



UPDATE

December 15, 2012

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*Prepared by the U.S. Department of Health and Human Services,
National Institutes of Health, National Institute of Mental Health,
Office of Constituency Relations and Public Liaison*

SCIENCE AND SERVICE NEWS UPDATES**EXPERIMENTAL AGENT BRIEFLY EASES DEPRESSION RAPIDLY IN TEST; WORKS IN BRAIN LIKE KETAMINE, WITH FEWER SIDE EFFECTS**

A drug that works through the same brain mechanism as the fast-acting antidepressant ketamine briefly improved treatment-resistant patients' depression symptoms in minutes, with minimal untoward side effects, in a clinical trial conducted by the National Institutes of Health (NIH). The experimental agent, called AZD6765, acts through the brain's glutamate chemical messenger system. Existing antidepressants available through prescription, which work through the brain's serotonin system, take a few weeks to work, imperiling severely depressed patients, who can be at high risk for suicide. Ketamine also works in hours, but its usefulness is limited by its potential for dissociative side-effects, including hallucinations. It is being studied mostly for clues to how it works. National Institute of Mental Health (NIMH) researchers reported on their results online December 1, 2012 in the journal *Biological Psychiatry*.

Press Release: <http://www.nimh.nih.gov/science-news/2012/experimental-agent-briefly-eases-depression-rapidly-in-test.shtml>

STRESS-RESILIENCE/SUSCEPTIBILITY TRACED TO NEURONS IN REWARD CIRCUIT; LIGHT INSTANTLY TRIGGERS OR REVERSES DEPRESSION-LIKE STATES IN RODENTS

A specific pattern of neuronal firing in a brain reward circuit instantly rendered mice vulnerable to depression-like behavior induced by acute severe stress, a study supported by NIH has found. When researchers used a high-tech method to mimic the pattern, previously resilient mice instantly succumbed to a depression-like syndrome of social withdrawal and reduced pleasure-seeking – they avoided other animals and lost their sweet tooth. When the firing pattern was inhibited in vulnerable mice, they instantly became resilient. Researcher reported on their study online, December 12, 2012, in the journal *Nature*.

Press Release: <http://www.nimh.nih.gov/science-news/2012/stress-resilience-susceptibility-traced-to-neurons-in-reward-circuit.shtml>

PSYCHOTROPIC MEDICATIONS ARE PRESCRIBED APPROPRIATELY AMONG U.S. TEENS, NATIONAL STUDY FINDS

Prescribed psychotropic medications are not being misused or overused among youth in the United States (U.S.), according to a study using nationally representative data sponsored by NIMH. The study was published December 3, 2012, online ahead of print in the *Archives of Pediatric and Adolescent Medicine*.

Science Update: <http://www.nimh.nih.gov/science-news/2012/psychotropic-medications-are-prescribed-appropriately-among-us-teens-national-study-finds.shtml>

NATIONAL INSTITUTE ON DRUG ABUSE TO ANNOUNCE RESULTS OF 2012 MONITORING THE FUTURE SURVEY

The National Institute on Drug Abuse (NIDA) will hold a press conference on December 19, to announce the results of its 2012 Monitoring the Future (MTF) survey. The survey, funded by NIDA, tracks annual drug abuse trends of 8th, 10th, and 12th-grade students, including attitudes and perceived risk of specific drugs of abuse. The 2012 MTF survey will include use of “bath salts” among students for the first time.

Press Release: <http://www.drugabuse.gov/news-events/news-releases/2012/12/national-institute-drug-abuse-to-announce-results-2012-monitoring-future-survey>

REPORT REVEALS FURTHER REDUCTION IN VETERANS HOMELESSNESS; VA ALSO ANNOUNCES \$300 MILLION TO EXPAND HOMELESS PREVENTION PROGRAM

The Departments of Veterans Affairs (VA) and Housing and Urban Development (HUD) announced that a new national report shows that homelessness among Veterans has been reduced by approximately 7 percent between January 2011 and January 2012. The *2012 Annual Homeless Assessment Report (AHAR) to Congress*, prepared by HUD, estimates there were 62,619 homeless Veterans on a single night in January in the United States, a 7.2 percent decline since 2011 and a 17.2 percent decline since 2009. The AHAR reports on the extent and nature of homelessness in America.

Press Release: <http://www.va.gov/opa/pressrel/pressrelease.cfm?id=2411>

SHARP RISE IN ADMISSIONS FOR CERTAIN DRUG COMBINATIONS OVER 10 YEARS

Substance abuse treatment admissions for addiction involving combined use of benzodiazepine and narcotic pain relievers rose a total of 569.7 percent, to 33,701, from 2000 to 2010, according to a report by the Substance Abuse and Mental Health Services Administration (SAMHSA). Overall substance abuse treatment admissions of people ages 12 and older in the same period rose 4 percent, to 1.82 million, the agency said. The report showed that 38.7 percent of those with this combined addiction began use of both drugs in the same year; 34.1 percent first used narcotic pain relievers, and the remaining 27.1 percent started with benzodiazepines.

Press Release: <http://www.samhsa.gov/newsroom/advisories/1212132836.aspx>

RESOURCES: PUBLICATIONS, TOOLKITS, OTHER RESOURCES

NIMH DIRECTOR BLOG

THE TOP TEN RESEARCH ADVANCES OF 2012

NIMH Director Thomas Insel describes his top picks in research advances for 2012.

<http://www.nimh.nih.gov/about/director/2012/the-top-ten-research-advances-of-2012.shtml>

NIH DIRECTOR BLOG

RISKY BUSINESS: PRESCRIPTION DRUG ABUSE AMONG TEENS

NIH Director Francis Collins discusses the dangers of prescription drug abuse.

<http://directorsblog.nih.gov/risky-business-prescription-drug-abuse-among-teens/>

BIOMEDICAL RESEARCH AT YOUR FINGERTIPS

NIH Director Francis Collins describes the new “PubReader” created by the National Library of Medicine that fits a journal article to any screen, laptop, or tablet, and enable readers to flip through a paper in the same way one can read a novel on an E-reader. <http://directorsblog.nih.gov/biomedical-research-at-your-fingertips/>

THE INTERSECTION OF SUICIDE RESEARCH AND PUBLIC HEALTH PRACTICE: NEW WEBINAR AND CONFERENCE CALL SERIES TO START IN JANUARY 2013

The Injury Control Research Center for Suicide Prevention (ICRC-S), a new research center funded by the Centers for Disease Control and Prevention (CDC) focusing on a public health approach to suicide research and suicide prevention, is launching a series of monthly webinars and conference calls starting in January 2013. The ICRC-S webinar series, *The Intersection of Suicide Research and Public Health Practice*, will explore the perspectives and approaches of suicide researchers and of state and local injury prevention and suicide prevention practitioners. The goal of the series is to promote a dialogue between researchers and practitioners, enabling them to identify new, collaborative projects that will inform and enhance suicide prevention and research efforts. Topics to be addressed in the series include: the public health approach to suicide research and suicide prevention, youth suicide, domestic violence and suicide, suicide among military veterans, and suicide and the media. The webinars will be held on the second Wednesday of the month from 2:00-3:00pm ET. The dates of the upcoming webinars are January 9, February 13, March 13, April 10, and May 8. <http://www.sprc.org/news-events/the-weekly-spark/announcement/injury-control-research-center-suicide-prevention-icrc-s-l>

NEW FROM SAMHSA

COMPREHENSIVE COMMUNITY MENTAL HEALTH SERVICES FOR CHILDREN AND THEIR FAMILIES PROGRAM: EVALUATION FINDINGS

This Report to Congress presents program evaluation findings of a federally-funded initiative that supports systems of care for community-based mental health services for children, youth, and their families. It reports on FY2010 data that track service characteristics, use, and outcomes.

<http://store.samhsa.gov/product/The-Comprehensive-Community-Mental-Health-Services-for-Children-and-Their-Families-Program-Evaluation-Findings/All-New-Products/PEP12-CMH12010CD>

PREVENTING THE USE OF SECLUSION AND RESTRAINTS WITH CHILDREN

This SAMHSA blog post describes SAMHSA initiatives to reduce and prevent the use of seclusion and restraint in behavioral health facilities that have been successful in reducing, and in some instances, eliminating these practices.

<http://blog.samhsa.gov/2012/12/07/how-can-we-prevent-the-use-of-seclusion-and-restraints-with-children/>

SYNTHETIC MARIJUANA LINKED TO ADVERSE AFFECTS

This SAMHSA blog post describes the adverse effects of synthetic marijuana use.

<http://blog.samhsa.gov/2012/12/05/synthetic-marijuana-linked-to-adverse-affects-high-rate-of-youth-affected/>

POLY-SUBSTANCE MISUSE TREATMENT

SAMHSA Medical Officer Melinda Campopiano addresses concerns about provider care and prescription drugs raised by a recent SAMHSA report on benzodiazepene and narcotic pain reliever treatment admissions.

<http://blog.samhsa.gov/2012/12/14/qa-poly-substance-misuse-treatment-with-dr-melinda-campopiano/>

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY (AHRQ) RESEARCH ACTIVITIES

ANTIPSYCHOTIC MEDICATIONS LINKED TO OCCURRENCE OF DIABETES IN CHILDREN

The use of second-generation antipsychotics (SGAs) has risen dramatically for children and adolescents. Yet, the majority of prescribing of these drugs is off-label and data on their safety and efficacy for children are limited. Numerous case reports and studies have suggested a link between antipsychotic medications and diabetes in adults. Now a new study has found that children using SGAs had a higher incidence of diabetes than children who were not using any psychotropic medications; however, there was no significant difference in the incidence of diabetes among children using SGAs compared to children using antidepressants. <http://www.ahrq.gov/research/dec12/1212RA14.htm>

MEDICARE PART D COVERAGE GAP REDUCES ANTIDEPRESSANT USE IN THE ELDERLY

The Medicare Part D prescription drug benefit includes a \$265 deductible, an insured period during which the beneficiary pays 25 percent of drug costs from \$265 to \$2,400, and a coverage gap when the beneficiary pays 100 percent of drug costs until reaching the catastrophic limit of \$3,850; then they pay 5 percent. A new study found that elderly Medicare patients with depression enrolled in standalone Part D plans in 2007 reduced their use of antidepressants during the Medicare Part D coverage gap. In fact, a full gap in drug coverage resulted in a 12.1 percent reduction in antidepressant use, particularly for brand-name drugs.

<http://www.ahrq.gov/research/dec12/1212RA24.htm>

ADDING ANOTHER MEDICATION RATHER THAN SWITCHING MEDICATIONS MAY BENEFIT PATIENTS PARTIALLY RESPONDING TO INITIAL ANTIDEPRESSANT

While antidepressants are effective treatment for major depressive disorder, up to 40 percent of patients may not respond adequately to initial first-line therapy. Options for such patients include switching to another medication, or adding an additional medication to the initial treatment. A new study found no clear difference between these strategies in terms of remission of depression, response to medication, or time to remission or response. However, the findings did suggest that those who completed an initial treatment of 12 weeks or more, and had a partial response to the medication with residual mild depression, might benefit more from augmentation of treatment with another medication than from switching medications.

<http://www.ahrq.gov/research/dec12/1212RA25.htm>

ACF CHILDREN'S BUREAU EXPRESS HIGHLIGHTS

SPOTLIGHT ON SOCIAL MEDIA

This month's Children's Bureau e-newsletter highlights social media strategy and policy suggestions from the Administration for Children and Families' (ACF) National Resource Center for Child Welfare Data and Technology, including a framework for developing social media privacy guidelines, and research on teen perceptions of social media's effect on their well-being.

<https://cbexpress.acf.hhs.gov/index.cfm?event=website.viewSection&issueID=142&subsectionID=46>

FROM NEURONS TO NEIGHBORHOODS UPDATE

The National Academy of Sciences recently released a report updating the child development field on a research initiative from 2000 titled, *From Neurons to Neighborhoods*. The original report resulted from a study spanning more than two years and aimed at re-examining the nation's response to the needs of young children and families. The update sought to assess measurable progress on the goals outlined in the original report, as well as evaluate challenges that remain in the field.

<https://cbexpress.acf.hhs.gov/index.cfm?event=website.viewArticles&issueid=142§ionid=3&articleid=3736>

PARENT'S GUIDE TO DRUG PREVENTION: GROWING UP DRUG-FREE--UPDATED

The U.S. Department of Justice partnered with the U.S. Department of Education to revise this publication that was originally published in 1998. This guide describes how to communicate about the harmful effects of illicit drugs and alcohol to children from elementary through high school.

http://www.getsmartaboutdrugs.com/hot_topics/dea_publications.html

INTIMATE PARTNER VIOLENCE, 1993-2010

This Bureau of Justice report presents data on nonfatal intimate partner violence (IPV) among U.S. households from 1993 to 2010. IPV includes rape, sexual assault, robbery, aggravated assault, and simple assault by a current or former spouse, boyfriend, or girlfriend. This report presents trends in IPV by sex, and examines IPV against women by the victim's age, race and Hispanic origin, marital status, and household composition. <http://www.bjs.gov/index.cfm?ty=pbdetail&iid=4536>

DCOE BLOG

DCOE BLOG: 3 MOBILE APPS TO HELP RELAX

This Defense Centers of Excellence in Psychological Health and Traumatic Brain Injury (DCoE) blog post describes three mobile apps developed by the National Center for Telehealth and Technology to help manage and cope with stress effectively.

http://www.dcoe.health.mil/blog/12-12-06/3_Mobile_Apps_Help_You_Relax.aspx

DCOE BLOG: PTSD AND THE HOLIDAYS—PLAN FOR IT

Dr. James Bender, a former Army psychologist who deployed to Iraq as the brigade psychologist, discusses issues that families should be aware of during the holiday time, particularly for service members with post-traumatic stress disorder or who have recently returned from deployment.

http://www.dcoe.health.mil/blog/12-12-13/Frontline_Psych_with_Doc_Bender_PTSD_and_Holidays_%e2%80%93_Plan_For_It.aspx

EVENTS

DEPRESSION AND SUICIDE IN THE TWO-SPIRIT COMMUNITY

DECEMBER 18, 2012, 1:00-2:00 PM ET

This SAMHSA Native American Center for Excellence webinar will examine depression and suicide within the Two-Spirit community. This ongoing Two-Spirit Learning Community is facilitated by Harlan Pruden, who is co-founder and Council member of the NorthEast Two-Spirit Society.

<http://nace.samhsa.gov/TTA/TrainingDocs.aspx>

TWITTER CHAT ON STRESS AND ANXIETY

DECEMBER 18, 2012, 3:30-4:30 PM ET

NIMH is joining the National Center for Complementary and Alternative Medicine for a Twitter chat on stress and anxiety. Anxiety is a normal reaction to stress, but for some people, anxiety can become excessive. Many treatments exist, and some people also turn to complementary health approaches for symptom management. But are these approaches safe and effective? Participate in the chat using the hashtag #nccamchat.

<http://www.nimh.nih.gov/health/topics/anxiety-disorders/twitter-chat-on-stress-and-anxiety.shtml>

WEBINAR: THE INTERSECTION OF SUICIDE RESEARCH AND PUBLIC HEALTH PRACTICE

JANUARY 9, 2013, 2:00-3:00PM ET

This webinar is the first in a series presented by the CDC-funded Injury Control Research Center for Suicide Prevention to explore the perspectives and approaches of suicide researchers and of state and local injury prevention and suicide prevention practitioners. A conference call will follow-up the webinar on January 16.

<http://www.sprc.org/news-events/the-weekly-spark/announcement/injury-control-research-center-suicide-prevention-icrc-s-l>

WEBINAR: SUBSTANCE ABUSE AND TRAUMATIC BRAIN INJURY

JANUARY 24, 2013, 1:00-2:30 PM ET

Save the date for the next DCoE webinar focusing on substance abuse and traumatic brain injury.

<http://www.dcoe.health.mil/Training/MonthlyWebinars.aspx>

GET INVOLVED IN NATIONAL DRUG FACTS WEEK

JANUARY 28-FEBRUARY 3, 2013

National Drug Facts Week is an opportunity for teens to interact with scientists and other experts about drug abuse. Help teens shatter the myths about drugs by hosting and promoting an event during the week. NIDA provides a toolkit with step-by-step suggestions for planning and promoting a community event.

Register an event today and help provide our nation's youth with the facts they need to succeed and make healthy decisions. Registrants will have access to NIDA staff who can offer advice about successful events and information on how to get free NIDA materials designed for teens. Be a part of this health observance that offers teens essential, science-based information about drug abuse and addiction!

<http://drugfactsweek.drugabuse.gov>

CALLS FOR PUBLIC INPUT

SAMHSA SEEKING FEEDBACK: DEFINING TRAUMA

SAMHSA is seeking input from the public on the concept paper, *SAMHSA's Working Definition of Trauma and Principles and Guidance for a Trauma-Informed Approach*. Feedback will be considered in the shaping of the definitions of trauma and trauma-informed approach, the principles, and the guidelines of a trauma-informed approach. Comments will be accepted through Friday, December 21, 2012.

<http://blog.samhsa.gov/2012/12/10/defining-trauma-give-us-your-feedback/>

2013 TRAUMA TRAINING SOLICITATION FOR APPLICATIONS

The SAMHSA GAINS Center will offer trauma training delivery and train-the-trainer events free of charge to up to eight selected communities between February 2013 and September 2013. The target audiences for this training are community-based criminal justice system professionals, including police, community corrections (probation, parole, and pre-trial services officers), court personnel, and other human service providers. Since the purpose of this training initiative is to offer targeted technical assistance and training to prepare communities in the field, there are no fees for registration, tuition, or materials associated with these trainings. Submit completed application form to the GAINS Center no later than January 14, 2013.

http://gainscenter.samhsa.gov/trauma/trauma_training.asp#solicit

COMMENTS SOUGHT FOR AHRQ EFFECTIVE HEALTH CARE PROGRAM REPORTS

The AHRQ Effective Health Care Program encourages the public to participate in the development of its research projects. The Program uses these comments to help focus its research and ensure that the final comparative effectiveness reviews answer the most important questions that clinicians, patients, consumers, and policymakers have about a given treatment, test, or procedure. The Program is currently seeking comments for:

MEDITATION PROGRAMS FOR STRESS AND WELL-BEING (COMMENTS ACCEPTED THROUGH JANUARY 2, 2013)

<http://www.effectivehealthcare.ahrq.gov/search-for-guides-reviews-and-reports/?pageaction=displayProduct&productID=1343>

SAMHSA'S SYSTEM OF CARE EXCELLENCE IN COMMUNITY COMMUNICATIONS AND OUTREACH PROGRAM

SAMHSA's Caring for Every Child's Mental Health Campaign wants to showcase and celebrate system of care achievements in communications and social marketing through its Excellence in Community Communications and Outreach (ECCO) Recognition Program. Communications and social marketing initiatives created and/or implemented between January 1, 2012, and December 31, 2012, can be entered. Each ECCO submission must be postmarked by March 22, 2013.

Call for Entries: http://www.samhsa.gov/children/images/ecco/CallforEntries_2013_508.pdf

Entry Form: http://www.samhsa.gov/children/images/ecco/2013_EntryForm_508_Reader.pdf

"WHAT'S YOUR CONNECTION" INITIATIVE

Disability.gov has launched the "What's Your Connection?" initiative to celebrate the website's 10th anniversary. As most people either know someone who has a disability or have a disability themselves, this initiative aims to promote inclusion and highlight disability as a natural part of life. People are asked to submit a captioned photograph or video that answers the question, "What's your connection with disability?" Submission deadline is July 31, 2013.

https://www.disability.gov/home/newsroom/what%27s_your_connection

FUNDING INFORMATION

EXCEPTIONAL UNCONVENTIONAL RESEARCH ENABLING KNOWLEDGE ACCELERATION (EUREKA)
FOR NEUROSCIENCE AND DISORDERS OF THE NERVOUS SYSTEM

<http://grants.nih.gov/grants/guide/rfa-files/RFA-NS-13-007.html>

NATIONAL CENTER ON HEALTH CARE TRANSITION FOR YOUTH WITH SPECIAL HEALTH CARE NEEDS

<https://grants.hrsa.gov/webExternal/SFO.asp?ID=eddecce4-3e2e-4753-b31e-aea6dcdb0bd1>

NATIONAL CENTER FOR HEALTH INSURANCE AND FINANCING FOR CHILDREN AND YOUTH WITH
SPECIAL HEALTH CARE NEEDS

<https://grants.hrsa.gov/webExternal/SFO.asp?ID=a3d3a012-07c1-4a48-a64e-b9fa7a373e10>

MEDICAL HOME IMPLEMENTATION FOR CHILDREN WITH SPECIAL HEALTH CARE NEEDS

<https://grants.hrsa.gov/webExternal/SFO.asp?ID=37401ff8-09e6-4547-808e-9dd63a8b9a58>

TELEHEALTH NETWORK GRANT PROGRAM

<https://grants.hrsa.gov/webExternal/SFO.asp?ID=b2fb77c1-487e-4ea3-a19c-96359b4588e3>



The **Outreach Partnership Program** is a nationwide outreach initiative of the National Institute of Mental Health (NIMH) that enlists state and national organizations in a partnership to help close the gap between mental health research and clinical practice, inform the public about mental illnesses, and reduce the stigma and discrimination associated with mental illness. For more information about the program please visit: <http://www.nimh.nih.gov/outreach/partners>. To subscribe to receive the **Update** every two weeks, go to: <http://www.nimh.nih.gov/outreach/partnership-program/subscribe-to-the-update.shtml>

The information provided in the **Update** is intended for use by NIMH Outreach Partners, National Partners and their associates for the express purpose of exchanging information that may be useful in the development of state and local mental health outreach, information, education and partnership programs.