



UPDATE

October 1, 2017

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*Prepared by the U.S. Department of Health and Human Services,
National Institutes of Health, National Institute of Mental Health*

LIFE-SAVING POST-ER SUICIDE PREVENTION STRATEGIES ARE COST EFFECTIVE; FOLLOW-UP POSTCARDS LESS EXPENSIVE, MORE EFFECTIVE THAN USUAL CARE

Three interventions designed for follow-up of individuals who are identified with suicide risk in hospital emergency departments (EDs) save lives and are cost effective relative to usual care. A study led by researchers at the National Institute of Mental Health (NIMH) modelled the use of the approaches in EDs and found that all three interventions compare favorably with a standard benchmark of cost-effectiveness used in evaluating health care costs. The interventions in the study include: the use of follow-up postcards by hospital staff, telephone outreach, and cognitive behavioral therapy.

Press Release: <https://www.nimh.nih.gov/news/science-news/2017/life-saving-post-er-suicide-prevention-strategies-are-cost-effective.shtml>

FEDERAL AGENCIES PARTNER FOR MILITARY AND VETERAN PAIN MANAGEMENT RESEARCH; JOINT HHS-DOD-VA INITIATIVE WILL AWARD MULTIPLE GRANTS TOTALING \$81 MILLION

Through an interagency partnership, the U.S. Department of Health and Human Services (HHS), the U.S. Department of Defense (DoD), and the U.S. Department of Veterans Affairs (VA) announce a multi-component research project focusing on non-drug approaches for pain management. Twelve research projects, totaling approximately \$81 million over six years (pending available funds), will focus on developing, implementing, and testing cost-effective, large-scale, real-world research on non-drug approaches for pain management and related conditions in military and Veteran health care delivery organizations. The National Institutes of Health (NIH) will be the lead HHS agency in this partnership.

Press Release: <https://www.nih.gov/news-events/news-releases/federal-agencies-partner-military-veteran-pain-management-research>

MARIJUANA USE IS ASSOCIATED WITH AN INCREASED RISK OF PRESCRIPTION OPIOID MISUSE AND USE DISORDERS

New research suggests that marijuana users may be more likely than nonusers to misuse prescription opioids and develop prescription opioid use disorder. The study was conducted by researchers at the National Institute on Drug Abuse (NIDA), part of NIH, and Columbia University.

News Release: <https://www.drugabuse.gov/news-events/news-releases/2017/09/marijuana-use-associated-increased-risk-prescription-opioid-misuse-use-disorders>

CDC LAUNCHES CAMPAIGN TO HELP STATES FIGHT PRESCRIPTION OPIOID EPIDEMIC; RX AWARENESS: SHARING REAL STORIES ABOUT THE DEVASTATION OF OPIOID USE DISORDER AND OVERDOSE

The Centers for Disease Control and Prevention (CDC) is launching *Rx Awareness*, a communication campaign featuring real-life accounts of people recovering from opioid use disorder and people who have lost loved ones to prescription opioid overdose. The campaign aims to increase the public's awareness and knowledge about the risks of prescription opioids and stop inappropriate use. *Rx Awareness* is CDC's latest effort in the fight against the prescription opioid overdose crisis.

Press Release: <https://www.cdc.gov/media/releases/2017/p0925-rx-awareness-campaigns.html>

HHS COMMITS \$144.1 MILLION IN ADDITIONAL FUNDING FOR OPIOID CRISIS

HHS has awarded an additional \$144.1 million in grants to prevent and treat opioid addiction in support of President Trump's commitment to combat the opioid crisis. The grants will be administered by the Substance Abuse and Mental Health Services Administration (SAMHSA). The funding will be distributed to 58 recipients, including states, cities, health care providers, and community organizations.

Press Release: <https://www.hhs.gov/about/news/2017/09/15/hhs-commits-144-million-in-additional-funding-for-opioid-crisis.html>

\$89 MILLION AWARDED TO LARGEST-EVER NUMBER OF COMMUNITY COALITIONS TO PREVENT YOUTH SUBSTANCE USE

The White House Office of National Drug Control Policy (ONDCP) announced \$89 million in Drug-Free Communities Support Program grants to 719 local drug prevention coalitions—the largest number of single-year grantees since the program's founding. Directed by ONDCP, in partnership with SAMHSA, these grants will provide local community coalitions with funding to prevent youth substance use, including prescription drugs, marijuana, tobacco, and alcohol.

<https://content.govdelivery.com/accounts/USSAMHSA/bulletins/1b9437a>

HRSA AWARDS \$200 MILLION TO HEALTH CENTERS NATIONWIDE TO TACKLE MENTAL HEALTH AND FIGHT THE OPIOID OVERDOSE CRISIS

The Health Resources and Services Administration (HRSA) awarded more than \$200 million to 1,178 health centers and 13 rural health organizations in every U.S. state, the District of Columbia, Puerto Rico, the Virgin Islands, and the Pacific Basin to increase access to substance abuse and mental health services.

Approximately \$200 million will support 1,178 health centers to support expansion and integration of mental health and substance abuse services. These services focus on the treatment, prevention, and awareness of opioid abuse in the primary care setting by increasing personnel, leveraging health information technology, and providing training.

Press Release: <https://www.hhs.gov/about/news/2017/09/14/hrsa-awards-200-million-to-health-centers-nationwide.html>

HHS OFFICE OF MINORITY HEALTH AWARDS \$5 MILLION TO HELP COMMUNITIES ADDRESS THE OPIOID CRISIS, CHILDHOOD OBESITY, AND SERIOUS MENTAL ILLNESS

As part of the Administration's efforts to address the opioid epidemic, childhood obesity, and serious mental illness (SMI) in communities throughout the country, the HHS Office of Minority Health (OMH) announced just over \$5 million in new cooperative agreement awards to 15 organizations. The awards were made through the OMH Empowered Communities for a Healthier Nation Initiative, which was created to help minority and disadvantaged populations in communities disproportionately affected by the opioid epidemic, childhood obesity, and SMI.

Press Release: <https://www.hhs.gov/about/news/2017/09/27/hhs-office-of-minority-health-awards-5-million-to-help-communities-address-the-opioid-crisis-childhood-obesity-and-serious-mental-illness.html>

FDA PERMITS MARKETING OF MOBILE MEDICAL APPLICATION FOR SUBSTANCE USE DISORDER

The U.S. Food and Drug Administration (FDA) permitted marketing of the first mobile medical application to help treat substance use disorders (SUDs). The Reset application is intended to be used with outpatient therapy to treat alcohol, cocaine, marijuana, and stimulant SUDs. The application is not intended to be used to treat opioid dependence.

Press Release: <https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm576087.htm>

DRUG SAFETY COMMUNICATION: OPIOID ADDICTION MEDICATIONS IN PATIENTS TAKING BENZODIAZEPINES OR CNS DEPRESSANTS: CAREFUL MEDICATION MANAGEMENT CAN REDUCE RISKS

The FDA is advising that the opioid addiction medications buprenorphine and methadone should not be withheld from patients taking benzodiazepines or other drugs that depress the central nervous system. The combined use of these drugs increases the risk of serious side effects; however, the harm caused by untreated opioid addiction usually outweighs these risks. Careful medication management by health care professionals can reduce these risks. FDA is requiring this information to be added to the buprenorphine and methadone drug labels along with detailed recommendations for minimizing the use of medication-assisted treatment drugs and benzodiazepines together.

Safety Alert:

<https://www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm576755.htm>

FINDINGS FROM HOUSEHOLD SURVEY REVEAL THAT ONLY A SUBSET OF INDIVIDUALS RECEIVE SERVICES FOR SUBSTANCE USE AND MENTAL HEALTH ISSUES

A new SAMHSA report reveals that 19.9 million adults that needed substance use treatment in the past year, representing 8.1 percent of adults aged 18 or older in the U.S. Out of 19.9 million adults needing substance use treatment, only 10.8 percent received treatment at a specialty facility. That means that about 17.7 million adults who needed treatment did not receive treatment at a specialty facility for their substance use.

Press Release: <https://www.samhsa.gov/newsroom/press-announcements/201709211000>

MARIJUANA HAD THE LARGEST ILLICIT DRUG USE INITIATION IN 2016

A new SAMHSA report reveals that 2.6 million people aged 12 or older in 2016 tried marijuana for the first time in the past year. Only about a third of people aged 12 or older perceived great risk of harm from weekly marijuana use. When asked, 44.7 percent of youth aged 12 to 17 reported that it would be fairly easy or very easy to obtain marijuana. The study also found that while there were 170,000 new heroin users, 85.6 percent of people aged 12 or older perceived great risk of harm from trying heroin. About one in 12 adolescents indicated that heroin would be easily obtainable.

Press Release: <https://www.samhsa.gov/newsroom/press-announcements/201709281000>

NEW FROM NIMH

DIRECTOR'S MESSAGE: SUICIDE PREVENTION: NEXT STEPS

September was National Suicide Prevention Month. Focusing on the benefits of collaborations, NIMH Director Dr. Joshua Gordon outlines recent research results as well as future directions in the area of suicide prevention research. <https://www.nimh.nih.gov/about/director/messages/2017/suicide-prevention-next-steps.shtml>

NEW SOCIAL MEDIA PAGE

Learn how to connect with NIMH through social media from this new webpage, which links to NIMH Facebook, Twitter, LinkedIn, YouTube, and Google+ feeds. <https://www.nimh.nih.gov/news/social-media/index.shtml>

NEW FROM NIH

ADVANCING RESEARCH TO PREVENT YOUTH SUICIDE: FEDERAL PARTNERS MEETING REPORT FOR THE PATHWAYS TO PREVENTION WORKSHOP

This report from the NIH Office of Disease Prevention is the culmination of a two-year effort by the NIH to identify activities that could be effective in preventing suicidal thoughts and behaviors as early as possible, and to assist in identifying future research needs. The report identifies key next steps and opportunities for collaboration across federal agencies, including: create a national workgroup focused on key issues relating to youth suicide with member organizations (both public and private) from the local to the national level; identify, compile, and integrate existing datasets with data on youth suicide risk/preventive factors to enable further secondary analyses; and develop improved experimental designs, data harmonization, and analytical techniques for examining youth suicide risk/protective factors.

<https://prevention.nih.gov/docs/programs/p2p/ysp-federal-partners-report.pdf>

CREATIVE MINDS: MAPPING THE BIOCIRCUITRY OF SCHIZOPHRENIA AND BIPOLAR DISORDER

NIH Director Dr. Francis Collins describes the research of an NIH Director's 2016 Transformative Research Award to apply what has been learned about the normal changes in the aging brain and their connection to neurodegenerative diseases to study changes in the brains of younger people with schizophrenia and bipolar disorder. <https://directorsblog.nih.gov/2017/09/28/creative-minds-mapping-the-biocircuitry-of-schizophrenia-and-bipolar-disorder/>

NIDA: STRONGER RELIEF FOR NEUROPATHIC PAIN

Opioid medications are highly effective against many types of pain, but not neuropathic pain, which arises from damaged or diseased nerves. NIDA research suggests a way to remedy that shortcoming.

<https://www.drugabuse.gov/news-events/latest-science/stronger-relief-neuropathic-pain>

NIDA DRUG AND HEALTH BLOG POST: “GETTING HIGH” IS REALLY ABOUT NOT FEELING LOW

This NIDA blog post for teens describes how drug use can cause changes in the brain that can lead to continued use. For example, drug use may cause brain changes that lead a person to feel depressed and anxious. When that happens, the person may want to use the drug again—just so they can escape the bad feelings the drug helped cause. In short, people who use a drug over and over may not be trying to get “high.” They may be trying to escape feeling very low, the state called withdrawal.

<https://teens.drugabuse.gov/blog/post/getting-high-really-about-not-feeling-low>

NIDA DRUG AND HEALTH BLOG POST: TEENS GET IT: MARIJUANA AND TOBACCO ARE HAZARDOUS TO YOUR HEALTH

This NIDA blog post for teens highlights data from the National Survey on Drug Use and Health that shows a decline in the number of young people saying they used marijuana or tobacco in the past month.

<https://teens.drugabuse.gov/blog/post/teens-get-it-marijuana-and-tobacco-are-hazardous-your-health>

ALL OF US: THE DISH: EXPANDED BETA PHASE

In his video blog, *All of Us* Research Program Director Eric Dishman provides an update on the status of the program. Based on what *All of Us* program staff have learned from beta testing volunteer recruitment, a second, expanded beta phase will launch in early November. A national launch is targeted for Spring 2018.

<https://allofus.nih.gov/news-events-and-media/videos/dish-expanded-beta-phase>

ALL OF US: THE DISH: CLOSED BETA UPDATES AND ELECTRONIC HEALTH RECORD CONSENT

In this video blog, *All of Us* Research Program Director Eric Dishman shares a program update, including the number of beta participants recruited, new sites launched, and the value of electronic health record data.

<https://allofus.nih.gov/news-events-and-media/videos/dish-closed-beta-updates-and-ehr-consent>

HHS BLOG POST: BRINGING CRITICAL HEALTH SERVICES CLOSER TO HOME

This blog post highlights the critical role primary care providers play in connecting patients to mental health and substance abuse services. Recent HRSA grant awards are described, including those by HRSA’s Federal Office of Rural Health Policy to improve access to health care services, particularly substance abuse treatment, in rural communities using telehealth networks, and to increase access to treatment and recovery services within rural communities.

<https://www.hhs.gov/blog/2017/09/14/bringing-critical-health-services-closer-home.html>

NEW FROM SAMHSA

SUICIDALITY AND DEATH BY SUICIDE AMONG MIDDLE-AGED ADULTS IN THE U.S.

This report, based on data from the annual National Survey on Drug Use and Health and the National Vital Statistics System, features findings about suicide attempts and suicide death rates among adults ages 45 to 64 from 2009 to 2014. https://www.samhsa.gov/data/sites/default/files/report_3370/ShortReport-3370.html

THE DIALOGUE: RESPONDING TO MASS VIOLENCE EVENTS

This issue of *The Dialogue* from SAMHSA's Disaster Technical Assistance Center features stories of responses to mass violence in communities across the U.S. It focuses on lessons learned from these events and includes information that may be helpful in behavioral health planning efforts.

<https://www.samhsa.gov/dtac/disaster-behavioral-health-resources/dialogue>

NEW KNOWLEDGE NETWORK

SAMHSA has launched its new *Knowledge Network* website, a library of online behavioral health training, technical assistance, and workforce development resources for the health care community. This website will help health care practitioners to find specific tools and resources more easily (e.g., webinars, white papers, fact sheets, trainings, and videos) that span SAMHSA's broad portfolio across many disciplines and online locations. <https://knowledge.samhsa.gov/>

KEEPING YOUTH DRUG FREE

This resource guide for parents offers advice on keeping children substance free. It reviews statistics about adolescent substance use, and provides tips on good communication.

<https://store.samhsa.gov/product/Keeping-Youth-Drug-Free/All-New-Products/SMA17-3772>

INFOGRAPHIC: HUMAN TRAFFICKING—WHAT DISASTER RESPONDERS NEED TO KNOW

The Administration for Children and Families (ACF) reminds disaster responders that human traffickers can take advantage of the chaos and vulnerability created by disasters and emergencies. They may exploit disaster survivors or laborers who support the cleanup and rebuilding efforts. It is imperative that responders know that the likelihood of coming into contact with an individual experiencing human trafficking is heightened in these circumstances. Anyone can be trafficked: men and boys, women, and girls.

<https://www.acf.hhs.gov/otip/news/natlprep>

NEW FROM CDC

SURVEILLANCE FOR CERTAIN HEALTH BEHAVIORS AND CONDITIONS AMONG STATES AND SELECTED LOCAL AREAS

This report includes age-adjusted prevalence estimates for 2013 and 2014 from the Behavioral Risk Factor Surveillance System and discussion of five health topics. The topics are: 1) health status indicators, including self-rated frequent mental distress; 2) health care access and preventive practices; 3) health risk behaviors; 4) chronic diseases and conditions, including depression; and 5) cardiovascular conditions.

https://www.cdc.gov/mmwr/volumes/66/ss/ss6616a1.htm?s_cid=ss6616a1_e

SCHOOL HEALTH POLICIES AND PRACTICES STUDY: 2016 DATA RELEASE

Results are available from the *School Health Policies and Practices Study 2016*, a national survey conducted periodically to assess school health policies and practices at the state, district, school, and classroom levels. Policies related to health services and counseling, psychological care, and social services are included.

https://www.cdc.gov/healthyyouth/data/shpps/pdf/shpps-results_2016.pdf

ESSENTIALS FOR PARENTING TODDLERS AND PRESCHOOLERS

This online resource provides information to help parents interact positively with children. It provides proven answers to common challenges so moms, dads, and caregivers can help two- to four-year-olds grow up happy and healthy. Read free articles, watch videos, and practice exercises for building positive relationships with kids.

<https://www.cdc.gov/media/dpk/child-development/parenting-essentials/dpk-parenting-essentials.html>

NATIONAL CENTER FOR PTSD: RESOURCES FOR MANAGING STRESS AFTER TRAUMA

People respond to traumatic events in a number of ways. They may feel concern, anger, fear, or helplessness. These are all typical responses to a traumatic event. This National Center for Post-Traumatic Stress Disorder (PTSD) newsletter highlights resources to learn what to expect following a traumatic event and how to manage stress reactions, including self-care options and how to seek professional help.

<https://content.govdelivery.com/accounts/USVHA/bulletins/1b9332a>

NEW FROM REAL WARRIORS CAMPAIGN

FOR PROVIDERS: TOOLS AND TIPS TO TREAT MILITARY PATIENTS

This article provides information to help health professionals understand military culture, highlights evidence-based clinical practice guidelines, identifies training and learning opportunities, and details how to become a TRICARE provider. <https://www.realwarriors.net/healthprofessionals/tools/articles.php>

STRESS REDUCTION TECHNIQUES FOR HIGH-STRESS OPERATIONS

This article summarizes the possible effects of heavy stress on service members, in particular those in special operation forces, and provides tips for improving performance during high-stress operations. <https://www.realwarriors.net/active/psychological-strength/stress-reduction-techniques.php>

RESOURCES AVAILABLE THROUGH COMBAT OPERATIONAL STRESS CONTROL

This article highlights DoD resources available for combat and operational stress. <https://www.realwarriors.net/active/combatstress/cosc-programs.php>

COMBAT AND OPERATIONAL STRESS: A NATURAL RESULT OF HEAVY MENTAL AND EMOTIONAL WORK

This article explains what combat stress is, including symptoms of stress, and how to access support resources. <https://www.realwarriors.net/active/combatstress/overview.php>

DOMESTIC VIOLENCE AWARENESS MONTH

October is Domestic Violence Awareness Month. There are numerous ways to enhance prevention efforts in your community. A key strategy in preventing domestic violence, often called intimate partner violence, is promoting respectful, non-violent relationships. Check out these CDC resources to learn more about preventing domestic violence. <https://www.cdc.gov/Features/IntimatePartnerViolence/index.html>

WEBINAR: GETTING DATA RIGHT – AND RIGHTEOUS – TO IMPROVE HISPANIC OR LATINO HEALTH

OCTOBER 3, 2017, 1:00-2:00 PM ET

CDC's Office of Minority Health and Health Equity is hosting this webinar during Hispanic Heritage Month to discuss the importance of population health monitoring programs to collect data elements that better capture Hispanics' diversity. The presenter will cover ways to provide language assistance to assure meaningful inclusion of all Latino and Hispanic populations in national health monitoring. Registration is not required. <https://content.govdelivery.com/accounts/USNIHNIMHD/bulletins/1b48021>

WEBINAR: HOMELESSNESS AND UNSTABLE HOUSING: IMPACT ON PROVIDER SERVICES

OCTOBER 4, 2017, 1:00-2:00 PM ET

This SAMHSA Recovery to Practice webinar will provide an overview of homelessness and housing instability, their subsequent impact on service engagement and outcomes, and how behavioral health providers can incorporate housing stability assessments into standard practice. The presenters will demonstrate how to integrate some basic tools into standard assessment and care, along with ways to use them to guide treatment and enhance recovery outcomes. https://events-na2.adobeconnect.com/content/connect/c1/916603251/en/events/event/shared/1078449659/event_landing.html?sco-id=1078449604&_charset_=utf-8

WEBINAR: PRECISION MEDICINE AND HEALTH DISPARITIES: THE PROMISE AND PERILS OF EMERGING TECHNOLOGIES

OCTOBER 11, 2017, 3:00-4:00 PM ET

The Precision Medicine and Population Health Interest Group in the Division of Cancer Control and Population Sciences at the National Cancer Institute, the NIH Genomics and Health Disparities Interest Group, and the CDC Office of Public Health Genomics are hosting this webinar that will explore the intersection of genomics, precision medicine, and health disparities. Webinar speakers will discuss the appropriate role and impact of genomics and precision medicine in understanding and addressing health disparities in the U.S. and around the world.

<https://cancercontrol.cancer.gov/research-emphasis/precision-medicine.html> (Select “Events”)

WEBINAR: THE 2017 REVISED CLINICAL PRACTICE GUIDELINE FOR PTSD: RECOMMENDATIONS FOR MEDICATIONS

OCTOBER 18, 2017, 2:00 PM ET

The VA PTSD Consultation Program Monthly Lecture Series will offer three one-hour lectures about the new Clinical Practice Guidelines for PTSD. This webinar will address recommendations for medications.

<https://www.ptsd.va.gov/professional/consult/lecture-series.asp>

VIDEOCAST LECTURE: COMMUNICATING SCIENCE TO THE PUBLIC: FOLLOW THE SCIENCE

OCTOBER 19, 2017, 11:00 AM-12:00 PM ET

Public understanding of science benefits both the public and the scientific enterprise; however, communicating science to the public is an acquired, not innate, skill, and it is particularly difficult and complex in domains like complementary and integrative health. Fortunately, there is a growing body of scientific evidence about what works and what does not that can be used to increase the effectiveness of science communication efforts. This National Center for Complementary and Integrative Health lecture will address both the needs for engaging with the public about science and some of the lessons learned, especially in controversial or contentious areas. This lecture will be streamed online at videocast.nih.gov and on Facebook. <https://nccih.nih.gov/news/events/IMlectures>

2017 NATIONAL CONFERENCE ON ALCOHOL AND OPIOID USE IN WOMEN AND GIRLS: ADVANCES IN PREVENTION, TREATMENT, AND RECOVERY

OCTOBER 26-27, 2017, WASHINGTON, DC

This national conference will highlight the intersection of harmful drinking among women, HIV infection, and adverse maternal-child health outcomes. The conference seeks to disseminate findings from the latest research on the prevention, diagnosis, and treatment of alcohol and other substance misuse among girls and women, including strategies to prevent HIV infection/progression and substance-exposed pregnancies, and establish a coalition of stakeholder organizations and researchers to develop a blueprint for a coordinated public-private response to epidemic substance misuse among women and girls. This conference, sponsored by the National Institute on Alcohol Abuse and Alcoholism (NIAAA), NIDA, the NIH Office of Research on Women's Health, SAMHSA, and the NIH Office of AIDS Research is free of charge and open to the public.

<https://www.niaaa.nih.gov/2017-national-conference-alcohol-and-opioid-use-women-girls>

FRONTIERS IN ADDICTION RESEARCH: THE SCIENCES OF ASTROCYTES, STRESS RESPONSE, AND TRANSLATIONAL RESEARCH

NOVEMBER 10, 2017, WASHINGTON, DC

During this mini-convention convened by NIDA and NIAAA, three scientific sessions will explore: techniques and approaches for studying astrocytes in neurological disorders and behavior; stress reactivity and immune function in brain development, addiction, and depression; and approaches towards treatment of substance abuse disorders and mental illness. <https://apps1.seiservices.com/nida-niaaa/frontiers2017/Default.aspx>

OMH RESOURCE CENTER TECHNICAL GRANT WRITING WORKSHOP

OCTOBER 26-27, 2017, FLAGSTAFF, AZ

Learn to write winning grants and build sustainable partnerships to improve minority health. This HHS OMH grant writing workshop to be held at Northern Arizona University is intended for university/college junior faculty, staff, and health professionals.

<https://www.minorityhealth.hhs.gov/omh/browse.aspx?lvl=3&lvlid=100>

MAJOR DEPRESSION AND AV101

JOIN A RESEARCH STUDY: ENROLLING NATIONALLY FROM AROUND THE COUNTRY

The primary purpose of this research study is to evaluate the safety and effectiveness of the oral drug AV-101 (an antagonist of the glycine receptor) versus placebo. The study aims to determine if this experimental drug has antidepressant effects and fewer side effects than other novel treatments for depression.

We are enrolling moderately depressed individuals between the ages of 18 and 65 with hard-to-treat major depressive disorder. This inpatient study lasts up to 14 weeks and procedures include a medication taper, taking the research drug, taking placebo, and four brain imaging scans. Optional procedures include a lumbar puncture and catheter placement in the spine two times. After completing the study, participants receive short-term follow-up care at the NIH while transitioning back to a provider.

The study is conducted at the NIH Clinical Center in Bethesda, Maryland and enrolls eligible participants from across the U.S. Travel arrangements are provided and costs are covered by NIMH (arrangements vary by distance). There is no cost to participate and compensation is provided.

The first steps to participate include calling NIMH, learning specifics about the study, asking about your eligibility, and consenting to participate.

To find out if you qualify, send an email to moodresearch@mail.nih.gov, or call 1-877-646-3644 (1-877-MIND-NIH) [TTY: 1-866-411-1010]. 15-M-0151

FUNDING INFORMATION

NEW ONSET DEPRESSIVE SYMPTOMS IN ACUTE ILLNESS

<https://grants.nih.gov/grants/guide/pa-files/PA-17-488.html> (R01)

<https://grants.nih.gov/grants/guide/pa-files/PA-17-487.html> (R21)

OPIOID USE DISORDER IN PREGNANCY

<https://grants.nih.gov/grants/guide/rfa-files/RFA-HD-18-036.html>

NIH SCIENCE EDUCATION PARTNERSHIP AWARD

<https://grants.nih.gov/grants/guide/pa-files/PAR-17-339.html>



National Institute
of Mental Health

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 increase the public's access to science-based mental health information through partnerships with national and state organizations. For more information about the program, please visit: <http://www.nimh.nih.gov/outreach/partnership-program/index.shtml>. To subscribe to receive the Update every two weeks, go to: <http://www.nimh.nih.gov/outreach/partnership-program/news-and-updates-from-the-program.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.