THE FUTURE OF PSYCHIATRY
CHAIR’S MESSAGE

By 2020, mental disorders will be the leading cause of disability on the planet. There is no longer any doubt that these disorders are among the most prevalent illnesses of our time.

I am humbled by the work that lies ahead of us, and honoured to be leading a Department that is uniquely positioned to address these challenges. The Department of Psychiatry at the University of Toronto leads changes in medical education, clinical care and discovery in Canada. This is a responsibility we do not take lightly.

As a leader in brain science, we are fostering the integration between psychiatry and other areas of medicine. New collaborative frameworks are creating unique learning opportunities for trainees and faculty. A new generation of researchers and practitioners will create improved patient outcomes.

Our Department integrates the perspectives of diverse institutions, collaborating and innovating with eight fully affiliated hospitals and 11 community sites across Ontario. The Department offers a thriving community to our undergraduate students, MSc and PhD students, residents, fellows and faculty members. We are dedicated to improving the mental health of current and future patients.

Our 2016–2017 Annual Report highlights achievements in the areas of education, research, clinical innovation and creative professional activity. It celebrates the accomplishments and milestones of our trainees and faculty. I hope you enjoy reading this report, and that the following pages reinforce or reinvigorate your commitment to the Department.

—Benoit H. Mulsant
Professor and Chair

OUR PRESENT
As one of the largest Departments of Psychiatry in the world, we serve as a catalyst for progress, mobilizing partners and resources to improve the outcome of those living with mental illness.

OUR FUTURE
By providing the best education and fostering the most innovative research, we are ensuring that the next generation of patients and clinicians will have a better experience. In Toronto, the future of psychiatry is happening now; it lives in our Department and promises to be bright and progressive.

2016-2017 EXECUTIVE COMMITTEE:
Drs. Molyn Leszcz (Vice-Chair, Clinical), Susan Lieff (Vice-Chair, Education), Benoit H. Mulsant (Professor and Chair), Mary Jane Esplen (Vice-Chair, Basic and Clinical Sciences), Alastair Flint (Vice-Chair, Research).
THE DEPARTMENT OF PSYCHIATRY AT-A-GLANCE
(2016–2017 ACADEMIC YEAR)

Our Department strives to provide the best care to today’s patients and to transform the understanding and treatment of mental illness and addiction for the patients of tomorrow.

Our unique breadth and depth allow us to provide sound clinical care, create novel knowledge, translate research discoveries and train the future generations of psychiatry clinicians, educators and researchers.

FACULTY

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41% of faculty are engaged in full-time academic pursuits.

TRAINEES

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VICE-CHAIRS: 4
(2016–2017 ACADEMIC YEAR)

**Vice-Chair, Basic & Clinical Sciences:**
Dr. Mary Jane Espelen

**Vice-Chair, Clinical:**
Dr. Molyn Leszcz

**Vice-Chair, Education:**
Dr. Susan Lieff

**Vice-Chair, Research:**
Dr. Alastair Flint

DIVISIONS: 8

**Adult Psychiatry and Health Systems**
Co-Directors: Drs. Sonu Gaind & Vicky Stergiopoulos

Brain and Therapeutics
Co-Directors: Drs. Tony George & Jim Kennedy

Child and Youth Mental Health
Director: Dr. Peter Szatmari

Consultation Liaison Psychiatry
Director: Dr. Jon Hunter

Equity, Gender and Population
Co-Directors: Drs. Kwame McKenzie & Valerie Taylor

Forensic Psychiatry
Director: Dr. Sandy Simpson

Geriatric Psychiatry
Director: Dr. Carole Cohen

Psychotherapies, Humanities and Education Scholarship
Director: Dr. Paula Ravitz
PUBLICATIONS

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DIVISIONS AT-A-GLANCE

The Division of Adult Psychiatry and Health Systems focuses on fostering the many roles of academic general psychiatrists, mental health clinicians and health services researchers. This Division helps to improve the patient experience and the quality, effectiveness and cost effectiveness of our “system” of mental health and addictions care.

The Division of Child and Youth Mental Health encompasses children, adolescents and youth (up to roughly 24 years of age) who face mental health challenges. The Division’s mandate is to promote scholarship and evidence-based services for this demographic.

The Division of Brain and Therapeutics integrates the clinical, educational and research activities of its four component subspecialty areas in the Department of Psychiatry: Neuroscience, Addictions, Mood and Anxiety Disorders, and Schizophrenia.

The Division of Child and Youth Mental Health focuses on access to care and the treatment of populations who lack equity in mental healthcare outcomes.

The Consultation and Liaison Division focuses on the relationships among psychological, biological and social factors in the expression of symptoms in medical/surgical illness. This Division’s mandate is to provide consultation to patients and liaise with their treatment teams, to optimize the bio-psycho-social care of patients.

The Division of Forensic Psychiatry and its hospital partners facilitate major clinical programs in forensic psychiatry, providing high-quality venues for teaching and research activity.

The Division of Geriatric Psychiatry strives for excellence in research into mental disorders in late-life and the education of healthcare practitioners who treat elderly patients.

As service providers to a growing and relatively under-serviced patient population, the Division also acts as an advocate for these individuals in the area of health policy.

The Division of Psychotherapies, Humanities and Education Scholarship aims to foster innovation, excellence and a community of academic scholarship that promotes relationship-centred healthcare, relationship-centred teaching and learning, and reflective capacity.
PARTNERSHIPS AT-A-GLANCE

“There is no such thing as a psychiatric training program without our hospital partners, the supervisors on the ground and the training experiences they provide. Our unique partnerships with these hospitals and the talented faculty who choose to train and educate our residents … that is the real beauty and strength of our program.”

—Dr. Mark Fefergrad
Director, Postgraduate Medical Education

FULLY AFFILIATED SITES: 8

Baycrest
Centre for Addiction and Mental Health (CAMH)
Hospital for Sick Children (SickKids)
Mount Sinai Hospital
St. Michael’s Hospital
Sunnybrook Health Sciences Centre
University Health Network (UHN)
Women’s College Hospital

COMMUNITY SITES: 11

George Hull Centre
Humber River Hospital
Hincks-Dellcrest Centre
North York General Hospital
Ontario Shores Centre for Mental Health Sciences
St. Joseph’s Health Centre
Surrey Place Centre
Michael Garron Hospital
Trillium Health Partners
Waypoint Centre for Mental Healthcare
Youthdale Treatment Centres
UNDERGRADUATE MEDICAL EDUCATION

Our Undergraduate Medical Education program remains committed to discovering and implementing innovative ways to train tomorrow’s physicians.

This academic year, we have continued to advance a number of new initiatives. Highlights in the Preclerkship program include the launch of the MD program’s new Foundations Curriculum in August 2016, which involves a greater emphasis on psychiatry-focused education.

In the Clerkship program, we launched a revamped version of our Core Curriculum lectures, focusing on more condensed and targeted lectures based on student feedback. We have also introduced protected self-study time for each rotation and now offer virtual faculty office hours.

Many recent initiatives continue to engage and challenge our trainees, including:

• Making Every Encounter Therapeutic (MEET): An elective experience offered to Year Two students focusing on therapeutic communication skills.

• Advocacy Mentoring Initiative (AMI): A unique training opportunity that allows students to give back to their communities while expanding their knowledge of advocacy, community stewardship and child development.

• Psychiatry Longitudinal Experience (PsycLE): An elective option for Year One students who wish to shadow psychiatry residents and/or faculty members in their clinical setting.

• Psychiatry Summer Institute: A one-week program providing Year One and Year Two students the opportunity to attend lectures on diverse topics in psychiatry.

—Dr. Raed Hawa
Director, Undergraduate Medical Education
POSTGRADUATE MEDICAL EDUCATION

This academic year was highlighted by our residents achieving a 100% pass rate on the Royal College examinations. We continued in our role as the largest psychiatry training program in North America and filled all 36 Canadian Medical Graduate and International Medical Graduate positions in the first iteration of the 2017 CaRMS match.

A series of initiatives are transforming our program over the next few years while keeping us at the forefront of innovation in postgraduate education:

• Residency-Led On Call Group: This team continues to modernize our call allocation processes. They have developed competencies related to the on-call experience and are now looking at streamlined and improved models of call.

• Patient Advisors Program: An ongoing program that involves carefully selecting and training Patient Advisors who have had lived experiences with mental illness. They are able to provide a unique and valuable perspective to our residents on our Chronic Care rotation.

• Competency-Based Education PGY1 Pilot Program: As outlined on page 13, this initiative at Sunnybrook Health Sciences Centre is modernizing our assessment strategy.

We will also be implementing a new competency-based curriculum across all five years of training, and anticipate that the PGY2 pilot will roll out in July 2018.

With 200 residents and over 400 supervisors per year, our Postgraduate Medical Education program continues to explore and push the boundaries of knowledge that will be useful to future clinicians and their patients.

—Dr. Mark Fefergrad
Director, Postgraduate Medical Education

FELLOWSHIP

Our Fellowship program attracts some of the best and brightest future leaders in psychiatry. We currently train 80 fellows from all six continents. Approximately two-thirds of our fellows are MDs, and one-third are PhDs.

Highlights of the past year include the expansion of our Alumni Network, which provides an opportunity for graduates to remain engaged in Department events and serve as mentors to prospective fellows. We have also developed a monthly seminar series presented by senior faculty. These seminars are enhancing the fellowship experience and promote future professional development.

—Dr. Arun V. Ravindran
Director, Fellowship Training

CONTINUING PROFESSIONAL AND PRACTICE DEVELOPMENT

Continuing Professional and Practice Development (CPPD) in the Department of Psychiatry aims to grow leadership in mental health CPPD to improve quality of care. We continue to focus on engaging faculty in Quality Improvement (QI), supporting lifelong learning through the use of data and practice feedback, and developing programs to support mental health practice improvement.

Recent CPPD-lead initiatives:

• Clinician Quality Improvement (C-QI): CPPD has created a position category in the Department that will recognize faculty who are focused on enhancing health outcomes through leadership and collaboration around practice improvement and innovation.

• Extension of Community Health Outcomes (ECHO) Mental Health in Ontario: This initiative is building capacity for primary care providers in the treatment of mental illness. See page 25 to learn more.

• University of Toronto Psychopharmacology Update Conference: In November 2016, this meeting brought together over 200 psychiatrists and mental health providers to discuss updated Canadian Network for Mood and Anxiety Treatments (CANMAT) guidelines. We will be hosting this conference again in November 2017.

—Dr. Sanjeev Sockalingam
Director, Continuing Professional and Practice Development
FACULTY DEVELOPMENT

Faculty development in the Department of Psychiatry facilitates the academic career development of our over 900 faculty.

Initiatives include:

• Orientation Day for New Faculty: An opportunity to welcome new faculty and provide an introduction to their academic roles and responsibilities.

• Promotions Boot Camp: This program teaches faculty how to apply for promotion and provides tips on showcasing their work in research, teaching, and creative professional activity.

• Donald Wasylkenki Education Day: Our 2017 event featured a plenary talk on effective teaching techniques. Workshops in the afternoon focused on academic career planning for women, using technology in teaching, health and resilience for faculty and trainees, and effective approaches for continuing professional practice development.

• Psychotherapy Faculty Development: A workshop addressing the needs of psychotherapy supervisors. Topics included how to approach a learner in difficulty, and attracted psychotherapy supervisors from a diverse range of experience levels, practice settings, and psychotherapy modalities.

• Competency-Based Medical Education (CBME) Faculty Training: This program assists faculty providing supervision and coaching in our new curriculum model see page 13. Sessions focused on the importance of direct observation and the use of encounter cards to document feedback.

—Dr. John Teshima
Director, Faculty Development
“We are helping to define the boundaries of psychiatry in the 21st century”
GLOBAL MENTAL HEALTH

Global Mental Health (GMH) in the Department of Psychiatry is an active partner in the University of Toronto’s global health initiatives.

Our key activities include:
• International collaborations in mental health education, treatment, research and training.
• Advocacy for policy change and patient rights.
• Humanitarian endeavours.

Over this academic year, ongoing initiatives included:
• Toronto Addis Ababa Academic Collaboration (TAAAC), an educational collaboration to improve mental health resources in Ethiopia. See page 24 to learn more.
• Mental health and addictions training in Latin America and the Caribbean.
• Research and training collaborations with centres in Africa, Asia, South America, and the Middle East.
• Collaborations with the World Health Organization (WHO) and the Pan American Health Organization (PAHO) on primary care training in mental health and addictions.

Several faculty received national and international funding for new global projects, focusing on:
• Improved mental health education in Guatemala.
• Psychiatric outreach to Arctic Canada.
• Medical school curriculum development in Sri Lanka.

Over the next year, GMH will continue to focus on establishing linkages with international academic centres, particularly those in emerging countries. We are also seeking grant funding for mental health projects both within Canada (focusing on ethnic or immigrant populations) and around the world.

—Dr. Arun V. Ravindran
Director, Global Mental Health
REVAMPING RESIDENCY: OUR PGY1 PILOT

The College of Physicians and Surgeons of Canada has mandated that all postgraduate psychiatry programs must shift from a time-based structure to a competency-based design over the next few years.

We decided to get a head start.

In the spirit of innovation, the University of Toronto has received special permission from the Royal College to restructure our program ahead of schedule. One of the few schools taking on this initiative in advance, we ran the first PGY1 pilot in 2016 and again in 2017. Our program has used this as an opportunity to refresh our curriculum and re-evaluate how we want to educate our residents.

“How we redesign our training program is going to have a big influence on what the future of psychiatry looks like,” says Dr. Mark Fefergrad, Director of Postgraduate Medical Education. “We train about one-quarter of all psychiatrists in Canada. This pilot has forced us to look at ourselves and ask: What should the psychiatrist of the future look like? What skills should they have? We are helping to define the boundaries of psychiatry in the 21st century.”

Over the coming years, we will be rolling out our PGY2-5 pilots. For the first time ever, our Department is also including mental health service users in the development of curriculum. Another advantage of the new curriculum is that there will be greater elective time to allow residents to focus on clinical areas of interest and/or research. The resulting program will be more flexible and learner-centred, with a real focus on research, service and access.

“We are going bigger on neuroscience, bigger on research, focusing on underserved populations and integrating physical health with mental health. This pilot emphasizes what we think will define the future of psychiatry,” says Dr. Fefergrad. “Our goal is to develop learners who have an approach to lifelong learning. Medicine is an evolving practice, and this pilot encourages self-reflection and developing the skills to go out and pursue new knowledge.”

Pilot Highlights:

- New Evaluation Standards: Trainees will be evaluated based on their capacity to master Entrustable Professional Activities (EPAs). EPAs are the key tasks in psychiatry that an individual can be trusted to perform in a given healthcare context, once sufficient competence has been demonstrated.

- Mobile Evaluation System: Supervisors can now evaluate residents via an app on the trainees’ smartphones. Replacing bi-annual online evaluations, our competency-based program offers trainees more frequent, lower stakes performance evaluations, observations and feedback.

Dr. Brian Hodges was awarded the 2016 Karolinska Institute Prize for Research in Medical Education in recognition of his research and work in mental health simulation, psychiatry communication skills and for developing the Psychiatry OSCE (Objective Structured Clinical Exam).

This major international Prize is awarded for outstanding research in medical education.

Dr. Hodges continues to develop approaches to help health professionals improve their clinical skills, communication and team-based practice.

Dr. Brian Hodges (far right)
“We train one-quarter of psychiatrists in Canada. This pilot has forced us to look at ourselves and ask: What should the psychiatrist of the future look like?”

**Revamped Curriculum Highlights:**

- **Underserved Selective:** Evidence suggests that residents who have the opportunity to work with underserved populations very early on in their training are more likely to serve these populations in their future practices. PGY1 residents now have a series of Underserved Selectives to choose from, ensuring they are exposed to a broad range of underserved groups, based on a variety of factors, including ethnicity, geography, sexuality, and socioeconomic status.

- **“Double Down” on the Emergency Room Experience:** PGY1s will now experience two months of emergency room training (instead of one) and then a new experience in that setting in the senior years. Our pilot recognizes that the emergency room is a significant aspect of the residents’ psychiatry experience; increased hours in the ER will give our trainees valuable time to observe and learn from their teachers on the ground while practising interviewing, diagnoses, pharmacology and psychotherapeutic interventions.

- **Psychiatric Homeroom:** This program brings PGY1s back from other services once a month to talk about the interface between mental health and physical health. It helps them understand complicated cases they may experience on other services through a psychiatry lens.

- **Longitudinal Ambulatory Clinic:** We offer a weekly, half-day clinic that allows trainees to follow patients’ illnesses long-term, enhancing their capacity to understand and treat chronic mental health issues.

- **Springboard:** To enhance and standardize the individual skills of each student, we now offer a four-week course at the beginning of the PGY1 year. This course identifies trainees’ weaknesses and allows them to improve their skills via interactive small-group seminars and clinical activities.
“Our research techniques need to be as multi-faceted and intricate as autism itself. We need to move away from ‘one exposure equals one outcome’ thinking, and instead dig deep into the complexities of mental illness, weighing risks and benefits.”
ANTIDEPRESSANT USE IN PREGNANCY NOT LINKED TO AUTISM IN CHILDREN

Dr. Simone Vigod and her team of researchers are helping pregnant women who suffer from depression or anxiety to navigate their path of treatment.

“There is a real stigma around taking antidepressants during pregnancy. For most women, their number one concern is the health of their baby over their own. However, it is important to consider the impact that not treating mental illness can have on a fetus,” says Dr. Vigod, Associate Professor in the Department of Psychiatry, and Lead of the Reproductive Life Stages (RLS) Program at Women’s College Hospital.

In her recent study, Dr. Vigod tracked 35,906 births in Ontario from 2002 to 2010. Her work, which was published in the Journal of the American Medical Association (JAMA) on April 18, 2017, has found that antidepressant use in pregnancy is not linked to autism in children, debunking previous research that suggested a correlation.

“While women who used antidepressants did have a slightly higher risk of having a child with autism, this connection was much more tenuous when we accounted for other factors, such as genetics, severity of the mother’s illness and other environmental factors. Autism and depression are genetically linked, so there is a complexity here that we need to further explore,” explains Dr. Vigod, who was recently appointed as Director, Division of Equity, Gender and Population for the Department.

“This study serves as a model of how diligent we have to be when conducting research, accounting for a wide variety of factors. We need to raise the bar when it comes to analyzing and comparing groups of people. Otherwise, data can be misrepresented,” says Dr. Vigod. “Our research techniques need to be as multi-faceted and intricate as autism itself. We need to move away from ‘one exposure equals one outcome’ thinking, and instead dig deep into the complexities of mental illness, weighing risks and benefits.”

Dr. Vigod took a three-pronged approach to her research:

• High-Dimensional Propensity Score (HDPS): Using HDPS to balance exposure group differences, Dr. Vigod found that taking selective serotonin reuptake inhibitors (SSRIs) in pregnancy is not independently linked with a greater risk of child autism.

• Sibling Comparison: Dr. Vigod found that there was no difference in autism risk between siblings whose mother had taken SSRIs antidepressants during one pregnancy and not the other.

• Mother Comparison: Looking at mothers who took antidepressants during pregnancy, and those who stopped before pregnancy, Dr. Vigod found no difference in risk of autism.

THE NEUROBIOLOGY OF AGGRESSION

Dr. Nathan Kolla, Assistant Professor and Head of the Violence Prevention Neurobiological Research Unit at the Centre for Addiction and Mental Health (CAMH), is investigating the neurobiology of aggression and impulsivity in a variety of psychiatric disorders.

He is leading a study that uses positron emission tomography to measure fatty acid amide hydrolase (FAAH) in the brains of individuals with borderline personality disorder (BPD) and antisocial personality disorder (ASPD). FAAH is a component of the endocannabinoid system that controls cell signalling pathways. It has also been implicated in the pathophysiology of violence in ASPD and BPD. This Canadian Institutes of Health Research (CIHR) funded study aims to discover whether brain levels of FAAH are altered in ASPD and BPD participants who have been violent.

In another recent study, Dr. Kolla is using magnetic resonance imaging to determine whether a psychological treatment aimed to reduce aggression is associated with brain changes. He is examining young people with conduct disorder (CD) who will undergo brain scanning and have blood samples taken prior to their involvement in a program called Stop Now And Plan (SNAP). After finishing SNAP treatment, they will undergo scanning and biomarker analysis again to determine how clinical treatment relates to brain changes.

DR. ARISTOTLE VOINESKOS NAMED TOP 40 UNDER 40

Dr. Aristotle Voineskos, Associate Professor and Director of the Slait Family Centre for Youth in Transition at the Centre for Addiction and Mental Health (CAMH), has been named to the Top 40 Under 40 list of Canada’s top young movers and shakers. One of only five scientists or doctors who made the list, Dr. Voineskos is recognized for leading substantial improvements in access to treatment for young Canadians with early signs of mental illness.

He is also leading new brain imaging research as Head of the Kimel Family Translational Imaging-Genetics Laboratory.
“Targeted peptide treatments have the potential to reduce side effects for people living with depression and schizophrenia. Side effects can discourage people from taking drugs that are critical for their mental health. We are going to change this.”
HITTING THE TARGET

Dr. Fang Liu, Senior Scientist in the Centre for Addiction and Mental Health (CAMH) Campbell Family Mental Health Research Institute and Professor in the Department of Psychiatry, is developing targeted peptide treatments that are leading to the development of better drugs to treat mental illnesses, such as depression and schizophrenia. “Compared to current medications, these targeted peptide treatments have the potential to reduce side effects for people living with depression and schizophrenia,” says Dr. Liu. “Side effects can discourage people from taking the drugs that are critical for their mental health. We are going to change this.”

BETTER TREATMENT FOR SCHIZOPHRENIA

Current medications that treat schizophrenia work by blocking the actions of dopamine, a neurotransmitter, on receptors of the brain. This blockage can alleviate symptoms, but it can also interfere with necessary neurotransmitter signalling, leading to side effects like slow gait, stiffness and tremor.

In search of a solution that would treat the symptoms of schizophrenia with minimal side effects, Dr. Liu discovered that brain receptors associated with schizophrenia (called dopamine D2 receptors) combine with a protein called Disrupted-In-Schizophrenia (DISC1), and this combined protein is elevated in schizophrenia.

Armed with this new knowledge, Dr. Liu has generated a peptide that prevents the binding of DISC1 with D2 receptors. Disrupting the formation of this protein has demonstrated antipsychotic effects in preclinical models, without side effects.

NASAL SPRAY DEPRESSION TREATMENT

Dr. Liu has also developed a highly targeted protein peptide for treating depression that has minimal side effects. This protein peptide could not cross the blood-brain barrier when taken orally.

Her team, supported by the Canadian Institutes of Health Research (CIHR), has found a non-invasive, alternative way to deliver the peptide treatment: a first-of-its-kind nasal spray. In preclinical models, the spray relieved depression-like symptoms with few side effects.

Dr. Liu continues to explore and perfect these and other highly targeted therapeutic approaches in her lab. As she works toward collaboration with industry partners, Dr. Liu is optimistic that her research will translate to clinical advances.
DECODING DEMENTIA

Dr. Krista L. Lanctôt is committed to optimizing the pharmacotherapy of cognition and neuropsychiatric symptoms (NPS) associated with dementia and predementia states.

As a Full Professor in the Departments of Psychiatry and Pharmacology/Toxicology at the University of Toronto, and Senior Scientist in the Hurvitz Brain Sciences Program at Sunnybrook Research Institute, Dr. Lanctôt is an active researcher in clinical pharmacology and has published over 250 manuscripts.

She is recognized for her approach to using biomarkers to identify and predict response to new treatments for NPS. Currently, Dr. Lanctôt is a Principal Investigator on several repurposing trials, including a clinical trial which examines methylphenidate as a treatment for apathy in patients with Alzheimer’s disease, funded by the National Institutes of Health. She is also exploring the effects of N-acetylcysteine on cognition in patients with vascular cognitive impairment.

FORENSIC EARLY INTERVENTION SERVICE

Dr. Kiran Patel, a Forensic Psychiatrist with the Centre for Addiction and Mental Health’s (CAMH) Complex Mental Illness Program, is lending his leadership to the Forensic Early Intervention Service (FEIS). This collaboration between CAMH, the Ministry of Community Safety and Correctional Services and the Ministry of Health and Long-Term Care provides screening and detailed assessment of remand inmates at the Toronto South Detention Centre and the Vanier Centre for Women.

FEIS works to enhance the care and treatment of inmates, support their transfer to hospital and more efficiently guide their criminal justice pathway where mental health is a key feature.

“FEIS highlights, and attempts to address, the complex needs of one of the most stigmatized and marginalized groups within our society: mentally ill prisoners. Every intervention we undertake helps bring the individuals we work with closer to good mental health, freedom from addictions and a return to being a functional and active member of society.”
“Various factors, including stigma, schedules, geography and the nature of mental illness prevent people from getting help. We have developed an internet-based, flexible model of care that circumvents these obstacles.”
Dr. David Gratzer and his team at Scarborough and Rouge Hospital’s (SRH) Mental Health Department have developed Canada’s first and only community-hospital delivered, internet-assisted cognitive behavioural therapy (iCBT).

“We fall short in the delivery of psychiatric care; for example, a recent study showed that only half of Canadians with depression receive treatment. With any other illness, this would be an unacceptable statistic,” says Dr. Gratzer, Assistant Professor in the Department of Psychiatry.

“Various factors, including stigma, schedules, geography and the nature of mental illness prevent people from getting help. We have developed an evidence-based, flexible model of care that circumvents these obstacles.”

Dr. Gratzer and his SRH team recently received the Award of Excellence in Mental Health and Quality Improvement from the Canadian College of Health Leaders for their iCBT model. Available through a physician’s referral, iCBT is an adult outpatient program designed to increase access to care. It allows participants to complete weekly modules in a time and space that works for them. Then, participants send the modules back to a dedicated SRH therapist for feedback and guidance. The program also includes videos and interactive content designed to alleviate symptoms of depression and anxiety.

“Patients who need CBT usually face long wait times and a lack of access to therapy outside of regular business hours,” says Dr. Gratzer. “Literature shows that success rates for iCBT rival face-to-face therapy, because it is unbound by the schedules and geography of participants. For a busy single mother or shift-worker who is unable to visit us during regular hours, this allows them to access treatment wherever and whenever it is most convenient for them. For people who live in remote areas or are unable to leave their home, this technology is a game-changer.”

In fact, the success of iCBT has inspired the creation of iMindful, a new program developed specifically for cancer patients undergoing chemotherapy treatment. “Ideally, when a patient comes to the hospital, they will have access to both internet and in-person therapy, empowering them to create a treatment plan that meets their unique individual needs.”

In Ethiopia, there is limited understanding of mental health issues among the general population; many people suffering from common mental disorders are undiagnosed and untreated. Ethiopia also suffers from a severe shortage of physicians and chronic brain-drain. Dr. Clare Pain, Associate Professor in the Department of Psychiatry and Director of the Psychological Trauma Program at Mount Sinai Hospital, has devoted much of her career to helping provide mental health services to Ethiopians. She is leading a variety of initiatives to train Ethiopian psychiatrists and mental health workers.

**Toronto Addis Ababa Psychiatry Project (TAAPP):**

TAAPP is an educational collaboration between the Department of Psychiatry, University of Toronto and the Department of Psychiatry, Addis Ababa University. The project has built and sustained the first psychiatry residency program in Ethiopia, greatly increasing the number of practising psychiatrists. There are now five departments of psychiatry outside the capital city of Addis Ababa, run by graduates of TAAPP.

**Toronto Addis Ababa Academic Collaboration (TAAAC):**

A more recent extension of the TAAPP project, TAAAC has built over 20 subspecialist medical programs in Ethiopia, facilitated by faculty mentors from the University of Toronto.

**The Biaber Project - Scaling Up Interpersonal Psychotherapy (IPT) for Common Mental Disorders in Ethiopia:**

An initiative of TAAPP, this program trains a network of Ethiopian health workers to provide culturally sensitive mental health treatment to people in their own communities. To date, 20,000 patients have been screened, and more than 500 primary care nurses working in 20 primary health clinics have been trained through the project.
PROJECT ECHO ONTARIO MENTAL HEALTH

EXTENSION FOR COMMUNITY HEALTHCARE OUTCOMES (ECHO)

This model builds primary care provider (PCP) capacity in the treatment of chronic illness, providing PCPs with guidance and training about current evidence-based best practice, reducing the need for specialist visits and improving the quality of care for patients in rural and underserved areas.

PROJECT ECHO ONTARIO MENTAL HEALTH AT THE CENTRE FOR ADDICTION AND MENTAL HEALTH (CAMH) AND THE UNIVERSITY OF TORONTO

CO-CHAIRS
Dr. Allison Crawford
Dr. Sanjeev Sockalingam
Linda Mohri

MANAGER
Eva Serhal

PARTNERS
Medical Psychiatry Alliance (MPA)

FUNDING
Ministry of Health and Long-Term Care
3-Year CIHR Grant (2017)

Project ECHO Ontario Mental Health has created a community for mentoring primary care providers via televideo. Since its launch in 2015, Project ECHO Ontario Mental Health has registered 336 primary care providers across 53 sites in Ontario, and has offered 80 educational sessions. Their team’s research has evaluated the evidence for Project ECHO globally, and demonstrated knowledge outcomes for primary care providers.

Project ECHO Ontario Mental Health is also working to expand integrated care to meet the needs of First Nations, Inuit and Métis patients and communities across Ontario. In March 2016, the team launched ECHO Ontario First Nations, Inuit, and Métis Wellness to create a community of practice for primary care providers working with Indigenous clients across Ontario. “ECHO Ontario First Nations, Inuit, and Métis Wellness aims to engage with Indigenous providers and communities to address the health disparities and fragmentation in care that exist for Indigenous peoples across Ontario,” says Co-Chair and Assistant Professor Dr. Allison Crawford.

Collaborating with CAMH experts in mental health, addiction medicine and Elders and Indigenous Social Workers, this project is developing an integrated approach to mental wellness. It encourages best-practices in healthcare and Indigenous knowledges, and integrating patients’ physical, mental, emotional and spiritual needs within the context of family and community.
AWARDS & HONOURS

The Department of Psychiatry faculty members receive recognition for their research, teaching, leadership and dedication to the psychiatry profession. What follows is a sampling of the many diverse honours earned by members of the Department of Psychiatry in 2016-2017 in recognition of their commitment, skill and impact on the communities in which we live and work.

INTERNATIONAL

Kenneth Fung – American Psychiatric Association (APA) Fellowship
Raed Hawa – APA Distinguished Fellow
Brian Hodges – Karolinska Institute Prize for Research in Medical Education
Benoit Mulsant – Distinguished Scientist Award, American Association for Geriatric Psychiatry
Gail E. Robinson – President of The American College of Psychiatrists
Nadiya Sunderji – Association for Academic Psychiatry Early Career Development Award
Anne Bassett – CPA Fellow
Sidney Kennedy – Fellow, Canadian Academy of Health Sciences
Paul Kurdyak – CPA Fellow
Dilkhush D. Panjwani – 2016 Prix d’excellence - Specialist of the Year, Royal College
Mark Rapoport – CPA Paul Patterson Innovation in Education Leadership Award
Mark Sinyor – 2017 CPA Career Achievement in Psychiatry Award
Ariel Shafro – 2017 W.T. Aikins Award for Excellence in Individual Teaching Performance in Small Group
Sanjeev Sockalingam & David Wiljer – FMEC CPD Project
Leigh Solomon – Appointed Interim Psychiatrist-in-Chief, North York General Hospital
Vicky Stergiopoulos – Appointed Physician-in-Chief for the Centre for Addiction and Mental Health
Rachel Tyndale – 2016–17 Faculty of Medicine Graduate Teaching Award for Sustained Excellence in Graduate Training and Mentorship
Tom Ungar – Appointed Psychiatrist-in-Chief at St. Michael’s Hospital

NATIONAL

Bruce Ballon & Ayal Schaffer – Canadian Psychiatric Association (CPA) - Council of Psychiatric Continuing Education (COPCE) Award for the Most Outstanding Continuing Education Activity in Psychiatry in Canada
Anne Bassett – 2017 Institute of Medical Science (IMS) Mel Silverman Mentorship Award
Paul Kurdyak – CPA Fellow
Sidney Kennedy – Fellow, Canadian Academy of Health Sciences
Dilkhush D. Panjwani – 2016 Prix d’excellence - Specialist of the Year, Royal College
Mark Rapoport – CPA Paul Patterson Innovation in Education Leadership Award
Mark Sinyor – 2017 CPA Career Achievement in Psychiatry Award
Ariel Shafro – 2017 W.T. Aikins Award for Excellence in Individual Teaching Performance in Small Group
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Tom Ungar – Appointed Psychiatrist-in-Chief at St. Michael’s Hospital

PROVINCIAL

Tatyana Barankin – Ontario Medical Association Life Time Achievement Award
Kenneth Fung – 2017 CPSO Council Award
Sonu Gaid & Kwame McKenzie – Expert Panel on Medical Assistance in Dying
Justin Geagea – 2017 Ontario Psychiatric Association Psychiatrist of the Year Award
Kwame McKenzie – Commissioner, Ontario Human Rights Commission

LOCAL/INTERNAL

Anne Bassett – 2017 Institute of Medical Science (IMS) Mel Silverman Mentorship Award
Saulo Castel – Appointed Director, Mental Health and Addictions Acute Care Alliance
Carla Garcia – Appointed Associate Director, Undergraduate Education, Department of Psychiatry
Cindy Grief and Ms. Sokoloff – University of Toronto Faculty of Medicine Colin Woolf Award for Excellence in Course Coordination, 2015-2016, for Geriatric Mental Health Education Network (GeMH)
Jon Hunter – 2017 Award for Excellence in Postgraduate Medical Education in the category of Teaching Performance, Mentorship and Advocacy
Krista L. Lanctôt – 2016–17 Faculty of Medicine Graduate Teaching Award for Sustained Excellence in Graduate Training and Mentorship
Elizabeth Lin – Appointed Evaluation and Measurement Lead, Department of Psychiatry
Julie Maggi – Appointed Director of Resident Wellness, University of Toronto

Peter Szatmari – Kanner - Asperger Medal from the Society for Research in Autism Spectrum Conditions for “Outstanding achievements in research on autism spectrum conditions”
LEADERSHIP TRIBUTE

DR. MOLYN LESZCZ

“My wish for the future of psychiatry is that we honour deeply the privilege and duty we have to promote and advance the mental health and wellbeing of our patients and our communities.”

Dr. Molyn Leszcz, Vice-Chair, Clinical, has completed his term. Much credit goes to Dr. Leszcz for his outstanding leadership in this role, and we would like to thank him for his significant contributions to our Department.

As Co-Chair of the Toronto Mental Health and Addictions Acute Care Alliance, Dr. Leszcz has worked to link seven hospitals, the University of Toronto and the Toronto Central LHIN, in coordination and integration of acute care. Dr. Leszcz has overseen our Department’s divisional structure with regard to leadership recruitment, establishing terms of reference for the Directors and leading the Council of Divisions meeting. He has served as the executive sponsor of our Pillar IV Strategic Plan Initiative with responsibility for the development of Mindfest as our signature anti-stigma event.

In response to issues around equity and access, Dr. Leszcz has facilitated the development of our Government Relations Committee. He has also played a key role in the development of the integrated mental healthcare initiative for PGY5s, placing them in community agencies under supervision.

We are incredibly grateful to Dr. Leszcz for his dedication to this important role.

DR. SUSAN LIEFF

“As psychiatrists, we are privileged to bear witness to the complexity of our patients’ lives, and to be entrusted with contributing to their mental healthcare. Let’s be worthy of that trust.”

After eight years of outstanding leadership as Vice-Chair, Education, Dr. Susan Lieff has completed her term. We would like to thank Dr. Lieff for her commitment and dedication to this role. Her time as Vice-Chair, Education has strengthened the educational excellence, scholarship and innovation of our Department.

Among her many accomplishments, Dr. Lieff spearheaded the development of Donald Wasylenki Day, created the Departmental Education Development Fund competition, and created our Education Awards Database and strategy. Dr. Lieff led the creation of various new roles in the Department and created the Subspecialty Directors Group.

She revitalized the Education Council into a collaborative group that identifies and supports educational development and innovation across the continuum of education, and has supported, advocated for and mentored the Educational Directors in their roles.

We are grateful to Dr. Lieff for her leadership as Vice-Chair, Education.
SUPPORT AND RECOGNITION

Thank you to our donors, who have invested in our collective future and the people who will define it. Your support is helping us to attract the best faculty, scientists and students. We are developing the next generation of psychiatry clinicians, educators and researchers who will invent and implement a renewed psychiatry.

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