



Psychiatric Research Report

2003 Award for Research in Psychiatry

The 2003 winner of the APA Award for Research in Psychiatry is Ming T. Tsuang, M.D., Ph.D. Dr. Tsuang holds positions as Director of the Harvard Institute of Psychiatric Epidemiology and Genetics; Stanley Cobb Professor of Psychiatry and Professor of Epidemiology, Harvard University; Superintendent and Head, Harvard Department of Psychiatry at Massachusetts Mental Health Center.

The award of \$5,000 and engraved plaque will be presented by Drs. Alan F. Schatzberg and Darrel A. Regier at the annual meeting of the APA in San Francisco. For the first time, the Award for Research will include a lecture to be presented by Dr. Tsuang on Wednesday afternoon, May 21, from 2:00 – 3:30, in Rooms 130/131 of the Moscone Center. The lecture, entitled *Searching for Etiological Risk Factors of Schizophrenia*, will follow the progression of that search over the course of the last 30 years and will forecast the direction of the work that is still to come.

Dr. Tsuang's multiple posts within the Harvard medical complex reflect his lifelong multidisciplinary approach to the problems of psychotic illness. Cytogenetic studies performed early in his career confirmed the import of genetic factors as one source of neuropsychiatric disease. However, Tsuang's participation in a WHO-sponsored cross-cultural epidemiological study of schizophrenia led him to speculate about the underlying etiological heterogeneity of the disorder, and by 1965 his Ph.D. thesis, a study of sibling pairs with psychiatric disorders (University of London), postulated a polygenic theory of schizophrenia that is widely accepted today. Convinced that the path to etiology, treatment and, ultimately, prevention, must be preceded by a thorough examination and documentation of clinical characteristics, Dr. Tsuang began a longitudinal retrospective of family and followup research, the Iowa 500 Study. This work ultimately provided the first evidence of a distinction between schizophrenia and affective disorders, and further provided the clinical criteria for subtypes of schizophrenia which have been adopted, with only minor changes, by APA in the *DSM*.



Ming T. Tsuang, M.D., Ph.D.

The Iowa Study subsequently led to a more comprehensive goal: to clarify the variable expression of schizophrenia phenotypes and endophenotypes by a) identifying susceptibility genes and b) defining environmental risk factors that clearly contribute to morbidity and could ultimately contribute to preventive efforts. Studies based on these objectives have yielded a number of findings that move the field forward and in new directions. Work with the well relatives of schizophrenic patients has shown that the syndrome of negative symptoms is found among these relatives; that neuropsychological indicators (deficits in abstraction, verbal memory, and auditory attention) also aggregate among the nonpsychotic relatives; and, there is evidence of structural brain abnormalities as well. Simultaneous genetic linkage studies produced findings of linkage to chromosome 10p, now corroborated by other groups.

Recent environmental studies have focused on pre- and perinatal complications (PPCs) that Tsuang has associated with doubling the risk for developing psychosis in adulthood. A six-year prospective investigation of a community cohort of pregnancies, currently in its concluding stages, examines the interactive effects of genetic predisposition and PPCs on the development of schizophrenia.

Dr. Tsuang's programs of research over the course of his career have converged to provide genetic, environmental, neuropsychological, and neuroimaging data for the purpose of identifying those at high risk for developing schizophrenia. The crucial clinical question now concerns the possibility of developing preventive interventions for high risk populations. That is the thrust of Ming Tsuang's current research and will most certainly be addressed in his Award for Research Lecture in San Francisco on May 21. ■

Also in this Issue

Annual Meeting Research Agenda pp. 9–12



From the Committee on Research Training Supporting Research by Promoting Scholarship: The AADPRT Pre-Meeting on Scholarly Activity

Michele T. Pato, M.D., Chair*

As I noted in my last column for *Psychiatric Research Report* (PRR, Fall 2002), there is a complementary relationship between research and the pursuit of scholarship in medicine. Both disciplines involve the basic principles of evidence-based medicine: pose a question hypothesis, seek out data, assess the data and judge the relevance of the data to the particular patient/hypothesis. Thus, when I was asked to oversee the development of a whole day of activities on Scholarly Activity for a pre-meeting to the annual meeting of the American Association of Directors of Psychiatric Residency Training (AADPRT), it seemed only logical to include components of research training, evidence-based medicine, and critical appraisal of the literature as key elements of the day. The real challenge was to organize a day of activities that would not only present scholarly activity as something worth doing but as something within the reach of every residency training program and department. Moreover, one of the explicit goals was not simply teaching how to teach others, but also teaching ourselves how and why to pursue scholarship.

The AADPRT pre-meeting that we developed was held in San Juan, Puerto Rico on March 5, 2003. The day's activities were attended by 150 mostly preregistered participants and opened with a plenary session that I led and that explicitly asked, "Scholarly Activity: WHAT IS IT ANYWAY?" Several answers were explored: "This ability to invent, devise, envisage and improvise is the key to success in all types of scholarly work."¹ Or as Bennett noted in 2000,² "The professional development of physicians is a lifelong commitment that builds on formal and informal opportunities to learn emerging science, apply

innovation in clinical settings and expand understanding of caring for patients."

In essence, research does not exist without scholarship. Among the plenary speakers, Wayne Fenton, M.D. and Regina James, M.D., both of NIMH, discussed the relationship between scholarship and research, the diminishing pool of M.D. psychiatric researchers, and the NIMH vested interest in promoting more research by psychiatrists as well as in funding the programs to train them. The morning plenary ended with a presentation by Jerald Kay, M.D., Chair of Psychiatry at Wright State University, exploring ways for all training directors and teachers to continue scholarly pursuits throughout their own careers and suggesting that the best way to promote scholarship in trainees is through modeling it in ourselves.

Workshop highlights

Eleven workshops offered within three time slots made up the rest of the day's activities. Workshops (see list below) focused on providing hands-on materials that could be easily implemented by participants. The workshop topics grew out of ideas generated by a study on scholarship in graduate medical education.³ In this study, detailed interviews with members of 19 different residency training programs across all specialties at one university helped to highlight some common weaknesses. Areas identified included: lack of instruction on critical appraisal of the literature, little formal training in research methodology and basic statistical concepts, difficulty programming time and mentors into residency training, and little instruction and practice in scientific writing and reviewing of the literature.

Based on an end-of-the-day evaluation completed by all participants, the workshops were extremely well received. Average scores were in the "outstanding range" for more than half the workshops and "very good" for all the others. Perhaps

the greatest criticism of the program was the disappointment expressed by participants that time restraints permitted attendance at only three workshops. Other comments ranged from enthusiasm for novel and practical strategies (big and small) of teaching scholarship and research, to an appreciation for workshops that focused on evidence-based approaches to teaching and patient care. Among the most highly attended workshops were those on scholarship through writing and publishing, making journal club a scholarly activity, and the several focused on evidence-based medicine approaches. Individual workshop instructors were praised for their efforts at modeling scholarship through the programs they had developed.

Where do we go from here?

With this kind of enthusiasm for scholarly activities, the next question is what can we do to maintain momentum and to further implementation? Several initial steps to move things forward were actually made at the meeting. The evaluation included several questions on followup: each participant was asked about the likelihood of implementing some of the materials presented at the meeting. We were quite encouraged by the response to this question. On a 7-point scale, where 4 represented *neutral*, 1 = *not likely*, and 7 = *highly likely*, the mean answer was 6.1, implying not only that participants liked what they heard but felt the ideas presented were practical enough to implement more broadly. About half of the participants also agreed to be contacted in 6-12 months about whether they had implemented any of the ideas that had been put forth in the workshops. This response will allow us, the APA Committee on Research Training and APIRE, as organizers of this event, to have a way of following up on the impact of this pre-meeting.

To further encourage implementation of the ideas and materials presented, an annotated workbook is being compiled

*Dr. Pato is Professor and Associate Chief of Staff for Research and Development, VAMC-Syracuse, and Director of the Center for Psychiatric and Molecular Genetics, Department of Psychiatry, SUNY Upstate Medical University-Syracuse

with the handouts and lectures for each of the 11 workshops. Plans for duplication and distribution of the workbook are now in progress. Still to be determined are the sources of funding for duplication/distribution as well as the scope of the distribution effort. Given the overwhelming success of the workshops, plans are also underway to offer some of the workshops again as part of the regular program at the AADPRT annual meeting. The goal of a future workshop would be not only to invite participation from those who were not able to attend this year's meeting, but to encourage those who did attend to return and provide feedback on their attempts at implementation. This will provide another measure of impact as well as feedback on how to improve these activities in the future.

Followup efforts at the level of individual training programs are also critical to the progress of scholarly activities. For example, begin by taking stock of what you are doing now. Establish a baseline and set some goals for improvement. How many papers have been published by residents and faculty, together and separately, over the past year or past five years? What might be some reasonable goals to set for the next two years? Do you want to match up residents and faculty to write papers or cases together as a way of encouraging collaboration, mentorship and scholarship in both groups? If you decide to implement a journal club that teaches critical appraisal, what is its impact on publishing in the department? And even more rudimentary, what is its impact on how much residents and faculty read the literature or cite the literature in the care of patients? Can you do a pre-measure, even if it is just in the

form of self assessment, of how often residents report reading the literature or how often they present literature in their case conferences? Or can you simply monitor improvement in understanding of the literature by monitoring the ease and accuracy with which residents can complete a "Critical Review/Appraisal" form for a given article? All of these ideas were presented at the Pre-Meeting on Scholarly Activity at the annual meeting of the AADPRT in San Juan on March 5.

Ultimately all scholarship is really about our success at life-long learning. If this learning - whether it be from reading an article, talking with a colleague, listening to a lecture, or listening to a patient - can be imbued with a passion for discovery, it will not be a dreaded chore but rather a welcomed pursuit. ■

Pre-Meeting Workshops

1. **Journal Club as a Scholarly Activity**
Instructor: Michele T. Pato, M.D.
SUNY Upstate-Syracuse, New York
2. **Psychotherapy Training as a Scholarly Activity**
Instructor: Priyanthy Weerasekera M.D., M.Ed.
McMaster, Hamilton Ontario
3. **Scholarly Activity: The Residency as Your Lab**
Instructors: James Clardy, M.D. & Robert Jarvis, M.D.;
University of Arkansas, Little Rock, Arkansas
4. **Teaching Evidence-Based Practice: Curriculum & Resources for Training Psychiatric Residents**
Instructor: Fred DuFour, M.A., M.Sc.;
SUNY Upstate-Syracuse, New York
5. **Creating an Evidence-Based Case Conference**
Instructors: Grace Thrall, M.D.; Connie Schardt, MLS,
AHIP; Duke University, Durham, North Carolina
6. **Teaching the Non-Statistician How to Evaluate Research**
Instructor: Fred DuFour, M.A., M.Sc.;
SUNY Upstate Syracuse, New York
7. **Matching Research to Residents**
Instructors: Jane Eisen, M.D. & Tim Mueller, M.D.;
Brown University, Providence, Rhode Island
8. **Teaching Research Ethics to all Residents**
Instructor: Donald L. Rosenstein, M.D.;
NIMH, Bethesda, Maryland
9. **How to Develop Scholarship through Writing (and Publishing)**
Instructor: Joyce A. Tinsley, M.D.;
University of Connecticut, Farmington, Connecticut
10. **Doing Research on a Shoestring**
Instructors: Mantosh Dewan, M.D. & Michele T. Pato,
M.D.; SUNY Upstate-Syracuse, New York;
Ed Silberman, M.D.; Jefferson University, Philadelphia,
Pennsylvania
11. **Getting Residents Involved in Research and Publishing (Even in small programs!)**
Instructors: Mary Jo Fitz-Gerald, M.D., Anita Kablinger, M.D.;
Louisiana State University, Shreveport, Louisiana

FOOTNOTES:

1. Bennett NL, Davis DA, Easterling Jr. WE, Friedman P, Green JS, Koeppen BM, et al. Continuing medical education: A new vision of the professional development of physicians. *Acad Med* 2000; 75: 1167-1172.
2. Glassick C, Huber MT, Maeroff GI. Scholarship Assessed: Evaluation of the professoriate. A special report from the Carnegie Foundation for the Advancement of Teaching. San Francisco: Jossey-Bass; 1997.
3. Pato MT, "Assessing Scholarly Activity," manuscript in preparation.

Legislative Forum

Lizbet Boroughs, M.S.P.H., Associate Director,
Division of Government Relations

❖ *FY03 appropriations six months late*

The FY03 Omnibus Appropriations bill was finally approved by both chambers of Congress and signed by the President. The APA is pleased to report that NIMH, NIDA and NIAAA received substantial increases. This increase is part of the bipartisan effort, supported by President Bush, to complete a five-year doubling of the National Institutes of Health (NIH) budget, thus raising the annual NIH appropriation to \$27 billion. The following increases were included in that figure.

NIMH: 8.4% increase (+104.5 million) for a total of \$1,349.8 billion

NIDA: 9.3% increase (+82.3 million) for a total of \$968.0 million

NIAAA: 9.3% increase (+35.6 million) for a total of \$418.8 million

CMHS: 3.7% increase (+30.8 million) for a total of \$862.1 million

Block Grant will be funded at \$440.0 million (+7 million),

Children's Mental Health Services Program, \$98.7 million (+2.2 million)

PATH Homeless Program, \$43.4 million (+3.5)

❖ *Congress and the Administration: "Done funding NIH!"*

FY03 marked the completion of the five-year Congressional campaign to double funding for the NIH. NIMH, NIDA and NIAAA budgets have all grown by tens of millions of dollars since 1999 when the doubling effort began, allowing unprecedented increases in the number of funded research grants. That growth, however, will probably come to a screeching halt in FY04.

Congressional staff have shared with the APA that significant future increases for NIH are not likely. Justifications for the new outlook:

- Congress has fulfilled five-year NIH doubling pledge and now it is time to fund other federal priorities.
- Bioterrorism research conducted by the

CDC and National Science Foundation must take priority over other health research programs.

- Domestic discretionary spending will be greatly reduced in FY04 due to the pressures of increased US military activity.

❖ *Grim outlook for FY04*

Prospects for significant increases in domestic health spending not related to bioterrorism are dire. Under President Bush's proposed FY04 plan to fund the NIH at \$27.9 billion, for example, the number of non-bioterrorism research grants awarded by the NIH next year will drop. Such a precipitous decline has occurred only once since 1989.

❖ *NIMH*

It is expected that in 2004 and 2005 funding increases for all of the NIH institutes will be held far below the increases that Congress enacted from 1998 through 2003. This decline in budget increases will have a devastating impact on the ability of NIMH (and NIH as a whole) to sustain the ongoing multi-year research grants that have been initiated over the past two to three years.

For FY 2004, the President is proposing \$1.38 billion for scientific and clinical research at the NIMH. This is barely a 3.6%, or \$50 million, increase over the amount the President requested for NIMH in FY 2003 (\$1.33 billion). The proposed increase for NIMH is far below the 8% to 9% annual increase that NIMH has been receiving from Congress in recent years.

❖ *CMHS*

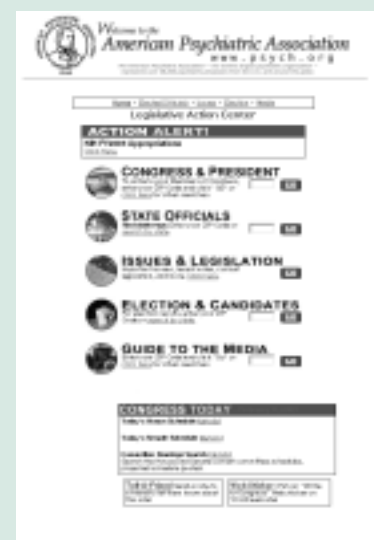
The Administration's budget proposes moderate increases for a few programs at the Center for Mental Health Services (CMHS). Funding for the PATH program was proposed at an additional \$3 million for FY 2004 – up to \$49.9 million. PATH is a formula grant program to the states that funds services for homeless individuals with severe mental illnesses. The President is requesting a \$10 million increase for the Children's Mental Health Program at CMHS. At the same time, the President's budget proposes to freeze most

other programs at the CMHS, including funds for the Mental Health Block Grant Program (\$433 million).

❖ *Bitter Budget Fight*

The Budget Resolution by which Congress determines the size of the overall FY04 budget has been hotly contested in both houses and is expected to be reported from conference committee in mid-April. The Senate's version of the Budget Resolution designates \$4.3 billion dollars more than the House version for health related functions, known formally as Budget Function 550. The health function in the Budget Resolution not only controls funding for NIH, CDC, HRSA, and SAMHSA, it also controls Medicaid which is of extreme importance to many patients with severe and persistent mental illness. When the Budget Resolution is approved by conference committee, the appropriations process, which further allocates funds to individual agencies, will begin all over again.

The APA will keep membership advised of further budget and appropriations developments via the Advocacy Page on the APA Web site. Online links also allow APA members to contact their elected officials by letter or by e-mail. From the APA Web site (www.psych.org) click on "Advocacy Action Center" under the ADVOCACY heading to access the Legislative Action Center menu displayed below. ■



From the Council on Research, John F. Greden, M.D., Chair

The 14th Albert J. Silverman Research Conference “Treatment of Depression in Real World Settings”

May 28, 2003

The University of Michigan Department of Psychiatry
and
The University of Michigan Comprehensive Depression Center

As Chair of the APA Council on Research, and Chair of the University of Michigan, Department of Psychiatry, I would like to indulge a chair's prerogative and call attention to an upcoming event at the University of Michigan that has held special meaning for me since its inception 14 years ago, the *Albert J. Silverman Research Conference*. This year, the “Silverman Conference,” as it has come to be known, marks an especially poignant milestone, the first anniversary of Dr. Silverman's death on May 10, 2002, at the age of 77.



A. J. Silverman, M.D.

Albert J. Silverman, M.D., was Chair of the University of Michigan Department of Psychiatry from 1970 until 1981. During this time he invigorated both mental health research and clinical care at U. of M. through his energetic leadership and visionary ideas.

Al Silverman came to U. of M. from Rutgers University where in 1963 he was one of the three founders of the Rutgers Medical School and the first Chair of its Department of Psychiatry. He was a Canadian-born psychiatrist who became an international leader in the field of psychosomatic medicine, embracing all aspects of the human brain and psyche. A naturalized American citizen, he became Chief of the Stress and Fatigue Section, Aero Medical Laboratory, U.S. Air Force, at Wright-Patterson Air Force Base. There, his interest in the physiological underpinnings of psychological phenomena coincided with the dawn of the space age, and he became a leader of U.S. Air Force research on space psychophysiology. He was also an analytically-trained psychiatrist who strove to bridge the divide between neuroscience and psychoanalysis.

At the U. of M., he sought to marry the Mental Health Research Institute, the noted home of basic neuroscience research, and the psychodynamically-focused psychiatry faculty. Al strengthened the clinical trials program, sparked new clinical treatments, and launched research programs that emphasized the emerging topics of psychopharmacology, biofeedback, and stress-neuroendocrine relationships. Prescient in all aspects of his professional life, he

revamped the medical school curriculum at Michigan to include increased training in psychiatry, he upgraded the psychiatry residency program, and he developed a psychiatry department that until this day continues to entice young neuroscientists and clinical researchers to join its ranks.

The annual conference that celebrates Dr. Silverman's contributions will be held this year on May 28. The conference will bring together community mental health providers, primary care practitioners, psychiatry residents, postdoctoral fellows, graduate students, undergrads, and faculty members for a day-long scientific program that includes poster sessions of cutting-edge research on a range of subjects spanning molecular neuroscience, educational outcome research, clinical trials, and many other topics.

This year's conference theme is the *Treatment of Depression in Real World Settings*. Two guest speakers will be featured. Kurt Kroenke, M.D., will address *Depression and Physical Symptoms: The Interface*. Dr. Kroenke is Professor of Medicine at the Indiana University School of Medicine, and Director of the Indiana University Clinical Investigator Training Enhancement Program. Mark Olfson, M.D., M.P.H., Associate Professor of Clinical Psychiatry at Columbia University, will speak to attendees about *Healthcare Seeking and Innovative Approaches to Treatment for Depressed Patients*. Panel discussions will follow each presentation. Additional sessions will focus on treating depression in primary care settings, under managed care, and within the VA system. (Up to three hours of CME credits can be earned.)

The primary mission of this conference will be to reach out to all those specialties that encounter and treat psychiatric illnesses, especially depressive illness, and to provide practitioners in those specialties with access to the latest scientific information on the treatment and care of patients with depressive illness. Underlying this mission, however, is our fond memory of a visionary, a healer, and a friend, Albert J. Silverman, M.D. ■

Building Research Careers



Writing a NIMH Mentored Career Development Award (a.k.a. "K Award"): Part III

Melissa P. DelBello, M.D.
Department of Psychiatry
University of Cincinnati College of Medicine

In the third part of this series about NIMH Career Development Awards (K Awards), we will complete our discussion of the review, scoring, and reapplication process. We will also examine some of the advantages and disadvantages of having a K Award.

The review process revisited

In Part II of this series we briefly described what happens to your K application after it is mailed to NIH. There are three submission deadlines each year: February 1, June 1, and October 1 (see deadlines for resubmission, below). It is preferable to finish your application well in advance of the deadline so that you have time to review the final application and make certain that it is complete. Typically, your application is sent to the NIH Center for Scientific Review (CSR) where it is assigned to a study section whose members will review your proposal. You may want to include a cover letter with your application requesting assignment to a specific study section and institute program.

It takes approximately four to five months from the time that you mail your application until the review committee meets. However, you should receive notification of receipt from NIH within two months after submitting the application. This letter will list the institute, program, and study section to which your application has been assigned.

After sending your application to NIH, it is useful to again contact the NIH program people who have guided you through the application process to let them know you have submitted your application and requested assignment to their program. Additionally, it may be helpful to send the program staff a final copy of your grant application so that they are aware of and can track your submission. I suggest maintaining contact with the program staff throughout the review process. In fact, you might want to inform the program staff once you receive notification of receipt from CSR confirming the study section to which your grant has been assigned for review. Although they are not permitted to actively participate in the review meeting, NIH program staff may attend the review of your application and thus be helpful in understanding reviewer comments, especially if resubmission is necessary.

"If at first you don't succeed..."

The priority score for your K application is available within a few days following the study section meeting. However, it often takes an additional month to receive written feedback from the review committee.

The **MAJORITY** of people who apply for a K Award do not receive a priority score that will lead to funding of their initial submission. In other words, most applicants will have to revise and resubmit their application. Therefore, do not expect that your first submission will receive funding, and try to resist the deflation that accompanies an unfundable priority score. In fact, if you receive a good score that is not within the funding range, I recommend celebrating your accomplishment. The tendency to feel frustrated and discouraged at this point leads too many physicians to drop out and change career paths. This is a critical stage for physician scientists. NIMH data indicate that although M.D. and Ph.D. candidates apply for K Awards at the same rate, and receive comparable first-time priority scores, the resubmission rate for Ph.D. applicants is approximately double that of M.D. candidates, producing a physician dropout rate that probably accounts for the greater number of Ph.D.s ultimately successful in obtaining career awards.

Your initial score, however, is an important indicator and predictor of the extent to which you will need to revise your application. Once you receive the reviewers' comments read them, reread them, and then put them away for a while. Share them with your mentors and advisors and ask for feedback. Discuss your reviews with the program people who, hopefully, attended the study section meeting and can help you interpret the written reviews.

Allow at least one month to revise your application. Also, remember to allow enough time for mentors and advisors to read the revisions prior to the resubmission deadlines, (March 1, July 1, and November 1). The *"introduction to the revised application"* section is of paramount importance. This is the section where you will concisely describe the changes you have made in response to the reviewers' comments, and it should be your highest priority for the revised application. Do not argue with the reviewers! Instead, demonstrate an appreciation for the time and effort the reviewers dedicated to reading and commenting on your application.

"One, two, three strikes you're out....."

NIH allows a total of three submissions: an initial application and two revisions. After the third time you are not permitted to submit the same K application. However, you may submit a new K

application with significant changes and a new title. Many people apply for a second round of three attempts. In general, persistence does pay off. When submitting a new application, be sure to closely re-examine your original application and the reviewers' comments, enlist the assistance of experienced mentors and program staff, and follow their recommendations. Most importantly, *do not give up*.

Risks and Benefits

There are many advantages to finally being awarded your K grant. You will receive at least 75% salary support and some research funds for up to five years. You will also have committed to enrolling in classes as a part of your career development plan. Most likely you will have dramatically underestimated the time needed to actually study for the classes. You have the option of enrolling in the classes for credit or for audit. However, taking the classes for credit may be preferable, if you intend to learn anything. Many take this opportunity to earn another degree, such as a Ph.D. or a Master's degree. However, you need to consider the risks and benefits of committing the amount of time needed to complete another degree. On the other hand, having a K Award allows you the luxury of being paid to attend classes that interest you, so take advantage.

One significant drawback of receiving a K is that once awarded, you are required to give up any other NIH salary support. This is a problem since the K does not fund your entire salary. The rationale for this restriction has several flaws, and a reconsideration of this policy might result in additional junior investigators applying for K grants.

Summary

In summary, we have reviewed several essential steps that potential applicants can take to improve their chances of success:

- 1- Begin to think about a K application several *years* before actually writing the grant application. Check out the NIH Web site (www.nih.gov) and search under Career Development Awards for the full array of available awards.
- 2- Apply for foundation or pharmaceutical grant support in order to obtain preliminary data.
- 3- Apply for travel awards to attend meetings so that you can meet potential advisors and mentors.
- 4- Establish communication and working relationships with appropriate primary mentors and advisors.
- 5- Write several peer-reviewed manuscripts.
- 6- Talk to others who have written/received K grants and review their applications.
- 7- Attend a NIH workshop on writing a K Award.
- 8- Find a NIH institute and program that best suits your application and talk with the appropriate program staff (preferably those who specialize in career development programs) far in advance of the submission deadline.

- 9- Allow ample time to write your application (several months) and consider building your proposal around the career development section.
- 10- Allow ample time for your advisors and mentors to read the application and to provide feedback.
- 11- Read your application several times before submission. Ask someone who has not previously read the application to examine it as well.
- 12- Send a cover letter to CSR with your application requesting the study section you think is most suited to review the content of your application. Making recommendations may help direct the application to reviewers with the appropriate expertise.
- 13- Send the NIH program staff a copy of your final application (with a cover letter) so that they are aware of your submission.
- 14- Check to ensure that your application has arrived at the appropriate place in time to meet submission deadlines.
- 15- Before and after your application has been reviewed, maintain contact with the appropriate institute program staff. They can help you to interpret the reviewers' comments.
- 16- Submit, resubmit, and do not give up!!!!

There are also several suggestions that might make this process more friendly and thus might increase junior faculty interest in applying for a K grant:

- 1- NIMH and other NIH institutes should sponsor additional K workshops to teach potential applicants about the process and make it less intimidating.
- 2- There should be an effort made to increase the incentives for mentors and advisors to participate in K Awards (i.e., salary support for mentors).
- 3- Continue and expand programs like the NIH Loan Repayment Program (LRP) for physicians who are ambivalent about pursuing a research career because of substantial accumulated debt from medical school.
- 4- Create a study section, within NIMH, that reviews only K applications (and other training grant applications). This will also help to ensure that K resubmissions are not re-reviewed by an entirely new committee.
- 5- At least one of the reviewers, on all physician applications, should be a physician.
- 6- Reconsider the policy that K awardees cannot receive salary support from NIH grants other than their K Award. ■

Meeting Announcements

2004 Ittleson Award

The American Psychiatric Association, Council on Children, Adolescents, and Their Families, requests nominations for the *2004 Blanche F. Ittleson Award*. This award recognizes outstanding research in child psychiatry by a psychiatrist investigator, or group of investigators, that has resulted in, or promises to lead to, a significant advance in promoting the mental health of children. The research must have been published within five years prior to submission of the nomination to the Ittleson Award Committee or must have been officially accepted for publication in the near future. The award consists of a \$2,000 prize and a plaque presented during the Convocation of Fellows at the Annual Meeting of the APA. August 8, 2003 is the deadline for submission of applications for the 2004 award. Applicants should submit four collated copies of: the research paper on which the nomination is based, a curriculum vitae, and a cover letter. Send to: The Blanche F. Ittleson Award Committee, c/o Jane Edgerton, APA, 1000 Wilson Blvd., Suite 1825, Arlington, VA 22209. For further information, contact jedgerton@psych.org.

ACNP Basic/Translational Research Award

The American College of Neuropsychopharmacology (ACNP) presents the *Daniel H. Efron Basic/Translational Research Award* to an individual on the basis of outstanding basic/translational research contributions to neuropsychopharmacology. The contributions may be preclinical or work which emphasizes the interface between basic and clinical research. The selection of the awardee is based on the quality of the contributions and its impact on advancing neuropsychopharmacology. The Efron Research Award consists of an expense paid trip to the ACNP Annual Meeting, December 7-11, 2003, in San Juan, Puerto Rico, a monetary award, and a plaque to be given at the ACNP Annual Meeting. The recipient of the award must be 45 years of age or younger as of 31 December 2003. He/she must not be a member of the ACNP or a citizen of the U.S. Complete

details about the nominations are available at www.acnp.org, or by contacting the ACNP Secretariat at (615) 322-2075. The application deadline is June 20, 2003.

ACNP Clinical/Translational Research Award

The American College of Neuropsychopharmacology (ACNP) presents the Joel Elkes Research Award to a young scientist in recognition of an outstanding clinical/translational contribution to neuropsychopharmacology. The work may comprise clinical studies and may mark an empirical advance or a theoretical construct based on laboratory findings. The contribution may be based on a single discovery or on a cumulative body of work. Of particular interest in selecting the awardee are contributions which further our understanding of self-regulatory processes as they affect mental function and behavior in disease and well being. The Joel Elkes Research Award consists of an expense paid trip to the ACNP Annual Meeting, December 7-11, 2003, in San Juan, Puerto Rico, a monetary award, and a plaque to be presented at the ANCP Annual Meeting. The recipient of the Elkes Award must be 45 years of age or younger as of 31 December 2003. He/she does not need to be a member of the ACNP or a citizen of the United States. Details are available at www.acnp.org or by contacting the ACNP Secretariat at (615) 322-2075.

Call for Poster Submissions

The APA's *2003 Institute of Psychiatric Services (IPS)* will be held October 29 - November 2, 2003, in Boston, MA. Poster submissions will be accepted until June 2. This year's theme is "Access to Integrated Mental Health Care." The informal, 90-minute poster format allows for presentation of research advances, new program features, model programs, and/or the posting of new research findings. Poster submission forms are available on line (www.psych.org). Submissions should be sent to Richard Balon, M.D., c/o Jill Gruber, American Psychiatric Association, 1000 Wilson Blvd., Suite 1825, Arlington, VA 22209-3901, or by fax to (703) 907-1090. For further information please call or e-mail Ms. Gruber, (703) 907-1821, jgruber@psych.org.

Academic Psychiatry

The Association for Academic Psychiatry will hold its Annual Meeting in Philadelphia, PA, October 1 - 4, 2003, at the Courtyard Marriott Hotel. This year's theme is "Best Evidence Medical Education: How Well Does Psychiatry Measure Up?" As evidence-based medicine sweeps through the country, educators have increasingly asked themselves, "What evidence can I provide to ensure that the curriculum, assessment technique, teaching methodology, etc., that I use is successful? Psychiatric educators are beginning to look into these issues as well. The annual meeting promises to provide participants with information useful for: designing and conducting effective research on psychiatric medical education, getting proposals funded and published, and obtaining timely results on the forefront of psychiatric medical education. Details available at www.academicpsychiatry.org, or from Carole Berney, (617) 661-3544.

AACAP 50th Anniversary

The American Academy of Child and Adolescent Psychiatry will celebrate its 50th anniversary at the AACAP Annual Meeting, October 14 - 19, 2003, at the Fontainebleau Hilton, in Miami Beach, Florida. Program and registration materials will be available in August. Submissions for New Research Posters will be accepted until June 13, 2003; notification of acceptance will be made in August. Additional information is currently available online, www.aacap.org.

Colorado Blending Conference

The National Institute on Drug Abuse will host the Colorado Blending Conference, September 8 - 9, 2003, at The Westin Westminster, in Westminster, CO. The theme of the conference will be "*Blending Clinical Practice and Research: Forging Partnerships in the Rocky Mountain States to Enhance Drug Addiction Treatment.*" This two-day conference will bring together clinicians and researchers to examine cutting-edge scientific findings about drug use and addiction and their application to clinical practice. More details about the conference will be posted on NIDA's Web site at www.drugabuse.gov, and a registration Web site will be available as of May 1, at www.mac1988.com/blendingcolorado. ■

*Research
Agenda
at the
Annual
Meeting*

American Psychiatric Association



**The Promise of Science
The Power of Healing**

156th Annual Meeting ♦ May 17-22, 2003

Research Agenda

New Research Sessions

- ◆ **Young Investigators' Poster Session (1)**
Monday, May 19, 9 - 10:30 a.m.
Hall D, Exhibit Level, Moscone Center
- ◆ **Young Investigators' Oral/Slide Sessions (2-4)**
Monday, May 19, 1 - 2:30 p.m.
Rooms 110, 111 and 112, Moscone Center
- ◆ **Poster Session (5)**
Monday, May 19, 3 - 5 p.m.
Hall D, Exhibit Level, Moscone Center
- ◆ **Poster Session (6)**
Tuesday, May 20, noon - 2 p.m.
Hall D, Exhibit Level, Moscone Center
- ◆ **Poster Session (7)**
Tuesday, May 20, 3 - 5 p.m.
Hall D, Exhibit Level, Moscone Center
- ◆ **Poster Session (8)**
Wednesday, May 21, noon - 2 p.m.
Hall D, Exhibit Level, Moscone Center
- ◆ **Poster Session (9)**
Wednesday, May 21, 3 - 5 p.m.
Hall D, Exhibit Level, Moscone Center
- ◆ **Poster Session (10)**
Thursday, May 22, noon - 2 p.m.
Hall D, Exhibit Level, Moscone Center

Special Sessions on *Psychiatric Dimensions of Disaster*

Review of Psychiatry

- ◆ **Trauma & Disaster Responses & Management**
Co-chairs: Robert J. Ursano, Ann E. Norwood
Tuesday, May 20, 9:00 a.m. - 12:30 p.m.

Forum

- ◆ **Terrorism & Psychosocial Preparedness**
Chair: Howard J. Osofsky
Tuesday, May 20, noon - 1:30 p.m.

Issue Workshops

- ◆ **Preparing Psychiatrists for Mass Casualty Events**
Chair: Kenneth S. Thompson
Monday, May 19, 9 a.m. - 10:30 a.m.
- ◆ **Lessons Learned from September 11**
Chair: David C. Lindy
Monday, May 19, 9:00 a.m. - 10:30 a.m.
- ◆ **Emerging Role of Psychiatry in a Bioterrorism Response**
Chair: Anthony T. Ng
Tuesday, May 20, 9:00 a.m. - 10:30 a.m.
- ◆ **Intergenerational Transmission of Trauma in Prevention of Long-Term Consequences of Traumatic Stress**
Chair: Andrei Novac
Wednesday, May 21, 9:00 a.m. - 10:30 a.m.

Symposia

- ◆ **Early Trauma: Strategies for Intervention & Treatment**
Tuesday, May 20, 2:00 p.m. - 5:00 p.m.
- ◆ **Science and Psychiatric Participation in Disaster**
Tuesday, May 20, 2:00 p.m. - 5:00 p.m.
- ◆ **Bereavement After Violent Death**
Tuesday, May 20, 2:00 p.m. - 5:00 p.m.
- ◆ **Terrorism, War, and Refugees: Psychiatric Effects & Prevention**
Wednesday, May 21, 2:00 p.m. - 5:00 p.m.
- ◆ **Psychological Impact of 9/11: Five Major Studies**
Wednesday, May 21, 2:00 p.m. - 5:00 p.m.
- ◆ **Terrorism & Political Violence in the 21st Century: New Forms and Responses**
Thursday, May 22, 2:00 p.m. - 5:00 p.m.

Component Workshops

- ◆ **Early Intervention Following Mass Violence: Designing an Effective Approach**
Chair: John S. Kennedy
Monday, May 19, 9:00 a.m. - 10:30 a.m.
- ◆ **Global Trauma: Experience & Implications for *DSM-V***
Co-chairs: Arthur M. Kleinman, Harold I. Eist
Wednesday, May 21, 9:00 a.m. - 10:30 p.m.
- ◆ **Update on Practice Guideline: PTSD-Acute Stress Disorder**
Chair: John S. McIntyre
Thursday, May 22, 11:00 a.m. - 12:30 p.m.

Research Agenda at the Annual Meeting

William C. Menninger Memorial Lecture

- ◆ **Horsemen of the Apocalypse: Terror, Nihilism, & Science**
Charles Krauthammer
Monday, May 19, 6:00 p.m. – 7:30 p.m.

APA Award for Research in Psychiatry Lecture

- ◆ **Searching for Etiological Risk Factors of Schizophrenia**
Ming T. Tsuang
Wednesday, May 21, 2:00 p.m. – 3:30 p.m.

Debates

- ◆ **Personality Disorder Nomenclature Should be Deleted in *DSM-V***
John S. McIntyre, John M. Oldham, Roger Peele
Monday, May 19, 9:00 a.m. – 10:30 a.m.
- ◆ **Racism is a Mental Disorder**
Geetha Jayaram, Alvin F. Poussaint, Robert T. M. Phillips
Tuesday, May 20, 9:00 a.m. – 10:30 a.m.

Forums

- ◆ **The Placebo Effect: Science, Belief, & Clinical Practice**
Co-chairs: Philip R. Muskin, Andrew F. Leuchter
Monday, May 19, noon – 1:30 p.m.
- ◆ **The Neurobiology of Parent-Child Relationships: Applications to Psychotherapy**
Co-chairs: Bernard D. Beitman, Eva M. Szigethy
Tuesday, May 20, noon – 1:30 p.m.

Lecture Series

- ◆ **The Neurobiological Consequences of Child Abuse**
Charles B. Nemeroff
Monday, May 19, 9:00 a.m. – 10:30 a.m.
- ◆ **Schizophrenia is More Than a Neurodevelopmental Disease**
Robin M. Murray
Monday, May 19, 2:00 p.m. – 3:30 p.m.
- ◆ **Genes, Family Relationships, and *DSM-V***
David Reiss (Adolph Meyer Award Lecture)
Tuesday, May 20, 9:00 a.m. – 10:30 a.m.
- ◆ **The Search for Genes of Bipolar Disorder: From Classical Genetics to Novel Molecular Targets**
Julien Mendlewicz
Tuesday, May 20, 11:00 a.m. – 12:30 p.m.
- ◆ **Can Psychiatry Improve Community Welfare? New Research & Practice Paradigm**
Kenneth B. Wells
Wednesday, May 21, 9:00 a.m. – 10:30 a.m.

- ◆ **Better than Prozac: Creating New Psychiatric Drugs**
Samuel H. Barondes
Wednesday, May 21, 11:00 a.m. – 12:30 p.m.
- ◆ **The Revolution in Mouse Molecular Genetics: New Approaches for Psychiatric Research**
Laurence H. Tecott
Wednesday, May 21, 2:00 p.m. – 3:30 p.m.

Research Advances in Psychiatry

- ◆ **An Update for the Clinician**
Co-chairs: Herbert Pardes, Geetha Jayaram
Monday, May 19, 10:30 a.m. – 12:30 p.m.

Review of Psychiatry

- ◆ **Molecular Neurobiology for the Clinician**
Chair: Dennis S. Charney
Tuesday, May 20, 2:00 p.m. – 5:30 p.m.
- ◆ **Standardized Evaluation in Clinical Practice**
Chair: Michael First
Wednesday, May 21, 9:00 a.m. – 12:30 p.m.

Research Consultations on

- ◆ **The Genetics of Bipolar Disorder & Other Psychiatric Phenotypes**
J. Raymond DePaulo, Jr.
Tuesday, May 20, 11:00 a.m. – 12:30 p.m.
- ◆ **Psychiatric Genetics & Epidemiology**
Ming T. Tsuang
Thursday, May 22, 9:00 a.m. – 10:30 a.m.

This format gives junior researchers an opportunity to discuss difficult issues with prominent colleagues. These sessions are limited to 25 participants on a first-come, first-served basis.

Discussion Groups

- ◆ **Some Recent Advances in Psychopharmacology**
Alan F. Schatzberg
Monday, May 19, 9:00 a.m. – 10:30 a.m.
- ◆ **Evidence-Based Psychiatry: The Promise & Pitfall of Translating Science into Practice**
Anthony F. Lehman
Wednesday, May 21, 9:00 a.m. – 10:30 a.m.

Component Workshops

- ◆ **The Research Base for New Diagnostic Criteria for Depression**
Co-chairs: Darrel A. Regier, Norman Sartorius
Monday, May 19, 11:00 a.m. – 12:30 p.m.

- ◆ **Career Choices in Psychiatry: Exploring Fellowship Training**
Chair: Caroline E. Fisher
Tuesday, May 20, 9:00 a.m. - 10:30 a.m.

- ◆ **Great Expectations: Integrating Mind & Brain in Resident Training**
Co-chairs: Jody J. Gold, Rebecca Brendel
Wednesday, May 21, 9:00 a.m. - 10:30 a.m.

Issue Workshops

- ◆ **IOM Study: Incorporating Research Into Residency Training**
Chair: Joel Yager
Monday, May 19, 9:00 a.m. - 10:30 a.m.

- ◆ **Evidence-Based Medicine: An Application in Child & Adolescent Psychopharmacology**
Co-chairs: Norman E. Alessi, Robert A. Kowatch
Monday, May 19, 11:00 a.m. - 12:30 p.m.

- ◆ **Treatment of Schizophrenia: Antipsychotic Polypharmacy vs Monotherapy**
Chair: Andre Tapp
Tuesday, May 20, 9:00 a.m. - 10:30 a.m.

- ◆ **From Neuropathology to Treatment: Emerging Treatment Strategies for Alzheimer's Disease**
Chair: Jacobo E. Mintzer
Tuesday, May 20, 9:00 a.m. - 10:30 a.m.

- ◆ **Neurobiology of Learning: Moving From the Ivory Tower Into the Classroom**
Chair: Janet E. Osterman
Thursday, May 22, 9:00 a.m. - 10:30 a.m.

Symposia

Monday, May 19th

2:00 p.m. - 5:00 p.m.

- ◆ Mineral/Vitamin Modification of Mental Disorders & Brain Function (S.2)
- ◆ Neuroscience to Treatment and Back (S.3)
- ◆ Eating Disorders 2003: From Laboratory to Practice (S.17)
- ◆ Integrating Neurobiology in Psychiatric Training and Practice (S.20)
- ◆ Interferon-Induced Neuropsychiatric Side Effects (S.22)
- ◆ Confronting Crises in Education, Mental Health, & Juvenile Justice: (Fresno-Controlled Prevention Study for Children (S.25)
- ◆ Applying Decision Science & Game Theory to Clinical Psychiatry (S.27)
- ◆ Schizophrenia: Guidelines, Practices, & Effectiveness Research (S.28)

Tuesday, May 20th

2:00 p.m. - 5:00 p.m.

- ◆ New Research in Gay, Lesbian, & Bisexual Mental Health Morbidity (S.31)
- ◆ An Update on Parkinson's Disease and its Psychiatric Complications (S.32)
- ◆ The Ethnicity Factor in Psychiatric Research: Identity & Methodology Issues (S.36)
- ◆ Early Intervention in Psychosis: Where Science Meets Community Psychiatry (S.39)
- ◆ Neurosteroid Mechanisms, Epidemiology, & Applications in Psychiatry (S.40)
- ◆ Science & Psychiatric Participation in Disaster Response (S.41)
- ◆ Recovery from Schizophrenia: A Challenge for the 21st Century (S.42)
- ◆ Advances in Understanding & Treating Chronic Depression (S.49)
- ◆ Women Psychiatrists Using Science to Heal (S.51)
- ◆ Comorbid Conditions in Schizophrenia: New Treatment Target or New Illness Model? (S.53)
- ◆ ADHD: Longer-Term Treatment for a Chronic Disorder (S.54)

Wednesday, May 21st

2:00 p.m. - 5:00 p.m.

- ◆ Dimensionality in Psychiatric Disorders (S.61)
- ◆ New Research and Novel Therapeutic Strategies for OCD (S.65)
- ◆ Unmet Needs in Bipolar Disorder: Redefining the Spectrum & its Boundaries (S.72)
- ◆ Glutamate: An Exciting Neurotransmitter (S.73)
- ◆ Cognitive Dysfunction in Bipolar Disorder (S.74)
- ◆ Meta-Analyses of the Efficacy of Second- vs First-Generation Antipsychotics (S.80)
- ◆ The Psychological Impact of 9/11: Results from Five Major Studies (S.81)

Thursday, May 22nd

2:00 p.m. - 5:00 p.m.

- ◆ Polypharmacy: Evidence Basis vs Clinical Experience (S.88)
- ◆ Truth and Expectations in Psychopharmacology Research (S.89)
- ◆ New Research in the Biology & Treatment of Bulimia Nervosa (S.98)
- ◆ Bipolar Spectrum or Borderline Personality: A Relevant Distinction?
- ◆ New Intravenous Treatments: A New Tool to Overcome Difficulties and Resistance (S.101)

CALL FOR SUBMISSIONS

JUNE 2 - DEADLINE FOR INDUSTRY-SUPPORTED SYMPOSIA SUBMISSIONS FOR THE 2004 ANNUAL MEETING

Criteria for Participation in Industry-Supported Symposia:

- Chairpersons and presenters must be representative of those in the field, and include women, minorities and young investigators.
- Chairpersons and presenters should be regarded as internationally or nationally known experts in the subject area to be presented.
- Chairpersons and presenters should be highly regarded within the scientific and professional community as presenters, moderators or discussants.
- All Industry-Supported Symposia Chairpersons must be APA members in good standing.
- Chairpersons and presenters must be willing to commit to availability for the entire scheduled time of the symposium.
- Chairpersons must coordinate the presentations, ensuring that they are well balanced, offer a variety of topics and that multiple viewpoints are presented.
- Chairpersons will be held accountable for the overall quality of the symposia and adherence to APA and ACCME Guidelines.
- Chairpersons must agree to follow the time schedule, and if necessary, interrupt a presenter who is over his or her allotted time; ensure that 25% of the allotted time is devoted to a question and answer or audience-interaction period; and conclude the session on time.
- Chairperson and presenters must agree *not* to solicit support of the symposium. The APA will handle all funding discussions.
- Chairpersons and presenters must be willing to fully disclose any potential conflicts of interest per ACCME Guidelines.
- Chairperson and presenters must disclose, at the time of submission, if they are employees of a pharmaceutical company and which company it is. The symposium should not contain more than one full-time employee of a potential funding company.
- Chairpersons and presenters must agree to limit Industry-Supported Symposia participation to no more than two during any one APA Annual Meeting. This participation will be further limited to serving as Chairperson on *only one* Industry-Supported Symposium. In case of multiple presentations, the SPC reserves the right to determine which presentation will be retained.
- Chairpersons and presenters must be willing to follow APA guidelines concerning honoraria/travel expenses for Industry-Supported Symposia.

APA Members who are interested in chairing an ISS MUST forward a complete submission by June 2, 2003. This would include the overall abstract (Part A), individual abstracts (Part B) for each presenter and a disclosure form for each participant. The ISS Subcommittee will review these for scientific merit, and those deemed of high quality will be presented to industry representatives in order to determine their potential interest in supporting these endeavors. For those that are likely to be supported, letters will be sent to the potential chairs around *September 5, 2003*. Those who have submitted abstracts that are not likely to be funded will be invited to submit their presentations as part of the regular scientific program.

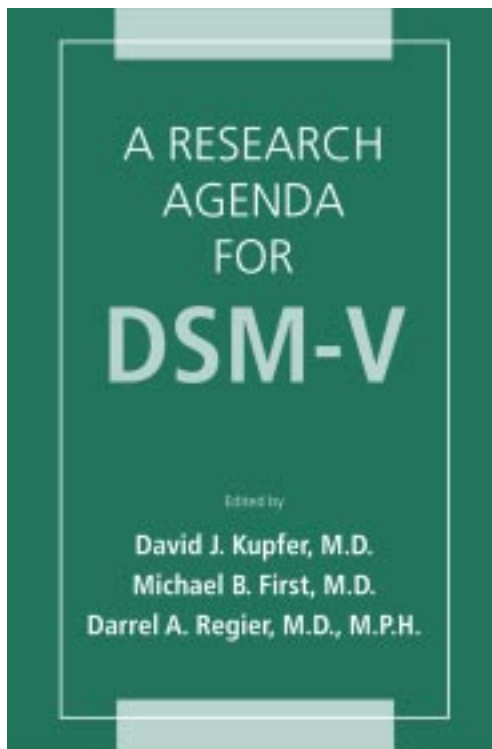
If you have questions about this procedure or need a submission form, please feel free to call or write to Ms. Kendra Grant, Administrator, Commercially-Supported Activities, Annual Meetings Department, American Psychiatric Association, 1000 Wilson Boulevard, Suite 1825, Arlington, VA 22209-3901. Phone: 703-907-7812



New from *APPI*

*American Psychiatric Publishing Inc.**

*10% APA member discount ◆ 1-800-368-5777 ◆ www.appi.org



A Research Agenda for DSM-V

Edited by David J. Kupfer, M.D., Michael B. First, M.D.,
and Darrel A. Regier, M.D., M.P.H.

This volume represents a far-reaching attempt to stimulate research and discussion in the field in preparation for the start of the DSM-V process, still several years away, and to integrate information from a wide variety of sources and technologies.

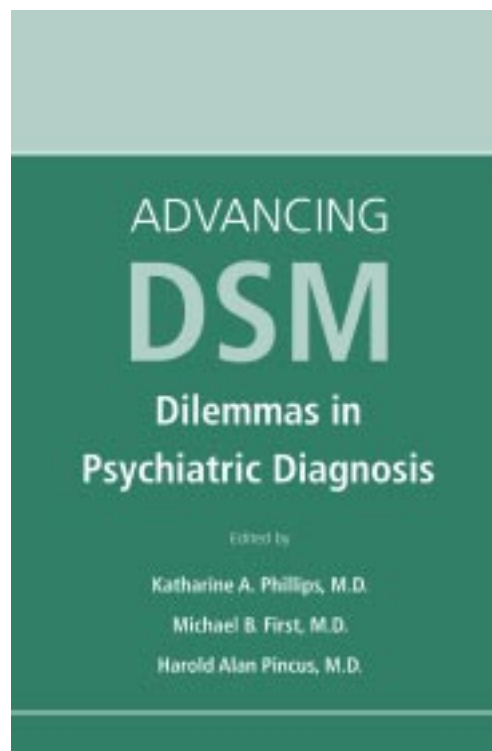
Produced as a partnership between the American Psychiatric Association and the National Institute of Mental Health, this fascinating work, reaches into the core of psychiatry, providing invaluable background and insights for all psychology and psychiatry professionals—food for thought and further research that will be relevant for years to come.

Advancing DSM: Dilemmas in Psychiatric Diagnosis

Edited by Katharine A. Phillips, M.D., Michael B. First, M.D.,
and Harold Alan Pincus, M.D.

In *Advancing DSM: Dilemmas in Psychiatric Diagnosis*, leading clinicians and researchers present diagnostic dilemmas from clinical practice that are intriguing, controversial, unresolved, and remarkable in their theoretical and scientific complexity. Chapters present a specific case study of a disorder or an area of diagnosis that illuminates the need for a revised diagnostic system. Chapter by chapter, *Advancing DSM* raises important, clinically relevant questions about the nature of diagnosis under the current DSM system and recommends new approaches.

DSM has been a landmark achievement for the field. By allowing reliable diagnosis, it has brought order out of chaos and fostered groundbreaking advances in research and clinical care. *Advancing DSM* will brief you on exciting changes in psychiatry today that will inform a next-generation DSM.



Award For Research in Psychiatry

*** Call For Submissions ***

The American Psychiatric Association takes pleasure in inviting submissions for the 2004 American Psychiatric Association Award for Research in Psychiatry. First awarded in 1949 as The Hofheimer Prize, the Award recognizes a single distinguished contribution, a body of work, or a lifetime contribution that has had a major impact on the field and/or altered the practice of psychiatry. The Award is intended to cover the full spectrum of psychiatric research.

The Award consists of a \$5,000 prize, a plaque, and an honorary lecture to be delivered by the awardee at APA's Annual Meeting in May 2004.

Candidates for the Award must be citizens of the United States or Canada and be nominated by a sponsor. Sponsors must be members of the American Psychiatric Association. Members of the Award Committee are excluded from submitting nominations.

The **sponsor** should submit a letter setting out in detail a justification for the nomination, summarizing the nominee's research accomplishments or coherent theme of research.

The **nominee** should submit:

1. A book, paper, or group of representative and thematically linked books and papers published in English (or accepted for publication);
2. A summary statement emphasizing the principle theme running through the work, its internal cohesiveness and consistency, and scientific implications;
3. An up-to-date Curriculum Vitae; and
4. An up-to-date Bibliography.

Entries must be submitted in SEVEN COMPLETE COLLATED SETS to:

Alan F. Schatzberg, M.D.
Chair, APA Research Awards Committee
c/o APA Division of Research, 1000 Wilson Blvd., Suite 1825
Arlington, VA 22209

For more information please contact Harold Goldstein, Ph.D., APA Division of Research; (703) 907-8623 or by e-mail at goharold@psych.org.

Deadline for receipt of submissions:
August 29, 2003

Research Training Opportunities

■ **SPONSOR:** American Psychiatric Institute for Research and Education (APIRE)

■ **POSITION:** Kempf Fund for Research Development in Psychobiological Psychiatry

DESCRIPTION: This award recognizes the mentor-trainee relationship by offering \$1,500 to a mentoring senior researcher and \$20,000 to an early career research psychiatrist to support the further development of research on the physiological, psychological and/or sociological causes and treatment of schizophrenia. Submissions must include a complete career development plan for the research trainee to be supported by the award, including a specific description of how funds are to be utilized.

DEADLINE: October 14, 2003

CONTACT: For further information, please see www.psych.org, then see dropdown menu under *Site Guide*, click on Research Resources, then on Research Awards. Or, call 1-800-852-1390.

■ **SPONSOR:** American Psychiatric Institute for Research and Education (APIRE)

■ **POSITION:** AstraZeneca Young Minds in Psychiatry

DESCRIPTION: This award was established to recognize and promote promising work by physician researchers, 35 years of age or under, who are working in the area of bipolar disorder or schizophrenia. Four unrestricted career development awards (\$45,000 each) will be awarded for a range of activities including research, educational efforts, travel, salary support and materials. Applicants must demonstrate how the award will advance their careers. Two awards will be made to U.S. applicants, one in the area of bipolar disorder and one for work on schizophrenia; two additional awards will be made to promising physicians from countries outside the U.S., also for work in bipolar

disorder and schizophrenia. Please see the Web site below for specific information about submission requirements.

DEADLINE: October 14, 2003

CONTACT: For further information, please see www.psych.org, then see dropdown menu under *Site Guide*, click on Research Resources, then on Research Awards. Or, call 1-800-852-1390.

■ **SPONSOR:** American Psychiatric Institute for Research and Education (APIRE)

■ **POSITION:** Program for Minority Research Training in Psychiatry (PMRTP)

DESCRIPTION: This NIMH-funded program supports minority medical students and psychiatric residents for an elective or summer experience in a research environment. Funds are provided for stipends, tuition, travel, and training-related expenses. Stipends are also available for one- or two-year post-residency fellowships. Training takes place at research-oriented departments of psychiatry in major U.S. medical schools and other appropriate sites nationwide. A research mentor at the training site oversees the research training experience.

DEADLINE: December 1 for residents seeking a year or more of training and for post-residency fellows. April 1 for medical students who are planning a summer research training experience. For other elective experiences students should apply at least three months before the start date of the proposed research training.

CONTACT: Ernesto Guerra, Research Training Director, APIRE, 1000 Wilson Blvd, Arlington VA, 22209. Toll -free 1-800-852-1390, fax: (703) 907-1087, e-mail: eguerra@psych.org. Web site: www.psych.org.

■ **POSITION:** Program for Minority Research Training in Psychiatry (PMRTP)

DESCRIPTION: The American Psychiatric Institute for Research and Education and the Program for Minority Research Training in Psychiatry request applications from residents at the PGY-4 (and some PGY-3) level that may be interested in developing a research career. Fellows receive stipends for a one-year renewable fellowship; stipends range from \$42,648 to \$44,616 for residents and up to \$48,852 for post-residency fellows. In addition, fellows receive travel support to attend the APA Annual meeting and other scientific meetings to present their research findings. Some tuition support is also available. Underrepresented minorities are encouraged to apply.

DEADLINE: December 1, 2003

CONTACT: Ernesto Guerra, toll-free 1-800-852-1390, e-mail: eguerra@psych.org, Web site: www.psych.org/res_res/pmrt5302.cfm.

■ **SPONSOR:** University of California, Los Angeles

■ **POSITION:** Postdoctoral Clinical Research Fellowships

DESCRIPTION: This newly initiated clinical research training program seeks to increase the clinical research expertise among health care professionals addressing drug abuse and addiction. The coordinated programs offers clinical research training combined with formal coursework and practical experience. Through immersion in the uniquely integrated environment of research and practice offered by the UCLA Integrated Substance Abuse Programs, post-residency psychiatrists and other physicians receive comprehensive training in the clinical research methods pertinent to the study of drug abuse and its treatment.

In the first year of the program, two postdoctoral fellows (M.D.'s or M.D.-psychiatrists) will begin a two-year training program; in the second year of the program an additional M.D. and one non-M.D. clinical professional from a community-based treatment setting will be added to the program. The program will train the fellows in clinical research methods and in the means of incorporating research findings into clinical practice. The clinical experiences will emphasize clinical trials of new pharmacotherapies and innovative behavioral treatments for drug abuse. A salary of approximately \$47,000 per year is offered. Applicants must be U.S. citizens or have work permits.

DEADLINE: Applications are accepted throughout the year.

CONTACT: Thomas Newton, M.D., Department of Psychiatry and Biobehavioral Sciences, David Geffen School of Medicine, UCLA. (310) 267-0159, e-mail: tnewton@ucla.edu.

■ **POSITION: Interdisciplinary HIV Training Program**

DESCRIPTION: The goal of this interdisciplinary training program in HIV-1 infection and AIDS is to provide state of the art research training for postdoctoral fellows (M.D., M.D./Ph.D., D.O., or Ph.D.) as well as for predoctoral fellows. The program is designed to develop independent researchers in medical and basic science disciplines which address the neuro- and psychobiology of HIV infection.

Trainees will be provided with 1) a comprehensive introduction to a wide variety of disciplines ranging from the epidemiology of HIV infection, through psychosocial factors affecting disease progression, to neurobiology of HIV and consequent immune responses; and 2) an in-depth basic and/or clinical research experience in one focused aspect of HIV. Trainees will spend approximately 90% of their time in research while broadening and deepening their knowledge by participating in a core seminar and taking selected classes.

Each trainee will be required to produce a 3- to 5-page grant application during the first year of the program and a first-authored paper during the second year of the program. Each trainee's curriculum is individually designed and the hands-on research experience is tailored to provide those experiences required to become an independent researcher.

DEADLINE: Open

CONTACT: Thomas Newton, M.D., Department of Psychiatry and Biobehavioral Sciences, David Geffen School of Medicine, UCLA. (310) 267-0159, e-mail: tnewton@ucla.edu.

■ **SPONSOR: University of California, San Diego**

■ **POSITION: Neurodevelopmental Disorders Clinical Research Fellowship**

DESCRIPTION: This large, collaborative multisite research group is recruiting for a 2-year NIH-sponsored research fellowship in clinical/genetic studies of childhood onset neurodevelopmental disorders. The position will be available beginning July 1, 2003. Individuals trained in psychiatry, child psychiatry, neurology, or pediatric neurology are welcome to apply. Fellows choose to be based at one of four sites (San Diego, Los Angeles, San Francisco, or New York) and will participate in research programs associated with UCSD, UCLA, UCSF and North Shore University Hospital. Research opportunities primarily focus on clinical aspects/components of genetic studies, including phenotype assessment, epidemiology, development of endophenotypes, etc.

DEADLINE: Open

CONTACT: Carol Mathews, M.D., Department of Psychiatry, UCSD, 9500 Gilman Drive, 0810, La Jolla, CA 92093-0810. (619) 725-3522, e-mail: camathews@ucsd.edu.

■ **SPONSOR: University of North Carolina at Chapel Hill**

■ **POSITION: Clinical Neuroscience and Pharmacology Postdoctoral Research Fellowship**

DESCRIPTION: Applications are currently being accepted for NIMH-funded research fellowship positions in clinical and applied neuroscience emphasizing neurobiology and psychopharmacology. This two-year fellowship is intended for psychiatrists who have completed residency training, are U.S. citizens or permanent residents of the U.S., and are eligible for a North Carolina medical license. Exceptional candidates entering their fourth year of training will be considered. Additional fellowship positions are available for Ph.D. trained applicants.

Fellows actively participate in ongoing research and self-initiated studies under the supervision of senior investigators. Training includes participation in a wide range of educational activities, including individual and group tutorials, courses on research design, statistics and bioethics, a journal club, and other seminars and lectures. Areas of active clinical investigation include schizophrenia, affective disorders, eating disorders, anxiety disorders, alcoholism, neurodevelopmental disorders, and the pathophysiology of stress transduction in mental and medical disorders. A wide variety of clinical research methodologies are represented, including neuroimaging, genetics, psychopharmacology, psychophysiology, and neuropsychology. Opportunities for basic research in neuropharmacology, developmental neurobiology, and animal models of psychiatric disease are available as well. Minority applicants are encouraged to apply. More information about research and investigators in the Department of Psychiatry is available at www.psychiatry.unc.edu.

DEADLINE: Open

CONTACT: John H. Gilmore, M.D., Director of Research Training, Department of Psychiatry, Campus Box #7160, University of North Carolina School of Medicine, Chapel Hill, NC 27599-7160. (919) 966-6971, fax: (919) 966-8994, e-mail: jgilmore@med.unc.edu.

Research Funding Opportunities

■ **SPONSOR:** National Alliance for Research on Schizophrenia & Depression (NARSAD)

■ **SUBJECT:** Young Investigator Award

DESCRIPTION: The NARSAD Young Investigator Award offers up to \$30,000 a year for up to two years to enable promising investigators to begin careers as independent research faculty or to extend research fellowship training. The program is intended to facilitate innovative research opportunities in basic and/or clinical research relevant to schizophrenia, major affective disorders or other serious mental illnesses including bipolar disorder, borderline disorder with depression and suicide, and research with children. NARSAD allows considerable flexibility in the use of funds: equipment, stipends, etc., are acceptable. Applicants must have achieved a doctoral level degree by July 25, 2003, and already be employed in a faculty or independent research position or in ongoing research training. Applicants must have an on-site mentor or senior collaborator.

DEADLINE: Applications must be received by July 25, 2003; notification of awards will be mailed on March 15, 2004; earliest start date is July 1, 2004.

CONTACT: Audra Moran, Director, Research Grants Program, NARSAD Research, 60 Cutter Mill Road, Suite 404, Great Neck, NY 11021. E-mail: amoran@narsad.org, Web site: www.narsad.org.

■ **SPONSOR:** National Alliance for Research on Schizophrenia & Depression (NARSAD)

■ **SUBJECT:** Distinguished Investigator Award

DESCRIPTION: The NARSAD Distinguished Investigator Award offers up to \$100,000 a year for a one-year period and is intended for established scientists who maintain peer-reviewed, competitively-funded scientific programs. The award program supports basic and/or clinical investigators in research relevant to

schizophrenia, major affective disorders or other serious mental illnesses. The program is designed to stimulate the development of key personnel and resources, to facilitate the rapid initiation of research in innovative areas, and to enable investigators to create unique scientific opportunities. Applicants must be full professors or equivalent. Because applicants must be already funded, it is essential that letters of intent state how the proposed work is not feasible without new funds. NARSAD does not seek to extend current work but rather to stimulate new approaches and projects from senior investigators.

DEADLINE: Letters of Intent must be received by May 15, 2003; requests for further information will be sent on August 1, 2003; final applications must be received by September 8, 2003; notification of awards will be mailed in March 2004; earliest start date, May 1, 2004.

CONTACT: Audra Moran, Director, Research Grants Program, NARSAD Research, 60 Cutter Mill Road, Suite 404, Great Neck, NY 11021. E-mail: amoran@narsad.org, Web site: www.narsad.org.

■ **SPONSOR:** The Robert Wood Johnson Foundation (RWJF)

■ **SUBJECT:** Substance Abuse Policy Research Program

DESCRIPTION: The RWJF requests proposals for research projects that will produce policy-relevant information about ways to reduce the harm caused by substance abuse. The program is intended to: identify and assess relevant policies, analyze the development, feasibility, effectiveness, and likely consequences of these policies, and help ensure that the understanding gained through these analyses will be used by decision makers in both public and private sectors. Up to \$4 million in grant funds will be awarded.

DEADLINES: Letters of intent for projects requesting less than \$100,000 may be submitted at any time, and they will be reviewed as they are received. A limited number of applications will be invited to submit full proposals, and these proposals

will also be reviewed as they are received. This option is for projects that are time-sensitive, of shorter duration, and involve analysis of current or emerging policies or of secondary data. For projects requesting \$100,000 to \$400,000, the deadline for letters of intent was February 7, 2003; deadline for receipt of full proposals, June 13, 2003; notification of awards, October 2003; projects begin, December 2003. The deadlines for 2004 awards are likely to follow a similar timetable.

CONTACT: Tracy Enright Patterson, National Program Office, Substance Abuse Policy Research Program, Dept. of Public Health Sciences, Wake Forest University School of Medicine, 2000 West First St., Winston-Salem, NC 27104. (336) 716-5170, e-mail: tpatters@wfubmc.edu, Web site: www.saprp.org.

■ **SPONSOR:** AHRQ and VA

■ **SUBJECT:** Translating Research Into Practice (TRIP)

DESCRIPTION: This TRIP Program Announcement is a collaborative effort between the Agency for Healthcare Research and Quality (AHRQ) and the Health Services Research and Development Service within the Department of Veterans Affairs to conduct innovative and rigorous research and evaluation projects related to the translation of research findings into measurable improvements in quality, patient safety, health care outcomes and cost, use, and access. The announcement underscores the need for research to bridge the chasm between promising prototypes and generalizable knowledge that can be used in multiple settings and lead to systematic improvement on a large scale. This effort represents the need to build on existing research in this field.

Specific goals: 1) to compare translation paradigms in a VA facility and in a non-VA facility; to measure the impact of translation activities.

NIMH, NCI, and NIAAA are interested in co-sponsorship of applications supported under this PA. The RO1 grant support mechanisms will be used for this announcement (PA-02-066).

DEADLINES: June 1, October 1, February 1

CONTACTS: For AHRQ, Margaret Coopey, (301) 594-4022, mcoopey@ahrq.gov, or Diane Brown, (301) 594 4019, dbrown@ahrq.gov. For VA, to Lynn McQueen, (202) 273-8227, lynn.mcqueen@hq.med.va.gov, or Richard Owen, (501) 257-1710, owenrichardr@uams.edu. For NIMH, David Chambers, (301) 443-3364, dchamber@mail.nih.gov. For NIAAA, Mike Hilton, (301) 443-8753, mhilton@willco.niaaa.nih.gov. For NCI, to Molla Donaldson, (301) 435-1638, donalsm@mail.nih.gov.

■ **SPONSOR:** NIAAA

■ **SUBJECT:** Treatment of Adolescents with Alcohol Use Disorders

DESCRIPTION: The National Institute on Alcohol Abuse and Alcoholism seeks research grant applications to develop and to assess efficacious behavioral and pharmacological treatments for adolescents with alcohol use disorders (AUD). Applications are requested in five specific areas: 1) more effective treatments for adolescent AUD; 2) treatments for AUD adolescents with psychiatric comorbidity; 3) improved maintenance of recovery through extensive relapse prevention interventions; 4) identification of contextual effects on treatment response and outcomes; 5) ways to narrow the gap between efficacy research and practice.

Three types of research design are encouraged: 1) pilot studies of novel interventions or new combinations of existing interventions; 2) randomized clinical trials to evaluate the efficacy of either novel interventions or extensions/enhancements of existing interventions; 3) natural history studies assessing impact of understudied influences on long-term course of AUD

and associated problem behaviors. The following mechanisms will be used to fund this PA: RO1 research project grant, RO3 small grant, R21 exploratory/developmental grant. (See Announcement # PA-03-088.)

DEADLINES: June 1, October 1, February 1

CONTACT: Cherry Lowman, Ph.D., Division of Clinical and Prevention Research, NIAAA, (301) 443-0637, e-mail: clowman@niaaa.nih.gov.

■ **SPONSOR:** NIMH

■ **SUBJECT:** From Intervention Development to Services

DESCRIPTION: This program announcement uses the exploratory research grant mechanism (R34) to provide resources for evaluating the feasibility, tolerability, acceptability and safety of novel approaches to improving mental health and modifying health risk behavior, and for obtaining the preliminary data needed as a requisite to larger-scale intervention or services studies.

The purpose of this announcement is to encourage research on 1) development or pilot testing of new or adapted interventions, 2) pilot tests of interventions with demonstrated efficacy in broader scale effectiveness trials, or 3) innovative services research directions that require preliminary testing or development. (See announcement # PAR-03-078.)

DEADLINES: June 1, October 1, February 1

CONTACT: Linda Street, Ph.D., Division of Services and Intervention Research, NIMH, (301) 443-0651, lstreet@nih.gov.

■ **SPONSOR:** NIMH, NINR, SAMHSA

■ **SUBJECT:** Developing Disaster Mental Health Research Capacity through Education

DESCRIPTION: The National Institute of Mental Health, the National Institute of Nursing Research, and the Substance Abuse and Mental Health Services Administration seek to encourage collaborative partnerships among scientists from various disciplines and State and local health and mental health authorities to facilitate interdisciplinary disaster research and education, to establish the capacity for rapid data collection after disasters, including acts of terrorism, and ultimately to improve connections between evidence-based practice and the public health response to disasters. The sponsoring Institutes and SAMHSA propose to fund the development of programs to establish and conduct educational and training activities and to create disaster research partnerships and protocols with the option of supplemental funds for implementing rapid data collection activities in response to unforeseen events.

The NIH Education Research Program grant (R25) mechanism will be used for this announcement. See announcement # RFA-MH-03-009.

DEADLINES: Letter of intent, May 16, 2003; application, June 13, 2003.

CONTACTS: For NIMH, Farris Tuma, Sc.D., (301) 443-5944, ftuma@nih.gov. For NINR, Hilary Sigmon, Ph.D., R.N., (301) 594-5970, hilary.sigmon@nih.gov. For SAMHSA, Charles Cook, L.S.W., (301) 443-4736, ccook@samhsa.gov.

Psychiatric Research Report is published by the Division of Research, American Psychiatric Association. We encourage the submission of information items; research training or funding opportunities; announcements of awards and conferences; calls for papers, nominations, etc. Direct all information as well as address changes to: PRR, Division of Research, 1000 Wilson Blvd., Suite 1825, Arlington, VA 22209, fax: (703) 907-1087, e-mail: prr@psych.org.

<i>Darrel A. Regier, M.D., M.P.H.</i>	<i>Executive Editor</i>
<i>Muriel R. Asher, M.A.</i>	<i>Editor</i>
<i>Lizbet Boroughs, M.S.P.H.</i>	<i>Legislative Editor</i>
<i>Emily C. Gray, B.A.</i>	<i>Staff Writer</i>
<i>Peggy Shanley-Reichert</i>	<i>Copy Editor</i>



Psychiatric Research Report (PRR) MAILING LIST UPDATE

PLEASE RETURN THIS FORM IF YOUR ADDRESS IS INCORRECT ON THE MAILING LABEL BELOW OR IF YOUR ADDRESS WILL SOON CHANGE. **PRINT** YOUR NAME, ADDRESS, PHONE AND E-MAIL ADDRESS IN THE SPACE PROVIDED. YOU MAY FAX YOUR RESPONSE.

Name: _____

Address: _____

E-Mail: _____

Phone: _____

Please return this form (including your mailing label) to:

Psychiatric Research Report
Division of Research
American Psychiatric Association
1000 Wilson Blvd., Suite 1825
Arlington, VA 22209
FAX: 703-907-1087 ■ E-mail: prr@psych.org

**American
Psychiatric
Association**

1000 Wilson Blvd., Suite 1825
Arlington, VA 22209



Nonprofit Org.
U.S. Postage
PAID
Washington, D.C.
Permit No. 9128
