VISN 22 MIRECC HOSTS VA SOCIAL SKILLS TRAINING FOR SERIOUS MENTAL ILLNESS

Stephen Marder, MD and Shirley Glynn, Ph.D. opened the second training program of a four part series May 19-20, 2008 in Long Beach, CA. VA Social Skills Training for Serious Mental Illness is a collaborative training program for healthcare professionals in recovery coordinator roles. Thirty attendees came to receive this training from throughout VISN 22 and as far away as Boise Idaho and Seattle Washington. This portion of the series was hosted by VISN 22 MIRECC, but VISN 5 MIRECC in Baltimore played an instrumental role in developing the training program, and collaborating with our staff to make this a successful event. Presentations were mixed with modeling, panel discussions, break out sessions, and opportunities for trainees to mingle and exchange ideas.

Dr. Marder spoke of the importance of this theme in the VA, due in large part to new data on the stagnant recovery of patients under VA care. He discussed the President’s New Freedom Commission on Mental Health (2003) and addressed how the Recovery Model in VA Mental health Programs needs to be adopted and implemented and VA staff need to be educated on recovery. He described how this Recovery Oriented approach can provide improved care for Veterans and their families more so than traditional models. Dr. Marder stated, “Adapting these principles requires a paradigm change in how clinicians interact with their patients.”

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VISN 22 MIRECC surveyed all five VISN 22 mental health departments about their facility’s recovery-oriented service needs. Each facility was provided with a list of recovery-oriented services and asked to rank their top five priorities. In addition, each facility was asked to briefly describe the current state of their recovery services, identify any challenges to its implementation and suggest ways in which MIRECC could help assist the facilities with implementation and/or expansion of services.

The survey findings revealed the top three areas of need for additional training or resources. Three out of four facilities ranked the following services as a top priority (one facility declined to prioritize):

1) Training to support the implementation of peer providers
2) Family support for OIF/OEF
3) Illness Management and Recovery (IMR)

RECOVERY INITIATIVE by Stacey E. Maruska, LISW

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Letter From The Director

Stephen R. Marder, MD

This issue describes the first in a series of programs that the MIRECC will launch to enhance the clinical care of veterans with serious mental illnesses. The VA Office of Mental Health Services is supporting a national program to offer training in psychiatric rehabilitation. This training is being provided through a joint effort by the VISN 5 and VISN 22 MIRECC’s. The first program took place in Baltimore in April and included VA clinicians from the Eastern US. Our MIRECC will host a series sessions that will focus on providers from the Western US.

Over the three years of the project 380 VA clinicians will be trained to provide Social Skills Treatment (SST) for individuals with serious mental illnesses. SST is an evidence-based treatment which uses social learning techniques to improve social skills. It is provided in a group setting and emphasizes behavioral rehearsal of new skills. Each trainee will receive their initial training in a two-day workshop which is followed by six months of weekly supervision and consulting through conference calls. All of the trainees will be expected to incorporate this training into their regular clinical roles.

I believe this training is an important step toward implementing a recovery focus for VA Mental Health. First, it focuses on improving the community functioning of patients. Further, it is very much a patient-centered form of treatment. Each participant is asked about their personal goals and the training sessions focus on strategies toward reaching those goals.

ECC is also planning other training activities for Mental Health clinicians. In September we will host a one-day workshop that will train clinicians in Cognitive Behavior Therapy for Psychosis. The training will be provided by Dr. David Kingdon, from the United Kingdom. We also anticipate hosting national training for family interventions for both the seriously mentally ill and veterans returning from OEF and OIF.

Initial Results for Donepezil (Aricept) Trial

Cognitive deficits are prevalent among patients with schizophrenia and have been linked to both liability for the disorder and to everyday function. There is growing interest in understanding the neural underpinnings of cognitive dysfunction in schizophrenia and discovering pharmacological agents that may improve cognition and functioning. Current treatments for schizophrenia primarily target psychotic symptoms and provide only minimal cognitive benefits. The cholinergic system has been linked to cognitive function, particularly in degenerative diseases like Alzheimer’s, and procholinergic agents appear to delay progression of cognitive deficits and may slow functional brain changes in that disorder. We tested whether augmenting standard atypical antipsychotic treatment with donepezil, an acetylcholinesterase inhibitor, would improve cognitive performance, clinical symptoms, performance-based measures of functional abilities, or brain response during a learning task among schizophrenia.

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**Fellowship Program News**

Congratulations to Irene Bratti, MD Fellow, UCLA, and Joshua Madsen, Ph.D. Fellow, UCSD who will be graduating from the MIRECC Fellowship program out of San Diego VA Medical Center at the end of June 2008. The Executive Committee is grateful for their considerable contributions to the MIRECC program and value the experience of having them as a part of the MIRECC team. We all wish them the best in their future endeavors.

Jonathan Meyer, MD will be welcoming a new fellow to the VA San Diego Healthcare System starting July 1, 2008. Reshma Bhat, MD is a graduate of the UCSD Psychiatry Program. She has interests in aging, and the impact of chronic PTSD on the aging progress.

For more information about the MIRECC Fellowship program visit:


Psychiatry Contact: Jonathon Meyer, MD, 858-552-8585, ext. 3570

Psychology Contact: Lisa Eyler, Ph.D., 858-552-8585, ext. 7666

**Spotlight on MIRECC 22 Staff**

Mahalah Buell, SRA III, is the Lab Manager for Dr. Mark Geyer, Director of the MIRECC Neuropsychopharmacology Unit in San Diego. She has a B.A. in Human Development from UCSD and has been with the lab since 2001. In 2005 she became the Lab Manager. She coordinates all aspects of Dr. Geyer’s work done both at his UCSD lab and at the MIRECC lab at the VAMC San Diego. She works closely with Dr. Geyer, Dr. Powell, Dr. Risbrough, and Dr. Zhou on many aspects of the research. Mahalah keeps busy managing the training and all work of the labs staff technicians and undergraduate students. She also works with the postdoctoral researchers in the lab, Dr. Young, Dr. Gresack, and Dr. Halberstadt.

Currently Mahalah is excited about the research involving the Five Choice Serial Reaction Time Task (5CSRT) and the rodent Continuous Performance Task (rCPT). The new cognitive direction that the lab is starting to move in is opening up a wide array of new methods in order to work towards increasing the functional efficacy of treatments in Schizophrenia.
a paradigm change in how clinicians interact with their patients.”

Dr. Glynn outlined why the use of Evidence Based Practices are important to the Recovery Model and described treatments that have demonstrated empirical effectiveness in the treatment of individuals with schizophrenia and other severe mental illness.

A huge thank you goes out to the planners at the Chesapeake Health Education Program, Inc. for their generous support and to the excellent trainers that came out to lead lively, interactive discussions and to introduce the steps required to implement the Recovery Model at their worksite.

The trainers were: Joanna Strong Kinnaman, Ph.D.; Cindy Clark, RN; Shirley Glynn, Ph.D.; and Susan Gingerich, MSW.

The VISN 22 Executive Committee wishes all the awardees success with their projects and look forward to your reports upon completion of your project.

As a reminder to awarded Units, all monies must be obligated by September 30, 2008. If you have questions about the Pala Grants, please contact Jon Strmiska, AO at 858-552-8585, x3525.
In an effort to support the mental health recovery initiative the VISN 22 MIRECC Educational Unit is actively planning and surveying ways to address the above mentioned facility needs. To support the implementation of peer providers MIRECC will fund the certification of peer providers in the network. Under the Mental Health Uniform Services Package peer providers are required to be certified as Peer Support Specialists. The Depression Bipolar Support Alliance (DBSA), which has been used by a number of VA's for peer specialist certification, is going to provide training for five peer support technicians in VISN 22 this year.

MIRECC is surveying existing clinical programs to address the need for more family support for OIF/OEF veterans. One program appears promising, it was developed by Mark Salzer, Ph.D. from the UCLA Center for Community Health. Project FOCUS which stands for Families Over Coming Under Stress is an 8-session resiliency-building program designed for military families and children facing the challenges of multiple deployments. It is a skill based, counselor-lead intervention, using family-level techniques to highlight areas of strength and resilience in the family and identify areas in need of growth and change to contend with current difficulties. Long Beach Medical Center in partnership with MIRECC has started to explore the opportunity of having trained Marriage and Family Therapy interns provide this service for returning soldiers and their families. —Stacey Maruska, LISW serves as Local Recovery Coordinator at the Long Beach VA.

Cont’d from Page 2 **Donepezil (Aricept) Trial**

patients. Clinically-stable outpatients with schizophrenia or schizoaffective disorder were enrolled in a double-blind, placebo-controlled augmentation trial. Participants received 5 mg of donepezil or identical-looking placebo for 4 weeks, then 10mg for 8 weeks, followed by 2 weeks at 5mg, in addition to their stable dose of atypical antipsychotic medication. Neuropsychological and clinical assessments were performed at baseline and 12 weeks. A subset of participants received functional magnetic resonance imaging at these timepoints as well, and a healthy comparison group that did not participate in the trial was also scanned on two occasions.

Summary findings: Consistent with most other randomized clinical trials of cholinergic agents in schizophrenia, no significant clinical or cognitive effects of donepezil were observed. However, similar to one prior neuroimaging study, our preliminary results showed that patients who took donepezil showed an increase in the brain response of the left prefrontal cortex during a learning task compared to those who took placebo. After donepezil treatment, the brain response in this region looked more like that of healthy participants. Since these normalizing brain effects of donepezil did not seem to result in overall benefits to cognition or symptoms, the search continues for a powerful treatment for cognitive deficits in schizophrenia. The brain imaging findings do suggest, however, that there may be some role for the acetylcholine system in treatment of cognitive deficits in schizophrenia. Pharmacomaging trials, though technically difficult and often small in size, may provide unique information in the search for new cognitively-beneficial compounds.

Warm colors show region in the left frontal cortex in which donepezil-treated participants showed a greater increase from baseline to follow-up in brain response to a learning task compared to placebo-treated participants.
**Quick Tip: PowerPoint Setup**

Do you need all your fonts, colors or background the same on each PowerPoint presentation slide? Before inputting your information follow these steps:

**Step 1:** In the upper menu, choose View > Master > Slide Master

**Step 2:** Select area you want changed > Choose Format > Make desired changes > OK > Click Close to return to Normal View

**Note:** It’s best to set up your style before you begin building your presentation.

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**Upcoming Events:**

**UCSD Graduation Banquet**
~ June 28, 2008  
~ Location: Birch Aquarium, La Jolla  
~ Tracy Riley, 858-534-4040

**National Mental Health Conference**
~ July 20-24, 2008  
~ Location: Washington DC  
~ VACO MIRECC Liaison, 215-823-4035

**Dr. David Kingdon Educational Training**
~ September 8, 2008  
~ Location: Coast Hotel, Long Beach  
~ Kathy Arnett, 562-826-8000, x2546

**MIRECC Retreat**
~ September 16-17, 2008  
~ Location: Coast Hotel, Long Beach  
~ Kathy Arnett, 562-826-8000, x2546

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**In the next issue...**

- Behavioral family therapy
- Fellowship program
- Gregory Brown, Ph.D.—Trip to Hong Kong
- Discussion from the MIRECC Live Meeting on May 27, 2008 to include Unit reviews
- Getting to know the VISN 22 Local Recovery Coordinators (LRC)
- MIRECC Spotlight—Kathy Arndt

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