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Ideas of Reference
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MPS Elections: Meet Our Candidates

In 2016, MPS members will elect a President Elect, and two Councilors. Candidate statements are included in this issue, along with your ballot. Councilor statements are on page 5. Vote by March 15!



President Elect Paul Goering, MD

It is with honor I accept the invitation to be considered for the role of President Elect of MPS.

I am deeply rooted in Minnesota. I was raised in St Cloud. After completing medical school in Minneapolis and residency in San Diego we returned to the Twin Cities. Many ask 'why?' The answer has always been easy. Minnesotans are invested in their community and each other in a way that is special. Since my return I have been grateful to be able to care for patients at United Hospital as an adult psychiatrist for almost 25 years. For the last eight years I have additionally served as the Vice-President of Mental Health and Addiction at Allina Health and currently represent Region 6 on the American Hospital Association Governing Council for Psychiatry.

There is much to celebrate about the remarkable achievements MPS has made in advancing the pillars of its mission (promoting accessible/high quality care devoid of stigma, engaging in advocacy for our patients and providers, and serving the professional needs of its membership). However, the celebration is diminished by the challenges that remain for both our patients and those of us caring for them. Over many years we have all seen the inadequacies of access to service, the difficulties with coordination, lagging adoption of best practices,

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Ethical Issues in Mental Health 2016: What Would You Do?

Bill Clapp, MD; Linda Vukelich



In 2013, the American Psychiatric Association published an updated edition of *Principles of Medical Ethics with Annotations Especially Applicable to Psychiatry*. In this conference, we will now ask psychiatrists (and other mental health professionals) to consider their own personal responses to major ethical issues that we confront in contemporary psychiatry. Speakers will explore our foundations of ethical behavior and provide a framework for approaching ethical dilemmas. Program planners will host an "Ask the Experts" session during which audience members can share their own examples of ethical quandaries and develop responses. We will explore the interface between ethics, law, and medical practice boards, while examining issues unique to specific clinical, academic, and research settings. During the afternoon sessions, participants will be invited to join small groups to discuss a variety of challenging ethical cases and later report findings to the larger group.

Our keynote presenter, Rebecca Weintraub Brendel, MD, JD, is Clinical Director of the Veterans Program at the Red Sox Foundation and Massachusetts General Hospital Home Base Program. She has served as a psychiatrist at the Law & Psychiatry Service and the Consulta-

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The newsletter of the Minnesota Psychiatric Society is published bi-monthly: Jan-Feb, Mar-April, May-June, July-Aug, Sept-Oct and Nov-Dec for members of MPS and others on request. Signed articles express the opinion of the author and do not necessarily reflect policies of MPS. Articles submitted are subject to review by the editors.

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Editor's Column

Matt Kruse, MD

In January, APA President Renee Binder wrote a wonderful editorial that asked the critical question "Should Psychotherapy Remain Part of Psychiatry?" and laid out an eloquent argument for psychotherapy as an indispensable tool in a psychiatrist's repertoire. I agree with Dr. Binder on virtually all of her points, including the classification of the dichotomy between psychological and biological interventions as a false one. But I disagree on one important point that runs throughout her entire editorial: she presents the use of psychotherapy as a choice.

Clearly, the amount of training and implementation of formal psychotherapeutic techniques varies greatly between clinicians. The ability to subsist on 20-minute medication checks while others maintain a psychoanalytic practice highlights the exciting range of practice options available to psychiatrists, unparalleled by any other field of medicine. But the flexibility is limited: I'd argue that a psychiatrist does not have the option to forego psychotherapy. Indeed, few physicians do.

At its core, psychotherapy – regardless of discipline – is an awareness of a patient's needs, and the insight that one's words and actions have the opportunity to promote (or hinder) care. Maintaining eye contact rather than staring at a computer screen is psychotherapy. Hearing (and exploring) a slight hesitation before a patient denies hopelessness is psychotherapy. Anything a psychiatrist does to provide care above and beyond a checklist or computer-generated algorithm is psychotherapy.

Anytime psychiatry – or any medical practice – involves direct contact between patient and physician, psychotherapy is occurring. We may not always bill for it, but we should always recognize, and appreciate, the scope of the service we are providing. ■

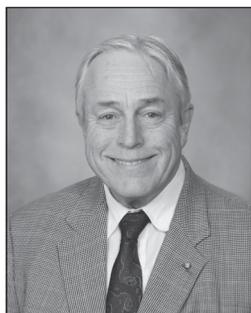
MPS-Political Action — Into the 2016 Races

Bob Nesheim MD, MPS PAC chair

Since 2007, it's been my pleasure and light yoke to convene our MPS PAC's Board of Directors. Our MPS PAC supports your practice by marshalling direct financial support for election of psychiatry-disposed members of the Minnesota House and Senate. We were deeply saddened by the loss of our friend, colleague, and former MPS President Eric Brown last March -- Eric had remained active on the PAC Board in spite of his daunting challenges. We gain sustained courage by his example.

In July, 2014, the Board debated and assigned some \$8,000 - in increments of \$200 or \$100 - to diverse candidates for the Minnesota House of Representatives. The PAC supported 40 candidates, of whom 38 gained office; our legislative guru Dominic Sposeto attained a remarkable 95% success rate in his recommendations for targeting our limited support. Distributions were balanced across the then-current political composition of the House. Due to high turnover in 2014, the usual/annual "bounce-back" of contributions from confident incumbents did not occur, with our reserves thereby rather reduced. We are additionally challenged this year with all (100%) House and Senate seats "in play." It's a challenge to be effective and audible in local Minnesota races when national contests are so fractious and demanding. Your MPS PAC needs your help to raise funds,

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Reflections

Lloyd A. Wells, MD, PhD
MPS President

As I write, snow is falling outside the cabin in Grand Marais. The trees are heavy with the snow, and it is immensely quiet except for the crackling of oak in the wood stove, which Denise lovingly feeds. This setting gives me an opportunity for reflection, less prevalent in my busier life in Rochester, and I reflect a lot about psychiatry.

And I read a lot up here — some new books, some old friends. Most recently I discovered *The Lost Landscape*, by Joyce Carol Oates, which was a Christmas gift from Denise. This book is an exceptionally well-written memoir. It is about Ms. Oates' life, not about psychiatry, but some points she makes are relevant to our work. She writes poignantly of the suicide of a close high school friend, at age eighteen, and ends her essay, "Some time after her death I would learn that Cynthia had swallowed a corrosive chemical taken from her chemistry laboratory, with the property of a powerful cleanser like DRANO. There it is: I have typed that word at last, after fifty-seven years: DRANO." The tragedy of youthful suicide does not change much, in format or effect, over the decades.

She also writes of the birth of her sister some sixty years ago. Her sister is severely autistic and has never developed speech. Psychiatrists of the time blamed her mother as being affectless and emotionally unavailable to her unfortunate child, when in fact Ms. Oates' mother was very warm, caring and devoted to her child. "Bad mothering. It is very hard for me to spell out these cruel and ignorant words... So many years later I am upset on behalf of my gentle, soft-spoken and self-effacing mother who'd given as much as any mother might give in the effort of a futile and protracted maternal task. My mother was not so much upset as crushed, shamed. And this for years... It is being proposed,

in some quarters, that autism might be celebrated as a kind of 'neurodiversity'... This is a romantic position, but it is not a very convincing position, for one who knows firsthand what severe autism is. Even if autism could speak, from its claustrophobic chambers, could we believe what autism might say? And how responsible would we be, to act upon that belief?"

Our profession's long history of blaming parents and especially mothers (far less now than used to be the case, but still occurring) for tragic and horrible illnesses was not our finest hour and led to an incredible amount of guilt. As a great psychiatrist, John Romano, used to tell his students, "The good old days were never that good." This seems to me to be an important truth. So many in our profession are quick to reject any changes in the way we practice, but some of the changes are salutary. Our past as a profession is far from sacrosanct.

A third quotation: "In itself, perhaps the brain does not THINK; it is the human agent within the brain... that thinks... We speak of 'our' brain as if we owned it, in a way. But such common usage is misguided, perhaps. We are nothing apart from our brains, thus it is our brains that think. Or fail to think... We are habituated to believe, at least in our Western tradition, that 'we' are located somewhere inside our brains, behind our eyes..."

How are we to think of the neuroscience revolution which is upon us as a profession and as a society? Ms. Oates delineates a central, Cartesian question which we shall repeatedly address: does my brain think, or do I think? Am I my brain? The question at first seems absurd, but I believe that we shall be immersed in it — in our daily work, in ethics, and in philosophy. Certainly, philosophers who are eliminative materialists — perhaps the predominant philosophy of the neural sciences — predict that in this century even our language will become neurologic: instead of conceiving and talking about "pain", we shall say something like, "The C fibers in my thalamus are firing too rapidly." Who knows? Psychiatry has had many false panaceas, and I hope this will not be the next.

And a final quote: "Our lives are not stories, and to tell them as narratives is to distort them."

How often do we speak of the "stories" of our patients' lives? We even have a therapy, narrative therapy, which centers around the story of a patient's life. Our patients have stories, and it is an honor to share them, but I believe Ms. Oates is correct: "our lives are not stories." There is far more to our lives and those of our patients than narrative.

Dyadic solitude and reading outside our field — I recommend them. Happy New Year to all of you. ■

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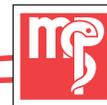
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MPS Elections: *Councilor - Vote for 2*

Marie Olseth, MD

I am honored to be nominated for Councilor for the Minnesota Psychiatric Society. For those that do not know me, I am a native of Minnesota and I attended the University of Minnesota Medical school. I started my psychiatry residency at University of Wisconsin Madison, and then attended my 4th year at University of Minnesota Psychiatry Program where my year was dedicated to working in the newly developed University of Minnesota early psychosis intervention program. Since residency, I have worked at Park Nicollet's Melrose Institute and have spent the past few years in private practice.



I have had the pleasure of serving on both the MPS Legislative Committee and the Twin Cities Medical Society's legislative committees over the past year. I have enjoyed the opportunity to advocate for the mentally ill and for Minnesota psychiatrists on current legislative issues in these committees. I have also dedicated additional time this past year with the MMA working on the issue of prescription drug fraud.

As a prospective MPS Councilor, I hope to continue to advocate for psychiatrists and psychiatric patients in Minnesota. I plan to continue to work on measures to minimize obstacles that physicians encounter in providing care and that patients experience when accessing care. I will work with MPS on providing updated information for psychiatrists on legislative issues and developments in the field of psychiatry. Also, I plan to continue to have ongoing dialogue with Minnesota psychiatrists to help MPS continue to support psychiatrists in doing our challenging and rewarding work. Thank you for your consideration. ■

Paul Goering, MD *(Continued from pg 1)*

inadequacies in planning/funding and the absence of unifying leadership. None of this is new, but its progression is sobering. And, it begs a question. What is the role of MPS? How do we use the remarkable skill, experience and diversity of our membership to the benefit of the community?

MPS has an opportunity today that is unique to exactly this time in history, our history. I believe that by deliberately exploring what our voice should be, and how it is used, we can further advance our mission and more robustly fill a leadership void in the community. MPS is uniquely situated to provide such a voice. Developing it would require deliberate planning to bring sharp focus to our priorities and sequence the specific tactics we think would predict success. And, it would require our members, our strongest asset, to use that voice. Executing such a plan would take multiple years (beyond a single presidency), but our governance structure is well suited to support such strategy deployment. To that end, as President, I would plan to focus on two agenda items: creating the opportunity to explore that voice, and developing a plan to use it. And, Minnesota that I am, I think we owe it to our neighbors and ourselves. ■

Matt Kruse, MD

I am humbled and honored to run for Minnesota Psychiatric Society Councilor. Raised in Illinois, I made my first move to Minnesota to attend Carleton College. After graduation, I was a research fellow at the NIMH before completing my MD/MBA joint degree at Yale University. I returned to Minnesota for residency at UMN and am now in my 4th year. My interests include first-episode psychosis, forensic psychiatry, healthcare policy, and system improvement. In July, I will become the first trainee to join the new Forensic Psychiatry Fellowship at UMN.



I have been involved with MPS for the past two years, serving on the legislative committee, and co-editing the MPS newsletter. I am additionally the Area 4 RFM deputy-representative to the APA Assembly, a member of the Minnesota Medical Association Policy Council, and vice-chair of the Twin Cities Medical Society Legislative and Policy Committee.

I firmly believe that policy and system issues impact the health of patients as much as our clinical interventions do, and MPS has unique potential to influence the delivery of mental health care in Minnesota. As such, I believe an MPS that strives to be as active as possible, with an involved membership, and strong outreach to the state's trainees will be key to improving the health and outcomes of our patients moving forward. As councilor, I hope to continue engaging residents in council meetings and committees to develop lifelong members, fostering collaboration between MPS, MMA, and TCMS, and ultimately, helping MPS demonstrate its value to its

members via advocacy, interest groups, and action. Indeed, I believe the MPS membership is strong, its energy is high, and bright days lie ahead.

I sincerely appreciate your consideration. ■

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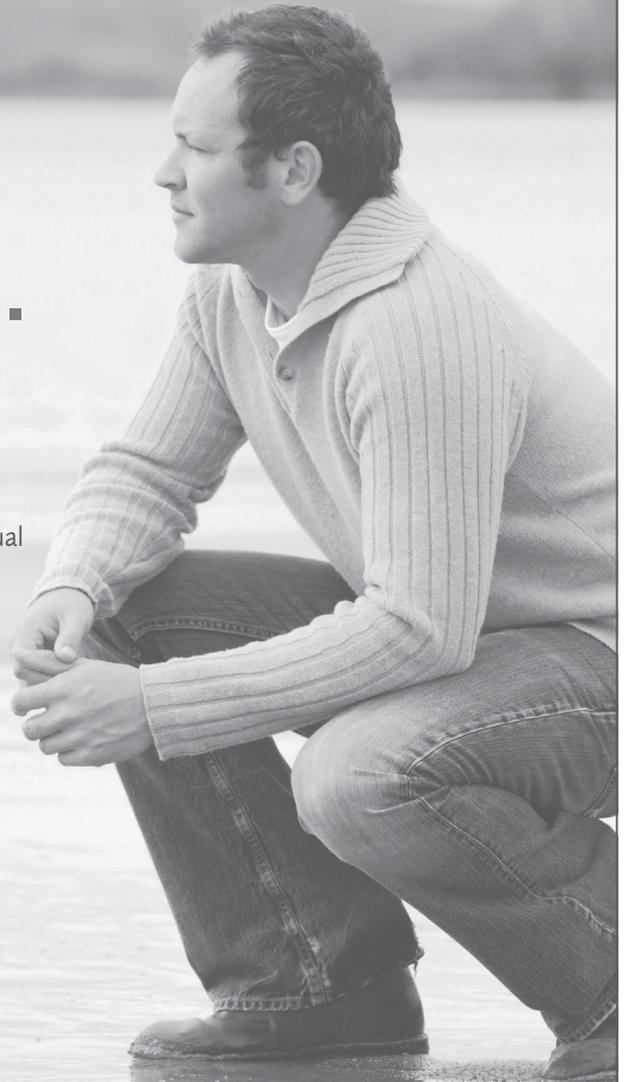


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What Would You Do? *(Continued from page 1)*

tion Psychiatry Service and as faculty of the Center for Law, Brain, and Behavior at MGH. She previously served as Associate Director of the Harvard Forensic Psychiatry Fellowship. Dr. Brendel is an Assistant Professor of Psychiatry at Harvard Medical School. Her educational efforts and research interests are informed by her broad clinical practice and focus on issues at the interface of psychiatry, medicine, law, ethics, and human rights. MPS is delighted to feature Dr. Brendel who is participating in her role as consultant to the APA Ethics Committee. She is joined by Colleen Coyle, JD, General Counsel for the APA. Ms. Coyle heads the APA's Ethics Department and is a well-regarded speaker whose knowledge and experience are unequalled. Minnesota Board of Medical Practice Executive Director Ruth Martinez, MA, will share Minnesota data and history as we explore the trends, examine historical and emerging data, and discuss the intersection between law and ethics in Minnesota. Steven Miles, MD, will present information developed as the chair of the University of Minnesota's Department of BioEthics, and members of the MPS Ethics Committee whose expertise is broad-ranging will be on hand to facilitate case discussions and be resources to participants.

The 2016 MPS Spring Scientific Program & MHCF Gala & MPS Recognition Dinner will be held at the American Swedish Institute on Saturday, April 16. Contact MPS (651-407-1873 or L.Vukelich@comcast.net) for more information. Online registration and a brochure to download are available on the MPS website at www.MnPsychSoc.org. These are challenging times and this program is designed to support ethical, high-quality practice by Minnesota psychiatrists, other physicians, and mental health professionals. Join us! ■

March 2, 2016 **MSCAP Dinner Event - Natalis Solutions**, St Paul, MN
www.MSCAP.org 651-407-1873

March 12, 2016, 9am-noon, Forum at 10 am
MPS Council Meeting - MMA Offices, Minneapolis, MN
www.MnPsychSoc.org 651-407-1873

March 23, 2016 **Minnesota Medical Association Day at the Capitol**
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March 31, 2016 **Mental Health Legislative Network Day on the Hill**
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April 16, 2016 **MPS Spring Scientific Meeting**
Ethical Issues in Psychiatry for 2016: What Would You Do?
American Swedish Institute, Minneapolis, MN www.MnPsychSoc.org

MPS PAC *(Continued from page 2)*

and also advise as we target our pointed dispersals. MPS could lose much legislative traction in 2016 if we lack sufficient funds to engage legislators in these meaningful conversations.

Your board includes Bill Clapp, Dionne Hart, Bob Nesheim, Joel Oberstar, and Jon Uecker; John Raymond kindly assists as Assistant Treasurer. We represent both sides of the aisle and a variety of concerns — but we all seek to enact the deliberations of the MPS Legislative Committee by encouraging psychiatry-friendly candidates, both toward election and in individual dialog with each of us as professionals, constituents and committed voters and contributors.

Support your MPS PAC in this election. We will convene in July to target contributions, and any optimism we bring to the electoral scene in Minnesota aids your practice and our patients. MPS PAC contribution forms are found in each newsletter; any of us are pleased to answer your questions about our track record and our current legislative goals.

And — do track down your own senator and representative, and get friendly with them on the very issues we need to have raised up. Thanks much. ■