

PSYCHIATRIST

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June 2019

Newsletter of the Southern California Psychiatric Society

President's Column

A Message to the Faithful

Erick H. Cheung, M.D.



This is a message to the faithful: thank you to all of our dedicated members who continue to support our organization. Only with your support, are we able to carry out our common mission of upholding the profession of psychiatry and the care of our patients. At 38,000 members and growing, no other voice speaks louder than the APA in the pursuit of accessible, high quality, and cutting edge mental health care for all individuals. This is an era of increasing visibility for the plight of the mentally ill. There are many issues that we are pursuing in the interest of the public good, these include mental health parity enforcement, reduction of gun violence, suicide prevention, and legislative support for models of collaborative care with primary care that increase access to mental health services.

Your district branch, the Southern California Psychiatric Society, is among the largest in the nation and carries considerable strength and influence on these topics. Thank you to our loyal SCPS Council members for donating their time and good conscience to serve and lead our society of psychiatrists in Southern California. We encourage our members to keep us apprised of any areas of practical concern and opportunities for ongoing advocacy and development.

To our new colleagues who are graduating from psychiatry residencies and fellowships: congratulations on this momentous step in the long journey of becoming a psychiatrist. As you forge into the world to establish your identity as a psychiatrist, remember that we are your professional guild, we have faith in you, we are here for you, and hope that you will join (or stay with) the family.

An elder psychiatry statesman explained to me, years ago when I was a first year resident, what organized psychiatry is all about. SCPS, CPA, and APA are the pillars that hold up the roof for the House of Psychiatry... fortifying the profession, defending it when necessary, and advocating as a collective force for policies that let psychiatrists do what they do best – taking care of patients, making breakthrough discoveries, and healing the community.

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Pandora's Box: To sleep or not to sleep?

By: Matthew Goldenberg D.O.
SCPS Newsletter Editor



As psychiatrists, we develop our philosophies, comfort and prescribing habits during our training. In early practice, we hone our craft and further develop our experience based on our patients' response (or lack thereof) to medications and gather additional evidence through attending conferences, earning CME and discussing difficult cases with colleagues.

Our patients come to us with their own experiences. Some have been raised in families and environments where mental health treatment is stigmatized and shamed. Others come to us with more neutral or positive experiences and expectations. They also get information from "Dr. Google," books and films and even the media.

Thus, with each patient encounter, we have an intersection of our professional recommendations and a patient's autonomy. We then use our training and skills to provide informed consent and provide patients with evidence-based and individualized care.

But what happens when another master enters the room with us and our patients? Specifically, there are times when the government changes law and policy that impacts the way we treat and care for our patients.

Recently, the US Food and Drug Administration (FDA) added a boxed warning to certain prescription insomnia medications. The new warnings will be required for eszopiclone (Lunesta), zaleplon (Sonata), and zolpidem (Ambien, Ambien CR, Edluar, Intermezzo, and Zolpimist), the FDA said in a safety communication.

The additional black box warning follows reports of injury and death resulting from sleepwalking, sleep driving, and engaging in other activities while not fully awake after taking these medications. The FDA will also require the addition of a contraindication against using these drugs in patients who have experienced such an episode after taking them.

A recent [Medscape](#) article noted that "the FDA reviewed 66 cases reported to the FDA Adverse Event Reporting System or found in the medical literature, in which patients engaged in activities while they were not fully awake, such as sleepwalking or driving, that resulted in serious injuries or death after taking eszopiclone, zaleplon, or zolpidem".

[Medscape](#) goes on to note that "there were 46 reports of nonfatal serious injuries, which included accidental overdoses, falls, burns, near-drowning, exposure to extreme cold temperatures leading to loss of limb or near death, and self-injuries such as gunshot wounds and apparent suicide attempts. The 20 deaths reported were from carbon monoxide poisoning, drowning, fatal falls, hypothermia, fatal motor vehicle collisions with the patient driving, and apparent suicide."

You may be thinking this is Déjà vu. You may recall that in 2013, the FDA flagged an increased risk of next-morning impairment with zolpidem and approved lower recommended doses for the medication. A year later they noted a risk of next-morning impairment with eszopiclone and lowered the recommended

dose.

Were you aware of these changes? How will these new warnings affect your practice? Do you feel it is important for the government to intervene and make these clinical recommendations for us and our patients?

I would love to hear your thoughts and comments and would be pleased to share them in next month's newsletter with your permission.

Please send submissions to me or SCPS Executive Director Mindi Thelen (scps2999@earthlink.net)

Best,

Matthew Goldenberg D.O.
SCPS Newsletter Editor
Email: docgoldenberg@gmail.com

Reference: <https://www.medscape.com/viewarticle/912402>

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The advertisement features a dark blue background. On the left, there is a stylized palm tree in light blue and white. To its right are three large, overlapping chevron arrows pointing right, colored orange, light blue, and white. The text 'REGISTER AT IMM2019.COM' is written in white and orange. On the right side, the text 'IMMH 2019' is in large white letters, followed by 'SAN DIEGO AUGUST 15-18' and '10TH ANNUAL INTEGRATIVE MEDICINE FOR MENTAL HEALTH CONFERENCE' in smaller white letters. Below this, a paragraph describes the conference, and at the bottom, a promo code is highlighted in orange.

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The Critical Thinker

By Steven Schuster

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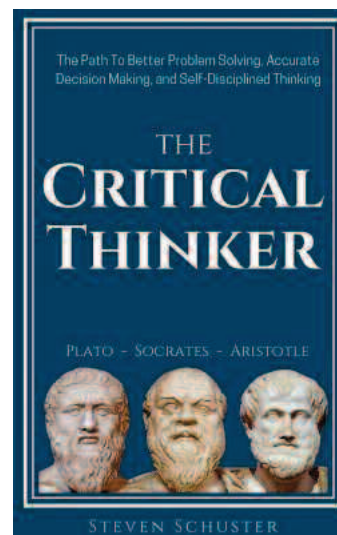
167 pages

\$10.78 Paperback

ISBN 9781718817340

Book reviewed by Kavita Khajuria, MD

“Question everything”



This book reviews the basic concepts, characteristics and benefits of critical thinking – questioning, reflection, bias recognition, effective communication, uncertainty tolerance, and a mind open to opinions and theories in order to allow for more reasonable judgment.

Suggestions include avoidance of mental shortcuts, trust of one's instincts, the need to pay attention and test assumptions, examine logic, explore options and think long term. Not to worry if you're of an emotional nature - turns out that emotional reasoning is beneficial and advantageous, if used appropriately. Piaget's four stages of cognitive development are explained. Critical thought from youth is encouraged in order to prepare for skills necessary to maneuver through future endeavors. Other topics include milestones, schemas, assimilation, accommodation, equilibration, universal intellectual standards, intellectual traits and eight elements of thought. What goes into the making of an Olympian? Mastery of the basics is stressed as a vital foundation from which to dig deep and build high. Mistakes are cited as necessary and crucial opportunities for success.

Schuster cites barriers to critical thinking to include egocentrism, social centrism, stubbornness, pride, prejudice and fear, to name a few. The costs of overgeneralization and oversimplification are stressed. The book concludes with a brief discussion on ethics and impartiality, and encourages sound judgment. With key takeaway points, stories, exercises, and a few self assessment questionnaires, this book is expressed in a narrative style that encourages questioning and contemplation from all angles.

2019 SCPS Installation and Awards Photo Gallery



Anita Red, M.D., Outgoing President



Erick H Cheung, M.D., Incoming President



Larry Lawrence, M.D., and Danielle Chang, M.D.



Timothy Hayes, M.D., and Steve Soldinger, M.D.



Katherine Unverferth, M.D., and Anita Red, M.D.



Anita Red, M.D., and Erick Cheung, M.D.



Mindi Thelen and Anita Red, M.D.



Eraka Bath, M.D., and the Honorable Judge Pratt.



Chris Erskine, LA Times, Special Award Recipient.



Lawrence Gross, M.D., Nubia Chong, M.D., and Maria Lymberis, M.D.



Lawrence Gross, M.D., Troy Kurz, M.D., and Maria Lymberis, M.D.



Eric Wagreich, M.D., and Larry Lawrence, M.D.



Larry Lawrence, M.D., and Joseph Simpson, M.D.



Katherine Camfield, M.D., incoming RFM Representative



Galya Rees, M.D., outgoing Treasurer and incoming Councillor.



Ariel Seroussi, M.D., West LA Councillor.



Matthew Goldenberg, D.O., incoming Secretary



Vivian Tang, M.D., incoming RFM Representative



Eric Wagreich, M.D., outgoing SCPS RFM Rep and incoming CPA RFM Rep.



Amy Woods, M.D., incoming San Gabriel Councillor.

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Council Highlights

April 11, 2019

Ijeoma Ijeaku, M.D., *Secretary*



PRESIDENT'S REPORT Dr. Red

Dr Red started the meeting by thanking Dr Cheung for presiding over the last meeting and for performing other behind the scenes duties while she was on maternity leave

Centralized Dues Billing Discussion:

Dr Red reported that APA has had centralized billing for three years and has been pushing for SCPS to get on board. At the current time, SCPS is only one of three district branches that is yet to join the centralized billing in collection of its dues.

Dr Red summarized for the board the interactions between SCPS council members, executive director and the APA so far. Essentially, APA had alleged that SCPS was losing members by not utilizing the centralized billing and provided statistics that did not check out from the SCPS end.

Dr Cheung reported that in the past month he had been exchanging emails with APA executive about the differences between APA statistics and SCPS statistics

A motion was made for SCPS to continue its current way of billing and managing its finances. Ten members had a yes vote, four members had a no vote and there was 1 abstention. One member expressed their concern about the prematurity of the voting given that Dr Cheung was still exchanging emails with APA to get clarifications on the statistics.

Rudin and Williams:

Dr Marder was nominated for the Williams award. He read an impressive resume and all members voted unanimously in his favor as the recipient of the Williams award

Tellers Committee:

Four SCPS members volunteered to approve the election results and call to inform the newly elected council members

SCPS Awards/Installation:

The installation and awards ceremony is scheduled for April 27, 2019. Ms Thelen informed council that only twenty people have signed up for the event so far.

Council members discussed the possibility of event sponsorship in the future.

Office Lease Update:

Mindi reports that the rent negotiator she has engaged informed her that they are working to negotiate for rent at \$2.40/ft and maximizing at not more than \$2.70/ft in 5 years

Resident Movie Night:

Dr Wagreich reported that a resident movie night is in the works. He requested that council approve the sum of \$150 to pay for expenses for the event.

Council unanimously approved use of \$150 from the funds already approved in the budget for CPA resident/fellow activities

PAC:

Dr Fouras reported that the CPA PAC continues to work to find creative ways to raise funds for CPA. He announced that it appears that SCPS generates the most funds for the CPA PAC

FIG Report:

Dr Fouras announced that he and Dr Little held the first event on March 28, 2019 at Dr Fouras' house. Dr Fouras reported that the show rate had been slightly less than expected and noted that this might be due to a last-minute change of date (originally scheduled for March 27). It was reportedly a success per few attendees on council.

Council members suggested opening event to non-members as a potential recruitment tool as well as expanding its beneficiaries to include ECPs

Council Member Changes:

Dr Red announced that three ECPs active on council were either moving away or already moved. These are Drs Do, Wiita and Haddad. She wished them well

Newsletter:

Dr Goldenberg summarized the highlights from the newsletter. He thanked the contributors to this month's newsletter. He encouraged members to continue to make contributions to the newsletter. He asked council members to ask colleagues to submit articles. He also asked members to suggest new options/columns for the newsletter

PRESIDENT-ELECT'S REPORT Dr Cheung

Dr Cheung gave highlights from the CPA March 17, 2019 meeting

- APA Assembly recorder, Paul O Leary reported that the 2021 APA meeting will be held in Los Angeles
- Area 6 Board Trustee Report – Mindy Young reported that the Institute for Psychiatric Services meeting has not been profitable, therefore the APA is re-analyzing vision, focus, and name, voting to not hold IPS in 2020
- APA liaison reported on Federal Parity Legislation: Ten years after passage of the Mental Health Parity and Addiction Equity Act (MHPAEA), the APA is pursuing an aggressive federal legislative agenda to ensure robust enforcement of the original law...
- Insurers would be required to submit information to the Department of Labor regarding how they design and apply managed care practices such as prior authorization, step therapy, network admission standards and reimbursement rates, among others
- Proposal to Weaken Medicare Part D Protected Classes: APA submitted comments opposing the Administration's proposal to weaken the Medicare Part D six protected classes (anticonvulsants, antidepressants, antineoplastics, antipsychotics, antiretrovirals and immunosuppressants) by allowing additional utilization management tools to be applied
- FDA's Reclassification of Electroconvulsive Therapy (ECT): The Federal Drug Administration (FDA) has proposed to re-classify ECT from a class III (high risk) medical device to class II (low risk) device for use in treating severe major depressive episode associated with MDD or Bipolar Disorder in patients who are treatment-resistant or who require a rapid response due to the severity of their psychiatric or medical condition

TREASURER'S REPORT Dr Rees

Dr Rees reported that we are under budget for 2019 dues, over budget for 2019 publication, over budget for the spring meeting, over budget for overall income and cash at hand is currently \$23,000 less than what it was when compared to last year.

We have filed our taxes for 2018 and have a \$27,000 loss.

A unanimous vote was passed to accept the report.

LEGISLATIVE REPORT Dr Shaner

Dr Shaner reported that four CPA-sponsored bills recently passed important hurdles.

-AB 565 (Maienschein) would provide more funds for loan repayments for psychiatrists who choose to work in the county systems where the psychiatric vacancy rate is high

-**AB 682 (Eggman)** would set up an online registry for psychiatric bed availability that emergency rooms could access

-**AB 1268 (Rodriguez)** would discourage unnecessary and cumbersome utilization management by managed care companies, especially prior authorization procedures

-**AB 1031 (Nazarian)** would create a better system of care for youth substance abuse.

Other bills of psychiatric interest include

AB 766 (Chui) which would have banned large sugary drinks (that could adversely affect individuals with metabolic syndrome), was withdrawn after strong opposition

SB 201 (Wiener) seeks to require that surgery to alter ambiguous genitalia be in most cases prohibited until individuals are old enough to consent, with the stated goal of correcting “abuses” when self-identified intersex individuals are surgically altered as infants. There has been strong opposition thus far from medical groups on the basis that the bill’s language is vague and such decisions should be based on discussion among patients, parents and physicians, and not legislated.

Many other bills with psychiatric implications are continuing through the legislative process, and CPA is actively involved in ensuring that psychiatrists actively participate. This is the end of the bill submission season and then provided updates on CPA-sponsored bills

ASSEMBLY REPORT: Drs Fogelson/Schaepper

Dr Fogelson reported that the ‘universal health care for all’ action paper that he authored was just endorsed by CPA earlier in the week. Dr Fouras volunteered to advocate for endorsement of the paper during the CMA/AMA later this year.

Dr Schaepper reports that there are over 40 action papers up for review by the Assembly. She mentioned some of the topics which ranged from various scope of practice issues to climate issues

MEMBERSHIP REPORT Dr Ijeaku

Current Active Membership –907

Total Membership 1005

Five RFMs and four GMs applied; all have met the basic criteria for membership.

A unanimous vote was passed to accept the new members

PROGRAM COMMITTEE REPORT Ms Thelen

Ms Thelen reported that the turn out for the just concluded suicide-themed spring meeting held at the Cedar Sinai on April 6, 2019 was low as had been anticipated. She reports that there had been last minute hiccups about the venue from the hospital. The meeting was moved to a smaller venue at the last minute

NEW BUSINESS:

Dr Schaepper announced that there is a new loan repayment program for physicians and encouraged members to access the program

Ms Thelen shared the invitation to SCPS council members for a social/welcome event during the upcoming APA meeting in San Francisco from NCPS

OLD BUSINESS:

Dr Red announced that Dr Chang has agreed to head the newly created Disaster Relief Committee

Welcome to SCPS' New Series: SCPS Flashback Photo Gallery



Doryann Lebe, M.D. with Los Angeles Mayor, Tom Bradley, circa early 1990's, For Mental Illness Awareness Month.



Christina Benson, M.D., Dan Seigel, M.D. and Jeff Sugar, M.D., circa 1990's.

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