientific Advisory Committee, which provides awards to support deserving work that is intended to support grant applications for additional work in the CIR.

In addition to magnetic resonance imaging, the Center for Imaging Research has available:

- **Functional Magnetic Resonance Imaging (fMRI):** used to determine the brain regions activated during the performance of a task by detecting blood oxygen changes and indirectly measuring neuronal firing.
- **Magnetic Resonance Spectroscopy (MRS):** measures the chemical composition of molecules in the brain without taking any tissue or blood samples and without radioactive tracers—useful in the study of any psychiatric and neural disorder. The CIR can provide multinuclear measurement including lithium-7, carbon-13, oxygen-17, fluorine-19, and phosphorus-31 MRS.
- **Diffusion Tensor Imaging (DTI):** measures the directions and rates of water diffusion across different tissue types, particularly useful for early detection of brain injury.
- **Magnetic Resonance Angiography (MRA):** uses MRI technology to study blood vessel pathology. At the CIR, it’s primarily used in investigations of the detection of unruptured intracranial aneurysms.
- **Electroencephalograms (EEG):** uses electrodes on the scalp to record electrical activity of brain neurons. At the CIR, an EEG can be done concurrently with an MRI study, which only a handful of MRI systems in the U.S. can perform.
The fourth annual Touchdown for HOPE Super Bowl Sunday event took place Feb. 3, 2013, at the Great American Ball Park Champions Club. The upscale Super Bowl party featured big-screen televisions, Cincinnati food favorites and live music, with proceeds going to enhance mental health care in the community.

Originally conceived in 2010 by Scott Robertson, Carl Satterwaite and John Ryan, this event, with hosts Anthony and Dede Munoz, has consistently raised over $200,000 and continues to improve the lives of those suffering with mental illness.

This year’s event focused on helping young adults with eating disorders, with proceeds going to the Harold C. Schott Eating Disorder Program at Lindner Center of HOPE.

Getting together at Touchdown for HOPE were (left to right) Paul Keck Jr., MD, president and CEO of Lindner Center of HOPE; Tom Hiltz; Pro Football Hall of Famer Anthony Munoz (honorary chair along with wife Dede); and John Ryan, one of the event’s “offensive coordinators.”

How does a psychiatrist acquire the empathy that is so vital to the profession? In the case of Martha Jane “Marky” Aden, MD, one way was to work at a variety of jobs that included journalist, Latin teacher and deputy court clerk.

Aden, who died March 15, 2013, at age 62, was a psychiatrist for more than 12 years, five of them on staff at Cincinnati Children’s Hospital Medical Center as a child and adolescent psychiatrist. At the time of her death, she was an assistant professor in the UC Department of Psychiatry and Behavioral Neuroscience.

“Martha was dedicated to the children and adult patients she treated and showed that by working until about four weeks before she died,” said Kathi Seta, the department’s associate director of business.

“She also had a great sense of humor,” Seta added. “And she loved socks—the more colorful the better.”

Aden trained in the Triple Board Program (Pediatrics, Psychiatry and Child and Adolescent Psychiatry) at UC and Cincinnati Children’s from July 2001 to June 2005 and served as chief resident of the program in her final year. Following her residency, she worked in private practice in addition to her associations with UC, Cincinnati Children’s and University of Cincinnati Physicians.

“Martha was an excellent psychiatrist, and we will miss her very much,” said Stephen Strakowski, MD, department chairman.

Aden graduated from Mississippi College in 1971 with a degree in Latin, then attended teacher training classes at Delta State College (now University). Over the next 24 years, her jobs included deputy court clerk, Latin and English teacher, press secretary and journalist.

She was working at the Jackson (Miss.) Clarion-Ledger in the mid-1990s when she decided to go back to school and become a physician, according to her obituary in the Clarion-Ledger. She asked her editors to allow her to become the obituary writer, which gave her sufficient schedule flexibility to take pre-med courses at nearby Millsaps College.

She entered the University of Mississippi School of Medicine in 1996 and graduated in 2000, then served a pediatrics internship at St. Louis Children’s Hospital/Washington University before moving to Cincinnati for her Triple Board residency.

Aden enjoyed horseback riding, sacred harp singing and contra dancing, and met her husband, Greg Wenker, through contra dancing. They were married in December 2011, shortly after she was diagnosed with cancer. She also loved her dog, Nina, and cat, Sunshine.

Aden donated her body to medical science.

The Martha Aden, MD, Child Psychiatry Champion Award has been created in the UC Foundation. To donate, please make checks payable to Martha Aden, MD, Child Psychiatry Award/UC Foundation, and mail to the Foundation at PO Box 19970, Cincinnati, OH 45219-0970.

Or give online at uc.edu/foundation. Click on “Make a Gift Today,” follow the prompts and click on “College of Medicine” under “Designated Gift.” From the drop-down menu of sub-designations, select “Martha Aden, MD, Child Psychiatry Award.”

IN REMEMBRANCE

Martha Aden, MD, Child Psychiatry Champion Award

Getting together at Touchdown for HOPE were (left to right) Paul Keck Jr., MD, president and CEO of Lindner Center of HOPE; Tom Hiltz; Pro Football Hall of Famer Anthony Munoz (honorary chair along with wife Dede); and John Ryan, one of the event’s “offensive coordinators.”
CONGRATULATIONS to the following Department of Psychiatry and Behavioral Neuroscience clinicians with UC Health who have received “top doctor” designation in the past year:

**Cincinnati Magazine Top Doctors 2013:**
Jeffrey Straw, MD
Lawson Wulsin, MD.

**U.S. News & World Report Top Doctors:**
Stephen Strakowski, MD.

**Cincy Magazine “Best Docs”**
(compiled by Best Doctors in America Inc.):
Caleb Adler, MD
Lesley Arnold, MD
Melissa DelBello, MD
Thomas Geraciotti, MD
Jeffrey Goldsmith, MD
Paul Keck, MD
Michael Keys, MD
Susan McElroy, MD
Douglas Mossman, MD
Henry Nasrallah, MD
Erik Nelson, MD
Anne Marie O’Melia, MD
Floyd Sallee, MD
Stephen Strakowski, MD.

At halftime of the UC–Rutgers men’s basketball game Jan. 30, UC Health honored its physicians who were named Best Doctors in America, Top Doctors in U.S. News & World Report and/or Top Doctors by Cincinnati Magazine. Thomas Geraciotti, MD (fourth from left), of the Department of Psychiatry and Behavioral Neuroscience, was among the honorees.