

Newsletter of the Eastern Missouri Psychiatric Society (EMPS)
 *** A District Branch of the American Psychiatric Association ***

Eastern Missouri Psychiatric Society Elects Officers for 2006

Eastern Missouri Psychiatric Society's biannual general election for officers of its Executive Council was held in May, 2005.

Jack Croughan, M.D. was elected for a two-year term as EMPS President-Elect. Dr. Croughan has been in private practice in Brentwood since 1982, and currently is the Medical Director for Missouri Physicians' Health Program, the assistance program for impaired physicians. He graduated from Kansas University Medical School and completed his psychiatry residency training at Washington University, where he was later on faculty for several years. Dr. Croughan is the current Chair of the EMPS Legislative

Committee, and serves on the EMPS Executive Council. In the past, he has testified in the Missouri Congress on



Jack Croughan, MD
Elected EMPS President 2006-2008

behalf of mental health legislation. On the future of the EMPS, Croughan states "I think we need to focus on membership", explaining the need to increase the number of EMPS members in order to build a stronger society that is more representative of local psychiatrists. He also emphasizes mental health legislation as a priority, noting, "we must also be on our toes about legislation that threatens us and our profession, like psychologist prescribing".

Sundee Jayaprabhu M.D. will become EMPS Secretary-Treasurer for two years. Dr. Jayaprabhu is a second-year psychiatry resident at the St. Louis University School of Medicine.

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EMPS Has Moved



trative offices are that of the St. Louis Metropolitan Medical Society, is now at:

680 Craig Rd., Ste. 308, Creve Coeur, Missouri 63141.
 EMPS' new contact telephone number is (314) 989-1014 and fax is (314) 989-0560.

On October 3rd, 2005, Eastern Missouri Psychiatric Society (EMPS) relocated from its previous location on Lindell Blvd. in St. Louis to a new address. EMPS, whose adminis-

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The President's Column



You Can Help Improve Missouri Psychiatry

By Jay Meyer, MD, President

Those of you who are kind enough to be reading this newsletter are to be thanked for at least your attentiveness to the news. You may also notice that since the death of Dr. Ed Kowert, our newsletter has not been published with very much regularity.

The lack of regular newsletters at least in part is a manifestation of the fact that very few of us work diligently for the benefit of our society. There is a labor vacuum and many may also say there's a leadership vacuum. I hope those of you reading this letter can agree with me and call me or the editor and say, "I need to volunteer a little time for Missouri Psychiatry". You may also say how can we improve the healthcare given to our patients, and how can we improve the image of psychiatry not only in St. Louis, but in the rest of the United States.

On November 22nd, 2005, Dr. Keith Garcia gave an excellent psychiatry grand rounds at Washington University about the devastating militancy of scientology. Within a week, Dr. Larry Kuhn, chair of EMPS' ethics committee, called me and told me that while driving to his office, he heard a talk show program in which a scientologist blasted psychiatry with all sorts of verbally violent comments including that it was psychiatrists, not the Nazis that were responsible for the Holocaust. Thankfully, this mobilized Larry, who called me, then Dr. Garry Vickar. Garry, who as many of you well know, is an excellent spokesman for us, called the radio station and protested. He also called the American Psychiatric Association (APA) and informed the Director of Communications.

Eastern Missouri Psychiatric Society has also hired and continues to employ a lobbyist in Jefferson City, Mr. Mo McCullough. He works closely with Tom Holloway of the Missouri State Medical Association educating legislators about our concern for our patients and our interest for the health of our profession. Our president-elect, Dr. Jack Croughan, has been a great role model for all of us. This past year, he's made several trips to Jefferson City to testify at hearings. I know Jack to be articulate and wise, and Mo McCullough reports back to us what an effective job he did. I fear that Jack is 100% of the St. Louis psychiatrists who volunteered and recently spent two weeks in Louisiana in response to the medical needs after Hurricane Katrina (see article on page 10).

I would urge all of us to be active members of NAMI, the National Association for the Mentally Ill. They are comrades in arms, highly motivated to help in the care of psychiatric patients and highly motivated to see that the politicians do well by our patients. Please join NAMI.

One last request. It's actually a double request. First, volunteer some time to help in the work of our psychiatric society. Secondly, find a fellow psychiatrist who is not a member of the Eastern Missouri Psychiatric Society (or the APA), and get them to join. We need to swell our ranks, and we need to do more to produce a better medical environment for our patients.



680 Craig Road, Suite 308,
Creve Coeur, Missouri 63141

Phone: (314) 989-1014
Fax: (314) 989-0560

Contact e-mail: csteenbergs@slmms.org
Website: www.emopsych.org

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EMPS Executive Director Retires

By Garry Vickar, MD

On December 30th, 2005 Gordon "Ron" Garrett retired after a long service as Executive Director of EMPS. For over 29 years, he was the Executive Vice President of the St. Louis Metropolitan Medical Society (SLMMS), and during that period was actively involved with EMPS.

I don't remember when I first met Ron, but he always seemed to be there. He was always somehow both behind the scenes and was directing the traffic at most medical society functions I attended. When I became involved with EMPS during the year of Dr. Harold Eist's APA Presidency, Ron was at an EMPS meeting and I got to know him better. This was a very quiet but determined man with a sense of purpose and commitment to physicians. I got to know him through my years of service on the SLMMS Council. I am now completing my second term as Vice-President of

SLMMS, and I've served for six years as Councilor. During that time, Ron has been an unobtrusive but clearly a solid Executive. It's not an easy job to work with physicians, but Ron carried that out with diplomacy and aplomb and was honored by the AMA for his



Gordon Ronald Garrett, Ed.D., CAE

distinctive and outstanding attributes as Executive of the Year a few years ago. I was honored to have been present at the House of Delegates meeting

at the AMA meeting when he was acknowledged in front of his peers and the House of Medicine.

With regard to the EMPS, Ron has been the glue that held us together. He has been the institutional memory and the keeper of the facts. Without him, we would have no EMPS. Not only was he honored by the AMA, but the APA took note of his skills when we had a presentation at one of the orientation meetings for new leaders of the APA district branches. Ron was approached by two different district branches to come and offer assistance in some of their issues. Why he chose to go to Hawaii and give me North Dakota I'll never know. But I didn't get invited to North Dakota, and he didn't tell me if he got invited to Hawaii. But Ron was recognized by many for this astute leadership, his sage counsel and generally good

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Election

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He is a graduate of Texas A & M University Medical School.

Garry Vickar M.D. was re-elected as APA Assembly Representative for three more years. Dr. Vickar is Chair of the Department of Psychiatry at Christian Hospital Northeast in St. Louis. Dr. Vickar has also served EMPS in the past as President, and is

completing his term as Vice-President of the St. Louis Metropolitan Medical Society. Dr. Vickar is a graduate of Washington University psychiatry residency program.

Vadim Baram, MD will be the APA Assembly Deputy Representative from EMPS, and will hold this position for three years. Dr. Baram is currently in private practice and on clinical faculty at St. Louis University

where he completed his residency and geriatric psychiatry fellowship.

Drs. Vickar and Baram will represent the EMPS in the APA Assembly, a legislative body composed of representatives from all 74 of APA's district branches.

Elected officers will begin their terms following the APA's next Annual Meeting, which will be held between May 20th and 25th, 2006.



Sundeeep Jayaprabhu, MD.
Elected
Secretary/Treasurer



Garry Vickar, MD.
Elected APA Assembly
Representative



Vadim Baram, MD.
Elected APA Assembly
Deputy Representative

Carol North Leaves Missouri for Texas

By Daniel Mamah, MD

Psychiatrist Carol North, M.D., MPE, at the end of 2005 relocated to Dallas, Texas after over 25 years of living in St. Louis. She is now on faculty at the University of Texas - Southwestern, at Dallas. In her new residence, North will be involved in much of what she was doing in St. Louis: psychiatric research, direct patient care, teaching and community work. "Dallas is a great city to live in" says North. "However I miss the architectural heritage and historic neighborhoods that I enjoyed in St. Louis".

Through her many years of service, North has contributed greatly to our knowledge of the psychiatric outcomes of severe environmental traumas. Over the past two decades, North has become a national leader in understanding the mental health effects of disasters. She has traveled to multiple different disaster sites, interviewed thousands of survivors and analyzed reams of data. These included the Times Beach flooding, a mass murder in Arkansas, a cafeteria shooting in Texas, earthquakes and firestorms in California, as well as the disastrous Midwestern flood of 1993. She also studied survivors of the 1995 Oklahoma City bombing and survivors

of the terrorist bombings in Nairobi, Kenya.

North worked with congressional staffers who were exposed to anthrax,



and studied workers at the World Trade Center who survived the September 11th terrorist attacks. That same month, she testified before a United States Senate Committee regarding the anticipated psychological aftermath of the September 11 terrorist attacks.

Last fall, she studied psychiatric outcomes in victims of the deadly hurricanes in the southern United States. Six days after Hurricane Katrina struck, she traveled to Baton Rouge, Louisiana

to observe the development of intervention plans, and to advise and help prepare for the longer term. She returned to St. Louis in the midst of a major effort to convert a hanger at Lambert airport to a disaster evacuee center. Rather than going home after getting off the plane, she went straight to the hanger. In the end however, the 2000 evacuees scheduled did not arrive.

"Dallas is an exciting place to be right now as there are many resources here, and the disaster community is very active" reports North. In Dallas, North is already involved in community efforts to conduct needs assessments among the Hurricane Katrina evacuee population and link them with services. She is also assisting with a study of mental health interventions provided at the Dallas Convention Center for Katrina evacuees.

In addition to her work with disasters, Carol North has devoted much of her career to the homeless, and is conducting research studies about the psychiatric impact of homelessness. For a decade, she was the psychiatrist for Grace Hill Neighborhood Services, where she worked with indigent and homeless people. She also made "house calls," visiting homeless patients in shelters, and occasionally provided services slightly outside of her normal routine.

Her research efforts have also included substantial studies in psychiatric aspects of gastrointestinal disease, somatization disorder and dissociation, and she is pioneering work studying thought disorders. North explains that a major goal of her various research projects are to better understand their psychiatric aspects which could eventually lead to more effective treatments.

Among her many honors North has received were the APA Brumo Lima Award for Excellence in Disaster

New Exec. Secretary for EMPS

By Gordon Ron Garrett, EMPS Executive Director (Ret.)

On October 3rd, 2005 Audrey J. Bermine retired after 33-plus years of dedicated service to the St. Louis Metropolitan Medical Society. Included as part of that exemplary service was providing executive assistance to the Eastern Missouri Psychiatric Society, which was recognized by EMPS President Jay Meyer, MD at a recognition dinner on September 9th, 2005. Before Ms. Bermine retired her replacement was hired to spend several weeks together in making the transition. Cindi Steenberg has been serving as the EMPS Executive Secretary since October 3rd, 2005. To contact the EMPS office you may call (314) 989-1014, fax to (314)989-0560, and/or e-mail to csteenberg@slmms.org. Ms. Steenberg will be able to take care of the EMPS business very well.

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10 Things to Know About Medicare Part D

Listed below are the 10 first things every practicing psychiatrist should know about the new Medicare prescription drug benefit, Medicare Part D:

1. This new federal outpatient prescription drug benefit, which began January 1, 2006, applies to all Medicare beneficiaries, including those who are dually eligible for Medicaid and currently receive their drugs through their state Medicaid plans.

2. The benefit is now being administered through private prescription drug plans (PDPs) that meet Medicare guidelines for the program. People with Medicare have to select which of the plans being offered in their region (the country has been divided into 34 regions) best meets their needs.

3. Since January 1, 2006, Medicaid no longer pays for prescription drugs that are covered by Medicare for dual eligible beneficiaries, approximately 2.5 million of whom have psychiatric illnesses. In October 2005, these beneficiaries were randomly auto-enrolled into a low-premium PDP in their region, but may switch to another plan at will.

4. Enrollment for non-duals began on November 15, 2005. Specific information about prescription drug plans and their formularies are available at 1-800-Medicare (1-800-633-4227) or at www.medicare.gov or www.mentalhealthpartd.org. Accessing this information should allow beneficiaries to determine which plan will best serve their needs.

5. CMS has stated that all or substantially all of the medications currently available in the categories of antidepressants, antipsychotics, and anticonvulsants should be on the formulary of every PDP. This does not mean that all doses and forms of these drugs must be included. CMS has a transition policy

that presumes patient stability if the patient present for a refill on or after January 1, 2006. PDPs are permitted to use prior authorization, step therapy, and other utilization management protocols, and are permitted to require documentation for off-label use for new starts. It should also be noted that drugs used for the treatment of substance use disorders are not a protected class.

6. Benzodiazepines and barbiturates are excluded from the Medicare prescription drug benefit. States may continue to cover these drugs for dually eligible beneficiaries.

7. Almost all beneficiaries, including dual eligibles, will have some form of co-pay for each prescription. The co-pays will vary by plan. Pharmacies are permitted to waive the co-pay but, unlike under Medicaid, are not required to do so if an individual is unable to pay.

8. Financial assistance is available to people with limited incomes (\$14,355 for an individual or \$19,245 or a couple in 2005). Dual eligible beneficiaries will pay no premiums as long as they stay with a low-premium plan, but are still required to pay co-pays. Other low-income people should have already received a notice encouraging them to apply for low income subsidy, but if they haven't they can get an application at their local Social Security Office of state Medical Assistance Office. A fact sheet you can also print out for your Medicare patients about financial assistance is available at www.cms.hhs.gov/medicarereform/limitedincomeresources11105.pdf.

9. Physicians may request coverage decision from a patient's PDP for a non-formulary drug or non-preferred drug at a preferred price. The PDP has 72 hours in which to respond to such a request. An expedited determination may be requested for a decision within 24 hours if the standard timeframe

would be harmful to the patient's medical condition. If the coverage determination is unfavorable, an expedited redetermination can be requested (and there is a stipulated appeals process in place that continues to the federal district court level).

10. Psychiatrists can learn more about Part D and how it will affect their patients at www.mentalhealthpartd.org. This website, devoted to Part D, is sponsored by the APA and other mental health groups that are working together to educate clinicians about the new benefit. Here physicians will find the latest information about the new benefit and will be able to access tools that will help them manage their patients through enrollment and the transition.

SLU Psychiatrist Receives NAMI Award

by Arturo C. Taca, Jr. MD

Dr. Mirela Marcu has been awarded NAMI's "The Mortimer Goodman Award" for her outstanding contribution of time and talent in support of NAMI St. Louis' mission to improve the lives of persons with mental illness and their families through education, support, advocacy and research, to achieve the highest possible quality of life. This award is given to a Mental Health Professional who has made an outstanding contribution to mental health through NAMI. The award will be presented at NAMI's 2005 Gala Celebration-"Celebrating Beautiful Minds" at the Frontenac Hilton.



Missouri Legislative Report 2005

By Mo McCullough, EMPS Legislative Lobbyist

The 2005 legislative session was a very eventful one on both the positive and negative side. The EMPS played a very active role in the legislative process during the session and continued to do so in the interim. We worked closely with allied mental health and medical groups to lobby for and against issues of importance to the psychiatric profession and mental health patients in Missouri.

One of the most significant victories on the plus side was the passage of comprehensive tort/medical malpractice reform legislation. This legislation will have a far reaching, long range positive impact on health care in the state of Missouri, from lowering costs to improving access. Sadly, the day

after session ended, Rep. Richard Byrd passed away. Rep. Byrd was the author and champion of tort and medicare malpractice reform. He will be sorely missed. In 2006, the Republican majority will continue Rep. Byrd's efforts to expand on this victory with insurance reform legislation.

Also passed was a bill that creates the Office of Comprehensive Child Mental Health and one that limits civil liability for suicide prevention intervention. On the defensive side we were successful in stopping psychologist from getting prescriptive rights, Licensed Professional Counselors (LPC) from being allowed to diagnose, pharmacist from being able to modify prescriptions and legislation mandating that patients receive copies of all test

results.

On the down side, the state budget woes forced the legislature to make some significant cuts in appropriations for many important programs. Medicare and Medicaid suffered cuts in many areas including mental health care. All of the mental health groups fought to keep these cuts to a minimum and we will continue to do so in 2006.

In the 2006 session look for more battles during the appropriation process followed by more budget cuts. Also, the psychologist, LPC's and pharmacists will be back to attempt to get through legislation what they don't have through education. Once again, it will be extremely important for the EMPS to be on top of the issues and stay involved in the legislative process.



Ellen Edens, MD (center) and Daniel Mamah, MD (left) during the APA Legislative Reception, which was attended by psychiatrists, congressional representatives and legislative aides.



Daniel Mamah, MD, meets with Missouri Congressman Russ Carnahan.

EMPS Members Advocate for Psychiatry on Capitol Hill

March 13-16th 2005 marked APA's annual "Advocacy Day" in Washington DC when psychiatrists from around the country visited their respective Senators and Representatives raising awareness of mental health issues and advocating for related congressional bills. Missouri was represented only by EMPS members: Ellen Edens, MD, a member of APA's Committee of Government Relations, and Daniel Mamah, MD, APA's Member-in-Training Trustee.

Visits took place in the offices of Senators Christopher Bond and Jim Talent, as well as Representatives Roy Blunt, Russ Carnahan, William Lacy Clay, and Jo Ann Emerson.

Pending congressional bills included those supporting: (a) mental health parity for insurance providers (b) elimination of Medicare's discriminatory 50% co-pay for outpatient mental health visits (vs. 20% for physical illness) (c) the "Keep Families Together Act", which ensures low income families do not relinquish custody of mentally ill children to receive care (d) elimination of the 30-patient limit for group practices using buprenorphine for opioid dependence (e) creation of a mandatory database of drug trials, and (f) privacy of electronic mental health records.

The four day event also included advocacy training, and addresses by representatives and other legislative officials.

Public Mental Health Funding in Missouri

By Daniel Mamah, MD

Nearly one in five Americans suffer from mental health disorders and 10% have a severe and persistent mental illness, making it a major public health issue facing the country. The Substance Abuse and Mental Health Services Administration estimates that 10.5% of Missourians experience severe mental illness each year, with rates souring to about 16% for those aged 18-25.

Public mental health systems are important for the entire society, but are often viewed as a "safety net" only for the non-insured or the homeless. Despite knowledge of the cost of untreated mental illness to society, public health systems increasingly ration care such that people must become severely ill before receiving many services, and there is often limited emphasis on prevention strategies.

The Missouri Department of Mental Health (DMH) consists of three major divisions: 1) Comprehensive Psychiatric Services 2) Alcohol and Drug Abuse, and 3) Mental Retardation and Developmental Disabilities. Currently, the Division of Comprehensive Psychiatric Services operates eight adult inpatient facilities, one children's hospital and one children's residential center. It is also responsible for providing a variety of mental health services, including case management. In 2004, about 70,000 Missourians were served in comprehensive psychiatric service programs.

The majority of US states have faced large budget deficits in the last

several years. Unlike the federal government, which can operate in deficit, most states have constitutional requirements to balance their budgets. In 2003 for example, 29 states cut mental health funding. In Missouri, the percentage of the state general revenue budget dedicated to mental health has shrunk from 10.1% in fiscal year (FY) 1985 to 7.2% in 2006 - a 28.7% decrease (*see figure*), lessening the capacity of community

untreated and mistreated mental illness costs the United States \$113 billion per year. These are a result of lost productivity of workers suffering from such disorders, the costs of incarceration, the cost of lost work hours of caregivers, as well as increased general health care costs.

For individuals disabled by mental illness who cannot afford private health insurance, Medicaid has been essential

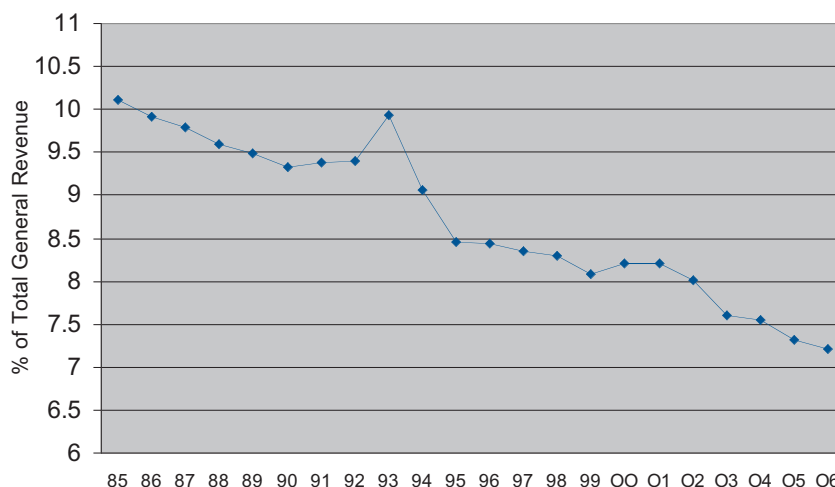
as their means to purchase medications and receive mental health services. As Missouri suffered its intense budget crisis however, the State Medicaid program has also become a large target for cuts.

Missouri must elevate public mental health to a position of priority that more truly reflects the impact and the cost of mental illness. The state needs a comprehensive, integrated system of mental health care which carefully draws on recent advances in

mental health knowledge. An initial step is restoring the mental health budget to earlier levels so that services can be rebuilt to meet pressing mental health and substance abuse needs. This increase could be phased in over the next several years; with incremental increases of the total state budget until more adequate levels of funding is reached.

It is important to educate our policymakers about the tremendous burden of an inefficient public mental health system. We must promote innovation and incorporate the new and more effective interventions developed in recent years, so that the available funds can be best utilized.

Department of Mental Health Appropriations Relative to Missouri Budget (FY 1985-2006)



providers to reach enough citizens with mental illness and to provide adequate levels of care. In FY 2006, budget allocations to the DMH were \$46.3 million less than that in 2001.

Thus, over the last several years, beds have been closed at publicly funded psychiatric hospitals, and funding for community-based psychiatric services has been reduced. Further reductions to the DMH budget could result in distress for many thousands of people presently receiving mental health, substance abuse or developmental disability services. Limited psychiatric care also has tremendous economic costs to society. According to the National Mental Health Association,



More SLU Medical Students May Be Considering Psychiatry

By Arturo C. Taca, Jr. MD, EMPS Member-in-Training Representative

Third year medical students from St. Louis University School of Medicine were recently polled to determine what fields they might be interested in considering for future careers. Results of this year's poll were enthusiastically welcomed by the SLU Department of Psychiatry. "We were very pleased to find out that between 14-18 of our current medical students were strongly considering psychiatry" as a field to train in, says Dr. Michal Artal, the Training Program Director at SLU.

Is this a sign of good times for the field? Dr. Robin Parks, the medical student coordinator for the department believes that several factors might be involved. "Right now it's too soon to

consider it a trend. It's definitely a blip on our screen. Historically, we have had an average of 5-7 interested students going into psychiatry. Studies show that the single most important element influencing students to consider prospective fields is their experiences with faculty. I think right now we have the most competent group of attendings teaching here at SLU". Dr. Park goes on to say that "I also think that now we have more tools to offer. Psychiatry isn't so much a soft science anymore and much more like a hard science. I think students are attracted to that."

Medical students are taking a more practical approach to choosing a field. "Lifestyle is very important to me" says

Dawn Brown, a 4th year medical student at SLU. "Being a woman and having a manageable lifestyle are very important factors in my decision", she goes on to say. "I wish I could say that my husband made me do it", says 4th year medical student Kelechi Loynd, whose husband is a psychiatry resident at Washington University. "I have actually learned to love what psychiatry can offer now".

Whatever it may be, psychiatry seems to be experiencing a "rebirth" in interest in current medical student populations. In time, hopefully, this won't represent just a "blip" on the radar screen but reflect true trend in the continued evolution in the field of psychiatry.

Resident Wins AMA Award



Michelle Nichols MD accepting the AMA Foundation's Leadership Award from 2005 AMA President John C. Nelson, MD, MPH

Michelle Nichols, MD, senior psychiatry resident at Washington University was named a recipient of the American Medical Association Foundation's 2005 Leadership Award, which provides medical students, residents and young physicians special training to develop their skills as future leaders in organized medicine. The AMA Foundation honored selected individuals with the award at its annual Excellence in Medicine Awards ceremony on March 13, 2005 in Washington D.C. Recipients of the award demonstrated "outstanding leadership skills in advocacy, community service and/or education".

Executive Director

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demeanor, even temperament, and politeness in all his dealings with physicians.

Everyone that has worked with Ron at EMPS speak highly of him. "Ron has been the strong and constant presence that has given EMPS its continuity" said Dr. Richard Hudgens, who was EMPS president in 1978. "People like Ron are really irreplaceable". 1995-1996 president Dr. Lynne Moritz noted, "Far beyond the call of duty, he was present and available to provide calm, knowledgeable advice as each obstacle or crisis came down the pike".

Ron will be missed in many circles. He'll be missed at the Council of SLMMS, and sorely missed in EMPS. The best we can do in tribute to his years of service is to continue working in the spirit of collegiality with the new Executive Director and learn from his experience on how to work in an easy, comfortable, yet solid and decisive way with the diverse individuals that make up both societies.

North

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Psychiatry, the Mortimer Goodman Award and Exemplary Psychiatrists award from the National Alliance of the Mentally Ill, and listing in Marquis' Who's Who in America and in the Best Doctors in America. She was also on the editorial board and reviewer of several prestigious journals.

Carol North has also been active in organized psychiatry: as president of the Eastern Missouri Psychiatric Society from 1996-1998, and more recently as chair of its disaster psychiatry committee. In addition, she was a member of APA's Council on Psychiatric Dimension of Disasters.

On a personal front, Carol North's background is equally inspiring. She was born in Iowa, where she also spent her early years. During her freshman year of college, she was hospitalized and diagnosed with schizophrenia. She had been hearing voices. Sometimes the

voices told her to kill herself, and she came close to taking her own life. In spite of the illness, she finished college and started medical school at the University of Iowa. Desperate for some sort of help, North and her family turned to an experimental therapy in which her blood was filtered in a process that might be compared to kidney dialysis. She details the experience in her inspiring book, *Welcome Silence*. "They never demonstrated that the treatment was generally effective," North says. "There were problems with the research, which eventually was abandoned". She hasn't required any medication or had any symptoms of schizophrenia since.

Subsequently, North completed her medical school education and residency at Washington University in St. Louis, where she later received her Masters in Psychiatric Epidemiology (MPE). She was most recently on faculty at the Washington University of Medicine, where she ascended to the title of Professor. She also served as Director of the Consultation-Liaison Psychiatry and

Emergency Psychiatry programs. As an avid researcher, North has been an investigator on multiple federal and other research grants, and has authored numerous peer-reviewed articles.

"Carol is one of the true stars in psychiatric epidemiology," reports Charles Zorumski MD, chair of the department of psychiatry at Washington University in St. Louis. "She is a great clinician, educator and researcher who has made seminal contributions to our understanding of psychiatric consequences of disasters".

Carol North will be missed in St. Louis for all her active roles and dedication to improving the field of psychiatry. Fortunately however, she may still be spotted occasionally at Washington University Medical School, as part of her research team still remains in St. Louis.

North also leaves the editorship of Eastern Missouri Psychiatric Society's newsletter, a post she held for over five years.



Washington University School of Medicine

Conte Center

Principal Investigator: John G. Csernansky, M.D.

Sponsored by: National Institute of Mental Health

The major goal of the Conte Center is to improve understanding of the underlying causes and mechanisms of schizophrenia, especially during its earliest phases. The Conte Center is currently studying MRI (Magnetic Resonance Imaging) scans of patients with schizophrenia, and their healthy siblings.

Volunteers are needed, who have a diagnosis of schizophrenia, and a healthy biological sibling between the ages of 12 and 26. Participation will involve a no-cost MRI (Magnetic Resonance) scan, plus 8-10 hours of interviews and cognitive testing. Participants in the study will not need to change their current treatments. Every participant will receive compensation for his/her time.

For further information, please call:

1-888-747-2162

or

(314) 877-0756

St. Louis Psychiatrist Helps Katrina Victims

By Daniel Mamah, MD



Pictures taken by Dr. Croughan during a visit to New Orleans, showing the severe devastation and personal property damage experienced by the residents of the city.

In early October, 2005 St. Louis psychiatrist Jack Croughan, MD drove over 11 hours south from his home in the Central West End. His destination was Baton Rouge, Louisiana located 80 miles northwest of New Orleans. The intent, to provide psychiatric care to victims of Hurricane Katrina, which struck six weeks prior. Baton Rouge, which encountered only minimal Hurricane damage, was a major hub for evacuees. Dr. Croughan's car also carried about 30 boxes of assorted psychotropic medications, and some medical verification documents.

The trip was a response to correspondence from the APA which offered assistance for psychiatrist volunteers. There was a proclamation by the Louisiana Governor stating physicians with valid licenses in other states could practice in the area. Settling in was nevertheless slightly chaotic for Dr. Croughan at first, but he ended up staying with a physician couple. There were four other psychiatrists scheduled during the same peri-

od: two from New York, one from New Jersey and one from Seattle.

In Baton Rouge, FEMA had several make-shift shelters set up for the over 150,000 evacuees that relocated to the city. In addition to FEMA, several charity organizations were also observed to be active within the shelters. "The volunteers there were extremely skillful", remarked Croughan, recalling their help directing distribution of services, and screening for the disabled.

Psychiatrists would work for 12 hours on weekdays, and for variable periods on weekends. Around 8 in the morning, they would convene with the mental-health agency staff, to discuss the day's plans. There were six major shelters where psychiatrists were assigned, the largest of which housed over 5,000 evacuees. Volunteer clinical work however did not come without challenges. There were essentially no prior medical records available. Psychiatrists would also sit by the sides of the evacuees' beds



Volunteer psychiatrists during morning orientation in the conference room of a clinical office building. Jack Croughan MD is pictured third from right. David Post MD, medical director of the local mental health agency, is third from left.



Evacuees at the "Trademart Center" one of the shelters where psychiatrists were assigned. The center, which was originally an agricultural and livestock display area, held about 1,500 people.

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Membership Update 2005

EMPS welcomes the following new members:

Arshad A. Bhatt, MD
 Katherine P. Buchowski, MD
 Joan R. Butcher, MD
 James W. Cannon, MD
 Lyle A. Clark, MD
 Martha H. DaSilva, MD
 Sandra D. Duarte Sckell, MD
 Lauren E. Flinn, MD
 Dawn M. Holemon, MD
 Jeffrey Kao, MD
 Shaheen Mansoor, MD
 Stacy L. Neff, DO
 Syed A. Raza, MD
 Duru L. Sakhrani, MD
 Paul B. Simon, DO
 Hermeeta K. Singh, MD
 Jeremy R. Thompson, MD
 Tony W. Thrasher, DO
 Sekhar Vangala, MD
 Sridevi N. Vemulapalli, MD
 Theresa N. Villafores, MD

Katrina

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during evaluations, as office space was not available.

Altogether, about 150 patients were seen by the psychiatrists during their two week stay. The majority of patients seen had chronic psychotic illnesses. Psychiatrists were summoned when evacuees became symptomatic or requested routine follow-up care. Most medications were available through the state health system, although some were not on the formulary.

Medical assistance was nevertheless not always graciously received by the staff of some charity organizations, particularly when these services were not under their direct supervision. Croughan believes the resistance may have resulted from fear of liability. Overall, he noted "there was a loss of governance in

the area", citing problems cross coordinating care across different agencies.

During his trip, Dr. Croughan also visited New Orleans, which was over an hour drive away, to see the catastrophic destruction brought about by the Hurricane. The scenes observed were sadly familiar: boats on the streets, buildings demolished, telephone poles dismantled, trees down, and houses abandoned. There was a lot of garbage lying around impeding transportation. "It was like a giant came along with a big box of debris and just sort of threw them all over the place", remarked Croughan.

Overall, Dr. Croughan reports he learned a lot from his experiences including the multiple organizational challenges that can evolve following disasters. Nevertheless, he commented "I would do it again if I could", and emphasized the need for improved mental health care following similar tragedies in the future.

The Department of Psychiatry at Washington University School of Medicine

The Department of Psychiatry provides a wide range of clinical services and research opportunities to address the needs of children, adolescents, adults, and the elderly.

Specialists are available for the evaluation of diagnoses including:

- Treatment-resistant depression
- Schizophrenia
- Bipolar disorder
- Substance abuse

Consultation services are available for Electroconvulsive Therapy, Repetitive Transcranial Magnetic Stimulation, and Vagus Nerve Stimulation.

To learn more about the services and research opportunities offered by the Department of Psychiatry or to refer a patient, please call **286-1700** or **286-1740**.

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We strive to make content in future issues of *Eastern Missouri Psychiatry* more representative of our membership, and encourage our members participation in its creation.

For communications regarding the newsletter, or to include articles, events or advertisements in future publications contact the Editor at:

*The Editor, Eastern Missouri Psychiatry,
680 Craig Road, Suite 308,
Creve Coeur, Missouri 63141
or
mamahd@psychiatry.wustl.edu*

Upcoming Events

1. **EMPS Program: "Working with Non-English Speaking Patients"**. *Speaker:* Julia Ostropolsky, MSW. *Date:* Thursday, February 16th, 2006 (6.30 pm). *Location:* St. Luke's Hospital, St. Louis, Conference Rm 1 & 2. *Contact:* Cindi Steenberg, (314) 989-1014, csteenbergs@slmms.org.
2. **Sixth Annual Guze Symposium on Alcoholism**. *Date:* Thursday, March 2nd, 2006 (8.00 am - 5.30 pm). *Location:* Eric P. Newman Education Center, Washington University Medical Center, St. Louis, MO. *Contact:* Debra Hughes, (314) 286-2244, guzesymp@matlock.wustl.edu.



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