

Bipolar Disorders Fellowship

Name of Institution: Douglas Mental Health University Institute

Location: 6875 LaSalle Boulevard, Montreal Quebec H4H 1R3

Number of position(s): 2

Type of Fellowship: Research and/or Clinical Fellowship in Bipolar Disorders

Length: 1 Year

Program Information_(see APPENDIX):

- **Number of fellowship positions requested:** 2
- **Academic affiliation:** McGill Department of Psychiatry
- **Name of hospitals involved in training:** Douglas Mental Health University Institute
 - 100% of the time spent at Douglas
- **Background:** The Bipolar Disorders program is a tertiary-care program for the assessment and the treatment of individual suffering refractory bipolar disorders.

The Bipolar Disorders Program (BDP) is dedicated to a tripartite clinical/research/teaching mission. The fellowship will be aimed at developing expertise in the evaluation and treatment of the full spectrum of Bipolar Disorders, and co-morbid conditions. The fellow will be fully integrated into the Bipolar Disorder Program clinical services including outpatient (approximately 200 new cases per year) and research projects.

Specific Learning objectives:

- 1) The fellow will develop the ability to carry out detailed neurobiological assessments of the full range of bipolar disorders and co-morbid disorders.
- 2) The fellow will learn to assess the medical complications associated with bipolar disorders and their management.
- 3) The fellow will acquire the capacity to determine the optimum treatment setting (inpatient, outpatient day program or day hospital) for individual patients.
- 4) The fellow will learn to develop and implement detailed treatment plans for individual patients (including individual therapy, group therapy)
- 5) The fellow will have the opportunity to develop skills in various psychotherapeutic modalities with particular emphasis on their application to bipolar disorders (including psycho education, motivational, cognitive-behavioural, behavioural, family therapy and group psychotherapy.)
- 6) The fellow will learn the role of pharmacotherapy in the treatment of bipolar disorders and related conditions.
- 7) The fellow will be exposed to the ethical issues specific to the treatment of bipolar disorders and will face the challenge of developing a therapeutic alliance with difficult patients.
- 8) The fellow will be exposed to ongoing clinical research being carried out at the Bipolar Disorders Program.

Learning modalities:

- 1) Carrying out initial assessments under direct observation and participation in assessment with other team members.
 - 2) Participation in outpatient and inpatient multidisciplinary clinical rounds.
 - 3) Follow-up of individual patients with clinical supervision by different supervisors.
 - 4) Participation in group psychotherapy as a co-therapist.
 - 5) Participation in monthly in-service teaching rounds.
 - 6) Participation in weekly research meetings.
- Participation in ongoing research projects and possibility of developing a smaller research project under the supervision of research team me

Name of the Fellowship Program Director: Serge Beaulieu M.D, PhD, FRCPC

Names of the Teaching Faculty

- o **Roles:** Dr Beaulieu
- o **Summary of clinical practice:**

Dr Beaulieu M.D, Ph.D, FRCPC, a psychiatrist and a research clinician whose main interest is primarily bipolar disease and major depression, will be the primary clinician and academic supervisor. He will ensure adequate exposure to all aspects of the treatment program, guide and assist in the conceptualization and implementation of research or academic projects.

Dr Mario Roy M.Sc, M.D, FRCPC, is a clinician psychiatrist who focuses on mood disorders and cognitive impairments, and phenomenology of mood disorders mainly bipolar disorders.

Dr Suzane Renaud M.D, whose principal field of interest is personality disorders vs. bipolar disorders, is also a psychiatrist and a research clinician at the program.

Dr Andrée Daigneault M.D gives attention to mood disorders principally on bipolar disorders and also on the phenomenology of bipolar disorders.

The Bipolar Disorders Program is a multidisciplinary team. The fellow will also benefit from working in close collaboration with a highly specialized team consisting of psychiatrists, psychologists, social workers and nurses. They will all provide assistance with the development and implementation of research projects.

- o **Major Strengths:** Working in an ultra specialized interdisciplinary program with an excellent clinical, teaching and research record.

Academic Facilities

- **Outline facilities for clinical and academic pursuit:** The Bipolar Disorders Program is situated at the Douglas Mental Health University Institute a large facility dedicated to treating the full scope of mental health problems across the life span. Researchers at the Bipolar Disorders Program are affiliated with the institute's well-know and highly-regarded research centre. The program research center is well-equipped with dedicated space, administrative and secretarial support, and onsite computing and technological services.
 - **Library access, materials relevant to fellowship training:** The Douglas Mental Health University Institute has an extensive library with dedicated and qualified library staff onsite. The Douglas is connected to the McGill Life Sciences Library and access to all McGill databases and electronic journals and references, is available through the intranet. Library staff also provides training in the use of databases and search engines.
 - **Multimedia learning materials available:** The Douglas Mental Health University Institute is equipped with teleconferencing equipment and has an audiovisual department that provides assistance in the production and utilization of teaching tools (videos, smart boards, power points, photographs...).

Fellow Duties and Responsibilities

- The fellow will have no call responsibilities and will not be expected to provide clinical supervision for residents.
- Outpatient clinic responsibilities will include performing 3-5 evaluations per week, following a caseload of approximately 10 patients at one time and possibly co-leading an outpatient group. Clinical work will be done alongside the clinical supervisors. The fellow will participate in most assessments (approximately 150-200 per year) and therefore have the opportunity to encounter a heterogeneous group of patients with subtypes of bipolar disorders and co-morbid symptoms. In addition, the fellow will participate in the assessment of atypical cases for diagnostic clarification.
- The fellow will also receive training and mentoring in teaching. The objective being to prepare the fellow to teach the basics of bipolar disorders evaluation, treatment and management to medical students, residents, and community partners.
- The fellow will have access to secretarial, nursing, psychological services and program coordinator assistance. Research assistants will also be available to assist the fellow in the execution of research projects (data collection, scheduling of participant, database management and data analysis)
- The fellow will attend weekly interdisciplinary team rounds on inpatient and outpatient unit and weekly research lab meeting.
- The fellow will attend in-service teaching rounds held once a month at the BDP. The fellow will also have the opportunity to attend rounds organized by different research axes of the Douglas Research Center, Grand Rounds, case-conferences and journal clubs.

- An introductory reading package given to all trainees will be made available to the fellow. Additional reading materials will be assigned on an as-needed basis.
- The fellow will be expected to present at least twice during the academic year.
- The fellow will be expected to complete an academic project such as a review paper or a small-scale research project that can generate results to be presented at a national or international conference. The fellow will also be supported in carrying out larger projects or in collaborating in ongoing Bipolar Disorders Program research project.

APPENDIX

DOUGLAS MENTAL HEALTH UNIVERSITY INSTITUTE BIPOLAR DISORDERS FELLOWSHIP

The Bipolar Disorders Program (BDP) is a superspecialized (third line) service of consultation and treatment for adults aged 18 to 65 suffering from bipolar disorders in the province of Quebec. Services are rendered in French and English and exceptionally to individual residing in other geographical areas.

The BDP is the main base of research and academic work on Anxiety, Depression and Bipolar Disorder in the McGill University organization. The BDP is dedicated to a tripartite clinical/research/teaching mission, and aims for the fullest possible integration of activities within these 3 spheres. More recently the BDP has assumed leadership of the RUIS-McGill program. The BDP has also fore fronted the development of a RUIS-centred organization involving regional adult mood disorders treatment centres and specialists. Several RUIS-related projects (including teaching to community clinicians and tele-training) have taken place.

The BDP offers modern, multimodal services for individuals with BDs, inspired by a multidimensional concept, and offered by a multidisciplinary team of specialists. The BDP also maintains an active program of clinical research into causes, co-morbidity, treatment outcome, and prognostic indices, and tapping neurological, psychological and social aspects of the BDs. Research at the Bipolar Disorders aspires to study neurobiological responses to antidepressant and mood stabilizer treatment and potential new treatments for these disorders. The research also aims to guide the development of more-effective and more-specialized treatments for people suffering bipolar disorders.

In addition, clinical/ research training is offered to trainees from various disciplines. BDP staff also consults to professional and non-professional groups in the community, providing clinical consultations and teaching to staff in first- and second-line settings and promotes self-help, public education, and other activities in support of BD sufferers and their relatives in the community.

The fellowship will take place at the BDP, and will be aimed at developing expertise in the evaluation and treatment of the full spectrum of bipolar disorders and co-morbid conditions (Obsessive-Compulsive, Personality and Substance Use Disorders). The fellow will also participate in teaching, research and outreach activities.

Publications and abstracts (2005 to 2008)

Papers

1. Braehler C, Holowka D, Brunet A, Beaulieu S, Baptista T, Debruille JB, Walker CD, King S. Diurnal cortisol in schizophrenia patients with childhood trauma. Schizophr.Res. 79(2-3): 353-354, 2005.
2. Yatham LN, Kennedy SH, O'Donovan C, Parikh S, MacQueen G, McIntyre R, Sharma V, Silverstone P, Alda M, Baruch P, Beaulieu S, Daigneault A, Milev R, Young LT, Ravindran A, Schaffer A, Connolly M, Gorman CP. Canadian Network for Mood and Anxiety Treatments (CANMAT) guidelines for the management of patients with bipolar disorder: consensus and controversies. Bipolar.Disord. 7 Suppl 3 5-69, 2005.
3. Baptista T, Martinez J, Lacruz A, Rangel N, Beaulieu S, Serrano A, Arape Y, Martinez M, de MS, Teneud L, Hernandez L. Metformin for prevention of weight gain and insulin resistance with olanzapine: a double-blind placebo-controlled trial. Canadian Journal of Psychiatry - Revue Canadienne de Psychiatrie.51(3):192-6. 2006.
4. Yatham L.N., Kennedy S.H., O'Donovan C., Parikh S.V., MacQueen G., McIntyre R.S., Sharma V., Beaulieu S. for CANMAT guidelines group. Canadian Network for Mood and Anxiety Treatments (CANMAT) Guidelines for the Management of Patients with Bipolar Disorder: Update 2007. Bipolar Disorders.8(6): 721-739. 2006.
5. Baptista T., Sandia I., Lacruz A., Rangel N., Mendoza S. D., Beaulieu S., Contreras Q., Galeazzi T., and Vargas D.. Insulin counter-regulatory factors, fibrinogen and C-reactive protein during olanzapine administration: effects of the antidiabetic metformin. Int Clin Psychopharmacol. 22 (2):69-76, 2007.
6. Baptista T., Martinez M., Lacruz A., Arellano A., Mendoza S., Beaulieu S., Hernandez L., Contreras Q., Galeazzi T., and Vargas D. Insulin resistance index and counter-regulatory factors during olanzapine or risperidone administration in subjects with schizophrenia. Schizophrenia Research. 89(1): 350-2. 2007.
7. Baptista T, Davila A, El FY, Uzcategui E, Rangel NN, Olivares Y, Galeazzi T, Vargas D, Pena R, Marquina D, Villarroel V, Teneud L, Beaulieu S. Similar frequency of abnormal correlation between serum leptin levels and BMI before and after olanzapine treatment in schizophrenia. Int Clin Psychopharmacol. 22(4): 205-211, 2007.
8. Baptista T, Rangel N, Fernandez V, Carrizo E, El FY, Uzcategui E, Galeazzi T, Gutierrez MA, Servigna M, Davila A, Uzcategui M, Serrano A, Connell L,

- Beaulieu S, de Baptista EA. Metformin as an adjunctive treatment to control body weight and metabolic dysfunction during olanzapine administration: a multicentric, double-blind, placebo-controlled trial. Schizophr.Res. 93(1-3): 99-108, 2007.
9. Therrien F, Drapeau V, Lalonde J., Lupien S. J., Beaulieu S, Tremblay A, and Richard D. Awakening Cortisol Response in Lean, Obese, and Reduced Obese Individuals: Effect of Gender and Fat Distribution. Obesity.15: 377-385. 2007.
 10. Parikh S, Velyvis V, Yatham L, Beaulieu S, Cervantes C, McQueen G, Siotis I, Streiner D, Zaretsky A. Coping styles in Prodromes of Bipolar Mania. Bipolar Disorders. 9: 589-95. 2007.
 11. Caron J, Tousignant M, Pedersen D, Fleury MJ, Cargo M, Daniel M, Kestin Y, Crocker A, Perrault M, Brunet A, Tremblay J, Turecki GM, Beaulieu S. La création d'une nouvelle génération d'études épidémiologiques en santé mentale. Santé Mentale au Québec. 32(2): 27-36, 2007.
 12. Baptista T., Aldana E., Angeles F. and Beaulieu S. Evolution Theory: An Overview of Its Applications in Psychiatry. Psychopathology. 41 (1):17-27, 2007.
 13. Therrien F, Drapeau V, Lupien SJ, Beaulieu S, Dore J, Tremblay A, and Richard D. Awakening cortisol response in relation to psychosocial profiles and eating behaviors. Physiol Behav. 93 (1-2):282-288, 2008.
 14. Bauer M, Beaulieu S, Dunner DL, lafer B and Kupka R. Rapid Cycling Bipolar Disorder – Diagnostic Concepts. Bipolar Disorders. 10 (1): 153-162. 2008.
 15. Ghaemi SN, Bauer M, Cassidy F, Malhi GS, Mitchell P, Phelps J, Vieta E, Youngstrom E; ISBD Diagnostic Guidelines Task Force and Collaborators (Angst J, Beaulieu S, Berk M, Birmaher B, Cassidy F, Dunner DL, Fagiolini A, Findling RL, Goodwin GM, Green M, Grof P, Hirschfeld RM, Johnson GF, Katzow J, Kumari V, Kupka R, Lafer B, Malhi GS, Mitchell PB, Peselow ED, Phelps J, Sadler JZ, Suppes T, Vieta E, Yatham LN, Youngstrom EA, Chengappa KN, Fulford W, Gershon S, Schaffner KF). Diagnostic guidelines for bipolar disorder: a summary of the International Society for Bipolar Disorders Diagnostic Guidelines Task Force Report. Bipolar Disorders. 10(1 Pt 2):117-28. 2008.
 16. Baptista T., ElFakih Y., Uzcátegui E., Sandia I., T´alamo E., Araujo de Baptista E. and Beaulieu S. Pharmacological Management of Atypical Antipsychotic-Induced Weight Gain. CNS Drugs. 22 (6): 477-495. 2008.

17. Baptista T., Uzcátegui E., Rangel N., El Fakih Y., Galeazzi T., Beaulieu S., and Araujo de Baptista E. Metformin plus sibutramine for olanzapine-associated weight gain and metabolic dysfunction in schizophrenia: A 12-week double-blind, placebo-controlled pilot study. Psychiatry Research 159 (1-2):250-253, 2008.
18. Ng F, Berk M, Sachs GS, Wilting I, Ferrier IN, Cassidy F, Beaulieu S, Yatham L. The International Society of Bipolar Disorders (ISBD) consensus guidelines for the safety monitoring of bipolar disorder treatments. (In press *Bipolar Disorders*) 2008.
19. Rabin M, Roll C, Losna I, Baptista T, Beaulieu S, Wolf MA, Assalian P, Tempier R, Turecki G. Comprehensive Nutrition Care to Prevent Bodyweight Gain and Metabolic Dysfunction Associated to Olanzapine Administration. (Submitted to *Pharmacopsychiatry*). 2007.
20. Waddington Lamont, E., Lalinec, M., Beaulieu, S., Ng Ying Kin, N. M. K., Walker, C.- D., & Boivin, D. B. Circadian variation of sleep and periodic limb movements in a bipolar man. (In Press to *Sleep Medicine*). 2008.
21. Baptista T., Rangel, N., ElFakih, Y., Uzcátegui, E., Galeazzi, T., Araujo de Baptista, E., and Beaulieu S. Rosiglitazone in the assistance of metabolic control during olanzapine administration in schizophrenia: a pilot double-blind, placebo controlled, 12-week trial (ACP-2008-0605), *Pharmacopsychiatry*. 41:1-6, 2008.

STATEMENT PAPERS

1. Lam R. and Kennedy S.
Beaulieu S. (as a CANMAT Member Reviewer). Prescribing Antidepressants for Depression in 2005: Recent Concerns and Recommendations. A statement from Canadian Network for Mood and Anxiety Treatments. The Canadian Journal of Psychiatry. 49(12): Insert 1-6, 2005.

CHAPTERS AND BOOKS

1. Roy M., Sablé R., Beaulieu S. and Lupien S. Neuropsychologie des désordres affectifs. In *Neuropsychologie clinique et neurologie du comportement*, edited by M. I. Botez. Ed.: Presse de l'Université de Montréal and Edition Masson. Third Edition. 2005.
2. Baptista T. and Beaulieu S. Reproductive Hormones and Metabolic Hormone Milieu in Mood Disorders. In: *Psychiatric and Metabolic Disorders*, edited by R. S. McIntyre and J. Z. Konarski, Nova Science Publishers Inc. 2007.

Abstract

1. T.J. Baptista, J. Martinez, A.Y. Lacruz, A. Serrano, J. Arape, M. Martinez, S. Beaulieu, S. Mendoza, L. Teneud, N. Rangel, L. Hernandez. Metformin for prevention of weight gain and insulin resistance with olanzapine: a double-blind placebo controlled trial. Society for Neuroscience Annual Meeting, 2005.
2. S. Beaulieu, P. Cervantes, L.N. Yatham, L. Belingard, R. Sablé, S. Saury, N. Maisy. Metabolic Abnormalities in a Bipolar Subgroup of the Canadian Bipolar Consortium: A two Years Follow-up Study. Annual Meeting of the American Psychiatric Association, May 2006.
3. S. Beaulieu, T. Baptista, M. Roy M, J. Thavundayil, R. Sablé, S. Saury, E. Paquet. Bipolar Affective Disorders: Activity of the Limbic-Hypothalamo-hypophyso-Adrenal Axis in an Acoustic Startle Paradigm. Annual Meeting of the American Psychiatric Association, May 2006.
4. S.V. Parikh, A. Zaretsky, I. Paletis-Siotis, L. Yatham, S. Beaulieu, P. Cervantes, G. MacQueen, D. Steiner & V. Velyvis. Relationship Functioning in Bipolar Disorders. Annual Meeting of the American Psychiatric Association, May 2006.
5. S. Beaulieu, T. Baptista, M. Roy M, J. Thavundayil, R. Sablé, L. Belingard, S. Saury, N Maisy, E. Paquet. Maladie Bipolaire et Sensibilisation au Stress : Rôle de l'Axe Limbo-Hypothalamo-Hypophyso-Surrenalien. Congrès Annuel de l'Association des Médecins Psychiatres du Québec. June 2006.
6. D.B. Boivin, E. Waddington Lamont, M. Lalinec and S. Beaulieu. Disrupted circadian variation of REM sleep in a bipolar man. 18th Congress of the European Sleep Research Society. September 12-16, 2006.
7. T.J. Baptista, A. Davila, N. Rancel, Y. elFakir, E. Uzcategui, T. Galeazzi, S. Beaulieu, Y. Olivares, V. Vanessa. Frequency of abnormal correlation between serum leptin levels and body fat after olanzapine administration in psychotic subjects. 36th annual meeting, Neuroscience 2006. October 14-18, 2006.
8. M. Miresco, L. Belingard, R. Sablé, S. Saury, T. Baptista and S. Beaulieu. Childhood Trauma and Physiological Responses to a Stressful Auditive Stimulation in Bipolar Affective Patients. Annual Meeting of the Canadian Psychiatric Association, November 2006.
9. S. Beaulieu, T.J. Baptista, M. Roy, L.Belingard, F. Corbalàn, R.Sablé and S.Saury. Bipolar Affective Disorders, Mood states, and the acoustic Startle Paradigm. Annual Meeting of the American Psychiatric Association, May 2007.

10. S. Beaulieu, T. Baptista, M. Roy, L. Belingard, F. Corbalàn, R. Sablé, S. Saury. Plasmatic Cortisol Levels During a Startle Paradigm in Bipolar Disorder. Seventh International Conference on Bipolar Disorder, June 2007.
11. S. Beaulieu, T. Baptista, M. Roy M, L. Belingard, F. Corbalàn, R. Sablé, S. Saury. Differential Fear-Potentiated Startle Response in Bipolar Type I and Type II Disorders. Annual Meeting of the Canadian Psychiatric Association, November 2007.
12. B.I. Goldstein, V.P. Velyvis, S.V. Parikh, A. Zaretsky, I. Patelis-Siotis, L. Yatham, S. Beaulieu, P. Cervantes, G. MacQueen, D. Streiner. Does Moderate Alcohol Use in Bipolar Disorder Predict Increased Symptom Severity and Poorer Functioning? Annual Meeting of the Canadian Psychiatric Association, November 2007.
13. S Beaulieu, T Baptista, M Roy, L Belingard, F Corbalan, R Sablé, S Saury. Differential Fear-Potentiated Startle Response in Bipolar Type I and Type II Disorders. 57th Annual Meeting of the Canadian Psychiatrist Association (CPA). November 2007.
14. S. Beaulieu. Invited Speaker on Bipolar Disorder and Medical Morbidity Symposium: Biological underpinnings of the increased prevalence of medical comorbidities in bipolar disorders. 3rd Biennial Conference of the International Society for Bipolar Disorders (ISBD). January 2008.
15. G. Sachs, M. Berk, F. Ng, N. Ferrier, I. Wilting, F. Cassidy, S. Beaulieu, L. Yatham. Safety monitoring of bipolar disorder treatment: ISBD Consensus guidelines. 3rd Biennial Conference of the International Society for Bipolar Disorders (ISBD). January 2008.