

Special points of interest:

- The first ever BIOS newsletter is here!
- Please contact us if you are interested in participating in any additional research studies!
- Remember to update your contact information with us!
- Thanks for participating in the study for all of these years!

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The BIOS Study Will Continue Through 2021!!

The National Institute of Mental Health (NIMH) funded the first phase of the BIOS Family Study in 2001. Today, we are happy to announce that the study has been refunded for the 4th time! This refunding will allow us to continue to follow our families through 2021, providing the scientific community with valuable information which translates into potential clinical interventions. We would like to take this opportunity to thank all of our participants, as well as, doctors, researchers, and

staff; we could not have made it this far without you!

BIOS has always had amazing retention and that cannot happen without our participants. So, if you are a participant and have not been seen in the last 2 years or if your contact information has changed, please contact Kelly Monk at 412-246-5796 or monkk@upmc.edu. Additionally, if you participated in the MRI portion of the study we will be contacting you about having a second scan during

the new phase of BIOS.

During the new phase of the study we will also have some new research opportunities! We would greatly appreciate your assistance in helping us to find the right candidates for several supplemental studies related to the original BIOS family study. Please see related items below.

Also, we would like to thank the NIMH, Fine Foundation and the McGuinn Family Foundation for their continued support of our endeavors.

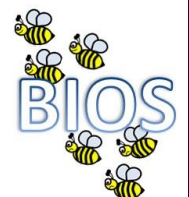
BIOS BEES (Brain Imaging Evaluation of Emotions Study)

New Participants Needed—those who have not previously participated in BIOS

In the new phase of the BIOS Family study, we will recruit new participants for an MRI sub study (these participants cannot have been in the original BIOS family study). We are looking for 2 different groups of families. The first group will include a parent diagnosed

with bipolar disorder with a child also diagnosed with bipolar disorder between the ages of 8 and 16. The second group would include a parent who has no emotional or behavioral health symptoms with a child who is also symptom-free between the ages of 8 and 16. If you

know someone who might be eligible and interested in the study please have them contact Kelly Monk at 412-246-5796 or monkk@upmc.edu. Participants will be compensated for their time.



Ways for Adolescents to Validate Emotions (WAVE) Study

In this study, we are investigating two psychotherapy approaches (Dialectical Behavior Therapy and Standard of Care Psychotherapy at our CABS clinic) for adolescents with bipolar disorder. We know that psychotherapy, with medications, can be helpful in managing bipolar disorder. However, there is much to be learned about which type of therapy is best for which adolescent with bipolar disorder. We are currently recruiting adolescents age 12-18 with a di-

agnosis of bipolar disorder and their family members. Participation in the study lasts for 2 years. Participating families will be randomly assigned (by chance) to receive one of 2 psychotherapy treatments for an entire year free of charge. One group will receive Dialectical Behavior Therapy (DBT), and one group will receive Standard of Care Psychotherapy at our CABS clinic. Both of these approaches include individual therapy for the adolescent and some family involvement. All

participating adolescents will see a psychiatrist to manage their medications, and will participate in assessment interviews every 3 months. Families are compensated for their participation. Please call Megan at (412) 864-3321 or email wavestudy@upmc.edu to learn more about the WAVE study!



Renewal and Eternal Hope by Kelly Monk, RN

My sister was ill over the New Year's holiday and unable to celebrate the incoming year in her usual fashion. When she started to feel well she decided to "redo" her New Year and have a "Re-New Year." She gave herself permission to re-start her year. Simple concept, right? I have been reflecting on my sister's approach to her "Re-New" year and suddenly it seems important to apply to other areas of life.

In our culture, we often avoid examining our emotions, pushing them away or stuffing them down with food. Sometimes we avoid the process of self-examination by filling time with activities such as watching television or "surfing the internet."

While technology rapidly advances, the condition of human spirit remains the same as it has over thousands of years, with very basic needs and desires. Emotional renewal transcends time and technology and is most beneficial if a conscious effort is made to seek daily personal renewal. Just as physical activity occurs when an individual chooses and determines to do so, emotional renewal doesn't "just happen." Meditation, prayer and reflection are exercises that can promote self renewal and recovery.

Stephen R. Covey, author of "*7 Habits of Highly Effective People*" suggests that individuals devote an hour a day to some type of exercise seeking personal renewal and

considers this a "daily private victory." Renewal is something we can only do for ourselves and is a pro-active approach to strengthening the human spirit.

Personal renewal can be done in various ways. Often it is an inner shift that results in life changing experiences. Author, Sandy Paris wrote, "Renewal means waking up the heart to divine love, humor and the right discrimination between the virtues and vices of life."

As we encounter spring blossoms after a long winter, may we remain hopeful and mindful of the importance of regular personal renewal. By giving herself permission to restart her new year, my sister is off to a great start.

*originally printed in the WPIC
Pastoral Care Services Newsletter*

Dr. Tina Goldstein Selected by President Obama to Receive Early-Career Award for Extraordinary Scientists and Engineers

President Barack Obama has named Dr. Tina Goldstein as a recipient of the Presidential Early Career Award for Scientists and Engineers. Dr. Goldstein is one of a select group of researchers chosen by the President to receive this honor.

Awardees are selected for their pursuit of innovative research at the frontiers of science and technology, and their commitment to community service as demonstrated through scientific leadership, public education, or community outreach. It is the highest honor bestowed by the United States Government on science and engineering professionals in the early

stages of their independent research careers.

She has served as the Principal Investigator for multiple projects supported by the National Institute of Mental Health and private foundations, and as a Co-Investigator for numerous other externally sponsored projects. In addition to her extensive research and academic activities, she is an outstanding clinician, teacher and mentor.

Dr. Goldstein and the other Early-Career Award winners will be presented with their awards at a special ceremony in Washington, DC



this spring. Please join us in congratulating Dr. Goldstein on her receipt of this prestigious award.

Pediatric Bipolar Conference 2015

In October, we held the first Pediatric Bipolar Conference. There were 170 attendees at the conference which included several speakers in the morning session and presentations by a young adult patient and a parent of a young client. The afternoon session consisted of four breakout sessions.

The keynote address was delivered by Boris Birmaher, MD entitled "Does Bipolar Exist in Youth?" The additional morning presentations were offered by Rasim Somer Diler, MD and Tina R. Goldstein, PhD; entitled "Differential Diagnosis in Youth with Bipolar Spectrum Disorder" and "Psychosocial Strategies that Can Help Youth with Bipolar

Spectrum Disorder," respectively.

The four breakout sessions included: "Family Interventions for Youth with Bipolar Spectrum Disorder," which was presented by Amy Schlonski, LCSW, BCD and Tim Winbush, LCSW; "Assessment and Monitoring of Youth with Bipolar Spectrum Disorders," presented by Christine A. Hoover, MSN, PMHCNS-BC and Susan Wassick, RN; "Key Elements of Individual Therapies for Youth with Bipolar Spectrum Disorders," Presented by Rachael Fersch-Podrat, LCSW and Nina Hotkowsky, LCSW; and finally, Danella Hafeman,

MD, PhD and Dara Sakolsky, MD, PhD presented "Medications for Children with Bipolar Spectrum Disorders."

If you are interested in learning more about the conference or seeing some of the PowerPoints, posters, and other materials please see our website: <http://www.pediatricbipolar.pitt.edu/> (the link to the conference is on the left side of the page, "Pediatric Bipolar Conference 2015.")

Plans have already begun for our next conference, to be held in October 2017! Stay tuned!

BIOS Study

Bipolar Offspring Study (BIOS)

A research study at the University of Pittsburgh

Pittsburgh Investigators and Staff: David Axelson MD, Boris Birmaher MD, Rasim Diler MD, Benjamin Goldstein MD, Danella Hafeman MD, PhD, Satish Iyengar PhD, David Kupfer MD, Cecile Ladouceur PhD, Mary Phillips MD, PhD, Dara Sakolsky MD, PhD, Renee Clark MPH, Ronna Currie BS, Josh Feldmiller BS, Mary Beth Hickey BA, Kelly Monk BSN, RN, Brian Rooks MS, Rita Scholle BA, Lindsay Virgin BA



What are the aims of the study?

- To follow both groups of families over time to examine the differences in rate and type of diagnoses presented (e.g., bipolar disorder, anxiety disorders, ADHD), symptoms (e.g., impulsivity, mood lability, depression), and daily functioning (e.g., academic, family, and social)
- To find the factors associated with increased risk to develop bipolar disorder
- To study the brain circuits associated with the onset of bipolar disorder

What are the findings?

- Offspring of parents with BP are at specific higher risk to develop BP, especially if they have significant depressive/anxiety symptoms, mood lability, and subsyndromal manic symptoms and their parents had early onset mood symptoms.
- About 20% of the offspring of parents with BP have developed bipolar disorder, meaning that not all children of parents with BP develop BP.
- However, a significant proportion offspring of parents with BP are at higher risk to have other disorders when compared with offspring of controls. These results indicate the need to identify and treat these disorders.

Who are the participants?

Offspring of individuals diagnosed with Bipolar Disorder (BP) (n=516) and offspring of community control parents (n=346). Control parents can have psychiatric disorders but not bipolar disorder.

What are the next steps?

- Continue to follow all eligible offspring through 2021
- Continue to share our findings with the scientific community and general population thru publications and presentations so that early diagnosis and intervention can occur

This research is funded by the National Institute of Mental Health

The above poster was presented at the Bipolar conference which was mentioned on page 3.

At intake, the children's ages the ages ranged from 2 to 18 years old. Today the ages range between 9 and 32 years old. Please note that recruitment for the

study happened between 2001 and 2007.

BIOS has conducted over 4500 follow-up interviews, seeing over 500 participants within the last two years alone. BIOS is a long lasting study that continues to have very high retention rates, approximately 90%.

Thanks to all of our wonderful participants for your time and devotion to the study!

HeartBIOS Study

HeartBIOS Study ♥

A research study at the University of Pittsburgh



Investigators and Staff: Benjamin Goldstein MD, PhD, Boris Birmaher MD, Rasim Diler MD, Danella Hafeman MD, PhD, Renee Clark MPH, Mary Beth Hickey BA, Kelly Monk BSN, RN, Rita Scholle BA

What are the aims of the study?

To determine if metabolic syndrome (high blood pressure, high cholesterol, obesity and diabetes) and high levels of hs-CRP (an inflammatory marker) are found at higher rate in families affected by bipolar disorder.

Who are the participants?

Parents and offspring who are participating in the Bipolar Offspring Study:

	Baseline	2-year Follow-Up
Parents <u>with</u> Bipolar Disorder	124	15
- Their offspring	168	26
Parents <u>without</u> Bipolar Disorder	100	12
- Their offspring	126	17

What are the clinical implications?

- Metabolic syndrome components are relevant to families affected by bipolar disorder because they are associated with both physical and mental health.
- Gaining a better understanding of who is at risk for developing metabolic syndrome components.

What are the findings?

This study will help us answer several important questions:

- Are metabolic syndrome components more common among parents and offspring with mood disorders, and do they predict future onset of mood disorders?
- Are metabolic syndrome components more common among offspring of parents with bipolar disorder even if they don't have mood disorders?
- Do mood disorders and metabolic syndrome components "travel together" in families?

What are the next steps?

With the first wave of the HeartBIOS study nearing completion, we are looking forward to continuing the second wave, which will allow us to look at changes over time.

This research is funded by the National Institute of Mental Health

Above is the HeartBIOS poster that was presented at the Bipolar conference (page 3)

HeartBIOS (also known as the medical screening study or the metabolic screening study) is an extension of the main BIOS study and looks specifically at physical health measures. This extension of the study has only two visits associated with it, intake and one follow-up. Intakes

started in April 2013 and will continue through 2017. There have been over 550 intakes and more than 150 follow-up visits, conducted to date. The HeartBIOS study includes both parents and offspring who originally participated in BIOS.

The National Institute of Mental Health (NIMH) is just now beginning to support more research of this kind, put-

ting BIOS on the cutting-edge of this field!

If you are in the BIOS study, but have not participated in the HeartBIOS Study and think you may be interested, please contact Kelly Monk at 412-246-5796 or monkk@upmc.edu, and she would be happy to help you determine if you are eligible for this portion of the study.

WPIC Shout Out!

**Principal Investigator:
Boris Birmaher, MD**



**Thank you for being
a part of the BIOS
Family Study!**

**Study Coordinator:
Kelly Monk, BSN, RN**



To Contact:

**412-246-5796
monkk@upmc.edu**

**Editor:
Renee Clark, MPH**

Child and Adolescent Bipolar Spectrum Services (CABS) Directors Boris Birmaher, MD, Rasim Somer Diler, MD, and Tina Goldstein, PhD would like to thank the faculty and staff, Danella Hafeman, Dara Sakolsky, Rachel Fersch-Podrat, Christine Hoover, Nina Hotkowsky, Megan Krantz, Kelly Monk, Amy Schlonski, Sue Wassick and Tim Winbush for their contributions and presentations at the “Bipolar Spectrum Disorders in Youth: Assessment, Differential Diagnosis, and Treatment” conference held on October 15, 2015 at the University Center. More than 170 participants attended the first-time conference which featured presentations related to CAB’s clinical and research endeavors. The presentations and accommodations were excellent and feedback was extremely positive. Congratulations on a job well done! The clinic directors look forward to this becoming a regular event.

New Research—FAB Study

The goal of the Fitness in Adolescents (FAB) study is to test the effect of physical activity on brain, cognitive functions, and emotions. The aim of the current study is to test the feasibility of measuring physical activity in adolescents. Eligible participants are those between the ages of 13 and 17, who are able to ride an exercise bicycle, and that have not been diagnosed with bipolar disorder. This study involves two visits and activities in-between visits. The first visit will take about an hour with 20 minutes of exercise and it will be an assessment of physical fitness on a recumbent bicycle. The second visit is for cognitive testing and physical activity measures. During this visit you will be asked to use the exercise bike for 20 minutes, your heart rate will be monitored before and after exercising and you will complete a 20 minute computerized cognitive task. Between visits you will be asked to wear an armband that measures physical activity. Please contact Danella Hafeman if you interested at 412-246-5820 or hafemand@upmc.edu.

Please visit our website:

www.pediatricbipolar.pitt.edu

