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MINDSCAPES

MGH DEPARTMENT OF PSYCHIATRY NEWSLETTER FOR FRIENDS AND SUPPORTERS • FALL 2015

Family-centered Care for Older Adults *Providing Mental Health Care for a Burgeoning Population*

We all would prefer our “golden years” to be care-free. But later in life, unanticipated medical and mental health issues can thwart plans, hopes and dreams.

It’s a situation that Cynthia Fantasia knows all too well. Six months before she planned to join her husband Bob in retirement, the future looked bright. They had planned to travel and spend more time with family, friends and each other. Then Bob was diagnosed with Alzheimer’s disease – a progressive disorder that robs a person of thinking, language and memory, and that disrupts family relationships.

Now retired, Cynthia has transitioned to the unplanned role of full-time caregiver, taking life one day at a time.

LONGER LIFE SPANS

Unfortunately, such stories are becoming increasingly common. One reason is that longer life spans and a demographic spike of aging baby boomers will double the number of adults 65 or older to more than 70 million by 2030.

More important, older adults are especially vulnerable to a variety of mental health problems that can range from psychiatric disorders to neurodegenerative disorders, and include cognitive or behavioral problems resulting from underlying medical conditions. As people become less able to navigate or even physically access our complex healthcare system without assistance, the onset of these illnesses can profoundly disrupt the lives of loved ones.

Cynthia’s situation would be even more difficult if she did not have a dedicated support network and the compassionate and expert help

and guidance of Anthony P. Weiner, MD, and his team in the Older Adult Outpatient Psychiatry Program at Massachusetts General Hospital.

A STRONG FOUNDATION

Dr. Weiner came to Mass General in 2011 with nearly 20 years of



Deborah Blacker, MD, ScD; Rebecca Osorio, MSW, LICSW; Anthony P. Weiner, MD; Jennifer L. DeSouza, MSW, LICSW, CGP

experience in geriatric psychiatry with a mandate to expand outpatient psychiatric care for older adults. He joined two veteran psychiatrists, William Falk, MD, and Cornelia Cremens, MD, and worked with them to build on their previous work in the field of geriatric psychiatry. “I am a true believer that we stand on the shoulders of those who have come before and, in our case, on Bill’s and Cornelia’s. We are now building on the foundation they created at MGH to establish a model system of care for elders and support for their families.”

Joining Drs. Weiner, Falk and Cremens are neuropsychiatrist Deborah C. Blacker, MD, ScD, who evaluates patients for

**“Aging is not an individual experience.
It’s a family and community phenomenon.”**

— Anthony P. Weiner, MD

Alzheimer’s and other forms of dementia in the Department of Neurology’s Memory Disorders Unit; and psychiatrist Feyza Marouf, MD, who cares for patients and directs the MGH/McLean Geriatric Psychiatry Fellowship. Rounding out the current clinical staff are social worker Jennifer De Souza, who sets up in-home and community support services; and case manager Rebecca Osorio, who maintains communication among the patient’s psychiatrist, PCP, specialists, other care providers and family members.

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Message from the Chief

This issue of *Mindscapes* describes the family-centered care clinic for older adults directed by Dr. Tony Weiner, the innovative program for research and teaching of empathy by Dr. Helen Riess, and the philanthropic spirit and deeds of philanthropist Tanglely Lloyd. Each story suggests a common core of values that guide the three leaders.



It is the idea of value-driven activity that inspires me to share a New Year's list – one that sets a framework for individual and collective efforts. In full disclosure, what follows is lovingly plagiarized from a presentation immortalized on YouTube that my daughter, Eliza, gave to business leaders in Edmonton, Canada.* When I heard her describe the corporate values of her company, I was struck by how

these seven “values” also reflect the culture of our department. So here they are:

1. **Be Optimistic:** “Believing that something is possible will somehow make it so.”
2. **Collaborate:** “The most powerful asset we have in our arsenal is the word ‘we.’”
3. **Embrace Ambiguity:** “Get comfortable with uncomfortableness.”
4. **Learn from failure:** “Ask forgiveness, not permission.”
5. **Make others successful:** “Going out of your way to help others succeed is the secret sauce.”
6. **Take ownership:** “The unwritten social contract here: individual ownership supports collective responsibility. Own that.”
7. **Talk less, do more:** “Nothing is a bigger buzz-kill than over-intellectualizing. Design is about rolling up your sleeves and making things.”

There is of course a lot to elaborate about each of these values, and some will have more resonance to each of you than others, but they speak to what has made us successful together, working with and for each other. Best wishes for a healthy and happy New Year.

Jerrold F. Rosenbaum, MD
Psychiatrist-in Chief
Massachusetts General Hospital
Stanley Cobb Professor of Psychiatry
Harvard Medical School

*From the “Little Book of IDEO.” IDEO is a design and innovation consulting company based in Palo Alto, CA.

In Memoriam: Frank P. Soldo, III

Frank Soldo, associate director of development for Psychiatry, died on Aug. 11 at the age of 54 after a year-long battle with cancer. Frank dedicated 25 years to working at Partners HealthCare, the last 15 of which were at Mass General.



Frank P. Soldo, III • 1961-2015

His development career began at North Shore Medical Center where he worked for 10 years. His signature accomplishment was the creation of an annual Cancer Walk, which continues to this day. He arrived at MGH in 2000 and worked initially in planned giving and major gifts, and in 2004 joined the development effort for the Department of Psychiatry.

“No task was beneath him or beyond him. He was a ‘can do, will do’ colleague,” said chief of Psychiatry, Jerrold F. Rosenbaum, MD. “His imprint can be found on so many of the initiatives of the last decade. Whatever the assignment, Frank brought his characteristic enthusiasm, know-how and vitality to bear.”

Among the initiatives that Frank helped launch were the Leadership Council for Psychiatry, and councils for the Schizophrenia Program, Bipolar Program, Depression Program, Psychotherapy Endowment and the Center for Law, Brain and Behavior. He also helped to plan the department’s 75th Anniversary celebration in 2009, the Psychiatry Grand Rounds endowed lectureship campaign in 2010 and the 80th anniversary celebration in 2014.

“If Frank ever doubted the depth of respect and admiration he garnered at the MGH, this was dispelled by the myriad emails, calls, cards and visits he received over the last year, foremost from colleagues, but also from donors and members of the faculty,” said Carol W. Taylor, interim vice president for Development. “What I will personally miss the most about Frank are the impromptu knocks on the door when he would appear, broad smile and eye twinkle, to tell me about a triumph with a reluctant faculty member or hesitant donor. It was just plain fun to work with him.”

Frank is survived by his parents, Frank and Gloria (Codispoti) Soldo; his brother, Paul and his wife Danielle; and nephews, Tyler, Davis and Logan Soldo. Funeral services have been held. Recently, the main conference room in the MGH Development Office at 125 Nashua Street was dedicated in his honor, and the Frank P. Soldo, III, Endowed Grand Rounds Lectureship in Psychiatry has just been established through the generosity of a donor family with whom Frank worked.

Improving Care Quality through Empathy

Innovative training program builds better doctor-patient relationships

Visit any online forum where patients leave reviews of healthcare providers and treatment experiences, and you're likely to see a wide range of feedback, some positive, some more explicit, including:

"The doctor just doesn't understand me."

"I felt rushed – like I was wasting the doctor's time by even making an appointment."

"I know something's not right, but the doctor makes me feel like I'm crazy."

In the new age of health care, these are common complaints among patients. When doctors meet with patients, they are usually seeing them at their most vulnerable state, whether due to physical or mental illness – or both. As a result, the ability to listen, and to understand patients' thoughts and feelings and offer comfort – which constitutes empathy – can be lost in the everyday demands of professional and familial obligations. But how can clinicians maintain or restore empathy in their interactions with patients? What's more, can empathy be taught?

A NEUROBIOLOGICAL BASIS

These and many more issues relating to empathy are the focus of Mass General's Empathy and Relational Science Program (ERSP). Since 2011, the ERSP has been researching the role empathy plays in the patient-clinician relationship. The research is grounded in the neurobiology of empathy and relational sciences.

"When people ask how the neurobiology of empathy works, I often give the example of how we react when witnessing someone closing their hand in a car door. We understand cognitively that this causes pain, but most of us also flinch, even though nothing has physically touched us. This experience helps us identify with the person in pain, which motivates us to help," says Helen Riess, MD, psychiatrist and director of the ERSP. "Neuroimaging studies have shown that the other person's pain response is mapped onto the pain sensors in our own brains, which is why we flinch. So, too, is the patient-clinician relationship: if doctors can identify with their patients' emotions, they will be more successful in treating any type of ailment – from the common cold to terminal illnesses."

TEACHING EMPATHY

From its early days, the ERSP achieved success in measuring the effects of empathy. Riess created the first empathy training program specifically for doctors. It was tested in a randomized, controlled trial at MGH, and the results



Members of the Empathy and Relational Science Program: *Front Row*, Lee Baer, PhD, Diego Reiner, BS, Helen Riess, MD, Margot Phillips, MD, *Back Row*, Tess Lauricella, BA, Mariano Menendez, MD, PhD, Aine Lorie, PhD

demonstrated that empathy could, in fact, be taught. Doctors who took the empathy course found that they maintained better eye contact, interrupted their patients less, and were better able to relate with and manage patients who expressed anger or frustration.

HIGH STAKES

The ERSP's interdisciplinary research team at Mass General also conducted the first statistical review of previous studies that showed that empathic relationships have meaningful effects on health outcomes such as obesity, diabetes, and hypertension. On a practical level, increasing empathy has a financial benefit. The Centers for Medicare and Medicaid Services, for example, use rating systems to measure patients' perspectives on their care, and then use the results as part of their formula for determining reimbursements to hospitals.

"Clearly there's much at stake for physicians when it comes to empathy," continues Riess. "People generally think you are either born with empathy or not, but empathy can be taught, and clinicians can improve. We've seen this across all of our research."

The ERSP is currently working on different cultural expressions of empathy and the impact of nonverbal expressions of empathy on ratings of physician warmth and competence. Dr. Riess and team members also consult with clinical leaders in medical services at Mass General, such as OB/GYN, Dermatology and Primary Care to help them enhance the level of empathy in patient care.



Research participants were asked to rate simulated nonverbal behavior of physicians, such as the impact of eye contact in these photographs, to determine their effects on measures of physician warmth and competence.

Tangley Lloyd

A passion for helping others have better lives



Tangley Lloyd and daughter Demi Isenstadt

Two weeks before attending Columbia University School of Social Work, Tangley Campbell Lloyd was visiting family in Winnetka, Illinois. While at the local library, she learned that in the late 1800s, her great grandmother worked at Hull House on Chicago's Near West Side. She worked alongside Jane Addams, the pioneer of modern social work in the U.S.

Whether that discovery preceded or merely reinforced Tangley's decision to follow a career of caring is unclear. But one thing is certain: despite encountering major bumps in the road of her life's journey, the pressing need and deep desire to help others is in Tangley Lloyd's DNA.

Mrs. Lloyd's passion for caring and strong sense of family inspired her creation of the Demarest Lloyd, Jr. Foundation. That same passion also begins to explain the foundation's recent gift to support pioneering research at Mass General in the genetic and environmental influences on mental illness.

HONORING DEMAREST LLOYD, JR.

Tangley idolized the father she never knew, who was killed in action during World War II when she was just an infant. When she was 32, Tangley set up the Demarest Lloyd, Jr. Foundation in his memory, and

became its chairperson and sole contributor. "The Foundation is my way of making my father happy if he were here on earth," she says.

Her passion for caring led her to Columbia "to get a second start" after having been married and raising two children. After earning MSW and LCSW degrees, Tangley worked at several organizations, including the Burke Institute in White Plains, which served people suffering from brain trauma, post-traumatic stress disorder, cardiac problems and stroke. Tangley then established herself as an independent psychotherapist for children and families

"I love social work because it supplies the tools to link families to critically-needed resources. That aspect makes psychotherapy not only my career, but also my love and my passion." It's also a practice she extends by volunteering with the Red Cross as a disaster mental health worker.

INTEREST IN CHILD PSYCHIATRY

Although she has always held Mass General in high regard ("My maternal grandfather always advised, 'If you're sick, go to MGH!'), it was the experience of her daughter Demarest "Demi" Isenstadt and her grandson Henry that forged strong links between the Lloyd family and the Department of Psychiatry.

With a home near Boston, all three of Demi Isenstadt's children were born at MGH. Despite "smooth sailing" with her first child, Demi's second child Henry had challenges. Afflicted with digestive and behavioral issues from infancy, he was diagnosed at age six with ADHD, combined type, and was referred to Timothy Wilens, MD, MGH chief of Child and Adolescent Psychiatry.

"Dr. Wilens charted a path and reassured us that, although complex, Henry's case is solvable, and that put our minds at ease. Now, three years since the diagnosis of ADHD, Henry is having his best year yet," says Demi, "and our fears about personality effects from medications are unfounded because Henry has remained true to himself.

"I've felt so cared for by the physicians at MGH," she adds. "They're concerned about so much more than prescribing a med. When I've needed to speak with our pediatrician, Dr. Qian Yuan or Dr. Wilens about anything, they've always been there to listen and help. There's such a human side to each and every one of the doctors at MGH, and parents need that type of care, too."

Her relief in knowing Henry was in good and capable hands at MGH inspired Demi to help start the MGH Food Allergy Center at MassGeneral Hospital for Children (MGHfC), serve as the first member of its parent board and help host a range of events for patients' families.

"The 'heart' that MGH shows really hits home to me as a therapist. I know passion when I see it, and everybody at MGH from the top down has it. They all do amazing work, and we're honored to help them!"

— Tangley Lloyd

It wasn't long before Demi's involvement piqued Tangley's curiosity in MGH, and, eventually, the foundation's involvement. "My interest has always been children and the underprivileged," says Tangley. "Prior to seeing Henry's problems and witnessing the amazing care he has received at Mass General, I typically looked for the foundation to help smaller organizations that were not well-known, such as the first Fresh Air Fund and those involved with domestic violence and abuse," she explains.

"But lightning strikes in everyone's life," she says, "and personal experiences lead you to a path that's different."

SHIFT TOWARD RESEARCH

One such bolt struck 10 years ago when Tangley was diagnosed with primary amyloidosis – an extremely rare and often fatal blood disease. The research-driven treatment protocols that resulted in a stem cell transplant saved her life.

"I'm a living miracle – a testament to medical advances through research," she asserts, citing that experience as the primary reason for changing the direction and focus of the family foundation toward research. "Both Demi and I are convinced that research is essential to improving health outcomes, and is where the funding needs to go."

At MGH, the Demarest Lloyd, Jr. Foundation has contributed funds to support work in food allergies conducted by Wayne Schreffler, MD, Dr. Yuan and Dr. Wilens' study of fish oils as a supplement in the treatment of ADHD.

Tangley also somewhat famously won the bid at the MGHfC Storybook Ball auction in 2014 to fund, fly and accompany MGH chief of Plastic and Reconstructive Surgery William Austen, Jr., MD, in the operating room of a hospital in Cartagena, Colombia, where he and his team performed surgery on children with cleft palate and lip.

"Demi and I were in scrubs and gowns in the O.R. watching Dr. Austen perform surgical procedures that immediately change the trajectory of a child's life. After some of these, we held the children in our laps, and we could see hope in their eyes. When I returned home, the photos I showed to a Colombian friend brought him to tears of joy."

DEEPENING INVOLVEMENT

In June 2014, Tangley and Demi accepted invitations to join the MGH Leadership Council for Psychiatry, which is dedicated to expanding awareness of mental illness, diminishing its stigma, and advancing research and clinical care through the work of the department.

"The Leadership Council helped us become more closely involved," says Demi. "It is so rewarding to see all the new and innovative efforts going on at MGH, and it also demonstrates the importance of philanthropy in supporting these initiatives."

At the council meeting in Palm Beach last February, Tangley heard Jordan Smoller, MD, ScD, speak about his research in genetic risk and resilience factors associated with mental illness. "I was so knocked over by his research proposal and what he and this amazing group of people are zeroing in on that I literally came out of my chair in support."

The research proposed by Dr. Smoller and his colleagues seeks to apply advances in genomics and bioinformatics to identify both the genetic and environmental risk profiles associated with mental illness and the resilience profiles of people at higher risk who do not develop a disorder. Achieving those aims would represent a key advance in developing personalized medicine for psychiatry.

"The 'heart' that MGH shows really hits home to me as a therapist," Tangley says. "I know passion when I see it, and everybody at MGH from the top down has it. They all do amazing work, and we're honored to help them!"



Tangley Lloyd with a patient, post surgery, in Cartagena, Colombia, joining the international team led by William (Jay) G. Austen, Jr., MD, chief of Plastic and Reconstructive Surgery at Mass General

— Family-centered Care for Older Adults

(Continued from page 1)

The program's mission is to optimize the mental health and well-being of individuals 65 and older who are affected by cognitive, mood or memory disorders. Clinical staff are equally concerned with providing education and support to family members who, like Cynthia, often are physically and emotionally involved in the care of a spouse or parent.

EXPANDING THE PROGRAM

MGH recently received a significant contribution from the Millicent and Eugene Bell Foundation to create an endowed director in Older Adult Outpatient Psychiatry. Meg Fofonoff, trustee of the Foundation, made the endowment gift to honor her parents, Millicent – who was a patient of Dr. Weiner's – and Eugene Bell. Says Ms. Fofonoff, "The most painful thing in this world is loss, and Dr. Weiner changed our lives with his approach to my mother's care. His caring for her and his very wise advice and supportive words allowed for the best quality of life for my mother."

This new funding will help accelerate Dr. Weiner's efforts to expand the small and dedicated staff currently in place by creating formal multidisciplinary care teams. Each team will be comprised of five clinicians: a geriatric psychiatrist; registered nurse clinical specialist with medication prescribing privileges and advanced psychiatric training; PhD-level psychologist; licensed, independent clinical social worker; and case manager.

Plans call for adding two full-time teams to work with patients by 2016, and assembling another two by 2018. Telemedicine will be an essential component of the care model. "Considering the mobility challenges that come with aging, along with increasing weather

severity, transportation issues and family members' lost time, a Skype-based visit in the home is a very sensible approach," Dr. Weiner explains.

INTEGRATED, COMMUNITY-BASED CARE

A major focus of the Older Adult Psychiatry Program is to connect previously separate care providers and groups. Dr. Weiner believes that the best model of care for the older patient involves a medical-psychiatric approach that integrates diverse services and that ideally delivers them in the patient's own home and community. "The needs of older adults commonly intersect the disciplines of psychiatry, internal medicine, neurology, rheumatology, orthopedics and cardiology," says Dr. Weiner. "Symptoms that could be interpreted as psychiatric may be generated by acute internal medicine problems. If you take a purely psychiatric approach to these problems, you're really shooting in the dark."

"In addition, aging is not an individual experience. Rather, it is a family and community phenomenon. Caring for older individuals in their communities rather than in higher-cost acute care settings helps the patient maintain social connections and family ties, all while containing costs," adds Dr. Weiner. "Studies support this approach. It's also the model I've used for more than 20 years, and I know it works."

For her part, Cynthia Fantasia says coming to grips with a disease like Alzheimer's is difficult, and people can't go it alone. "We're so very fortunate to be in the care of the Older Adult Psychiatry Program. The team's compassion for their patients is combined with incredible knowledge and that makes me feel comforted and safe."

Family Collaboration in Coping with Alzheimer's

John S. DeMichaelis describes his 82-year-old father, John M.'s onset of Alzheimer's disease as a trickle of memory issues starting in 2010 that eventually swelled, demanding medical attention.

It was shortly after John M. retired from the family's produce business, State Garden, that John S., and his mother began noticing the patriarch's memory loss. But at the time, the severity was still manageable.

Meanwhile, John M. had discussed the problem confidentially with his primary care provider, Charles H. Weiss, MD, of MGH's Bulfinch Medical Group, who also was keeping a watchful eye.

In 2013, as the memory issues became

more pronounced, the family was referred to Gad A. Marshall, MD, of the MGH Neurology Department, who officially diagnosed Alzheimer's disease. Dr. Marshall also maintained contact with them to offer help when needed.

Earlier this year, with symptoms taxing the DeMichaelis' ability to cope, Dr. Marshall, in consultation with Dr. Weiss and MGH psychiatrist Owen S. Surman, MD, referred the family to the MGH Older Adult Outpatient Psychiatry Program and its founder, Dr. Weiner.

"When we first met with Dr. Weiner, he was so confident and reassuring that he put us all at ease immediately," relates John. "He looked us straight in the eye and assured he would be able to help us and keep Dad at home.

"Mom and I continue to be Dad's primary caregivers. Despite how devastating Alzheimer's can be, things are going well for us because of the strong, collaborative medical group at MGH and the extraordinary level of personal care and accessibility Dr. Weiner provides," he explains.

"We know more difficult times are to come. But with Dr. Weiner and MGH in our corner, it will be much easier."



The DeMichaelis family with patriarch John M. DeMichaelis

Two New Endowed Psychiatry Chairs Celebrated

Thomas P. Hackett, MD, MGH Chair

Andrew A. Nierenberg, MD, director of the Bipolar Clinic and Research Program, was honored on Sept. 3 as the inaugural incumbent of the Thomas P. Hackett, MD, Endowed Chair in Psychiatry. More than 85 guests attended the ceremony honoring Nierenberg at the Paul S. Russell, MD Museum of Medical History and Innovation.

The chair was established through the generosity of several donors, including Kent and Elizabeth Dauten of Chicago, Illinois who provided majority funding.

“The Hackett chair is a perfect tribute to Dr. Andrew Nierenberg, who is the ideal first incumbent,” said Britain W. Nicholson, MD, chief medical officer, who served as the event’s master of ceremonies. “Like Tom [Hackett], Andy is a go-to critical thinker and thought leader who can appreciate all sides of a complex challenge.”

Dr. Nierenberg joined the MGH Psychiatry Department in 1992. His primary interests are treatment-resistant depression, bipolar depression and the longitudinal course of mood disorders. He has been recognized nationally for his contributions to knowledge and treatment of mood and anxiety disorders.



Kent and Elizabeth Dauten, Andrew A. Nierenberg, MD, and his wife Karen Blumenfeld

Previously, Dr. Nierenberg helped lead two studies that involved thousands of patients with mood disorders and that were among the largest clinical trials ever funded by the National Institute of Mental Health (NIMH). Currently, he is the principal investigator of an NIMH initiative to collaborate with 50,000 patients across the country to use patient reported outcomes and electronic medical records as a national infrastructure for future studies.

Dr. Thomas Hackett, the chair’s namesake, was chief of Psychiatry at Mass General from 1976 until his death in 1988. “He was absolutely beloved and revered as a chief, animating and enhancing all he touched. His life and his work remain an inspiration,” said Dr. Nicholson.

“The Hackett chair is a great honor that will give me the time to be curious, to ask good questions and to work with fellow researchers to seek answers,” said Nierenberg. “Even more important, it will help generations of researchers who come after me continue to do so at the MGH.”



Peter L. Slavin, MD, Mary and Marvin Davidson, Paula K. Rauch, MD

Timothy Christopher Davidson MGH Chair

Paula K. Rauch, MD, director of the Marjorie E. Korff Parenting at a Challenging Time (PACT) Program, was honored as the inaugural incumbent of the Timothy Christopher Davidson Endowed Chair in Psychiatry during a Sept. 10 ceremony at the Paul S. Russell, MD Museum of Medical History and Innovation.

The endowment will provide support for the Korff PACT Program at the Mass General Cancer Center, a program founded by Rauch in 1997 to provide guidance and support to families when a parent is facing cancer or any life-threatening illness.

“Paula is a visionary leader and an inspiring mentor who epitomizes the caring and compassionate physician,” said Peter L. Slavin, MD, MGH president. “Paula wears many hats, and she wears them all so well. She is a brilliant child psychiatrist and is often the first person any of our staff members call when they have an issue in their own family. The Davidson Chair is a well-deserved honor.”

Dr. Rauch is also the program director of family support and outreach for the Red Sox Foundation and Massachusetts General Hospital Home Base Program, and she is a teacher and supervisor on the Child Psychiatry Consultation Service for MassGeneral Hospital for Children. In addition, she recently voiced the role of therapist Dr. Paula on “Arthur,” a children’s television show that tackles the challenges of growing up.

The Davidson chair was initiated by Marvin and Mary Davidson of Palm Beach, FL and Marvin’s son Scott Davidson of Rye, NY, who provided the lead gifts in memory of son and brother Timothy. Their generosity was supplemented by gifts from 20 other donors to complete funding of the endowed chair.

“Paula’s PACT program deals with the practical but especially with the emotional aspects of life, illness, loss and death,” said Mary Davidson. “What she does is gives families the courage to bear one’s losses.”

“The incredible generosity of the Davidson family has created an enduring legacy of support for the PACT families we serve who face the unique challenges of parenting well while living with a life-threatening illness,” said Dr. Rauch.



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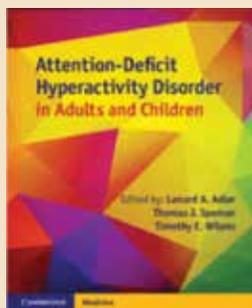
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Faculty Books

ATTENTION-DEFICIT HYPERACTIVITY DISORDER IN ADULTS AND CHILDREN

Editors: Lenard A. Adler, New York University School of Medicine; Thomas J. Spencer and Timothy E. Wilens, Massachusetts General Hospital. Cambridge University Press, 2015

Attention-Deficit Hyperactivity Disorder (ADHD) is a chronic neurobehavioral disorder characterized by persistent and often acute distractibility, hyperactivity, and impulsivity. It is a condition usually associated with children but in recent years the diagnosis of ADHD in adults has risen significantly. ADHD often coexists with a wide array of other psychiatric illnesses, including depression and bipolar disorder, thus complicating its assessment and management.



In *Attention-Deficit Hyperactivity Disorder in Adults and Children*, a team of world-renowned experts bring together the recent research in this area and cover the history, diagnosis, epidemiology, comorbidity, neuroimaging, and a full spectrum of clinical options for the management of ADHD. The wide-ranging, detailed coverage in this text will be of interest to psychiatrists, psychologists, social workers, coaches, physicians or anyone who wants to develop a deeper understanding of the etiology, characteristics, developmental process, diagnostics and range of treatment modalities.

HOME FOR DINNER

Author: Anne K. Fishel, PhD, Massachusetts General Hospital, American Management Association, 2015

Sports, activities, long hours and commutes - with so much to do, dinner has been bumped to the back burner. But research shows that family dinners offer more than just nutrition. Studies have tied shared meals to increased resiliency and self-esteem in children, higher academic achievement, a healthier relationship to food and even reduced risk of substance abuse and eating disorders.



Written by a Harvard Medical School professor and mother, *Home for Dinner* makes a passionate and informed plea to put mealtime back at the center of family life and supplies compelling evidence and realistic tips for getting even the busiest of families back to the table. Chock full of stories, new research, recipes and friendly advice, the book explains how to: Whip up quick, healthy and tasty dinners; get kids to lend a hand (without any grief); adapt meals to the needs of everyone - from toddlers to teens; inspire picky eaters to explore new foods; keep dinnertime conversation stimulating; add an element of fun; reduce tension at the table; explore other cultures and spark curiosity about the world.

Mealtime is a place to unwind and reconnect, far from the pressures of school and work. As the author notes, family therapy can be helpful, but regular dinner is transformative.



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