



West Hudson Psychiatric Society

Serving Rockland, Orange, Sullivan & Delaware Counties

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eSynapse

May 2017

Editor's Comments

James Flax, MD, MPH, DLFAPA

In this issue of eSynapse you will find a summary of our Executive Council meeting so all readers will have an idea of district branch business. But, it's only a summary. Please **come** to a meeting to appreciate the rich discussions. There are comments by our President. Dr. Abdullah has again sent us a new article in his long line of erudite essays. There is a summary of our spring general meeting including a summary of the talk by Katherine Shear. There is the regular communiqué from the APA.

There are ads and announcements that may interest you, including from my malpractice insurer, PRMS. Please scroll all the way to the end to see it all. And, if you are not receiving the MSSNY eNews, here's a link where you can read about issues of interest to all of medicine in New York State: <http://www.mssny.org>.

I am happy to report that Orange Regional Medical Center has received Initial Accreditation from the ACGME. Orange Regional Medical Center Psychiatry Residency is NYCOMEC's and ORMC's first ACGME accredited program.

NYSPA is soliciting detailed information on insurance reimbursements to identify fee and reimbursement discrimination in the payment for outpatient mental health services. Please see the announcement below.

NYSPA Parity Enforcement Project (PEP)

NYSPA is rolling out its newest Parity Enforcement Project initiative to identify fee and reimbursement discrimination in the payment for outpatient mental health services. NYSPA has prepared two Request Forms - one for in-network services and one for out-of-network services - and a set of instructions for using the Request Forms. You will

note that the instructions have been prepared for use for non-psychiatrists because these forms can be used by anyone who has health insurance through a job, through ACA or a Medicare or Medicaid managed care plan. We urge every psychiatrist who has health insurance coverage to submit either an in-network form or both forms (if you have out-of-network coverage). Anyone with health insurance can submit the forms regardless of whether they have received, are receiving or expect to receive treatment for mental illness. The forms do not require the disclosure of any individual medical information and the responses will not include any medical information. These forms can be widely disseminated to individuals receiving treatment and support groups for patients. The key is that NYSPA needs to review the responses in order to identify evidence of discriminatory coverage. The forms can be downloaded from the NYSPA website by [clicking here](#). Please join us in participating in this effort to identify and root out reimbursement discrimination in the treatment of mental illness.

I want to underline the importance of the APA PAC. However much we may dislike it, this is the way American politics works. **More important than the amount of money contributed is the number and percentage of members who contribute.** Politicians want to know how many people feel strongly enough about the issue to give to the PAC. If you haven't contributed, please consider doing so. Even \$1 adds your name to the list and number of donors. See the form appended to the last page of eSynapse. I make a point of giving every year because it is the APA PAC that advocates for my interests as a psychiatrist better than any other organization.

**Executive Council Meeting
II Fresco Restaurant, Orangeburg, NY
Friday, June 9 2017
Journal Club (15 minutes) PROMPTLY at 12:30
Followed immediately by Business Agenda**
**Please contact Mona Begum, MD (drmonabegum@gmail.com) if you are planning to attend.
IT'S A FREE LUNCH**

Dr. Ferro recently advised me of a useful electronic publication of psychiatric advice – SimpleandPractical.com. This prompted me to think of all the publications I use to keep up to date. I do not use UpToDate.com though I understand it is very useful. I do use the APA publications, including Focus. I am a member of the listservs of Columbia University Psychiatry and multiple PsychoPharm listservs. I pay for two monthly newsletters - Biological Therapies in Psychiatry and The Medical Letter. I read APA News, Psychiatric Times and Clinical Psychiatry News. I sometimes will read Psychiatric Annals as well. I use Epocrates daily. And, there are the daily web searches and Wikipedia resources. As a result of our modern digital resources, I'm thinking of throwing out all the ancient textbooks taking up space on my shelves. I'd be interested in hearing from others about what resources you rely on to keep up to date.

Please join APA's **FREE** 'Find a Psychiatrist' Database by clicking
<http://www.psychiatry.org/psychiatrists/search-directories-databases>.

PRESIDENT'S COLUMN – MAY 2017

Mona Begum, MD, DLFAPA [drmonabegum@gmail.com]

Dear West Hudson Psychiatric Society Members, Colleagues and Friends:

As an ongoing commitment to keep our members abreast of the psychiatry resources available in our community we had Dr. Dan Iosifescu, MD joined our March Executive Council meeting as a guest. Dan is a depression researcher at Nathan Klein Institute, who is doing ketamine trials for patients with refractory depression. He would like to have referrals from the psychiatrists. For detailed information, I encourage you to read the meeting minutes and brief summary of Dan's ketamine trial (see announcement below in this issue of Synapse). We have invited Leslie Davis, founder of Rockland County Depression and Bipolar Support Association [DBSA] to attend our Executive Council meeting next month.

We had our Spring Educational Meeting on Friday, April 28 at La Terrazza Restaurant in New City. The topic was "Complicated Grief and Its Treatment" presented by Katherine Shear, MD, Director of the Center for Complicated Grief at Columbia Presbyterian Hospital. It was a well-attended meeting and the feedback I received from the members about the speaker and the talk was just fabulous. If you were unable to attend the meeting, please read the synopsis of the talk in this issue of eSynapse prepared by our Resident Fellow Member, Eric Jarmon, DO.

Looking forward, we are discussing options about selecting our Fall Educational Meeting speaker/topic. If you have any suggestion or know of a good speaker or a topic you would like to learn about, please let us know.

In our last Executive Council meeting we discussed two open board positions. One is Assembly Representative and the other one is President-Elect. Nigel Bark, MD, who is our current assembly representative for many years has been unanimously selected again to continue in this role as well as begin his tenure as our next President of the WHPS. We had a nominating committee to select the next president elect. We nominated Laura Antar, MD for this role. Congratulations to Laura who was elected in this role by vote from General Membership.

Laura completed Child and Adolescent Psychiatry Fellowship and a PHD in Neuroscience from Albert Einstein/ Montefiore Medical Center. She did a clinical research fellowship in Autism Spectrum and Obsessive-Compulsive Disorder. She is currently a Clinical Assistant Professor at Albert Einstein College of Medicine's Department of Psychiatry and Behavioral Science where she lectures and supervises residents at Montefiore. Laura is in private practice in New City, NY. I am confident that Laura will enrich our district branch with her vast knowledge in the field of psychiatry and her skill & expertise in leadership roles.

We all know that the attempt to repeal the Affordable Care Act [ACA] did not pass. During the March NYSPA Meeting, it was the feeling of most members that APA finally took a position even though it was late in the game to defend our mission to protect equitable, high quality mental health care for our patient population.

As always, I welcome your ideas and exchanges. Our next meeting is on June 9th 2017 at 12:30 pm @ Il Fresco Restaurant in Orangeburg.

Summary from Executive Council Meeting
Friday, April 21, 2017
II Fresco, Orangeburg, NY

Attendees Present: Mona Begum, Nigel Bark, Dom Ferro, Lois Kroplick, Jim Flax, Russ Tobe, Ulrick Vieux, Laura Antar, Eric Jarmon, Eric Benson, Minh-Duc Huynh and Christopher Walfall.

1. Community Mental Health Presentation – Dan Iosifescu, M.D., NKI Depression Researcher
 - a. Has ketamine trial ongoing at NKI. Patients can be paid to receive the treatment.
2. Spring 2017 Educational Meeting Update
 - a. Katherine Shear, M.D., “Complicated Grief”, Fri 4/28 at La Terrazza
 - b. 30 attendees are currently registered
 - c. Speaker is confirmed and hope to get a copy of her presentation early next week
3. Fall 2017 – discuss options for speakers/topics
 - a. Nigel will contact Dr. Altha Stuart, the APA President-Elect to present.
4. APA Annual Meeting in May – Mona, Nigel, Les, Ulrick, Eric and Liz will be attending from our DB
5. Open board positions in May:
 - a. Assembly Rep – Nigel said he would continue in this position if no one else is interested
 - b. Nigel will be both the Rep and the President. This is a good time for a new member to step in. No volunteer from the meeting, but we will seek to have someone serve as Rep with him, as meetings for president and Rep
 - c. President Elect
 - i. Nomination Committee: Mona Begum, Nigel Bark and Russ Tobe
 - ii. Laura Antar was recommended
 - iii. Mona will present her name to the general membership next week for a vote.
6. Partnership with PRMS: Dr. Begum reopened the discussion.
 - a. Yearly flat fee payment with terms laid out in the contract.
 - i. Concerns: Giving our member email addresses, unclear if we are responsible for the cost of signage and their educational meeting, partnering with a commercial entering.
 - ii. Pluses: the funding is helpful; PRMS provides good information
 - iii. Liz will follow up with PRMS on some questions and Mona will contact the President of the NYC DB as a reference.
7. COMMITTEE UPDATES by Committee Chairs.
 - a. Lois: Public Affairs
 - i. Mental Health Coalition: Public Forum on 10/18/17
 - ii. NAMI Walk 5/13: The board approved that we will sponsor NAMI-Rockland
 - iii. Next meeting of MHC 5/4 at Building F at Pomona
 - iv. At NYSPA Public Affairs meeting, they discussed the Goldwater Rule not to diagnose public figures. Commenting on the mental status of members of the Trump administration is unethical.
 - b. Nigel: Public Psychiatry at NYSPA
 - i. Concern about burdensome documentation at state hospitals
 - ii. AOT coming up for vote to be made permanent. Some concern that the new act will micromanage treatment to a greater degree.

- iii. Ann Sullivan spoke about the closing of beds, noting that the money saved is being transferred directly to outpatient care.
 - 1. New hires that work for the state for five years can receive up to \$25,000 per year of student loan forgiveness.
 - c. Jim: Synapse: Soliciting anything for publication, as usual.
8. NEXT EC MEETING – June 9, 2017 at 12:30 at Il Fresco
- a. Journal Club or Guest Presentation
 - i. Possible guest - Leslie Davis – DBSA; Lois will invite her.
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West Hudson Psychiatric Society General Membership Meeting Summary Friday, April 28, 2017 La Terrazza Restaurant, New City, NY

Executive Council Present: Mona Begum, Nigel Bark, Raj Mehta, Dom Ferro, Lois Kroplick, Marc Tarle and Eric Jarmon

Introduction: Dr. Mona Begum opened the 2017 General Membership Meeting and Spring Educational Dinner with a recap of some of her goals she wanted to accomplish during her term as President of West Hudson Psychiatric Society district branch; most notably was to increase membership. Dr. Begum was pleased to announce that her goal was met – from 103 members in 2015 to 117 current members. She also acknowledged the new residency program at Orange Regional Medical Center and thanked Dr. Ulrick Vieux, the Residency Director, for his continued support of our district branch. Lastly, Dr. Begum gave a synopsis of the new Mentorship Program that we created this year, matching all of the residents with the experienced and accomplished psychiatrists in our district branch.

Committee Updates:

- **Dr. Lois Kroplick: Public Affairs** - Mental Health Coalition: Public Forum on 10/18/17; Next meeting of MHC is 5/4 at Building F in Pomona and NAMI Walk is 5/13 – everyone is welcome to join or sponsor.
- **Dr. Jane Kelman: Women's Group** – female doctors meet periodically to discuss women's issues and current events at rotating locations. The next meeting is scheduled for Friday, May 12th at 12:30pm at Dr. Tovah Feldhamer's office.
- **Dr. Nigel Bark: Assembly Rep** – the APA Assembly serves the needs of psychiatrists and recommends actions to the APA Board of Trustees. Dr. Bark welcomed all issues and comments from members to help support the field of psychiatry and the needs of psychiatric patients.
- **Dr. Raj Mehta: Education Chair** - advised that he strives to bring quality and well-known speakers on varied mental health topics to our district branch. Dr. Mehta advised that he has approached Dr. Jeffrey Lieberman, former APA President to present at a future meeting.

New President Introduction: Dr. Mona Begum introduced the West Hudson Psychiatric Society's new President, Dr. Nigel Bark.

New President's Comments: Dr. Nigel Bark acknowledged Dr. Mona Begum for the impressive list of projects that she successfully undertook during her two-year term as President.

President-Elect Vote: Dr. Mona Begum informed everyone that Dr. Laura Antar has been nominated to serve as the President-Elect and assume the role of Presidency when Dr. Nigel Bark's 2-year term is completed. Dr. Antar was then approved by all members present.

Speaker Introduction: Dr. Raj Mehta then introduced our main speaker, Dr. Katherine Shear, Director, The Center for Complicated Grief, who gave an extremely passionate and informative presentation on our educational topic: *Complicated Grief and Its Treatment*. We are very grateful to Dr. Shear for taking time out of her busy schedule to present to a packed house of over 30 attendees.

The following summary of Dr. Shear's talk is authored by Eric Jarmon, DO:

This past Friday, Dr. Katherine Shear, Marian E. Kenworthy Professor of Psychiatry at Columbia University School of Social Work and director of The Center for Complicated Grief, presented on Complicated Grief at the West Hudson Psychiatric Society's Spring Educational Meeting. Bereaving the loss of a loved one is a universal experience we all share as human beings. Even though acute grief is a natural process, it can be a devastating experience that each of us experiences in a unique way as we learn to adapt and go on in life. However, when this process is halted, grief becomes complicated. During complicated grief, the grieving person is unable to adapt to the loss, and life becomes infused with a sense of emptiness that the loved one is no longer there, and only a return of the deceased can relieve the pain.

A treatment strategy for complicated grief includes 16 weekly sessions, specifically tailored for treating this condition. Based on three large studies funded by the National Institute of Mental Health, the techniques applied in these sessions draw from interpersonal therapy, motivational interviewing, positive psychology, and cognitive behavioral therapy. The role of the therapist in these sessions is to help guide the patient through their complicated grief, by addressing the obstacles to the natural adaptive process and fostering resilience.

NAMI WALKS NYC

MAY 7, 2016

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**Join Us Saturday, May 7, 2016 for
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GET STARTED TODAY

• Become a Walk Star

Commit to raising \$1,000 for NAMI and you'll be invited to two exciting events. You'll also receive a commemorative t-shirt and have access to a special registration area on walk day.

• Start a Team

Recruit your friends and family to join your effort. Early registration guarantees your entrance in a special prize raffle.

• Become a Sponsor

Bring your company on board as a proud sponsor of NAMIWalks NYC. Our sponsors get major visibility and recognition for their support of mental health. Contact Sarah Sheahan at 212.684.3365 for details.

• Join the 5K Run

Race for your personal best in NAMIWalks NYC's 5K timed run.

• Stay Engaged

Check your e-mail for dates and other information on our walk workshops

To Support



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Rockland

Contact us at: namiwalks@namirockland.org

Phone: 845.359.8787

or Visit www.namirockland.org/namimwalks.html

CORRESPONDENCE

*(Editors note: I vowed when I started this publication to publish anything sent to me by our members.
Please do so.)*

Silas Weir Mitchell, MD & *The Yellow Wallpaper*

Syed Abdullah, M.D.

The year 1884 marked the 50th anniversary of the formation of the American Medico-Psychological Association. The program committee of the Association searched for a prominent figure as a guest speaker at its golden jubilee celebration. Silas Weir Mitchell, M.D. was the most renowned neurologist, known for his treatment of peripheral nerve injuries during the civil war. He had an international reputation not only for his medical expertise, but also for the novels and poems he wrote. Although known for his critical views of psychiatry, the program committee, in a bold gesture of collegiality, invited him as an honored speaker on this historic occasion. To the surprise of all, this proved to be a chastening experience for the organization, which was to be later called the American Psychiatric Association.

This was a time when the neurologists were already making incursions in the field of mental disorders. The psychiatrists had become confined and sequestered in the Asylums and had come to be known as alienists by their medical colleagues and the general public. The membership of their Association consisted solely of the superintendents of the asylums. There was no treatment known for the illnesses that the alienists specialized in. There was no research or teaching activities going on in the asylums. The superintendents of these institutions acted as custodians and administrative heads. Inside the walled centers of their domain they wielded nearly absolute power for as long as they held their politically assigned position, which was mostly until the end of their lives.

In his speech, Mitchell was merciless in pointing to the drawbacks and shortcomings that existed in the workings of the asylums. He, at this time, was flush with his own eminence as a neurologist and a best-selling author, had started treating the non-psychotic psychiatric patients, who were mostly middle and upper class women of the affluent Philadelphian society. Most of his patients were diagnosed as hysterical, neurasthenic and depressed. His treatment method soon came to be known as Mitchell's 'Rest-Cure.' These expensive treatments were carried out at home or in well-appointed resorts and 'rest homes' with a generous provision of nurses, masseurs and attendants. It was indeed a status symbol to have a female relative under the care of Dr. Mitchell. Many other neurologists, prominent among whom were William Hammond and George M.

Beard, emulating Mitchell, had become famous in the medical profession in New York City and elsewhere. Dr. Hammond even went so far as to propose a resolution to exclude asylum superintendents from membership in the newly formed American Neurological Association.

When Mitchell stood up to speak at the fateful golden jubilee meeting he eschewed the conventional pleasantries and went on hitting below the belts of the gathered hosts. He criticized the lack of progress in the specialty, the isolation of psychiatry from the rest of the medical profession, the absence of resident physicians, labs, and nurse training facilities in the asylums. He lashed out at the customs, bureaucracy and politics that hampered progress. He said it was wrong to attempt both medical care and business management of the asylum. "Insist you are physicians and no more" he said, "the cloistered life you lead give rise, we think, to certain mental peculiarities ...asylum life is deadly to the insane...it should be the last resort not first."

The initial reaction to his diatribes was a defensive embarrassment, which later gave way to self-searching and widespread reforms & improvements which continue to this day. Many years later, when Clifford Beers, a former asylum patient, launched his mental hygiene movement, Mitchell gave his enthusiastic blessings and support to his efforts (see Synapse May-June '03).

To understand Doctor Mitchell let us take a look at his 'rest cure' treatment in his own words:

In carrying out my general plan of treatment it is my habit to ask the patient to remain in bed from six weeks to two months. At first, and in some cases for four or five weeks, I do not permit the patient to sit up or to sew or write or read. The only action allowed is that needed to clean the teeth. In some instances I have not permitted the patient to turn over without aid, and this I have done because sometimes I think no motion desirable, and because sometimes the moral influence of absolute repose is of use. In such cases I arrange to have the bowels and water passed while lying down, and the patient is lifted on to a lounge at bedtime and sponged, and then lifted back again into the newly-made bed. In all cases of weakness, treated by rest, I insist on the patient being fed by the nurse, and, when well enough to sit up in bed, I insist that the meats be cut up, so as to make it easier for the patient to feed herself.

In many cases I allow the patient to sit up in order to obey the calls of nature, but I am always careful to have the bowels kept reasonably free from costiveness, knowing well how such a state and the effort it gives rise to enfeeble a sick person.

Usually, after a fortnight I permit the patient to be read to, one to three hours a day, but I am daily amazed to see how kindly nervous and anaemic women take to this absolute rest, and how little they complain of its monotony. In fact, the use of massage and the battery, with the frequent comings of the nurse with food and the doctor's visits, seem so to fill up the day as to make the treatment less tiresome than might be supposed. And, besides this, the sense of comfort which is apt to come about the fifth or sixth day, the feeling of ease, and the ready capacity to digest food, and the growing hope of final cure, fed as it is by present relief, all conspire to make most patients contented and tractable.

The moral uses of enforced rest are readily estimated. From a restless life of irregular hours, and probably endless drugging, from hurtful sympathy and over-zealous care, the patient passes to the atmosphere of quiet, to order and control, to the system of care of a thorough nurse, to an absence of drugs, and to simple diet. The result is always at first, whatever it may be afterwards, a sense of relief, and a remarkable and often a quite abrupt disappearance of many of the nervous symptoms with which we are all of us only too sadly familiar.

All the moral uses of rest and isolation and change of habits are not obtained by merely insisting on the physical conditions needed to effect these ends. If the physician has the force of character required to secure the confidence and respect of his patients, he has also much more in his power, and should have the tact to seize the proper occasions to direct the thoughts of his patients to the lapse from duties to others, and to the selfishness which a life of invalidism is apt to bring about. Such moral medication belongs to the higher sphere of the doctors duties, and if he means to cure his patient permanently he cannot afford to neglect them. Above all, let him be careful that the masseuse and the nurse do not talk of the patient's ills, and let him by degrees teach the sick person how very essential it is to speak of her aches and pains to no one but himself.

In summary, the treatment had the following characteristics: seclusion and rest; massage; electric stimulation and a high calorie, high fat, diet. His patients were not allowed to see relatives, read, write or otherwise strain themselves. The average therapy lasted six weeks. In the case series he described, there was only one male patient, who perhaps suffered from tuberculosis. This rest cure became the rage in the last quarter of the nineteenth century for upper class women who did not seem to be thriving. Apparently it was also adopted in England and,

in a limited way, by Freud. The Civil War, during which he was a contract surgeon to the army, brought Mitchell to fame. His writings on nerve injuries became classics, as did his description with William Keen and G.R. Moorehouse of causalgia. They also wrote about “reflex paralysis”, post paralytic chorea, erythromelalgia (Weir Mitchell’s disease) and cerebellar function.

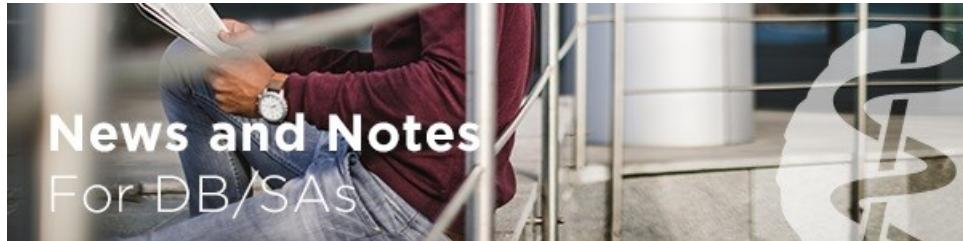
The state psychiatric hospitals, and most of the proprietary ones, tried to emulate some of Mitchell’s rest cure methods. But with their limited resources and burgeoning patient population the closest they came to do that, was to restrict the reading of books, curtail letter writing and control the use of telephones. In some cases visitors were disallowed for fear of agitating the patient. In extreme instances padded cells and physical restraints were used to ‘calm’ an agitated patient. In most cases the rest of the features of Dr. Mitchell’s practices, involving one-on-one staffing, were beyond the scope of the crowded psychiatric facilities. These are well illustrated in the book *A Mind That Found Itself* by Clifford Beers.

One of Dr. Mitchell’s patients was a talented and intellectually gifted woman, Charlotte Perkins Gilman, who went into depression following the birth of her baby. At the termination of her treatment with Dr. Mitchell she wrote a short story titled *The Yellow Wallpaper*. During the treatment she was separated from her baby girl and confined to a room with no provision of paper or pen in order to prevent any ‘mental exertion’ or emotional strain. Later she wrote “the mental agony grew so unbearable that I would sit blankly moving my head from side to side – to get out from under the pain. Not physical pain, not the least ‘headache’ even, just mental torment, so heavy in its nightmare gloom that it seemed real enough to dodge... I would crawl into remote closets and under beds - to hide from the grinding pressures of that distress.” Charlotte Gilman later explained “The real purpose of the story was to reach Dr. S. Weir Mitchell, and convince him of the error of his ways. I sent him a copy as soon as it came out, but got no response. However many years later, I met someone who knew close friends of Dr. Mitchell’s who said he told them that he had changed his treatment of nervous prostration since reading ‘*The Yellow Wallpaper*. ’ If that is a fact, I have not lived in vain.”

“*The Yellow Wallpaper*” was written in 1890 and eventually published in 1892 in the New England Magazine. The story is written in the form of a loosely connected journal. It follows the narrator’s private thoughts, which become increasingly confusing. One can follow the author becoming more and more disjointed, as she gradually descends into madness as her only escape from an oppressive husband and an authoritarian physician. Her protests and remonstrations are dismissed as a mere prattle of an unreasoning female who does not know what is good for her. She was confined to a room as part of

treatment for the nervous breakdown. Isolated and forbidden to express herself creatively, she becomes obsessed with the garish yellow wallpaper. She starts imagining that there are women trapped behind the hideous patterns in the paper. Eventually she becomes delusional in her efforts to free the unfortunate women thus trapped. By frantically tearing up the wallpaper, she symbolically frees herself from the bondage of her circumstances.

Charlotte Gilman eventually terminates her treatment, leaves her husband, moves away to California and plunges herself into writing and publishing. She joins the fledgling feminist movement, speaking, and organizing the first wave of the suffrage campaign. The story, considered initially as a tale of horror, had fallen into oblivion until the resurgence of feminism in the sixties when it was established as an important piece of feminist literature. Some critics have used the story to highlight how women function in a patriarchal society as well as in a masculine psychological model.



News and Notes for APA District Branches

May 2017

This monthly newsletter is prepared by APA's Communications Team as a benefit for our District Branches and State Associations. If you have any questions, please contact James Carty at jcarty@psych.org or 703-907-8693. Want to keep up with APA in between newsletters? Connect with us on [Facebook](#), [Twitter](#) (@APAPsychiatric) and [LinkedIn](#) for the latest news and updates.

What's New at the APA

1. Late Advance Registration for the APA Annual Meeting in San Diego runs until **May 18**. There is still time to save on your registration fee by [going online and registering](#) for the meeting today!
2. The APA has created a webpage to keep members updated on efforts to ensure that MOC requirements are relevant to psychiatric practice and to establish a fair process for psychiatrists who demonstrate meaningful learning and improvement. You can learn more about what the APA is doing for you about MOC [here](#).
3. APA joined with 24 other medical groups in support of the March for Science and its nonpartisan call for the appreciation of scientific evidence, education, and investment. A letter co-signed by the groups asserts that scientific progress and support for federal research are vital to the public health of the nation and continued scientific advancement. You can read the letter and see the groups that participated [here](#).

Mark Your Calendar

1. APA Annual Meeting, San Diego (May 19-24)
2. National Children's Mental Health Month
- a. National Children's Mental Health Awareness Day (May 4)
3. Better Sleep Month

May Course of the Month

Each month, members have free access to an online CME course on a trending topic. The May course "*Neuroimaging Correlates of Psychopathology and Substance Abuse*" discusses the neurobiology of substance abuse and examines multimodal neuroimaging data of marijuana and methamphetamine users with and without psychiatric comorbidity.

[Access course here](#)

MindGames Competition Results Announced

MindGames, the APA's national residency team competition, has concluded its online qualifying exam. A total of 127 teams participated in this year's competition. Visit the [APA website](#) to see the top three teams advancing to the final round of MindGames as well as the overall top 10 teams. The final live round of MindGames will be on [Tuesday, May 23, at 5:15 p.m. in the San Diego Convention Center](#). Please direct any questions to mindgames@psych.org.

Distinguished Fellow Nominations Now Open

[APA Distinguished Fellowship](#) is awarded to outstanding psychiatrists who have made significant contributions to the psychiatric profession. It is the highest membership honor the APA bestows upon its members. Be recognized for your accomplishments, and submit your nomination by **July 1**. Contact your District Branch for more information.

Ready to take the next step in your career?

Become a Fellow of the APA and earn the [FAPA designation](#). Fellows are committed to psychiatry and the ongoing work of the APA. Be among the prestigious 25% of APA general membership. There are no additional fees or dues payments, simply complete the [application](#) [here](#).

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Actual terms, coverages, conditions and exclusions may vary by state.
Unlimited consent to settle does not extend to sexual misconduct.

Insurance coverage provided by Fair American Insurance and Reinsurance Company (NAIC 35157).
FAIRCO is an authorized carrier in California, ID number 3175-7. www.fairco.com

In California, d/b/a Transatlantic Professional Risk Management and Insurance Services.

ANNOUNCEMENTS AND ADS

If you missed the dinner meeting on genetic testing for psychiatrists, here is a link to the slides from the talk by Jay Lombard, MD, the founder of Genomind.

<https://www.dropbox.com/s/ullqriwoa37njkz/Genomind%20presentation.pptx?dl=0>

PRIVATE PRACTICE: FEES Here is a link to a legal public site where you can look up fees for a given zip code. <http://www.fairhealthconsumer.org/>

PRIOR AUTHORIZATIONS If you are frequently bothered with cumbersome and seemingly unnecessary requests for prior authorizations, the APA is eager to hear from you: Ellen Jaffe, Director, Practice Management HelpLine/Medicare Specialist, Office of Healthcare Systems and Financing, American Psychiatric Association, (703) 907-8591 ejaffe@psych.org Practice Management HelpLine (800-343-4671) - email at hsf@psych.org. Also, one of our members posted to an international list-serv with regard to any denial of benefit, so I quote Dr. John Fogelman:

The URL below will direct you to a database for the regional CMS (Centers for Medicare and Medicaid Services) headquarters. The names of the regional Medical Directors are listed. When you call, hang in through all the options, and at the end type in the name of the medical director. You will get either the real live doc, an assistant, leave a message, or the name of someone to call for in an emergency. It usually works.

http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/Regional_Contacts.html

My experience has been that the higher you go in any organization (hospital, government, insurance companies), the closer you are to the decision maker, and the decision makers do not have to stay on the unvarying mindless script. They do not instruct you to have a good day, apologize for your inconvenience, thank you profusely and hear how they know how valuable your time is. They usually listen, and if you do not scream at them, a favorable result often follows.

PARITY ENFORCEMENT FROM NYSPA: If you missed the NYSPA Webinar on parity I strongly suggest you listen to it; accessible on the NYSPA website. Seth Stein and Rachel Fernbach have presented a packet of wonderful new tools that potentially will allow us to better manage and respond aggressively to insurance company efforts to restrict care.

PLEASE MAKE EVERY EFFORT TO RETURN PHONE CALLS. EVEN IF YOU HAVE NO ROOM IN YOUR SCHEDULE FOR NEW PATIENTS: I have frequently heard complaints about patients leaving voice mails with psychiatrist's offices and never getting a return phone call. If true, this reflects very poorly on our profession.

The Clinical Research Division (CRD, Director: Dan V. Iosifescu, MD, MSc) at the Nathan Kline Institute is pleased to announce we are starting several clinical trials in patients with major depressive disorder (MDD). We plan to evaluate novel potential treatments, including devices and pharmacological agents.

Our first study is testing transcranial laser therapy (TLT) in addition to antidepressants for MDD subjects who have failed to improve with antidepressants alone.

You can find more information about the study in the following summary description:
<https://clinicaltrials.gov/ct2/show/NCT02959307>

Interested patients should contact Dr. Karen Nolan at 845-398-6572. The study PI, Dr. Dan Iosifescu, will be happy to answer your questions (845-398-6568), or
Dan.Iosifescu@nki.rfmh.org

Have you been feeling sad, blue, or down in the dumps?

Have you lost interest in the things you used to enjoy?

Are you looking for help?

If so, you may be eligible to participate in a research study using Transcranial LED Therapy (TLT) to treat depression that is being conducted at the Nathan Kline Institute in Orangeburg, NY.

TLT involves a non-invasive and invisible beam of light that increases energy metabolism in the brain, and some of this increased brain activity may help people with depression. This treatment is not the same as electroconvulsive therapy (ECT).

All TLT sessions will take place at the Nathan Kline Institute. The visits include 1 initial screening visit, 24 TLT sessions, and 1 follow-up visit making for a total of 26 visits to our program. Those who qualify will receive the experimental treatment, study-related, medical exams, and laboratory tests at no cost. Study participants will be compensated \$50 per study visit.

If you are between 18 and 70 years old and would like more information please contact

Karen Nolan at 845-398-6572 or email nolan@nki.rfmh.org



Refuah Health Center

Seeking Board- certified or Board-eligible psychiatrist for full or part-time position at Federally Qualified Health Center in Rockland County, NY. NYS license required.
Experience preferred; Flexible hours and competitive salary offered.
Please contact M. Pagliocca, Human Resources at (845) 354- 9300.

Weekend Psychiatry/Psychotherapy Office for Rent

Route 45, Pomona
Shared Waiting Room, Wheelchair Accessible, Wall-to-Wall Windows,
Private Bath, Full Sound Insulation, Separate Entrance/Exit
Call Lorraine Schorr (845) 354-5040

Depression Support Group

Depression support group meets 2 times a month in Pomona, NY. We are inviting new members at this time. We are moderated by a clinical social worker. This is not a therapy group but social support for people fighting depression. Call Kathy for more information (914) 714- 2837.

Rockland County Depression and Bipolar Support Alliance

Peer-to-peer run support group for people with depression, bipolar disorder, anxiety disorder or any related mood disorder & their friends & family. The support group meets every Thursday night from 6:30 - 8:30 at Jawonio, inc. 775 N Main St. New Hempstead. Reservations are not required. There is no fee for attending the support group meetings. This is a very warm and welcoming group run by people who have been there and can help. Any questions please call Leslie or Leonard at 845-837-1182.

Full time office space for rent in well-appointed Pomona suite,
\$850/month. Call 845 354-6050 for details.

NEW YORK STATE PSYCHIATRIC POLITICAL ACTION COMMITTEE, INC.
400 GARDEN CITY PLAZA, SUITE 202
GARDEN CITY, NEW YORK 11530

Name: _____

Address: _____

Tel. No.: _____

I hereby join as a member of the NYSP-PAC for 2016 and enclose my payment in the following amount:

_____	General Member	\$100.00
_____	Contributing Member	\$150.00
_____	Supporting Member	\$200.00
_____	Sustaining Member	\$250.00 or more
_____	Other amount	

Circle one:

VISA MASTERCARD AMEX DISCOVER

I hereby authorize the charging of my credit card.

Account #: _____

Three or four digit number following account number that appears on signature bar on reverse side of credit card:

Expiration Date: _____

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Please make checks payable to NYSP-PAC.

Checks can be mailed to:

NYS-PAC, 400 Garden City Plaza, Ste. 202, Garden City, NY 11530