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Inside



Ho-down at 5-HT corral: brief, totally serious summary of serotonin symposium page 2



Channeling staff moves on and up page 11



Home run! Frank Pancho Womack in Longhorn Hall of Honor page 8



The Emissary

Texas Research Institute of Mental Sciences, Houston

Dec.-Jan. 1981-82



Marc Meyers

Serotonenergetic action at symposium: Barbara Dufresne and Dr. Beng T. Ho

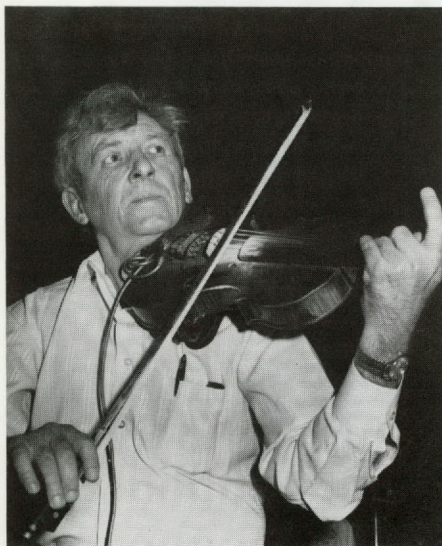
New brain information from an international gathering

Scientists from throughout the United States and from Holland, Israel, England, and Switzerland convened at the institute's 15th annual symposium, Serotonin in Biological Psychiatry.

The meeting Nov. 4-6 at the Shamrock Hilton Hotel was co-chaired by Dr. Beng T. Ho, chief of the TRIMS neurochemistry and neuropharmacology section, and Drs. Earl Usdin and Erminio Costa of the National Institute of Mental Health.

Serotonin is a central neurotransmitter, that is, a chemical that communicates information from one neuron to another in the brain. The major aspects of serotonin's activity were covered in conference reports ranging from regulation of the enzyme that synthesizes serotonin to the neurotransmitter's role in depressive illness and personality disorders. The presentations were without exception well attended and most precipitated lively discussion. A few high points of the meeting are presented here.

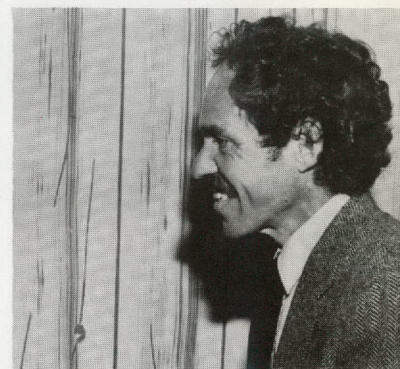
by Peter Silverman, Ph.D.



A little country music got mixed with serotonin. The reception, for obvious reasons, was named a Ho-down for its chief organizer.

1 After a greeting and brief historical overview by Dr. Joseph Schoolar, TRIMS director, the pace of the meeting was set by Dr. Arnold Mandell. In a vibrant presentation, Mandell discussed the activity of tryptophan hydroxylase, the first enzyme in the biosynthetic pathway of serotonin. Mandell suggested that lithium, a current and effective treatment for mania, acts by increasing the milieu viscosity and phase coherence of the enzyme.

Dr. Elaine Sanders-Bush discussed the physiological regulation of serotonin release from neurons. She pointed out that blood platelets, frequently used to model central serotonergic processes, do not contain serotonin-binding protein, an important difference between platelets and neurons.

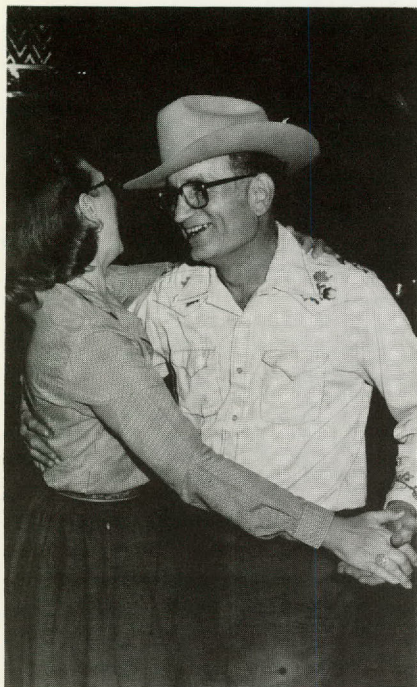


Dr. Arnold Mandell

Dr. John Fernstrom explained that dietary factors are important determinants of blood levels of the precursor of serotonin, tryptophan. The discussion of endocrine regulatory aspects of serotonin by Dr. Herbert Meltzer wrapped up the first day's presentations.

2 The morning of the second day was largely devoted to considerations of serotonin receptors. Dr. Stephen Peroutka presented current thinking on serotonin receptors and showed evidence that there are, in fact, two types of serotonin receptor, one associated with the inhibitory effects of serotonin, the other associated with its excitatory effects. Interestingly, both types of serotonin receptor show high affinity for the hallucinogen, LSD.

The afternoon session consisted of poster presentations, among them two summaries of research done in our section, followed by a panel discussion.



3 The last day of the meeting was devoted to serotonin uptake, the process by which serotonin is taken up into neurons, and to clinical considerations. The importance of uptake is that inhibition of this process has been suggested as the mechanism by which antidepressants work. Dr. Ray Fuller discussed pre-

Drs. Ray Fuller and John Fernstrom



clinical work with fluoxetine, a relatively new compound that is a highly selective serotonin uptake inhibitor.

Dr. John Feighner then presented preliminary data from clinical trials in which fluoxetine was compared with the much used antidepressant, amitriptyline. The data suggest that fluoxetine is as effective and has fewer side effects.

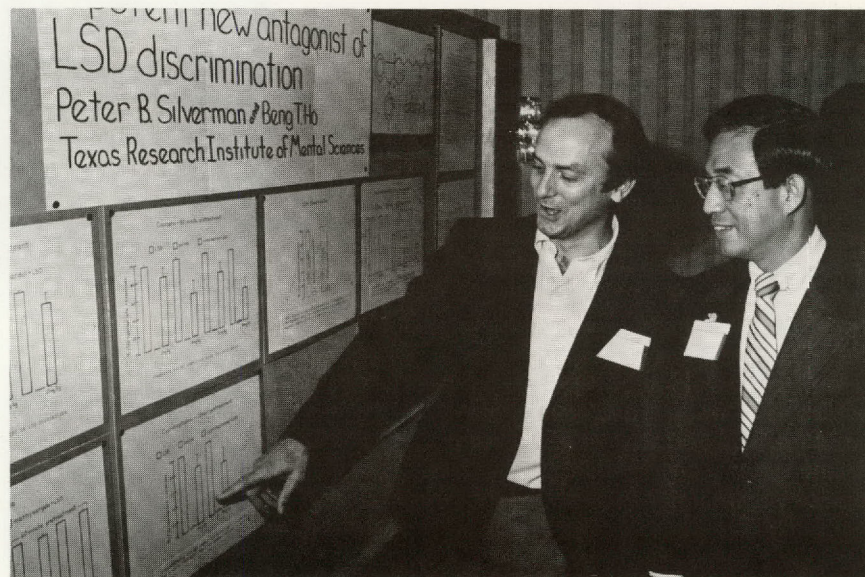
Dr. Herman van Praag discussed his work with 5-hydroxytryptophan, a serotonin precursor, as both a therapeutic agent for depression and for prophylactic treatment. When questioned about the cost of such treatment, van Praag admitted that he and his collaborators had indeed discussed the possibility that giving patients the money the drug costs, instead of the drug, might be just as good for depression.

In the last formal presentation, Dr. Gerald Brown reported the thought-provoking correlation between low cerebrospinal levels of 5-hydroxyindole acetic acid, a serotonin metabolite, and aggressive antisocial behavior.

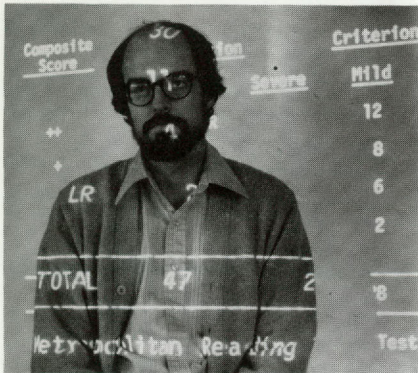
Dr. Earl Usdin then closed the meeting with a succinct summary of the proceedings, accompanied by beautiful slides of flowers and trees. Usdin managed to get in several plugs for the book version of the symposium which is to be published by Raven Press in a few months.

All in all, a very informative and pleasant way to spend three days.

Betty and Dr. Joseph Schoolar on dance floor, left, and Drs. Peter Silverman and Beng Ho at poster session.



Dr. Jack M. Fletcher marked, temporarily, by one of his slides.



State school workers have chance to join work on behavior scale

Hispanic data especially vital

Adaptive behavior, in its plainest terms, means getting along in the world and doing what's expected at one's age and place in life.

For the ordinary five-year-old child, on a school day, this might be that she's eaten her cereal with a spoon, drunk her milk without spilling it on the floor for the cat, tied her sneakers and arrived at her kindergarten classroom without inciting a revolt in the carpool. She's learning numbers and letters and she can sing approximately on key. Some day she might be a secretary or a Supreme Court justice.

Measuring adaptability—or social maturity, as it's also called—is different for mentally retarded children and adults. Their ability to perform normal tasks of living has nothing to do with their actual age—a retarded person might be 24 years old and function at the kindergarten child's level. Moreover, each retarded person has different strengths and deficits, and to train him and her to reach the highest level of functioning in life requires a precise kind of assessment.

current tests inadequate

Although many researchers have come close to developing that kind of psychometric instrument, most of those currently available are "standardized poorly" and few are appropriate or even legal for classifying mental retardation, says Dr. Jack M. Fletcher, chief of the TRIMS neuropsychology research section.

In the early 1930s Edgar Doll designed the Vineland Maturity Scale which, Fletcher says, "was largely ignored despite his emphasis on

the need for assessing social competence in mentally deficient individuals."

Other attempts to develop accurate assessments of mentally retarded persons followed, but they all had problems of proper and reliable standardization, and they were not applicable to mentally retarded persons who live in institutions.

All this is, of course, leading up to say that TDMHMR state schools for the retarded have been asked to join an effort to develop norms and standards for an updated Vineland Social Maturity Scale, and Fletcher is coordinating the Texas contribution.

Researchers and clinicians in 32 states are involved in the work, which will include a sample of 3,000 normal children from birth to age 19. In addition, Fletcher says, norms will be obtained for five exceptional samples of 600 persons each: mentally retarded people in residential and nonresidential settings, and emotionally disturbed adolescents in residential settings.

Under development for five years, the new Vineland version measures adaptive behavior in communication, daily living, socialization, and motor movement. The project is led by Drs. Sara Sparrow and David Balla of Yale University and by Dr. Domenic Ciccetti of the New Haven Veterans Administration, under a contract with the American Guidance Service. The data will be compiled by the end of next year and the scale will be available in 1983.

The Texas contribution will be important because it is expected to include tests of a Spanish-speaking population. State school staff members have long asked for an accurate testing instrument for Hispanic clients and, Fletcher says, "this is their chance to help produce it."

The scale is fairly short, each interview taking only about 30 minutes. Fletcher and neuropsychology researcher Susan Landry discussed the Vineland work at their recent workshop at TRIMS, and they are ready to help interested state school staff members join the project.

—Lore Feldman

COMNET teleconferences begin Jan. 6 statewide

Detailed DSM-III review broadcast monthly on new telephone network

Round two of the office of continuing education's efforts to train TDMHMR staff members in the use of *DSM-III* begins Jan. 6 with the first teleconference.

Discussions of the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders (Third Edition)* will be broadcast monthly from TRIMS to all state hospitals, state schools, human development centers, and central office over a new network called COMNET.

The conferences take place on the first Wednesday of each month from 3 to 4 or 4:30 p.m. in classrooms set aside by each facility. The series ends Sept. 1.

Using *DSM-III* and the *DSM-III Training Guide* published by the office of continuing education (see related story on page 16), the conferences will be led by TRIMS faculty members. Each location has identical equipment consisting of voice amplifiers, speakers, and microphones. The *DSM-III Training Guide* and slides will be mailed in advance of the conferences.

The series begins with a general overview of *DSM-III*, followed Feb. 3 by a discussion of basic concepts and the major classifications.

The seven remaining programs will provide a thorough review of each major *DSM-III* classification:

March 3—disorders first evident in infancy, childhood, and adolescence.

April 7—psychosexual disorders, factitious disorders, disorders of impulse control and adjustment.

May 5—substance abuse and organic mental disorders.

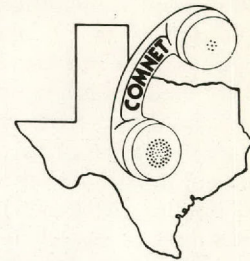
June 2—personality disorders.

July 7—schizophrenic, psychotic, and paranoid disorders.

Aug. 4—affective disorders.

Sept. 1—anxiety, somatoform, and dissociative disorders.

Serving on the faculty are Dr. Joseph C. Schoolar, TRIMS director; Dr. James L. Claghorn, assistant director; Dr. Carlo DiClemente, chief, alcoholism treatment clinic;



Mary Beth Holley, assistant chief, family therapy training program, and training coordinator, child and family section; Dr. Edwin E. Johnstone, director, psychiatric residency training program; Dr. Steve McColley, clinical psychologist, inpatient service; Dr. Timothy Sharma, chief, substance abuse section; and Dr. Kenneth S. Solway, chief, clinical psychology and social services training section.

The teleconferences carry continuing education credits. For more information, contact the office of continuing education.

We can help

The Public Responsibility Committee composed of volunteers from the community has been established to assist in protecting the rights and interests of every patient in the care of the Texas Research Institute of Mental Sciences (TRIMS).

Complaints, questions, concerns or suggestions may be made known by writing to:

Chairman
Public Responsibility Committee
P.O. Box 20391
Houston, Texas 77025

Legal note

by J. Ray Hays, Ph.D., J.D.

L Consent to hospitalization

A question was raised in a recent division and section heads' meeting about the capacity of an individual to consent to hospitalization. A psychiatrist was concerned about admitting to the hospital an elderly woman who, because of her confused mental state, could not give adequately informed consent to be admitted. By equating mental state with competence, the psychiatrist's question illustrated the difference in approach to problems of consent between physicians and lawyers.

Legal competence is a word of art in the law and differs from competence as a psychiatrist or psychologist thinks of it. A recent attorney general's opinion (MW-339) is an excellent source of legal definitions of consent. "Legally adequate consent" requires, first, that the person giving consent must have the legal capacity to do so, which means he or she must be of minimum legal age and not have been adjudicated incompetent to manage his or her personal affairs. Second, the person giving consent must be informed about and comprehend the nature, risks, and benefits of the proposed treatment, as well as treatment alternatives. Third, the consent must be given voluntarily, free from coercion or undue influence.

presumed competent

An adult is presumed to be legally competent. In the case of the elderly patient in question, the admitting physician must make a clinical decision about the patient's ability to comprehend adequately the nature and risks of psychiatric hospitalization, weighing these against alternatives.

If the physician decides that the patient cannot give informed consent, yet hospitalization is required, the physician must seek the patient's involuntary commitment. As part of an indefinite commitment proceeding, a jury will determine whether or not the person is mentally ill, whether or not hospitalization is required for the protection of the patient or others, and whether or not the person is competent.

Texas law does not equate mental illness with incompetence. One can be mentally ill and still competent for all purposes, including giving informed consent to hospitalization. Commissioner's Rule 302.04.23.007, however, favors voluntary hospitalization, stating that "facilities shall encourage courts, practitioners, referral agencies, and other appropriate parties to pursue voluntary admissions in preference to involuntary commitment."

The physician's judgment about the need to hospitalize a patient and about the patient's ability to consent cannot be faulted if the decision is made in a reasonable way. The admitting physician must, of course, do what is best for the patient in view of the totality of the patient's circumstances.

My legal advice is to do what any good physician would do, which comes close to the admonition I used to hear from older and wiser colleagues to whom I presented a moral dilemma. The inevitable response was, "Do what's right." Although that principle will not prevent a physician from being sued, it goes a long way toward protecting the physician from losing the lawsuit.

Employee relations group has new members

The first TRIMS employee relations committee completed its term and new members were appointed by Dr. Joseph Schoolar last month.

New members are Peter Baer, Annette Baptiste, Norma Davidson, Dr. Jaime Ganc, Dr. Charles Harrington, Myrna Khan, Nita Martin, Coy Nolley, Jane Peterman, Wallace Ragan, Ira Sams, Jane Sanborn, Mark Szurek, Rev. William Tallavast, and Jerry Werner. Joyce Sanders, chair of the first committee, and Paul Phillips, former vice chair, will serve as ex-officio members of the committee until the end of January.

The five task forces established by the previous committee to look into employees' wishes presented their findings and recommendations to Schoolar. The task forces dealt with new employee orientation, pay policies, employee services, parking, and the snack bar.

Schoolar wrote members that he had forwarded the reports to administrator Frank Womack to study and to report back "the actions we should take to resolve the issues. Through your efforts we have been made aware of conditions that could, should they be allowed to continue, decrease our effectiveness."

Holiday Greetings!

This Christmas card was designed by Jaime, a 12-year-old patient at M.D. Anderson Hospital and Tumor Institute. It is part of a collection of seven different cards sold by Anderson volunteers to benefit a special recreation and education fund for the hospital's young patients. The cards are available in the hospital gift shop at \$5 for a package of 20. If you've bought your cards already, maybe you would like these for next year.

Jaime's card is also *The Emissary's* way of wishing all our readers happy holidays and a productive, healthy new year.



Research review committee

lists approved projects

AAMD region elects Mirabi to top post

To disseminate information about research being conducted by Texas Department of Mental Health and Mental Retardation facilities, the Central Office Research Review Committee (CORRC) will issue, in this space, quarterly reports of projects the committee has approved.

In addition, *The Emissary* will print abstracts of completed research projects. For more information about any study, please contact the principal investigator.

Regional cerebral blood flow patterns in schizophrenia, depression, and pseudodementia in relation to age and cerebrovascular disorders. James L. Claghorn, M.D., and John Largen Jr., Ph.D., TRIMS. 78-0087 A-1. At risk.*

An analysis of some of the factors that may influence successful adjustment in community placement of previously institutionalized mentally retarded individuals. Bristol Mills, Richmond State School. 81-0081. Program evaluation. †

Amendment—Blood levels in psychiatric outpatient treatment. Robert C. Smith, M.D., Ph.D., TRIMS. 78-0083 A-2. At risk.

Clinical response to prolixin and its bioavailability in the treatment of schizophrenia. Joseph C. Schoolar, Ph.D., M.D., and Chester M. Davis, Ph.D., TRIMS. 81-0005. At risk.

A correlation of the WAIS-R with the WAIS for sixty psychiatric maximum security patients. Craig L. Moore, Ph.D., Rusk State Hospital. 81-0082. Not at risk. ††

Body image of mentally retarded persons: Changes resulting from a Special Olympics gymnastics program. Joannie Hill, Denton State School. 81-0020. Not at risk.

Effectiveness of in-home intervention for families with severely emotionally disturbed children. Mary Urmeneta, TRIMS. 81-0048. Not at risk.

Neuropsychological measures and EEG in normal control subjects. John W. Largen Jr., Ph.D., Robert C. Smith, M.D., Ph.D., and Ron Dossett, TRIMS. 80-0076. At risk.

An evaluation of the internal body concepts of emotionally disturbed and average adolescents. Asha Jogi, M.A., M.Ed., Austin State Hospital. 81-0018. Not at risk.

Neuropsychological patterns and neurophysiological responses in dementia. John W. Largen Jr., Ph.D., TRIMS. 81-0037. At risk.

The validation of a set of generalized regression equations on an institutionalized mentally retarded population. Richard A. Ness, Ed.D., Denton State School. 81-0075. Not at risk.

Employment opportunities for clinical geropsychologists. Paul K. Chafetz, Ph.D., TRIMS. 81-0031. Program evaluation.

Continuum of care study—to explore the existence of a continuum of care for children in out-of-home placement.

Michael Bruce (Texas Department of Human Resources), Austin State Hospital, and Waco Center for Youth. 81-0034. Program evaluation.

Addendum: A study of marriage in reconstituted families. Carol Ann Brady, Ph.D., TRIMS. 79-0050 A-2. Program evaluation.

Divorce and stepparenting: Preventive interventions and research issues. Carol Ann Brady, Ph.D., and Joyce Ambler, M.S.W., TRIMS. 81-0056. Program evaluation.

Type of dissolution of marriage and stepfamily adjustment. Carol Ann Brady, Ph.D., TRIMS. 81-0059. Program evaluation.

*The at-risk category applies to research involving human subjects and the use of experimental methods.

†Program evaluation research is defined as the rating or determination of the value of procedures and operations of service delivery.

††The not-at-risk category applies to studies with human subjects which do not use experimental methods or to studies which place the subject at no additional risk.



Dr. Mohsen Mirabi, a psychiatrist and chief of adult outpatient services, last month became second chairperson-elect of Region 5 of the American Association on Mental Deficiency (AAMD).

Having chaired the board of the AAMD Region 5 Medical Division for three years, Mirabi will head the organization from October 1983 to October 1984. AAMD Region 5, covering Texas, Arkansas, Louisiana, Oklahoma, Kansas and Missouri, includes physicians and other professionals concerned with the welfare of mentally retarded persons. It is the only interdisciplinary organization in the field of mental retardation in this country.

Mirabi's interest is in research and treatment of emotional disorders of the mentally retarded, and his goal is to recruit more psychiatrists to serving developmentally handicapped people. "Only one-third of one percent of psychiatrists in this country are involved in the field of mental retardation," he said. "And yet, because of their background and training, psychiatrists are uniquely equipped to contribute to the care of the mentally retarded."

Mirabi received his medical degree from the University of Vienna, Austria, and completed his residency training in psychiatry at Baylor College of Medicine in Houston. He is a clinical instructor in psychiatry at Baylor and a clinical assistant professor at the University of Texas Medical School at Houston.

For best defense in basketball, for
errorless outfielding and high-class pitching...

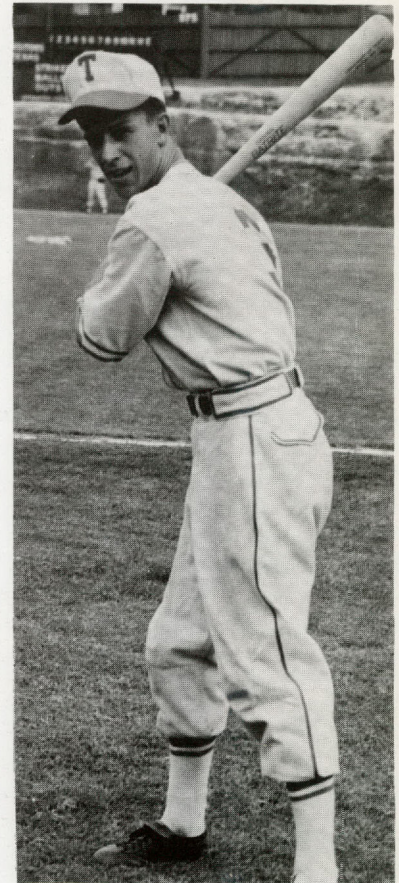
Womack is now in UT Hall of Honor

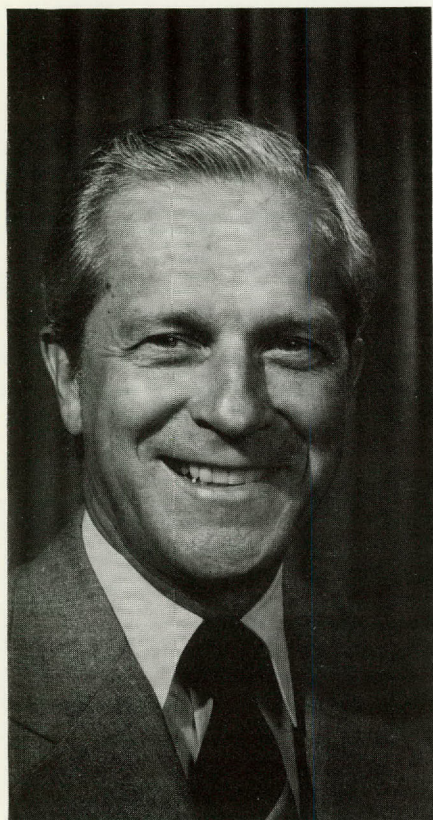


In Memorial Stadium during
halftime of the UT-Baylor
game Nov. 21, the crowd watched
Frank Womack, administrator of
TRIMS, being inducted into the
Longhorn Hall of Honor.

Womack, known as Pancho then,
was a 1949-51 basketball and base-
ball star whose exploits probably
have been duplicated, but not often
and by much taller people. Among
his fellow inductees—and you may
have heard of Dodger pitcher Burt
Hooton—Womack is the only one
who gave up games to get at least
part of his exercise from worrying
about budgets.

That's not to say Womack cannot
be recognized from his clippings. He
is 52, he plays tennis, and he plants
trees and feeds a few head of cattle
on his place in Simonton.





He started breaking records early and turned up in *Ripley's Believe It or Not* when, as a San Jacinto High School pitcher, he struck out 103 players in five games during American Legion state playoffs. A former



high school opponent of his, reminiscing in a recent *Austin American-Statesman* letters column, recalled a game in which Womack's signals were stolen by the other team, but he won anyway.

surprised 'em

At the University of Texas, Womack played on two national and four Southwest Conference basketball teams, his last as captain of a team nobody expected to go far. "Only the most optimistic rooters dared to suggest a title," says a newspaper story of the time.

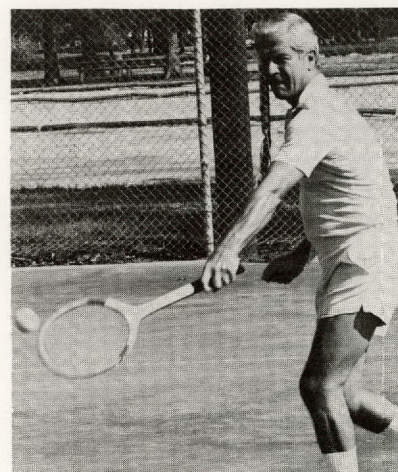
In the deciding championship game against A&M, Womack was the squad's "finest defensive player," holding the Aggies' leading scorer, Jewell McDowell, to zero points, the one and only time McDowell couldn't find the net for a whole, long evening.

As an outfielder on the UT varsity baseball team, Womack played

two seasons without errors and ran up an over-300 batting average. As a pitcher he won eight and lost one. On top of that he won an outstanding student award.

And now, some 30 years later, he got what he deserves, and you may see his portrait in the stadium field house.

—Lore Feldman



The hypothesis is that communication between certain brain regions is not as efficient in the learning-disabled child as in the normal child.

The method for testing the theory, explains Dr. Bernard Saltzberg, chief of the information analysis section, "involves analyzing electrical signals recorded from different

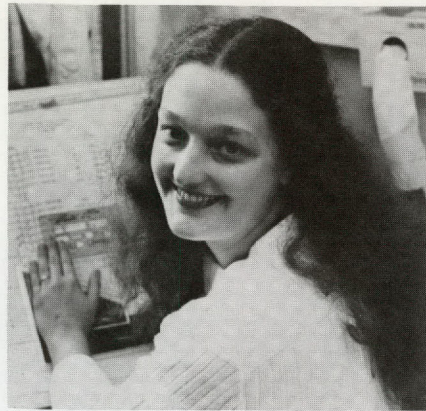
Computer study of EEGs may help identify the cause of learning disorders

brain regions, then computing the amount of shared information between them."

The measure of shared activity between two EEG signals is, in signal-processing theory, called "spectral coherence."

Miles of tape—electroencephalographic records of children with various types of learning problems—are being analyzed in his section. Saltzberg hopes to design a method of identifying the brain mechanisms that underlie learning problems. The goal down the road is to develop a classification system of learning disorders based on understanding the brain activity that is related to learning.

Saltzberg is widely known for the detection of brainwave spiking, and he is, not surprisingly, more at home with the vocabulary of mathematics and computer analysis, than with lay language.



Norma Davidson is the section's secretary, artist, editor-proofreader

35 children in study

Saltzberg is studying EEG data from 20 children with learning disorders and a control group of 15 age-matched normal learners. While their EEGs are being recorded, the children perform language and word recognition tasks, they match shapes and solve other kinds of problems believed to activate certain areas of the brain.

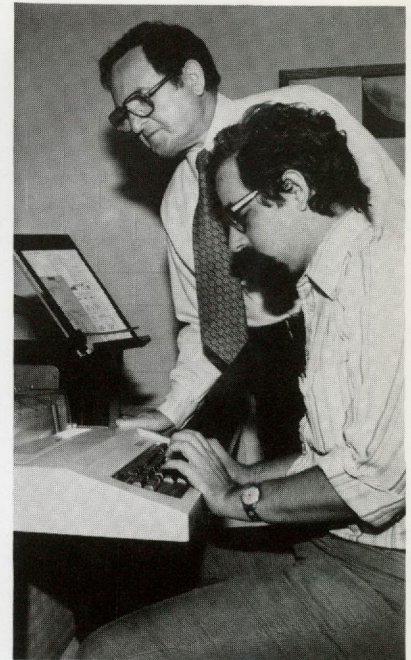
The project is a collaborative study with systems analyst William Burton, Dr. Robin Michael of the University of Texas department of psychiatry, and Dr. Jack Fletcher, chief of the TRIMS neuropsychology section. Fletcher and Michael selected the children, designed test protocols, and conducted the neuropsychological evaluations.

"We are trying to find out whether regions of the brain communicate in specific ways in certain cognitive states," Saltzberg explains. But, because the EEG of a learning-disabled child is perfectly normal superficially, the research requires deeper and more detailed analysis of multiple-channel EEGs than is required for an ordinary EEG evaluation.

Saltzberg and Burton use what they call a "frequency microscope"—the spectral coherence formula applied to the record via

computer—to identify the level of shared activity between EEG channels.

"We are trying to find out what takes place within the brain in



William Burton at keyboard, Dr. Bernard Saltzberg as the composer.

"We are trying to find out whether regions of the brain communicate in specific ways in certain cognitive states."

response to different stimuli and what pathways are involved when the brain is processing visual and auditory stimuli," Saltzberg says. "If we learn what brain pathways are activated in reading, for example, we may then be able to train a learning-disabled child to activate that pathway as a possible remedial measure."

The staff of the long-term care channeling demonstration project—now called Texas Project for Elders: Assistance with Long-Term Care—has added a new member, moved to new headquarters, and is getting ready to start seeing clients in February.

The four-year project will demonstrate and evaluate delivery of long-term community care of functionally impaired persons 65 or older. Houston is one of 10 sites throughout the country chosen to participate in the national project. The TRIMS Gerontology Center is the local administering agency for the Texas project.

Channeling staff members—Nancy L. Wilson, site director; Anne Morrison McNally, site coordinator; Sylvia Muckelroy, executive secretary; and a new case management supervisor, Betsy Baldwin—moved in November to offices in the Shamrock Professional Building, 2210 Maroneal. They've leased 10 rooms—offices and a conference room—on the fourth floor.

By January Wilson hopes to have hired nine more people: two intake and screening specialists, two nurses, a community outreach and development specialist, an administrative secretary, two records and data clerks, and a social case manager. Two additional project case managers will come from Sheltering Arms and the Texas Department of Human Resources. The project's intake and screening staff will be at TRIMS so they can work with the senior information and outreach service.

Wilson and McNally have been spending the last few months "planning service procedures and building community relationships so that we're prepared for delivering services," Wilson said. Before February project staff members will have to set up the new office, train new employees, pretest project procedures, and establish a management information system for compiling

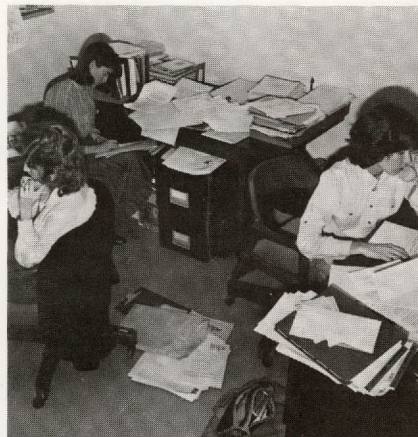


Project staff members and a visitor: Left to right, Betsy Baldwin, Nancy L. Wilson, Yvette Stallworth, state project coordinator from Texas Department of Human Resources, Sylvia Muckelroy, and Anne Morrison McNally.

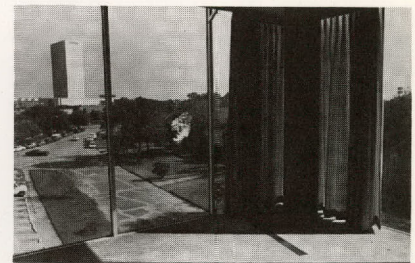
Long-term care staff moves to new HQ



At public forum on state long-term care plan, Wilson, TDMHMR board member Ellie Selig, and McNally.



Why they moved: offices of the Texas Project for Elders, before and after.



and transmitting data. "We're looking at service delivery to the impaired elderly in almost a laboratory way," Wilson said. "We're trying to provide information to determine future public policy."

Although project staff members will not actually provide the care for their clients, they will determine what a client needs and see that he or she gets it. Case managers will go to a client's house to evaluate what existing services in the community would be of benefit. For some clients they might negotiate with the family or neighbors to help out with

additional problems.

A case manager for instance, might tell a family member, "We can get meals for your father from Meals on Wheels for five days a week, but can you bring food the other two days?" The case managers, Wilson said, will "work cooperatively with a big cast of characters: service providers, family, friends, and volunteers."

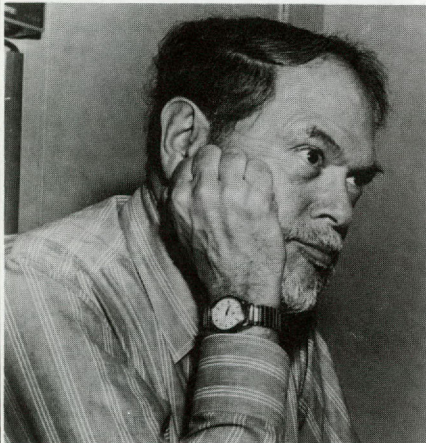
They'll also check from time to time to see if a client's care plan needs to be changed. Occasionally that might even mean eliminating or reducing a service a client no longer requires. One of the goals of the project is seeing that clients receive cost-effective care. "We have to make sure that clients are being provided the level of service that they need," Wilson said.

—Karen Hanson Stuyck

Books, journals, meetings

Robert E. Hemfelt presented "Transgenerational dependence and family homeostasis as etiological dimensions of substance abuse chronicity" to the Texas Personnel and Guidance Association. In addition, Hemfelt and Steven Tapscott talked about drug abuse treatment on KLEF radio.

At the Texas Psychological Association meeting, Drs. Carlo DiClemente, Edwin Johnstone, and Kenneth Solway led a workshop in *DSM-III*; Drs. Jack Fletcher and George Faibish gave a symposium on clinical neuropsychology as a specialty; Fletcher and Dr. Bernard Saltzberg discussed EEG and event-related cortical potentials; William Keller and Ronald Dossett reported on their EEG research with violent juveniles; Dr. J. Ray Hays advised on "Being ethical and avoiding litigation"; and Drs. Walter Delange, Ernest Fruge', and Steven Pollack gave a workshop on teaching family therapy.



Dr. George H. Pollock, director of the Chicago Institute for Psychoanalysis, discussed aging and psychopathology with the Gerontology Center's staff last month.

New Aging volume

S.J. Enna, T. Samorajski, and Bernard Beer, editors. *Brain Neurotransmitters and Receptors in Aging and Age-Related Disorders*, vol. 17, *Aging*. New York: Raven Press, 1981.

The proceedings of a symposium held in Houston last year, the book includes chapters by Thaddeus Samorajski, "Normal and patholog-



Two of new book's editors—Dr. S.J. Enna, pharmacology and neurobiology professor at the University of Texas Medical School, and Dr. Thaddeus Samorajski, TRIMS neurobiology of aging chief.

ical aging of the brain"; Kenneth R. Brizze, Samorajski, Robert C. Smith, and D.L. Brizze, "The effect of age and chronic neuroleptic drug treatment on cell populations in the neostriatum of Fisher 344 rats"; S.J. Enna and Randolph Strong, "Age-related alterations in central nervous system neurotransmitter receptor binding"; Smith, Harnath S. Shelat, Janardhan Sammeta, and Chandra R. Misra, "Aging, receptors and neuroleptic drugs"; and George A. Vroulis and Smith, "Cholinergic drugs and memory disorders in Alzheimer's type dementia."

The volume surveys the most recent research on the neurological mechanisms of Alzheimer's disease, senile dementia, and behavioral disorders associated with aging.

Nature article and others

Peter Silverman and Beng T. Ho. Persistent behavioural effect of apomorphine in 6-hydroxydopamine-lesioned rats. *Nature*, in press, 1981.

Paul Satz, Dina Krauskopf, and Jack M. Fletcher. Neuropsychological and personality correlates. In W.E. Carter (ed.), *Cannabis in Costa Rica: A Study of Chronic Marijuana Use*, pp. 174-190. Philadelphia: Institute for the Study of Human Issues, 1980.

B.L. Crue Jr. and B. Saltzberg. Dynamic pain. In special edition, *Pain, Bulletin of the Los Angeles Neurological Societies*, 44: 127-152, 1981.

Appointments

Dr. Kay R. Lewis was appointed by Gov. William P. Clements to the Joint Committee to Study the Needs of Autistic Citizens in Texas. Serving

with her are State Sens. Chet Brooks and W.E. Pete Snelson; State Reps. Gene Green and Frank Madla; TDMHMR board member Ellie Selig; Dr. Larry McCarron, director, Mental Retardation Research and Training Center, Lubbock; Clay Hill, director, Lynne Development Center; and parent representatives Mary Brock and Jan Zimmerman.

David Wood is a newly appointed member of the mental retardation services advisory council of the Mental Health and Mental Retardation Authority of Harris County.

Mathew's migraine book off press

Roy J. Mathew, editor. *Treatment of Migraine: Pharmacological & Biofeedback Considerations*. New York: SP Medical and Scientific Books, 1981.

The collected papers of a 1979 TRIMS symposium contain chapters by Seymour Diamond, Judi Diamond-Falk, and John W. Largen Jr., "Update: Biofeedback in the treatment of vascular headache"; Largen and Mathew, "Cerebral blood flow and headache activity in normal volunteers and migraineurs trained in skin temperature self-regulation"; and Maxine L. Weinman, Mathew, and James L. Claghorn, "A study of physicians' attitudes on biofeedback."

The book provides information about the diagnosis of migraine, its etiology, course, complications, and pharmacological treatment. The application of biofeedback in treating this illness is examined in detail by the country's foremost practitioners of this and other treatment methods.

Forensic issues

At the Conference on Correctional and Forensic Issues co-sponsored by the Texas Department of Corrections and TRIMS, Dr. Joseph C. Schoolar discussed "Lack of physiological parameters in determining violence"; Ronald G. Dossett reported his research with violent juveniles, and Dr. Kenneth Solway, Dr. Victor Elion, Anita Smith, and Patricia H. Solway presented "Moral development and self-reported delinquent behavior"; Drs. Craig L. Moore and Bernard Saltzberg discussed evaluation of the criminal offender.

"The psychologist as an expert witness" was Dr. J. Ray Hays' topic at the convention of the Louisiana Psychological Association.

Art psychotherapy and other models

Felice Cohen spoke to the Harris County Hospital District's nurse anesthesia students about art psychotherapy for children, and she gave an inservice training seminar at the Rehabilitation Institute of Orange, California on her work with abused children.

Rose Cason Brewer and Vona Morton conducted a seminar on counseling drug abusers for continuing education students at the University of Houston....Dr. Sergio Henao discussed child and family psychiatry at the American Society for Adolescent Psychiatry conference at Galveston....Dr. Cyrus Sajadi, Dr. Alan Kellerman, and Dee Pizzitola taught a three-session workshop for nurses at Park Plaza Hospital....And Claire Frey lectured on therapy for schizophrenic patients to graduate social work students at the University of Houston.



Faculty to teach new round of two-day seminars

With their first faculty resource program completed successfully and with good attendance, the TDMHMR-TRIMS office of continuing education is launching the second one, four two-day workshops on topics staff members throughout the department have requested.

The fall program, taught by TRIMS researchers and clinicians, was attended by between 50 and 100 persons each time, except for the last one, "Adult development and the managerial perspective," which was limited to 25 participants.

Winter '82 program

Jan. 20-21—*Human Sexuality and the Mental Health Setting* will focus on issues related to sexuality as they occur in TDMHMR settings and on human sexuality and self-awareness of attitudes and values. The format will include lecture, small group discussions, and films. It is not a course in sex therapy. Faculty: Suzanne Bafus, Ph.D., Shirley Friedman, M.A., Barbara Hoek, M.A., Robin A. Perley, M.P.H.

Feb. 10-11—*The Courts and You: Medical Legal Issues* concerns the role of the mental health professional as an expert witness. Other topics include confidentiality; commitment procedures; responsibilities of the physician, nurse, psychologist, and social worker; insanity and competency for trial; consent to treatment and issues related to juveniles. Format includes case presentations and mock trial proceedings. Faculty: Barbara Bowen, R.N.,

James L. Claghorn, M.D., Alton Lynn Ellison Jr., J.D., J. Ray Hays, Ph.D., J.D., Kent Johnson, J.D., Charles Weigel, J.D., LL.M., Susan Rachlin, J.D.

Feb. 24-25—*Adult Neuropsychology: Current Status and Applications* is designed to translate research findings into clinical practice. Effects of age, chronicity, type, site, and extent of lesion will be discussed and common assessment tools reviewed. Neuropsychological research and testing as they relate to schizophrenia, alcoholism, dementia, and depression will be covered. Faculty: John Largen Jr., Ph.D., George Vroulis, Ph.D.

March 10-11—*Basic Techniques of Group Therapy* is an introduction to group therapy and will include lecture, large and small group discussion, films, tapes, and demonstration. Emphasis is on principles related to group therapy with adults: theory, group size, setting, meeting frequency, rules, and member selection. There will be an opportunity to learn about group therapy with specific client populations—the elderly, acutely ill inpatients, outpatient schizophrenics—and about anxiety management, assertiveness, living and social skills. Faculty: Steve McColley, Ph.D., Jon Reck, Ph.D.

The seminars carry continuing education credits and are free to TDMHMR and community center staff members. Fee is \$50 for others. For more information, call the continuing education office at (713) 797-1976, exts. 204 and 205; STS 859-9204 and 859-9205.



Who we are



Dr. Pamela Yu

Dr. Pamela Yu says she is a “jack of all trades” in the child and family clinic. More specifically, she is the new staff psychologist, a co-assistant administrative supervisor in the clinic, and a member of the training faculty.

Formerly on the faculty of the University of Rochester Medical School’s psychiatry department, Yu spent much of her time doing child and family research. One project she worked on was a longitudinal study of children at risk of developing schizophrenia (at least one of their parents had been hospitalized for a major mental disorder). The children, some as young as four, will be followed through late adolescence—the time, says Yu, they’d be most vulnerable to breakdown.

In her TRIMS job her primary role is clinical teaching of psychology interns, psychiatry residents, and social work students. She also conducts therapy, coordinates and supervises psychological testing in the clinic, and is planning to research children at high risk for various psychiatric disorders. “I’m enjoying getting back to clinical work and teaching after being heavily involved in doing research,” she says.



Leticia Miranda

Her previous work with children is one of the reasons Leticia Miranda is now counseling grown-ups with alcohol problems. Supervising counselor in the new TRIMS alcohol treatment center, Miranda counseled drug abusers and alcoholics in both the Philippines and in Philadelphia. She also worked with children and families in a Philadelphia MHMR center and at a shelter for abused children and women.

“I could see the negative effect on a child’s life of the parent’s alcoholism,” she says. Yet she was frustrated by most families’ unwillingness to deal with the alcohol problem—they thought their troubles always stemmed from something other than drinking.

Miranda likes the fact that the TRIMS alcohol treatment center is an outpatient program, which is fairly unusual in alcoholism treatment. An entire team—psychologist, psychiatrist, nurse, caseworkers—makes a treatment plan geared to a particular client. “We fit the person for what he needs. We’re not just saying, ‘Oh, we just do group therapy,’” she says.

A master’s-level psychologist, Miranda conducts therapy, supervises two caseworkers, and coordinates therapy. “I’m working with an excellent team,” she says.



Julie Kavitski

Veteran *Emissary* readers probably noticed the new look of the publication last month, the work of Julie Kavitski, *Emissary* art director. The new design, says Kavitski, a graphic designer in Baylor College of Medicine’s Medical Illustration and Audiovisual Education Department, is “a continuous process that’s going to take a while. I think the basic plan is going to stay, but there are some bugs I still have to work out. I want the *Emissary* to look as inviting and visually exciting as it can.”

Before her Baylor job, Kavitski wrote and designed a newspaper for the Houston Builders Association and was a reporter and photographer for the Ames (Iowa) *Daily Tribune*. Although Kavitski’s degree is in journalism, she learned her art skills in jobs that required both writing and designing. “I learned by doing, and I’m still learning,” she says. Finally she realized that she enjoyed the graphics work more than the writing.

Her journalism background, though, gives her a better appreciation of what a writer is trying to do, and she tries to reflect the feel of the story in her layout. “For a piece to work, there has to be a relationship between the design and written concept.” She’d always thought of art as her hobby, she says, but now “I feel as if I’ve found what my life’s work should be. It’s what I was meant to do, but it took me a while to find out.”



Bernard Ihaza

Bernard Ihaza is making the rounds of the institute's administrative sections and lending his quiet, observant presence to each one in turn—watching patients being interviewed in admissions, seeing purchasing and supply procedures and, during late afternoons, talking to his preceptor, administrator Frank Womack.

Ihaza is a Nigerian student at the University of Houston-Clear Lake where he's earning a master's degree in health services administration. He'll be at TRIMS for a one-year residency. When he goes home, he expects to take an administrative job in a hospital in Benin City, his home, and to help manage his father's farming estate. The family has about 150 acres of pineapple orchards and orange groves and raises cows, sheep, and dogs. Ihaza's undergraduate degree is in microbiology and agriculture.

Ihaza is the eldest son in a family of 10 children. When he decided to get his education abroad, he first joined an uncle in Leeds, England, but found he wanted to live more independently than the uncle would allow. He came to Southern University in Baton Rouge and married an American. They now have three children, the youngest one born in Houston. Janice Ihaza works at Methodist Hospital and is a social work student at Texas Southern University.

Ihaza's first introduction to TRIMS was a tour for UH students. Obviously, he decided there was something to learn here.



Barbara Hughes

The dozens of people who've put a lot more speed into their work by learning word-processing have one person to thank for that desirable skill—Barbara Hughes, their instructor.

Hughes is supervisor of the MAGNA SL housed in a room that could stand to be larger and cooler, because the machine is never idle and the room never uncrowded. Hughes learned word-processing herself when she stopped being a housewife and state PTA leader in East Texas and came to Houston to marry again and go to business school.

Though she attends the University of Houston two nights a week, Hughes is always willing to work evenings and weekends to teach word-processing to staff members who have no other free time.

"I love to teach and work with them," she says, "especially on their first project. Most people are very apprehensive at first, and I help them over their anxiety. And some people have a natural aptitude."

Learning the basics of word-processing takes maybe 12 hours, but Hughes is reluctant to mention a time because this varies so much for different people. Once learned, the skill saves uncountable hours of typing manuscript revisions and addressing letters. The most tedious aspects of typing have been taken over by the machine.

Hughes belongs to the personnel staff and calls personnel director Coy Nolley "the best boss one can have." He, in turn, says proudly that "she developed her own training manual that's much better than the company's."



Mynette Lee

One day on the job—she spent the morning matching people to offices and telephone numbers—and by afternoon Mynette Lee had organized a Christmas party for the substance abuse clinic.

Few people have been greeted with as many hosannas as Lee, the new coordinator of volunteer services. The position had been open since August, when Carol Walser left to earn her doctorate.

Lee has a master's degree in social work from Tulane University and was mental health coordinator for the Hemophilia Center at Hermann Hospital. This summer she helped plan and direct a camp for hemophilic children, who enjoyed nothing more than being allowed to run and play. "Baseball was one of the hits of the camp," Lee says. "And, yes, they slid into bases." There were a few problems—a scraped head when a boy bumped against his bunk bed—"but nothing major."

Lee worked with the local Hemophilia Foundation, led seminars for parents, conducted individual and group therapy, and did liaison work with the schools. She enjoyed her work with volunteers so much, she says, that she decided to do it full time.

DSM-III training guide breaking sales records

The *DSM-III Training Guide* is selling beyond the wildest expectations of its editors in the TDMHMR-TRIMS office of continuing education and even its sober New York publisher, Brunner/Mazel.

Dr. Linda J. Webb, continuing education chief, reports that 25,000 copies have been bought by Ciba-Geigy, 2,200 copies were sold to the public, and the Behavioral Sciences Book Club, a Macmillan division, has taken 5,000 copies. All memos to TRIMS from the publisher seem to end with an exclamation mark.

The guide to the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders (Third Edition)* consists of training materials tested in workshops throughout the state and written and edited by TRIMS faculty members. Editors are Webb, Dr. Carlo C. DiClemente, Dr. Edwin E. Johnstone, Joyce L. Sanders, and Robin A. Perley.

An audiovisual package of 140 slides and a 60-minute videotape of five case vignettes supplements the book.

a good deed

Comments about the guide's quality, timeliness, and usefulness are coming in from leaders of the psychiatric profession. It is a "clear and

succinct adjunct to DSM-III," wrote Dr. Jerry M. Lewis, psychiatrist-in-chief of Timberlawn Psychiatric Hospital in Dallas, while social worker Ellen Rosenthal of The Guidance Center, New Rochelle, N.Y., called it an "absolutely indispensable tool for intelligent understanding and accurate use of DSM-III."

"The editors have done a really good deed for all of us. . . This diagnostic guide strongly reinforces the major impetus given by DSM-III for accurate diagnosis and therefore more appropriate treatment," was the comment of Dr. Milton Berger of Downstate Medical Center, State University of New York.

And Dr. Lewis Wolberg, chairman of the New York Postgraduate Center for Mental Health, called it a "highly practical and well thought-out guide that will be extremely useful—in fact invaluable—to every mental health professional who must work with the new DSM-III."

Authors of chapters include Dr. James L. Claghorn, Dr. Jaime Ganc, Mary Beth Holley, Dr. Mohsen Mirabi, Dr. Joseph C. Schoolar, Dr. Kenneth S. Solway, and the editors.

At Brunner/Mazel, a leading publisher of psychiatric literature, the book is far and away the bestseller with its record of 32,000 copies sold in the first two months. A psy-

chiatric textbook is thought to be doing extremely well if it reaches a sale of 5,000 copies.

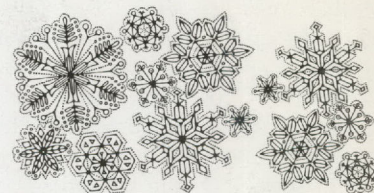
The *DSM-III Training Guide* is \$10.95 paperbound, \$15 cloth-bound, and going fast.

Training seminars now on Tuesdays

Times have changed, literally, for the weekly training seminars which for years were held on Friday mornings. The conferences now take place every Tuesday afternoon, 3 to 4:30, in the auditorium.

Dr. Mohsen Mirabi, chief of adult outpatient services, is the coordinator of the meetings, which alternate inpatient grand rounds, outpatient clinical conferences, and the former Friday morning research seminars.

Mirabi welcomes suggestions for topics to be covered.



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Bulk Rate
U.S. POSTAGE
PAID
Permit No. 4
Houston, Texas

The Emissary
Dec.-Jan. 1981-82
Vol. 14, No. 1

Newsletter of the Texas Research Institute of Mental Sciences, the research-training-patient care facility of the Texas Dept. of Mental Health and Mental Retardation, an equal opportunity employer.

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Produced by medical illustration and audiovisual education, Baylor College of Medicine.