President’s Column

Robert Frost, Laura’s Law, and the Green Journal

David Fogelson, M.D.

“Stopping by Woods on a Snowy Evening”

Whose woods these are I think I know.
His house is in the village though;
He will not see me stopping here
To watch his woods fill up with snow.

The little horse must think it queer
To stop without a farmhouse near
Between the woods and frozen lake
The darkest evening of the year.

He gives his harness bells a shake
To ask if there is some mistake.
The only other sound’s the sweep
Of easy wind and downy flake.

The woods are lovely dark and deep.

(Continued on page 2)

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Robert Frost paints a perfect picture of New England in winter. 40 winters have come and gone since my first New England winter. My medical career began back then. My second New England winter found me taking my clerkship in psychiatry at the Beth Israel Hospital. I was hooked. As I trudged through the falling snow on Longwood Avenue, I marveled how the snow muffled the noise of the cars and transformed the MTA train into a machine that seemed to glide silently upon its tracks. The light of the street lamps was subdued by the snow flakes. I would head to the library at Beth Israel Hospital, take the latest “Green” journal off the shelf, and read it cover to cover. While other medical textbooks and journals were a chore to read, the contents of the “Am J Psych” was effortless and a pleasure to read while seated in a comfortable library with the snow falling outside.

The early waning of the light of day, the muted intensity of the light of day this time of year, brings back these memories. Holiday decorations are sprouting up all over the city. I reminded to wish you all Happy Holidays and a Joyous New Year!

I once again direct you to the minutes of our meetings for a thorough update on the activities of your council and committees.

The most notable local development in mental health care delivery is summed up in an LA Times article by reporter, Abby Sewell, (November 25, 2014) excerpted here:

“Los Angeles County officials...implement[ed] court-ordered intensive outpatient treatment for people with serious mental illness.”

“The Board of Supervisors approved...implementing Laura’s Law, a state law adopted after a mental health patient launched a shooting rampage at a California clinic that killed 19-year-old employee Laura Wilcox and two others.”

[The plan] ”...creates 300 new treatment slots for people with serious mental health issues and allows hiring to begin for mental health workers to reach out to potential patients. In some cases, the county can seek a court order to require treatment.”

“...Tuesday’s vote will now allow for court-ordered treatment of those who refuse voluntary programs.”

“The supervisors approved spending $1.6 million in state money... including salaries for 18 mental health workers....[T]wo outreach teams...will assess patients referred by family members, law enforcement, treatment providers and others.”
“The program will cost an estimated $10 million a year when fully operational. Funds will come from a combination of state and federal mental health sources.”

Now Back to the Green Journal

The most compelling article to provide us with clinical guidance in this month’s Green Journal, is the article by Donald Black from the University of Iowa evaluating the effectiveness of quetiapine in the treatment of Borderline Personality Disorder (BPD). It is accompanied by an editorial by Mauricio Tohen of the University of New Mexico. 95 patients diagnosed with Borderline Personality Disorder were randomized to receive for 8 weeks 150 mg/day (n=33), 300 mg/day (n=33), or placebo (n=29). Response was defined as a 50% reduction in overall symptoms. Time to a 50% reduction in overall symptoms was shorter for both quetiapine groups. 82% of subjects in the 150 mg group were responders compared to 74% in the 300 mg group and 48% in the placebo group. The drop-out rate was 16% more for the quetiapine groups: 33% for the 150 mg group; 42% for the 300 mg group, and 21% for the placebo group. Sedation was the primary cause for discontinuing treatment. Symptoms most responsive to treatment included verbal and physical aggression, and irritability. The findings of this study are not generalizable to all patients with Borderline Personality Disorder because patients with co-morbid major depression, PTSD, panic disorder, OCD, and substance dependency were excluded. Patients were allowed to continue psychotherapy but not begin new psychotherapy during the study.

These findings are encouraging while at the same time we should note their limitations. Patients with BPD suffer terribly. A treatment that brings prompt relief is welcome. While the response rates are impressive, even those patients responding continued to have significant symptomatology. In addition, we do not know from this study if quetiapine would continue to show superiority over placebo beyond 8 weeks. Patients with co-morbid disorders might not respond so well. In addition, a medication such as quetiapine is not without risk. Weight gain, diabetes, and elevated lipid levels are significant risks and, while a remote risk, tardive dyskinesia poses a risk as well. Medication should be seen as an adjunct to psychotherapies that have been shown to be helpful in reducing symptoms. Their benefit needs to be evaluated over time. Rating scales will help us determine if initial improvement is maintained. If treatment effect wanes, medication should be discontinued.

SCPS Council and staff wish you a happy holiday season and a healthy and prosperous 2015!
Letter from the Editor

Prop 46 and Us
Colleen Copelan, M.D.

The decisive defeat of Proposition 46 is a resounding victory for organized medicine, our coalition partners and, ultimately, the wisdom of the people.

Pre-proposition poling and focus group research indicated that voters were opposed to increasing malpractice awards. The lawyers who wrote the proposition obfuscated that goal by adding two more popular provisions: drug testing and obligatory use of the CURES database.

It turns out that more than 70% of voters like the idea of drug testing--for just about anybody.

And the Attorney General allowed drug testing to dominate the title of Prop 46.

Our goal was to expose the malpractice provision, and the real cost to healthcare systems and, ultimately, to patients and taxpayers.

Post-election poling indicates that the vast majority of the one-third of voters who voted for the proposition did so because they liked the drug testing part. An even vaster majority of the two-thirds who voted "no" did so because they did not want to increase the cost of malpractice payouts.

Our resounding victory may provide momentum for a better, no-fault, non-adversarial, system for adjudicating bad outcomes.

The California Medical Association played a leading role in the No-On-46 Campaign and our California Psychiatric Association was part of the coalition.

We psychiatrists are--wisely--part of CMA and, of course CPA.

The CMA's political action committee, CALPAC, supports candidates who understand health care policy. The California Psychiatric PAC does likewise.

I heartily support your participation in both of our organizations, and your contribution to both of our PACs.

As for me, I have. And may I modestly advise that I am currently a member of the Executive Committee of CALPAC. You will hear more from me about contributions. Cocopelan@aol.com.
**Four. But Strong.**

By Janet Charoensook, MD & Carlos Fernandez, MD
PGY-1 Psychiatry Residents at UCR Department of Psychiatry

“Mental illness is nothing to be ashamed of, but stigma and bias shame us all.” With these words, former President Bill Clinton established the vision and foundation to the journey we embarked on. Initiated as the founding class, we were given the honor of shaping the future of psychiatry in the vast Inland Empire. The University of California, Riverside’s Psychiatry Residency is dedicated and committed to community outreach and increasing access to mental health services and resources to the underserved community of the county. A 2009 California HealthCare Foundation study reported that Riverside County had one psychiatrist for about every 24,438 patients. In 2009, there were over 2 million residents in Riverside County and only 94 psychiatrists. With this in mind, we set forth a goal of making an impact for the constituents of Riverside County. Thus, we undertook the philanthropic challenge of raising money and engaging the public over mental health awareness and decreasing the stigma of mental illness. While simultaneously being staunch advocates of mental health and young psychiatrists in training, we set forward to make an impact in the academic community and leave our mark in UCR and the Inland Empire history.

Our attending refers to us as “ducklings.” Let us introduce ourselves! We are the Power Psychiatry Rangers, but we are more commonly known as the first class of interns at UCR! Bright-eyed and bushy-tailed, we are forging our long journey ahead, ready to take on any challenge with contagious fervor. This enthusiasm is much needed for our next four years, because we are trailblazing a legacy for the future of psychiatry to come in the Inland Empire. Not only is this a new beginning, there are only four of us! Immediately, we became a tight-knit family. As a group, we are given the opportunity by our faculty to individualize our own legacy as we see most helpful to our population in the community. Early on, during orientation, we walked through downtown Riverside, introducing ourselves and assessing the need for mental health accessibility in the community. We committed ourselves to creating a strong community-based residency program by creating a free clinic in the heart of downtown and advocating for the patients we serve everyday. Essentially, we envision ourselves and the future of psychiatry in Riverside as an opportunity to make an everlasting impact in our community. As a class, we hold ourselves to the highest expectations in all areas - academically, professionally, and, most importantly, in serving our patients and community. Thus, we aim to “inspire innovation.”

When we learned of NAMIWalks in Riverside/San Bernardino, we jumped right into the challenge of raising awareness and giving back to the community. We had seen NAMI in action, admiring the strength and solidarity of the individuals and families committed to helping each other survive and thrive with mental illness. We educated our patients, their families, and community members on these resources that were available to them. Through patient advocacy, we were fortunate to meet people who cared about mental health issues as much as we did. They graciously donated to our cause and vision of patient education and empowerment. Not only were we raising money for NAMI, we were providing avenues for people to show their support for individuals and families struggling with illnesses. One of the most exceptional moments in the journey was the opportunity to reach out to the California Psychiatric Association (CPA) at the annual conference in Yosemite. It was awe-inspiring to see a roomful of psychiatrists from all over California be so generously committed to this cause. Truly as a community, we were able to raise over $4,000, which was the highest amount raised by any team in both the Riverside and San Bernardino counties (Go Riverside!). It was a momentous accomplishment for the smallest residency in the Inland Empire, but overall great win for our patients. We must also thank our rock solid foundation and cheering squad, Dr. Jerry Dennis, Dr. Gerald Maguire, Dr. Mary Ann Schaepper, Dr. Jaswinder Walia, and Dr. Reba Bindra!

We are four, but strong.

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SCPS’ Women’s Committee hosted its semi-annual brunch on Saturday, November 1st. The brunch was at the beautiful home of Janet Pine, M.D. and was another highly successful event. The guest speaker was Dr. Lois Frankel, author of *Nice Girls Don’t Get the Corner Office*. Here are photos from the brunch.
Unmatched Growth
Opportunities

“The leaders [at DMH] are visionary and ahead of the curve...particularly when it comes to healthcare reform.”

Christopher Thompson, MD
Supervising Psychiatrist

“The Department has a lot of innovative approaches to treating a very difficult population.”

Karen Lee, MD
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President’s Report (Dr. David Fogelson):

Dr. Furuta was invited to present on global mental health, including a new fellowship and training opportunity from Healinitiative.com. Council discussed avenues to provide support including: contacting and collaborating with Northern California Psychiatric Society, making additions to website, distribution of information to the membership via email, submission of an article to the SCPS newsletter, as well as limited options for financial support. A motion was made regarding the above, seconded, and approved by all council members.

Dr. Vollero (participating by tele-conference) provided an update from a joint discussion between Ethics and Bylaws committees, regarding ethics procedures and reviews of ethics complaints. Dr. Shaner made a motion to revise a recent ethics committee recommendation. The motion was seconded, and approved unanimously by Council.

The upcoming APA advocacy day and SCPS attendees were discussed.

President Elect’s Report (Dr. Heather Silverman): Reported on discussions from CPA Council meeting regarding IMD’s and payor exclusions that appear biased against psychiatric care, update on TAR for psychotropic medications for children, possible changes in ICD-10 start date.

Membership Report (Dr. Malik): The following individuals were recommended for action:
New MIT: Ashley Covington, Sara Hyoun, Katia Stoletniy.

A motion was made to accept the membership committee’s recommendations, seconded, and approved.

Treasurer’s Report (Dr. Duriez): A review of current financial status of the organization was presented. A motion was made, seconded, and approved to accept the treasurer’s report.

Program Committee Report (Dr. Gales): Provided update about the upcoming psychopharmacology meeting. Will begin planning for an April 18th meeting on ADHD.

The art of psychiatric medicine report (Dr. Furuta): Discussed next project on oral history-taking. A motion was made to provide additional support to the committee for $600, it was seconded, and unanimously approved.

Assembly Report (Drs. Schaepper and Lawrence): Reminded of upcoming election and Southern California candidates. Provided updates regarding issues including violence, guns and mental health; maintenance of certification; performance in practice; non-MD prescribing laws.

The meeting was adjourned by Dr. Fogelson at 9:30 PM.
SCPS provided a grant to the UCLA Child Psychiatry Fellowship Program for their annual retreat. This is their adorable way of showing appreciation!
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Schedule: 8:15 A.M. - 3:30 P.M.

Rationale-Based Treatment of Bipolar Disorder
Joseph F. Goldberg, M.D.

Integrated Care
Paul Summergrad, M.D.

Utilization of Pharmacogenomics in Psychiatric Practice
Gerald A. Maguire, M.D.

Pharmacological Implications of Marijuana: Therapeutic Agent or Target for Therapeutics?
Itai Danovitch, M.D.

Eating Disorders: An Update
Joel Yager, M.D.

Click Here for Complete Details and Registration

The Southern California Psychiatric Society (SCPS) is accredited by the Institute of Medical Quality/California Medical Association (IMQ/CMA) to provide continuing medical education for physicians. SCPS takes responsibility for the content, quality and scientific integrity of this CME activity.

SCPS designates this educational activity for a maximum of 5 AMA PRA Category 1 Credit(s)TM. Physicians should only claim credit commensurate with the extent of their participation in the activity. This credit may also be applied to the CMA Certification in Continuing Medical Education.
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**Councillors by Region (Terms Expiring)**

- San Fernando Valley: Oscar Pakier, M.D. (2017)
- Santa Barbara: Paul Erickson, M.D. (2015)
- South Bay: Mary Read, M.D. (2016)
- South L.A. County: Dharmesh Sheth, M.D. (2016)
- Ventura: vacant (2017)
- Marcy Botlik, M.D. (2016)
- Arsalan Malik, M.D. (2015)
- Michelle Furuta, M.D. (2016)
- Past Presidents: Mary Ann Schaepper, M.D.
- Steve Soldinger, M.D.
- Lawrence Gross, M.D. (2017)
- Mary Ann Schaepper, M.D. (2016)
- Larry Lawrence, M.D. (2018)
- Executive Director: Mindi Thelen
- Desktop Publishing: Mindi Thelen

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