

camhconnexions

Mobile laboratory launches CAMH Research Renaissance Project

The first lab on wheels to study mental health and addictions in small Ontario communities may be coming soon to a neighbourhood near you. Unveiled in late February, the Mobile Research Laboratory will allow CAMH researchers to extend their reach to underserved populations such as First Nations, rural and remote populations, and into communities that lack the resources for conducting such research.

The mobile lab enables researchers to measure important factors in co-occurring mental health and addictions that are unavailable from large health surveys. A standard core questionnaire of basic measures can be shared by researchers working on different studies. This research will provide information on underserved communities that can be used to develop new ways to deliver services.

It's expected the mobile lab will reach 20 communities over the next few years, starting with Port Colborne this spring. The



CAMH Research Program leadership and scientists (L-R) Drs. Jim Kennedy, Bruce Pollock, Juergen Rehm, Samantha Wells and Benoit Mulsant (obscured) cut the ceremonial ribbon to launch the first Mobile Research Laboratory to study mental health and addictions in Ontario communities.

first project to use the mobile lab is called Researching Health in Ontario Communities. Funded by Canadian Institutes of Health Research (CIHR), this study will examine factors at the individual and community levels that lead to the development of mood and anxiety disorders, alcohol and drug abuse and interpersonal violence.

This mobile research lab is part of CAMH's largest ever scientific endeavour: the \$38 million **CAMH Research Renaissance Project**—extending from the neuron to the

neighbourhood level. Funders are the Canada Foundation for Innovation (CFI) and the CAMH Foundation.

Using a unique interdisciplinary and integrative approach, an outstanding team of CAMH scientists—neuroscientists, radiochemists, psychiatrists, epidemiologists, social scientists and more—are advancing the understanding, treatment and prevention of mental illness and addictions. Stay tuned for the next phase—focusing on the neuron end of the continuum—to be announced soon.

Brain imaging and genetic analysis may help identify people at early risk for Alzheimer's disease

An innovative new CAMH study has combined genetics and brain imaging to determine who may be at risk for developing late-onset Alzheimer's disease long before symptoms appear. Scientists found evidence suggesting that a variation of a specific gene may play a role in this disease, which accounts for over 90% of Alzheimer's cases.

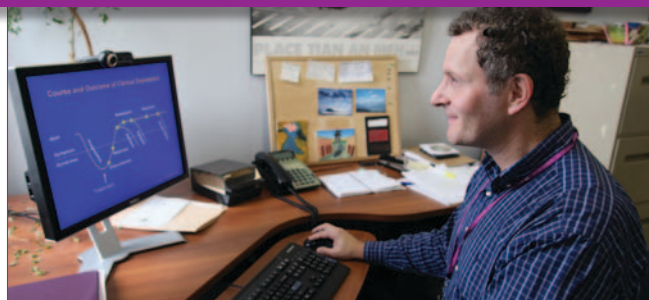
The gene, which is called brain-derived neurotrophic factor (BDNF), is crucial to maintaining healthy function of the brain, primarily the brain's memory centre. It is responsible for learning and memory function. A combination of genetic screening and brain imaging found that the variation of the BDNF gene called val66met influenced exactly those brain structures and connections that deteriorate at the earliest phases of Alzheimer's disease.



Dr. Aristotle Voineskos

“Our sample consisted of healthy adults who passed all cognitive testing and displayed no clinical symptoms of Alzheimer's disease, yet the brains of those who carried the gene variation had differences in their brain structures consistent with changes we see in people at the earliest stages of Alzheimer's disease,” said Dr. Aristotle Voineskos, physician and scientist at CAMH, and principal investigator of the study.

“In the past, Alzheimer's disease could only be diagnosed and treated once outward symptoms became present,” added Dr. Voineskos. “Early identification is key because, in addition to seeking therapeutic treatments early to reduce suffering, delaying Alzheimer's onset by only two years has the potential of saving the Canadian health care system nearly \$15 billion over the next 10 years. The combination of brain imaging and genetics is a key approach that may help us to identify people at risk for Alzheimer's disease.”



Dr. Zindel Segal

Mindfulness meditation found to be as effective as antidepressant medication in prevention of depression relapse

Mindfulness-based cognitive therapy—where patients use meditation—provides equivalent protection against depressive relapse as traditional antidepressant medication, according to new CAMH research.

The study compared the effectiveness of pharmacotherapy with mindfulness-based cognitive therapy (MBCT) by studying people who were initially treated with an antidepressant and then, either stopped taking the medication in order to receive MBCT, or continued taking medication for 18 months.

“With the growing recognition that major depression is a recurrent disorder, patients need treatment options for preventing depression from returning to their lives,” said Dr. Zindel Segal, head of the Cognitive Behaviour Therapy Clinic in the Clinical Research Department at CAMH.

“Data suggest that many depressed patients discontinue antidepressant medication far too soon due to side effects or an unwillingness to take medicine for years. Mindfulness-based cognitive therapy is a non-pharmacological approach that teaches skills in emotion regulation so that patients can monitor possible relapse triggers as well as adopt lifestyle changes conducive to sustaining mood balance.”

Over an 18-month period, relapse rates for patients in the MBCT group did not differ from patients receiving antidepressants (both in the 30% range), whereas patients receiving placebo relapsed at a significantly higher rate (70%).

“For that sizeable group of patients who are unwilling or unable to tolerate maintenance antidepressant treatment, MBCT offers equal protection from relapse,” said Dr. Segal. “Offering pharmacological and psychological interventions may keep more patients in treatment and thereby reduce the high risk of recurrence that is characteristic of this disorder.”

Workers most invested in their jobs have highest stress levels

A workplace's key employees may be at the greatest risk of experiencing high levels of work stress, according to a new study led by Dr. Carolyn Dewa, senior scientist and head of CAMH's Work and Well-being Research and Evaluation Program.

In a survey of 2,737 workers, 18 % reported that their job was "highly stressful."

The odds of having high stress were greater if workers were managers or professionals, if they thought their poor job performance could negatively affect others, or if they worked long or variable hours.

"The people who report high stress are the ones most invested in their jobs," said Dr. Dewa. "Employers should be very concerned with keeping this population healthy. From a business perspective, it is in a company's best interest to support these workers."

The job characteristics associated with stress pointed to workers who were engaged and responsible. If workers felt their poor job performance could result in

any physical injury, damage to company's equipment or reputation, or a financial loss, they were twice as likely to report high stress.

Having a remote worksite, or entertaining or travelling for work also increased the odds of being stressed. So did variable hours such as being on call, doing shift work or having a compressed work week.

"It is important that employees have access to resources that address their mental health concerns. In the long run, these interventions can help save some of the annual \$17 billion in lost productivity in Canada," said Dr. Dewa. "Employers should be asking, 'What am I doing to reduce stress in my most valuable people?'"

On the other end of the scale, 82% of workers reported low or no stress. This group was more likely to be male, single, under the age of 25 or work in a small business. In addition, if workers were satisfied with their jobs, they were less likely to identify their jobs as being highly stressful.

29,000 Ontario students report problem gambling – drug use and suicide a concern

A CAMH survey found more than two-thirds of the students who are problem gamblers also reported problems with substance use and/or alcohol use, and 25% reported a suicide attempt in the past year.

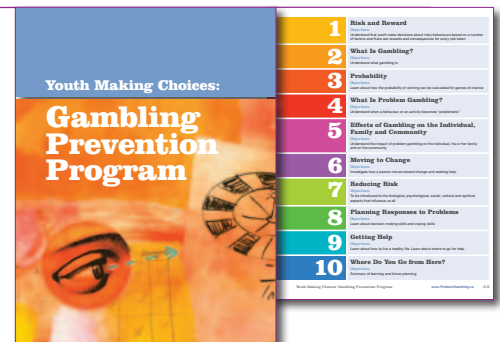
"We also found that students who reported problem gambling indicators also reported high rates of elevated psychological distress and other potentially dangerous behaviours," said Dr. Robert Mann, senior scientist in CAMH's Social and Epidemiological Research Department and principal investigator on the study.

The Ontario Youth Gambling Report looked at self-report data from over 9,000 students across Ontario. The most commonly reported activities among students were betting on card games and purchase of lottery tickets, and least

common were internet gambling and gambling in casinos. Based on the results, the survey indicates approximately 29,000 Ontario students from grades 7-12 are gambling problematically.

They were 11 times more likely to report involvement in gang fights and carrying a handgun, and were 20 times more likely to report selling drugs other than cannabis.

"Students, parents and teachers need more education about what to look for in youth and how to help. What this research tells us is that there are real harms associated with gambling which our public health and healthcare policies, education system and corporate citizens can't ignore," said Dr. Bruce Ballon, Head of CAMH's Adolescent Clinical and Educational Services (A.C.E.S.) for



Problem Gambling, Gaming and Internet Use.

CAMH's Problem Gambling Institute of Ontario developed a ten-lesson curriculum for teachers called "Youth Making Choices: Gambling Prevention Program," aimed at helping students enhance coping skills, develop knowledge of probability, and improve students' ability to recognize and avoid problematic behaviours associated with gambling.

The curriculum is available now and can be downloaded from the "Resources for Professionals" section of www.problemgambling.ca

CAMH storybook tackles kids' smoking fears

With the prevalence of anti-smoking messages, kids today know more about the dangers of smoking than ever before, and often have concerns when people in their lives smoke cigarettes.

Marshalling its expertise in addictions, children's mental health and education, CAMH developed a new children's storybook called "Smoking and Quitting: Clean Air for All" to tackle these worries. Copies were distributed to every elementary school and public library across Canada during National Non-Smoking Week in January.

"Kids grow up hearing about the dangers of smoking, including some messages that are really aimed at adults," said Dr. Irfan Mian, psychiatrist in CAMH's Child, Youth and Family Program. "This can cause confusion and concern for kids, especially if parents, caregivers, other family members and people they admire smoke. It's important to talk to kids about the realities concerning smoking and encourage them to discuss their feelings. Discussing the facts is one of the most important things you can do for them."

Produced in both English and French with support from Health Canada, "Smoking and Quitting: Clean Air for All" has received a recommendation from Curriculum Services Canada to become part of the supplemental curriculum. The book is also meant for family members to read and discuss together or for a child to read independently.

For more information, visit www.camh.net/publications.



Helping more Ontarians quit smoking

Minister of Health Promotion and Sport, the Honourable Margaret Best, pictured above in red with (L-R) CAMH CEO Dr. Catherine Zahn; Dr. Anne DuVall, president, Ontario College of Family Physicians and Dr. Peter Selby, CAMH clinical director, Addictions Program and head of the Nicotine Dependence Clinic, visited CAMH's TEACH Learning Centre on *Weedless Wednesday* to announce more help for smokers in Ontario who want to quit. The Training Enhancement in Applied Cessation Counselling and Health (TEACH) Project is geared toward training health care professionals in the public, private and non-profit sectors who provide counselling services to people who use tobacco.

Beginning in Spring 2011, Family Health Teams across the province will be able to partner with CAMH to provide access to free over-the-counter nicotine replacement therapy (NRT) such as nicotine patches and gum, combined with counselling.

Providing grief, crisis and trauma training in Haiti

The January 2010 earthquake changed Haiti forever. As the toll of human suffering continues to rise, people and organizations around the world have rallied to help Haitians face the challenge of rebuilding their lives and their country.



CAMH's Antoine Derose training community service providers in Port-au-Prince.

This past summer Akwatu Khenti, director of CAMH's International Health Office, Antoine Derose, CAMH program consultant, and Dr. Akua Benjamin of Ryerson University's School of Social Work led the CAMH relief trip to Port-au-Prince, Haiti.

"Our response included the deployment of a group of mental health specialists from Toronto who provided culturally appropriate training for community and religious leaders, service providers, and traditional healers in disaster relief, bereavement, and other mental health-related issues," explained Akwatu. "In order to maximize the usefulness of the workshops for all participants, we distributed select CAMH publications and educational materials."

With collaboration from NGOs and local organizations, CAMH's team provided a series of nine training sessions with various members of the community. "We averaged about 45 participants each day, a total of roughly 416 participants for all the workshops. The feedback we have received has been overwhelmingly positive. They were extremely impressed with the team of specialists and the quality of information received," said Antoine.



CAMH and Qikiqtani Regional Hospital staff meet to share knowledge

CAMH develops partnership with Nunavut hospital

In October 2010, CAMH staff flew to Nunavut to develop a unique partnership with a fellow hospital in need – one that faces incredible challenges and limited resources.

CAMH's Graham Vardy, Athina Perivolaris and Kristen Cleary provided week-long training to help the leadership team of the Qikiqtani Regional Hospital manage complex client issues, including psychiatric acuity, aggression, and intoxication.

"We visited the inpatient unit and ER, trying to understand how their processes worked and where we could provide further training and knowledge," said Graham, who was surprised that the inpatient unit was a combined one that manages obstetrics, general medicine, ICU, psychiatric and addiction clients all on the same unit.

After interviewing staff and hospital leadership, the CAMH team had a good understanding of the clinical team's challenges and were able to make recommendations about the physical, educational and process improvements that could be considered.

The hope is for CAMH to continue working with the Qikiqtani Regional Hospital to provide ongoing support in managing its complex clinical situations.

Highlighting the value of harm reduction in addiction treatment

As one of the four essential ‘pillars’ of comprehensive addiction treatment, harm reduction addresses problems that the other pillars do not. That was one of the observations provided to a Kingston-area audience of service providers and family members by CAMH senior scientist Dr. Carol Strike during a CAMH in the Community event in November.



CAMH provincial services staff with presenter Dr. Carol Strike (centre). (l-r) Chris Sullivan, Michael Piercy, Dr. Carol Strike, Heather Lackner, and Trevor Wereley.

“Consumption of illicit substances is a global phenomenon influenced by varied social, economic, political, and cultural environments, not simply individual actions. Many societies respond to these problems with a four pillar approach including prevention, drug treatment, enforcement, and harm reduction. Canada’s anti-drug strategy does not include a harm reduction pillar but should, because prevention does not prevent all people from using drugs,” said Dr. Strike.

HARM REDUCTION IS ANY POLICY OR PROGRAM DESIGNED TO REDUCE DRUG-RELATED HARM WITHOUT REQUIRING THE CESSATION OF DRUG USE.

“Relapse is a common feature of the process of recovery from addiction. Enforcement does not reduce drug-related problems. Closely aligned with a public health approach, harm reduction is designed to address problems that the other pillars do not.”

Watch Dr. Carol Strike speak about harm reduction on the CAMH YouTube channel: www.youtube.com/camhtv



Dr. Kwame McKenzie

Improving mental health for diverse groups

Speaking in Niagara to participants from 45 agencies, transcultural psychiatrist Dr. Kwame McKenzie, CAMH’s Medical Director of Diversity and Mental Health, used his 20 years of extensive work in the field of mental health and diverse populations to highlight the many barriers newcomers encounter. Dr. McKenzie spent most of his talk reviewing approaches to help overcome barriers to mental health and addiction services for newcomers, including using:

- population-based, flexible services that involve diverse communities to understand and meet their needs;
- service development tailored by provinces, territories and regions to their demographic imperatives; and,
- experience of local communities and people with lived experience to help develop more appropriate services.

Awards and appointments

Dr. Zindel Segal, Cameron Wilson Chair in Depression Studies at CAMH, has received an R34 award from the National Institute of Mental Health to develop an online platform for delivery of Mindfulness Based Cognitive Therapy for Prevention of Depressive Relapse.

Seven CAMH scientists have been awarded Young Investigator Awards by the U.S.-based National Alliance for Research on Schizophrenia and Depression (NARSAD). The award provides support for two years to enable promising investigators to begin their careers as independent researchers.

Congratulations to the following young investigators:

DR. DANIEL BLUMBERGER - DEPRESSION
 DR. GEORGE FOUSSIAS - SCHIZOPHRENIA
 DR. ZACHARY KAMINSKY - DEPRESSION
 DR. ROMINA MIZRAHI - SCHIZOPHRENIA
 DR. TAREK RAJJI - SCHIZOPHRENIA
 DR. ARUN TIWARI - SCHIZOPHRENIA
 DR. ARISTOTLE VOINESKOS - SCHIZOPHRENIA

The Parkinson Society Canada gave five Canadian researchers a boost in funding to improve quality of life for people with Parkinson's. **Dr. Nicola Ray**, a CAMH post doctoral fellow received The Lois Harper Basic Research Fellowship award to study impulsive behaviours, including pathological gambling, as a side-effect of medications used to treat stiffness or tremor.

During the Canadian Psychiatric Association's 60th Annual Conference in Toronto, CAMH clinicians were honoured for their work. **Dr. Ari Zaretsky** was awarded the Association of Chairs of Psychiatry in Canada Award for Excellence in Education.

Dr. Sophie Grigoriadis and **Dr. Lori Ross** won second place for the R.O. Jones Award for Best Paper.

The Greater Toronto Chapter of the Association of Fundraising Professionals (AFP) honoured **G. Raymond Chang**, a CAMH donor, with the "Outstanding Philanthropist Award."

Susan Mullin, vice president of Philanthropy for CAMH Foundation, received the 2010 "Outstanding Fundraising Professional Award."



G. Raymond Chang

Dr. Peter Menzies, CAMH's clinical head of CAMH Aboriginal Services, was appointed to the Aboriginal Canadian Institutes to Health Research branch as well as being named to the Institute Advisory Board.

The American College of Psychiatrists has given the Award for Research in Geriatric Psychiatry to CAMH Vice President, Research **Dr. Bruce G. Pollock**. His research has focused on the efficacy and adverse effects of psychotropic drugs in elderly patients and the ability of pharmacogenetics to personalize medications in older adults.

CAMH reaches new heights

CAMH reached a major construction milestone in its Queen Street Redevelopment Project with the concrete “topping off” of one of the three new buildings, signifying that the highest point has now been reached. This phase of the project is scheduled for completion in 2012.



From left to right: Mike Layton, councillor, Ward 19; The Honourable Liz Sandals, MPP and parliamentary assistant to the Minister of Health and Long-Term Care; Dr. Catherine Zahn, president and CEO, CAMH; and Matt Ainley, executive vice president, Carillion Canada celebrate the “topping off” of the Gateway Building.



After the concrete was poured, Matt Ainley, the Honourable Liz Sandals, and Dr. Catherine Zahn signed a commemorative steel beam that will be later placed in the Gateway Building. Guests also had the opportunity to sign the beam.

Coming events

“Edward the Crazy Man”

a play for children about mental illness and homelessness.

Presented by Workman Arts,

April 28 – May 15, 2011.

Call 416 583-4339 for more information.



“UnMasked”

a CAMH Foundation event that brings together leaders from business, philanthropy, health, entertainment and the arts in support of mental illness and addiction. **May 11, 2011.**

Call 416 979-6909, ext.6169 for information.

Workman Arts “Being Scene: art exhibition”

opens at Hart House, University of Toronto, **June 1, 2011.**

Call 416 583-4339 for more information.

Watch us on YouTube at www.youtube.com/camhtv and join us on twitter and facebook



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HIGHLIGHTS DISPONÍVEL EM PORTUGUÊS

Published by: CAMH Public Affairs

Public_Affairs@camh.net

416 535-8501, ext. 4250

Editor: Margaret Goulding

Centre for Addiction and Mental Health (CAMH),
33 Russell Street, Toronto, ON M5S 2S1

www.camh.net

How to reach CAMH

CAMH INFORMATION
CENTRE

info@camh.net

CAMH
1001 Queen Street West
Toronto, ON M6J 1H4

WEBSITE
www.camh.net