

Minnesota Psychiatric Society 2023 Spring Meetings – April 22, 2023

MIND THE GAP: LAW, ETHICS, & PRACTICE

POSTER SESSION

Conference attendees are encouraged to actively participate in the poster session, interacting with presenters and other participants. Posters will be reviewed by a panel and awards will be presented at the end of the day.

Addressing a patient's disclosure of past homicidal behavior in a community behavioral health clinic – Presenter: Annie Waniger MD

Abstract: *Managing a patient who has reported past homicidal behavior can be challenging for mental health care professionals. The first step in managing a patient who reports a past crime is to assess the level of danger they pose to themselves and others. Once the patient's risk level has been determined, a treatment plan can be developed that addresses their specific needs and goals. In this case, a 56-year-old man presenting to an outpatient psychiatric clinic for anxiety and depression discloses frequent intrusive thoughts of harming men and past homicidal behavior. This case provides an opportunity to review 1) the components of a risk assessment for patients reporting homicidal thoughts and behaviors 2) the principles of duty to warn and a clinician's obligation to protect future victims 3) the legal and ethical requirements concerning confidentiality breaches and 4) resources for navigating the legal and ethical complexities of such cases.*

Addressing system deficits for caring for patients with behavioral and psychological symptoms of dementia – Presenter: Jeremiah Atkinson, MD

Abstract: *Neurocognitive disorders are common conditions in the geriatric population which intersect the traditional disciplines of psychiatry, neurology, and medicine. Behavioral and psychological symptoms of dementia (BPSD) also make caring for these patients challenging in the inpatient setting, as many units feel incapable of meeting all their complex needs. Another confounder is the patient's ability or lack thereof to consent for care, and choosing how best to use alternative decision makers. Healthcare systems must plan for better inpatient resources to care for patients suffering dementia and the caregivers that serve them.*

Teaching the Minnesota commitment process to medical trainees – Presenter: Molly Gannon, MD

Abstract: *Background: The civil commitment process, merging the clinical and legal systems, can be confusing for patients and providers alike. This is particularly true for medical trainees with brief exposure to the mental health system on rotations.*

Method: *Literature review of the NAMI guide for civil commitment, as well as discussions with inpatient experts in the commitment process.*

Results: *The authors created a flowchart diagram for the various stages and possible outcomes of legal processes in the Minnesota commitment process. The flowchart includes the 72-hour hold process, petitioning for commitment, various types of commitments, and additional court ordered treatments. The authors' intent for this presentation is to receive feedback on the diagram as well as to share the resource. A QR code will be included on the poster to electronically distribute the resource.*

Conclusion: *Clearer understanding of the commitment process will improve patient care and reduce unnecessary infringement of patient autonomy.*

Review of the Practice of Euthanasia and Assisted Suicide for Psychiatric Disorders–

Presenters: Manuel Fuentes Salgado, MD

Abstract: Objective: Narrative review of the literature about characteristics of patients, eligibility criteria and bioethical dilemmas related to euthanasia or assisted suicide for psychiatric reasons (pEAS) in countries where it is legalized.

Methods: PubMed, Scope and PsycINFO databases were searched to identify scientific articles, reports and regulation protocols published up to January 2023.

Results: pEAS is legalized in five European countries and will be in Canada in 2023. Even if the incidence of pEAS is still low, it has been increasing in the last few years. The most frequent diagnoses were mood and personality disorders.

Questions about criteria of access, guidelines, capacity to decide, access and consent to psychiatry care, assessment of unbearable suffering, and definitions of irremediability or treatment refractoriness in psychiatry; are major concerns and are strongly debated in the literature.

Conclusion: pEAS procedures should be carefully revised, there are many areas of concern and under intense ethical discussion.

Real-world efficacy of repetitive transcranial magnetic stimulation (rTMS) using intermittent theta burst stimulation (iTBS) on depression and anxiety –

Presenter: Noah Lee, MD

Abstract: Intermittent Theta Burst Stimulation (iTBS) is a form of repetitive Transcranial Magnetic Stimulation (rTMS) which delivers 3 minute treatments for depression instead of the standard 20-40 min treatments. We performed a chart review of 42 patients receiving iTBS (600 pulses/session, 30 sessions), using PHQ-9 and GAD-7 to measure improvement in depression and anxiety. A single question patient-reported outcome (PRO) of whether the treatment helped depression was asked. For depression, the response rate (>50% improvement) was 38%, while remission (PHQ<5) was 9.5%. 57% of patients felt the treatment was helpful. For anxiety, mean GAD-7 improved from 13.0 to 9.1. We conclude that iTBS outcomes are similar to standard rTMS for depression, with PRO higher than the PHQ-9 response rate. Anxiety symptoms also improved.

Smits v. Park Nicollet and the Current Duty to Warn Landscape –

Presenter: Katie McLaughlin, JD, MS2

Abstract In this poster we present a recent opinion from the Minnesota Supreme Court and discuss its implications on psychiatry. After receiving outpatient mental health treatment at Park Nicollet Health Services for a period of approximately 3 months, Mr. Brian Short engaged in an act of murder-suicide, killing his wife, three teenage children, and himself. His estate filed suit against Park Nicollet, presenting the central question: Was there foreseeable risk to Short's family members, where Short had no prior history of violence and had never threatened violence against his family, such that his mental health providers may be held liable? This poster examines how the Minnesota Supreme Court resolved this duty to warn matter and discusses the differential treatment this issue has recently received in various states. Recent cases are contextualized against the seminal Tarasoff case, with consideration of the underlying ethical question of balancing duty to warn against patient confidentiality..

Exhaled Breath Analysis: What a Psychiatry Researcher Needs to Know - A Scoping Review–

Presenter: Nadia Luong Van, MS3

Abstract: Exhaled breath analysis is a non-invasive diagnostic technique used to identify biomarkers indicative of health conditions and disease. It has shown promise in detecting biomarkers for psychiatric disorders, although the research is still primitive. We aimed to explore various methods of obtaining and analyzing exhaled breath, process the results of studies completed in relation to psychiatric, mental, and neurocognitive disorders, and identify key biomarkers that could be further investigated to aid diagnosis and treatment.

A scoping review was conducted using PRISMA guidelines. After removing duplicates, a total of 954 papers were identified, 17 of which met the full inclusion criteria. Results found exhaled breath to be a promising method to investigate biomarkers in psychiatric disorders, offering ease of application with remote measurements and surveillance of metabolic state. Exhaled breath analysis signatures of various psychiatric disorders have yet to be discovered. Further clinical and translational research is needed in this field.

**Combining Forensic and CAP Skill Sets for Risk Assessment of Mass Homicide –
Presenter: Ayse Irem Sonmez, MD**

Abstract: *Psychiatrists are increasingly likely to encounter adult and pediatric patients who make threats of mass homicide. However, mass homicide threat assessment training is currently uncommon in psychiatric residencies and fellowships. Trainees and their supervisors would benefit from cognitive frameworks by which to approach these highly emotive, anxiogenic patient encounters. Psychiatrists need to understand which risk factors are relevant for clinical assessment and intervention so as to gather data adequately and promptly, access appropriate support and assistance, and conduct risk assessments within their scope of practice.*

We outline an educational approach whereby forensic and CAP faculty work together to teach fellows threat assessment theory, legal history and limitations of threat assessment, and the use of structured professional judgment (SPJ) tools. Faculty then supervise a joint fellowship experience on a clinical consult service for mass homicide threat assessment, to give trainees concrete experience prior to independent practice.

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**Should we ‘dare to care’ or continue to ‘do no harm’? Ethical evaluation of covert medication management in patients with Severe Mental Illness (SMI) – Presenter:
Akshaya Selvamani, MD**

Abstract: *The consequence of untreated psychosis includes increased morbidity, individual suffering, risk of self-destructive or harmful behavior. Our current approach to improving medication adherence in this population includes engaging in bidirectional dialogue with the patient and family, provider-directed contingency management, or forced medication in setting of court order. Alternative mechanism for improving medication adherence is through the covert medication administration - that is, providing concealed medications in food or drink to the patient without their explicit knowledge. Precedence for covert administration exists in pediatrics and end-stage dementia where patients have sustained decision making incapacity. In this poster, we explore the ethical analysis of covert medication management in patients with severe mental illness (SMI) where decision making capacity is fluctuating. We advocate for culturally responsive ethics that values outcome over autonomy, appreciates the collective goals and engages familial involvement.*

**Consensus Building and Implementation of the Online Training Module to Prepare
Clinical Skills Evaluation (CSE) Examiners in Psychiatry –
Presenters: Maritza Steele, BA**

Abstract: *Clinical Skills Evaluations within Accreditation Council on Graduate Medical Education certified psychiatry residencies are a required component for American Board of Psychiatry and Neurology eligibility. The American Association of Directors of Psychiatric Training (AADPRT) previously developed educational materials to improve the precision of faculty evaluations, which exists behind an AADPRT website firewall. Furthermore, in-person training requirements for faculty across the country are taxing to programs and institutions. Nelson and colleagues (2021) adapted materials developed by AADPRT into an accessible online training module. In order to use these new videos for training purposes, we established consensus ratings for the residents’ performance in each video.*