

Minnesota Psychiatric Society 2019 Spring Scientific Program

Suicide: A Multidimensional Approach to Risk, Prevention & Assessment

POSTER SESSION

"Why do I overwhelm people?" Addressing interpersonal difficulties while addressing MDD and ADHD with the use of TLDP. – Lyuba Megits, MD

When co morbid major depressive disorder and attention deficit hyperactivity disorder co-occur in women, the latter can often be missed as a diagnosis and ascribed to the woman's "extroverted and chatty" personality. When ADHD is diagnosed in this setting it is treated pharmacologically, often with good success. In this case presentation we explore how time limited dynamic psychotherapy (TLDP) was used to therapeutically help treat difficulties in interpersonal relationships that stemmed from a history of an invalidating childhood, coupled with intense energy that came with ADHD, and led to a cyclic maladaptive pattern of "overwhelming" others during interactions, which left the patient bewildered and feeling alone and misunderstood as to why her attempts to "help others" seemed only to push others away. Through the use of TLDP theory and techniques, the patient was able to identify new understandings regarding her interactions and gain new experiences within therapy, which ultimately could be translated to the real world.

GABA Receptor Signaling Pathway Enrichment in Suicide: A Preliminary Postmortem Brain Proteomic Study – Alejandra Cabello Arreola, MD

Introduction

The neurobiology of completed suicide remains unknown. We aimed to identify altered proteins and biological pathways in the dorsolateral prefrontal cortex (DLPFC) of individuals who died by suicide or other causes, employing a web-based software for proteome data analysis.

Method

Postmortem DLPFC tissues from age-matched male suicide mood disorder cases (n=5) and mood disorder non-suicide cases (n=5) were compared. For all but one individual, the last documented mood state was depression. Postmortem interval and tissue pH were not significantly different between groups. Tissue proteome was detected and quantified by liquid chromatography coupled with tandem mass spectrometry. Proteins that differed between groups at false discovery rate (FDR) corrected p-values (Benjamini-Hochberg-Yekutieli) 1. The top differentially expressed proteins are potassium voltage-gated channel subfamily Q member 3 (KCNQ3; FDR<0.001, FC=-0.481, p=2.10E-09), RNA binding motif protein X-linked (RBMX, FDR=0.006, FC=-1.152, p=5.32E-06), and adenylate cyclase 5 (ADCY5; FDR=0.006, FC=1.176, p=7.00E-06). One of the top canonical pathways enriched was the GABA receptor signaling pathway (p=0.001; Benjamini-Hochberg p=0.108), which includes two of the top proteins (KCNQ3 and ADCY5).

Conclusion

These preliminary results in proteomics support previous brain genetic expression findings involving GABA signaling in suicide completers. Further investigations with larger sample size are needed.

Frontal Lobe Epilepsy and Psychosis – Anum Khan, MD

Frontal Lobe epilepsy is a disease which can manifest in multiple different ways due to the vast functionality of the frontal lobe. This is a case of a 38 year old patient who presented acutely psychotic and was found to have frontal lobe epilepsy per EEG readings. This case highlights the importance of identifying secondary causes of psychosis and the possible role in neurological screening with EEG prior to final diagnosis. This case also allows us to evaluate the ethical role in treatment of patients with a secondary causes of psychosis that refuse to be medically treated.

A Brief Review of Gender Minority Clients in SUD Residential Treatment – Patrick Zhao, MD;

Gender minority (GM) is an umbrella term for non-cisgender population. It includes transgender, gender-nonconforming and agender clients. It is recognized that gender minority populations, like the rest of LGBTQ, contend with higher prevalence of mental illness and substance use issues. In this review, we studied 28 consecutive cases of GM clients, who were attended to an ASAM 3.7 level of substance use residential treatment facility, called Pride Institute in Eden Prairie, MN.

The GM clients completed LGBTQ-Affirming Comprehensive Psychiatric Evaluation (LACPE). LACPE is sexual orientation, gender development specific, development and culture informed psychiatric assessment. It takes in approx. two and half hours to complete with a psychiatrist.

Key points,

- 1) the uniqueness of GM clients in addiction setting such as drug of choices, co-occurring psychiatric illness, and transitioning etc.*
- 2) LGBTQ-affirming comprehensive psychiatric evaluation is person-centered care in working with GM clients.*
- 3) overrepresentation of ASD in GM, vice versa is observed in this study. Clinical cross screening is high-yield and important.*
- 4) intervention: wraparound strategies.*

Advancing the Current Use of Electroconvulsive Therapy in Patients with Severe Treatment Resistant Depression – Rana Jawish, MD

Electroconvulsive therapy (ECT) is a highly effective treatment for patients with depression who are medication resistant or have suboptimal responses to pharmacological therapy. About 85% of these patients with refractory depression improve with ECT. Despite this remarkably high response rate, ECT is under-utilized in many psychiatric settings due to its stigmatized perception by patients and mental health professionals. A study of a private insurance claims database in the United States found that only 0.25 % of nearly one million patients with unipolar major depression or bipolar disorder receive ECT. There are other barriers to ECT administration such as: socioeconomic status, race and age. ECT patients are more likely to be of higher socioeconomic status, white, older than 65 and receive ECT in a private sector psychiatric facility. In this case report, we will focus on the discrepancy in our clinical practice between the existing guidelines for ECT indications and the current use of ECT in our psychiatric facilities. We present a patient with schizoaffective disorder, chronic depression and suicidal ideation who had poor response to psychotherapy and multiple medication trials including SSRIs, mood stabilizers, and typical and atypical antipsychotics requiring multiple hospitalizations. The patient was successfully treated with ECT showing rapid improvement in his symptoms following six therapy sessions. In this case report we show that ECT should be considered early for patients with chronic refractory depression rather than reserved as last therapy option.