MUSC Psychiatry Chair Update
November 2015

Thomas W. Uhde, MD
Department of Psychiatry and Behavioral Sciences & Institute of Psychiatry
Dr. Kelly Holes-Lewis is an adult psychiatrist whose primary focus is in the treatment of depression and anxiety disorders. She utilizes a broad range of therapeutic techniques in the care of her patients, including multiple types of psychotherapy in conjunction with medication management, if needed. She has specialized experience in the treatment of patients with cancer of all types and stages. She also specializes in the treatment of clients in high stress careers, such as, physicians, executives and high profile members of the community, who often need to adopt time saving stress reduction, business, and wellness strategies into their daily routines. Dr. Holes-Lewis believes in well-rounded care that involves mind, body and spirit.

Dr. Holes-Lewis completed her Psychiatry training at the Medical University of South Carolina. She is board certified in Adult Psychiatry by the Board of Psychiatry and Neurology and also board certified in Obesity Medicine by the American Board of Obesity Medicine. She is involved in both research and clinical care in both specialty areas. She has authored and co-authored book chapters, original publications and also participates as an invited speaker in these specialties.
Following the completion of her social work training at San Jose State University in California in 1983, Louise Haynes MSW accepted a position in the ADTP (Alcohol and Drug Treatment Program) at the Charleston VA Hospital. Ray Anton was an attending on Psychiatry; Kathleen Brady was a resident; and, soon after her arrival, Bob Malcolm joined the ADTP as Medical Director. It was an incredibly rich learning environment for a new social worker. After five years of front line social work, Louise left the VA and moved to Columbia where she became the Director of Women’s Services at South Carolina Alcohol and Drug Abuse Commission (now DAODAS) with another great mentor, Jerry McCord. In response to concern over the much-publicized crack cocaine epidemic of the day and with new “Set Aside” money from SAMHSA, it was her job to establish policies and programs to promote improvement in addictions services for women in South Carolina.

The next stop on Louise’s career was as Director of Morris Village and the Director of the Division of Alcohol and Drug Services for the South Carolina Department of Mental Health. While at Morris Village she formed a partnership with MUSC and the South Carolina Node of the NIDA Clinical Trials Network. Morris Village was a site for one of the early CTN studies (TELE), testing the use of phone calls to connect patients transitioning from inpatient to out-patient treatment. For the next fifteen years Louise served as the Community Treatment Program Representative for the MUSC Node of the CTN. Currently, she is an Assistant Professor in the Addiction Sciences Division, a Co-Investigator on the CTN grant, and has been the Node PI for numerous CTN sponsored studies, including studies conducted at the Atlanta VAMC and the University of Alabama at Birmingham. Her work in the area of adoption of HIV rapid testing in substance abuse treatment programs has received national attention. Most recently, she presented a poster titled *Project HOPE: Hospital Visit as Opportunity for Prevention and Engagement for HIV-Infected Drug Users* at the International Society of Addiction Medicine Congress in Dundee, Scotland. Coming full circle, Louise is now leading a Twelve Step Facilitation Group as part of Kathleen Brady’s Mindfulness Based Recovery study at the Charleston VA.
Dr. Leilani Lee graduated from the College of Charleston where she earned an Artium Baccalaureatus Degree (A.B.), demonstrating advanced proficiency in Latin in addition to her Biology Major. She subsequently attended a Post-Baccalaureate program at Boston University. Dr. Lee graduated from the Medical University of South Carolina (MUSC) College of Medicine and completed her psychiatry residency at Stony Brook University, Stony Brook, New York. She completed her Forensic Psychiatry Fellowship at the University of Massachusetts Medical School. Dr. Lee began her research career in the Department of Cellular and Molecular Biology at MUSC while an undergraduate at the College of Charleston and continued research in the Division of Molecular Imaging and Neuropathology at the New York Psychiatric Institute, Columbia University.

Dr. Lee is Board Certified in General Adult and Forensic Psychiatry and is a Fellow in the American Psychiatric Association. She holds a position as Assistant Professor within the Department of Psychiatry and Behavioral Sciences at MUSC, where she serves on the Workplace Violence and Grand Rounds Committees and the College of Medicine Professional Standards Subcommittee. She is also a member of the American Academy of Psychiatry and the Law where she serves a member of the Education and Cross-Cultural Issues Committees.

Dr. Lee currently works in the Community and Public Safety Psychiatry Division of the Department of Psychiatry and Behavioral Sciences at MUSC as a Forensic Psychiatrist. Her work within the division includes being supervisor for Correctional Psychiatry services provided by the division and training Forensic Psychiatry and Psychology Fellows. As a Forensic Psychiatrist, Dr. Lee completes competence to stand trial, criminal responsibility, aid to sentencing, malpractice, disability, fitness for duty, and sexual behavior evaluations. She also continues in clinical practice within the Bio-Behavioral Medicine Division of the Department of Psychiatry and Behavioral Sciences at MUSC. She provides psychiatric assessments and treatment for pre- and post-organ transplant patients and patients with co-morbid medical problems. She also provides psychiatric treatment for patients who are receiving oncological care at the Hollings Cancer Center. As part of her clinic practice, Dr. Lee provides Cognitive Behavioral Therapy for a variety of psychiatric disorders. Her current research interests include Correctional Psychiatry and Sexual Behaviors.
KUDOS/WINS

• Dr. Connie Guille's research on reducing interns’ risk of having suicidal thoughts was published in the Journal of American Medical Association (JAMA) Psychiatry and featured on the MUSC News Center webpage http://academicdepartments.musc.edu/pr/newscenter/2015/guille-constance-jama-psychiatry-study-on-reducing-suicidal-thoughts-in-interns.html#.VkS1pE3luUk

CONGRATULATIONS DR. PETERSON

AAMC- 2015 ORR
Organization of Resident Representatives
Community Service Recognition Award:

Daena L. Petersen, M.D., M.P.H., M.A.

Dr. Daena Petersen serves vulnerable populations in the state of South Carolina, including People Living with HIV/AIDS, transgender individuals across the age span.

In partnership with Dr. Cassandra Galindo and the Infectious Disease Division of Medical University of South Carolina’s Infectious Disease Department and under the supervision of Dr. Edward Kinter of MUSC’s Behavioral Sciences Department, Dr. Petersen has been involved in a number of HIV psychiatry projects in Charleston. The program at MUSC’s behavioral health clinic includes three objectives: to expand psychiatric services in the outpatient setting; to establish collaborative clinical care between gay and GLBT services in the university health system and community health organizations; and third, to establish a HIV psychiatry clinic for the care of patients with HIV.

Congratulations to
Daena Petersen, MD
PG 4 General Psychiatry Resident

https://www.aamc.org/members/orr/about/446272/daenapetersen.html
Dr. Darlene Shaw was selected to receive the 2015 Women Scholars Faculty Advancement Award which is awarded by the university to a faculty member who demonstrates excellence in her/his commitment to the advancement of women faculty. You are invited to attend an award reception on Dec. 7, 2015 at 4:00 pm in Colcock Hall lobby.

ICD-10 UPDATE

REMINDER TO ALL PROVIDERS: ICD-10 diagnosis codes should be submitted for services provided October 1, 2015 and after. ICD-9 codes should not be submitted for billing as they are not recognized for billing after September 30, 2015. If you have any questions, please contact Kelly Mendoza

UNUSED, UNWANTED MEDICATION DROPBOX

In an effort to assist other local law enforcement organizations in decreasing the amount of illegally used or improperly disposed of prescription medications in the Charleston area, the Medical University of South Carolina (MUSC) Public Safety Department has installed a secure, medication drop box for unused or unwanted prescription medications.

The new medication drop box is located in the lobby of the MUSC Public Safety department, located at 101 Doughty Street.

http://academicdepartments.musc.edu/pr/pressrelease/2015/dropbox.htm
NEW HIRES

New Hires—Institute of Psychiatry:
Alex Canova
Kathleen Duncan
Breshawn Frasier
Shawn Katalinas
Patrick Olalere
Heather Thomas

SPRING CYCLE FOR PROMOTION & TENURE

For anyone who is requesting promotion or tenure effective January 1, 2017, all promotion and tenure requests must be received in the Chairman’s office no later than February 9, 2016, in the form of complete packets accompanied by a letter of recommendation from your Division Director. Packets with checklists, requests for materials, and forms specific for regular and modified faculty have been developed to make the submission process more straightforward. Packets are available on the College of Medicine’s website. Follow this link: http://academicdepartments.musc.edu/com/faculty/apt/musc/index.html. The letter of recommendation from your Division Director must follow appendix 2 in the COM APT guidelines. Division Director letters should include the following paragraphs: introductory, education, research if applicable, scholarly publications, clinical practice if applicable, administration, and other activities and accomplishments. If you have any questions, please contact Kristen Mulholland mulhollk@musc.edu.

Wu LT, Ghitza UE, Batch BC, Pencina MJ, Rojas LF, Goldstein BA, Schibler T, Dunham AA, Rusincovitch S, Brady KT. Substance use and mental diagnoses among adults with and without type 2 diabetes: Results from electronic health records data. Drug Alcohol Depend. 2015 Sep 12.

Pelluru D, Konadhode RR, Bhat NR, Shiromani PJ. Optogenetic stimulation of astrocytes in the posterior hypothalamus increases sleep at night in C57BL/6J mice. Eur J Neurosci. 2015 Sep 15.


Cortese BM, Uhde TW, LaRowe SD, Stein SV, Freeman WC, McClernon FJ, Brady KT, Hartwell KJ. Olfactory cue reactivity in nicotine-dependent adult smokers. Psychol Addict Behav. 2015 Mar;29(1):91-6.
Please join us for a

Holiday Luncheon
Tuesday, December 15
11:30am-1:00pm
IOP lobby

Please RSVP by December 7 to mulhollk@musc.edu. You MUST RSVP to attend the luncheon. Those attending are encouraged to bring a side dish or a dessert to share. Please email mulhollk@musc.edu if you plan to bring a side dish or dessert.

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American Red Cross

Give a meaningful gift this holiday season.
Donate blood.

Blood Drive
MUSC Institute of Psychiatry

Friday, December 4th
10am-3pm
Held in Mgmt 4 South (410 G)

Please contact Bonnie Jones at 792-6341 or jonesb@musc.edu to schedule your donation.
Title: Eagle Eye: Validation of computer-based saccade measures as a sensitive, reliable, and freely available biomarker for tracking subtle neurocognitive changes in Parkinson's disease.
**Sponsor:** Michael J. Fox Foundation  
**Contact:** Jenna Renfroe, PhD; renfroe@musc.edu; 843-792-6096  
**Description:** This study aims to validate a computer-based task to enable clinicians and researchers to measure saccades without the cost and complexity of traditional eye-tracking equipment.

Title: Development and standardization of an iPhone-based application for quantitative measurement of the pupillary light reflex in healthy adults and patients with Parkinson’s disease. (iDilate)
**Sponsor:** Chairs Departmental Research Foundation  
**Contact:** Jenna Renfroe, PhD; renfroe@musc.edu; 843-792-6096  
**Description:** This aim of this project is to develop and standardize an application that would allow clinicians, researchers, and community-based safety personnel (e.g., police and EMS) to obtain quantitative measurements of the pupillary light reflex, a highly sensitive measure of neurological functioning.

Title: Atomoxetine Treatment for Cognitive Impairment in Parkinson’s Disease (ATM-Cog).
**Sponsor:** Michael J. Fox Foundation  
**Contact:** Vanessa Hinson, MD, PhD; hinsonvk@musc.edu; 843-792-6096  
**Description:** This is a RCT assessing the safety and efficacy of ATM for cognitive impairment in Parkinson’s disease.

Title: Ranger Resilience and Improved Performance on phospholipid bound Omega-3’s (RRIP-3).
**Sponsor:** Aker Biomarine  
**Contact:** Travis H. Turner, PhD; turnertr@musc.edu; 843-577-5011 x5192  
**Description:** This is a RCT examining whether supplementation with phospholipid bound omega-3 improves resiliency to psychophysiological distress in a sample of 400 candidates going through Infantry Basic Officer Leadership Course (IBOLC) and subsequent Ranger training at Ft. Benning. In addition to grades from IBOLC and success/failure in Ranger training, a number of neuropsychiatric measures are included as outcome and mediator/moderator variables.

Title: Better Resiliency Among Veterans with Omega-3’s (BRAVO)
**Sponsor:** Congressionally Directed Medical Research Program.  
**Contact:** Samantha Wise; wissa@musc.edu; 843-792-2425  
**Description:** This RCT seeks to determine if dietary supplementation with omega-3 HUFAs reduces the risk for serious suicidal behaviors in an at-risk clinical population. Changes in cognitive processes specific to suicide risk are evaluated, including implicit associations, response inhibition and sustained attention.
ONGOING STUDIES

**Title: Positive Psychotherapy to Improve Autonomic Function and Mood in ICD Patients**

Contact: Dr. Lily Christon (Project Coordinator); Dr. Eva Serber (PI)

Contact email: pam-icd@musc.edu

Contact phone number: 843-792-0625

Description: This study is a randomized clinical trial of a positive-emotion focused cognitive-behavioral therapy intervention (Quality of Life Therapy) vs. a heart healthy education intervention among patients with implantable cardioverter defibrillators (ICD), with the primary aim of feasibility and acceptability of QOLT in ICD patients. Secondary aims include obtaining effect size estimates of QOLT on frequencies of arrhythmia episodes and ICD-delivered therapies, parasympathetic activity and regulation, and QOL and psychosocial constructs. Recruitment: patients of MUSC Cardiology

**Title: TMS for nicotine addiction**

Contact: Scott Henderson or Xingbao Li

Contact email: henderjs@musc.edu or lixi@musc.edu

Contact phone: 843-792-5560 or 843-792-5729

Description: This is a double blind randomized controlled smoking cessation research study sponsored by the National Institute of Drug Abuse. This study is designed to ascertain whether repetitive transcranial magnetic stimulation (rTMS) can affect things that may prompt you to want to smoke and the consumption of cigarettes over a 3-month period. After assessment and inclusion into the study, participants will be randomized to receive a 10-time active rTMS or placebo-like rTMS. Participants must be (1) current cigarette smokers; (2) between 18-60 years old; (3) able to commit approximately 13 hours of time to the study; and (4) have no metal in their body. Compensation will be provided.

**Title: Integrative Risk Reduction and Treatment for PTSD and Teen Substance Use Problems**

Contact: Liz McGuan, mcguan@musc.edu, 843-792-8361

Description: This program involves a randomized controlled trial (RCT) with subjects ages 13-18 years who have experienced interpersonal violence (physical or sexual abuse/assault, exposure to domestic violence, witness community violence). Subjects are randomized to either receive Risk Reduction through Family Therapy (RRFT) or Treatment As Usual (TAU). Youth will be recruited from local child advocacy centers and the interventions are psychosocial in nature. Follow-up assessments will be conducted at multiple time points through 18-month post entry.

**Title: Investigation of safety and efficacy of once-daily semaglutide in obese subjects without diabetes mellitus**

Contact: Suzanne Kuker, kuker@musc.edu, 792-5427

Description: This study seeks to determine whether semaglutide, will help non-diabetic people who are obese to lose weight over one year. Participants will be randomly assigned to receive 1 of 5 doses of semaglutide, liraglutide or an inactive placebo and will be enrolled in the study for 59 weeks. The primary measure will be weight change and other measures will include health factors related to obesity such as blood sugar control, blood pressure, and cholesterol. The safety of the drug for weight loss will also be studied.
Title: Group Motivational Interviewing (GMI) for Homeless Veterans in VA Services  
Contact: Kayla Lamb, Kayla.Lamb@va.gov, 843-577-5011 ext: 5310  
Description: We are seeking Veterans who are homeless or in the VA Homeless Program to voluntarily enroll in a VA research study comparing two types of treatment for Veterans who have an alcohol misuse problem. Eligible participants will attend one of two groups: a motivational enhancement group therapy, called ‘The Self-Change Program’, designed to enhance motivation to make a healthier change around using substances by exploring personal goals, values, and strengths for making a change, or a Like Skills Educational Group therapy for improving quality of life and enhancing home stability. The study will recruit participants from within three locations: the Charleston VA Medical Center, the Myrtle Beach Community Based Outpatient Clinic (CBOC), and the Savannah, GA CBOC. Compensation will be provided to qualified participants.

Title: A Randomized, Double-blind, Multicenter, Placebo-controlled, Parallel-group, Efficacy and Safety Study of 2 Doses of Dasotraline in Adults with Attention Deficit Hyperactivity Disorder (ADHD)  
Contact: Amanda Wagner, wagne@musc.edu, 843-792-0484  
Description: This is a randomized, placebo-controlled, double-blind clinical trial (Phase III) evaluating the safety and efficacy of an investigational medication called Dasotraline in adults with Attention Deficit Hyperactivity Disorder. The study requires weekly visits for 12 weeks, and daily medication compliance.

Title: Smart Capsule for Automatic Adherence Monitoring  
Contact: Elizabeth Jones, jonesel@musc.edu, 843-792-5819  
Description: The purpose of this study is to determine the acceptability, tolerability, and efficacy of capsules with built-in, ingestible sensors that allow researchers to tell whether or not a patient took them as prescribed. This study is recruiting healthy volunteers.

Title: Effects of transcranial Direct Current Stimulation and Brief Cognitive Intervention on Pain Tolerance.  
Contact: Brittan Carter, cartebri@musc.edu, (843) 792-3659  
Description: The Departments of Psychiatry and Anesthesiology at MUSC are accepting volunteers for a clinical research study to investigate pain tolerance. The purpose of this study is to determine whether a new medical technology, called Transcranial Direct Current Stimulation (tDCS) can temporarily alter pain tolerance level. tDCS is a minimally-invasive technique (i.e., it does not involve any surgical procedures, additional medication or sedation, or needles) that uses a very small amount of electricity to temporarily stimulate specific brain areas in awake people. The electrical current passes through the skin, scalp, hair, and skull and can temporarily increase or decrease activity in areas of the brain that are thought to be involved with pain perception. Interested participants will be screened on the telephone and then have one appointment lasting approximately 1 hour. Participants must be between the ages of 18 and 75. Participation is confidential, and compensation is available.
ONGOING STUDIES

Title: The Effects of Cognitive Behavioral Therapy and Transcranial Direct Current Stimulation (tDCS) on Fibromyalgia Patients
Contact: Brittan Carter, cartebri@musc.edu, (843) 792-3659
Description: The purpose of this study is to determine whether a new medical technology, called Transcranial Direct Current Stimulation (tDCS), can help reduce fibromyalgia and reduce the need for pain medication when applied in combination with cognitive behavioral therapy (“talk therapy”). tDCS is a minimally-invasive technique (i.e., it does not involve any surgical procedures, additional medication or sedation, or needles) that uses a very small amount of electricity to temporarily stimulate specific brain areas in awake people. The electrical current passes through the skin, scalp, hair, and skull and can temporarily increase or decrease activity in areas of the brain that are thought to be involved with pain reduction. Some preliminary studies suggest that tDCS may be effective in reducing fibromyalgia and altering pain perception in both healthy adults and in patients with various types of pain conditions. Participants must be between the ages of 21 and 85. Participation is confidential, and compensation is available.

Title: Preliminary Study Investigating Whether Low Field Magnetic Stimulation (LFMS) Has Antinociceptive Effects In A Laboratory Pain Model
Contact: Brittan Carter, cartebri@musc.edu, (843) 792-3659
Description: The purpose of this study is to determine whether a new form of non-invasive brain stimulation, called low field magnetic stimulation (LFMS), can relieve pain. LFMS is like another form of brain stimulation called transcranial magnetic stimulation (TMS). This study consists of a 30 minute screening visit and two 90-minute experimental trials separated by approximately one week. Participation is confidential, and compensation is available.

Title: The Effects of Cognitive Behavioral Therapy and Transcranial Direct Current Stimulation (tDCS) on Chronic Lower Back Pain
Contact: veteranpainsc@gmail.com, 843-779-2493
Description: The purpose of this study is to determine whether a new medical technology, called Transcranial Direct Current Stimulation (tDCS), can help reduce chronic lower back pain and reduce the need for pain medication when applied in combination with cognitive behavioral therapy (“talk therapy”). tDCS is a minimally-invasive technique (i.e., it does not involve any surgical procedures, additional medication or sedation, or needles) that uses a very small amount of electricity to temporarily stimulate specific brain areas in awake people. The electrical current passes through the skin, scalp, hair, and skull and can temporarily increase or decrease activity in areas of the brain that are thought to be involved with pain reduction.

• COMPENSATION PROVIDED
• ALL INFORMATION IS CONFIDENTIAL
PARTICIPANTS MUST:
• Be between the ages of 18 - 70
• Suffer from chronic pain
• Be a United States Veteran
• Take a prescription pain medication
Title: rTMS for Adolescent Depression -- upcoming in the next couple weeks
Contact: Annabel Franz, franza@musc.edu, 843-876-5141
Description: We are investigating the safety and efficacy of repetitive TMS as a treatment for adolescent depression for those aged 12-21 years old. We are seeking adolescents of this age range who have not received sufficient benefit from at least one antidepressant medication trial. TMS is currently FDA approved for treating adult depression.

Title: rTMS for Bipolar Depression - current
Contact: Annabel Franz, franza@musc.edu, 843-876-5141
Description: We are investigating repetitive TMS as a treatment for bipolar depression in conjunction with mood stabilizers in adults aged 22-68 years old. We are seeking treatment refractory patients with bipolar disorder. TMS is currently FDA approved for treating adult depression.

Title: rTMS for Reducing Marijuana Craving and Risky Behaviors in Non-Treatment Seeking Heavy Marijuana Smokers - current
Contact: Annabel Franz, franza@musc.edu, 843-876-5141
Description: A pilot trial investigating how TMS to the left dorso-lateral pre-frontal cortex can reduce marijuana craving and impulsive decisions in adults 18-60.

Title: Enhancing Disrupted Reconsolidation: Impact on Cocaine Craving, Reactivity & Use
Contact: Amanda Smith, smitham@musc.edu, 792-6984
Description: The purpose of this double-blind, placebo-controlled study is to examine whether beta-adrenergic antagonist propranolol can attenuate cocaine-associated memories and thereby reduce cocaine craving, cue reactivity, and use in cocaine dependent participants. Participants will receive either placebo, 40mg, or 80mg of propranolol after each of two laboratory sessions of cocaine cue exposure. Participants will be evaluated on cocaine craving, physiological reactivity to cocaine cues, and cocaine use in follow-up sessions for 6 weeks.

Title: Traumatic Exposure and Competency to Stand Trial: Describing Juvenile Offender Characteristics.
Contact: Sheresa Christopher, chrisshe@musc.edu, 792-1461
Description: Exposure to traumatic events is associated with trauma sequelae which has been studied and observed in samples of justice-involved youth. Within this population, a small subset of youth is referred for evaluation of their competency to stand trial due to concerns they may be lacking a factual and rational understanding of the proceedings against them and the ability to assist their attorney in their defense. Despite the high prevalence of trauma exposure and the similarity of deficits observed, little is known about trauma exposure in youth thought to exhibit deficits in those abilities typically associated with competency to stand trial. The current study aims to describe the differences in characteristics between juveniles who are opined competent to stand trial and those who are not. A particular emphasis is placed on the presence and type of past trauma exposure in relation to the nature of the criminal offenses given the high prevalence of trauma in this population.
Title: Comparison of Pre-Trial Competency to Stand Trial Defendants’ Characteristics on Outcome of Feigning Measures: A Preliminary Study of Local Norms
Contact: Jennifer Steadham, steadhaj@musc.edu, 876-2140
Description: Deliberate attempts to falsify, fabricate, or grossly exaggerate some aspect of functioning is known as feigning. When feigning is motivated by possibility of external gains (e.g., avoidance of prosecution or lesser punishment), it is known as malingering (Rogers & Shuman, 2005). Malingering has obvious relevance in forensic mental health evaluations, as pre-trial criminal defendants have clear motivations to feign impairment. Feigning strategies can be subdivided into two varieties in criminal forensic contexts: cognitive (i.e., memory or thinking processes) and psychiatric (i.e., symptoms of major mental disorders) impairment. Categorical classifications can be made on the basis of a defendant’s performance on feigning assessment measures, into groups thought to be exaggerating or fabricating impairment (“probable malingers”) or those thought to be responding honestly (“non-malingerers”). In the last decade, direct examinations comparing the characteristics of competency defendants suspected of malingering versus non-malingerers, as classified by feigning measures, have been sparse and most often included as an incidental question in a larger study. For the current study, a sample of competence to stand trial evaluations conducted by MUSC’s Forensic Psychiatry Program will be reviewed. Competency to stand trial reports dated 2011 through August 2015 will be included for review. Evaluation reports will be coded for examinee (e.g., demographic, psychiatric diagnoses, and mental status descriptions) and evaluator characteristics (i.e., specialty field).

Title: CSP556 “rTMS for depressed veterans”
Contact: Matt Schmidt, matthew.schmidt@va.gov, 843-577-5011 ext 5209
Description: This is study for veterans only who have depression. The treatment given is Transcranial Magnetic stimulation. It is a double blind study with a sham (placebo) possibility. There is a screening phase of about 1 week, a treatment phase of 4-6 weeks, and a follow up phase where subjects come in once per month for 5 months. All procedures and assessments done at Ralph Johnson VA. Subject compensation is available up to $400.00.

Title: A Randomized Trial of E-cigarettes: Natural Uptake, Patterns and Impact of Use
Contact: Caitlyn Hood, hooca@musc.edu, 843-876-2291
Description: Electronic cigarettes (e-cigarettes) are the newest and perhaps the most popular non-cigarette products available to smokers. In this study, we will examine how the use of electronic cigarettes affects smoking behavior. Eligible participants will have a 2/3rds chance of receiving a sample of e-cigarettes. Participants must be current, daily cigarette smokers who are 18 years of age or older and interested in trying the e-cigarette.

Title: Oxytocin in Cocaine Dependence
Contact: Lisa Nunn, jenkinli@musc.edu, 792-0476
Description: This study explores the effect of oxytocin on stress response and brain reactivity in individuals with cocaine dependence. Participation consists of a screening visit, three outpatient study sessions, and two brief follow-up visits.
Title: Effect of Pregnenolone on Cue-Reactivity in Marijuana-Dependent Individual.
Contact: Lisa Nunn, jenkinli@musc.edu, 792-0476
Description: This study explores the impact of an oral medication, pregnenolone, on drug craving following exposure to marijuana cues. Participation consists of a screening visit and one study session.

Title: Neural Substrates of Emotion: Impact of Cocaine Dependence
Contact: Lisa Nunn, jenkinli@musc.edu, 792-0476
Description: This study explores the effect of oxytocin on brain activity associated with stress in cocaine dependent individuals. Participation consists of a screening visit and one study session.

Title: A Randomized Controlled Trial of Varenicline for Adolescent Smoking Cessation (formal title protocol); Project Quit (nickname)
Contact: Referrals – Team Intake Coordinator; Study Management - Lori Ann Ueberroth, Study Coordinator
Contact email: Referrals – smokingstudy@musc.edu; Study Management – ueberro@musc.edu
Contact phone number: Referrals – 792-4097; Study Management – 792-8220
Description: This is a research study to determine if a medication (varenicline) helps young cigarette smokers quit. Smokers aged 14-21 who participate in the study receive medication or placebo and help with quitting during 12 weekly sessions. Smokers under 18 must have parental consent. There is no cost to participate and compensation is available to those that qualify.

Title: The gender-sex hormone interface with craving & stress-related changes in smoking (formal title protocol); SCOR 3 Nicotine (nickname)
Contact: Referrals – Team Intake Coordinator; Study Management - Lori Ann Ueberroth, Study Coordinator
Contact email: Referrals – smokingstudy@musc.edu; Study Management – ueberro@musc.edu
Contact phone number: Referrals – 792-4097; Study Management – 792-8220
Description: This is a non-treatment study for cigarette smokers ages 18-45, examining gender and reproductive hormone influences on smoking behavior. There is NO requirement that participants be interested in quitting smoking. The study involves 4 clinic visits and compensation is provided for those who qualify.

Title: Gabapentin for Relapse Prevention: Alcohol Withdrawal-Brain GABA/Glutamate Effects
Contact: Konstantin Voronin, voronin@musc.edu, 792-4887
Description: This treatment study is an 16-weeks outpatient clinical trial where subjects will get medication, which might help them to reduce or stop their drinking, or a placebo. This study will recruit and randomize subjects who have expressed an interest in receiving treatment for alcohol dependence. Upon enrollment into this study there will be 11 outpatient visits. Each visit will last about 1-1.5 hours.
**ONGOING STUDIES**

**Title:** Impulsivity and Drinking/Craving: Effect of a Dopamine Stabilizer Medication  
**Contact:** Mark Ghent, ghent@musc.edu, 792-1222  
**Description:** This non treatment study investigates the effects of a medication in response to alcohol. Individuals (ages 21-40) who complete the study will be paid for their participation. This study does not involve alcohol treatment.

**Title:** Acceptability and feasibility of the remote monitoring of smoking and relapse in adolescents  
**Contact:** Taylor York, york@musc.edu, 843-792-0493  
**Description:** This is a research study that will test a new remote monitoring technology to assess smoking in the natural environment among adolescents and young adults ages 15-25. After assessment and inclusion in the study, participants will be asked to carry two devices (smartphone and a device to assess how much they are smoking) with them for 11 days and answer questions about their smoking, mood, surroundings, etc. Participants will also be asked to make a brief quit attempt lasting for approximately 48 hours. There is no cost to participate and compensation is available to those who qualify. Remote monitoring technology has the potential for fewer clinic visits and a better understanding of smoking among adolescents and young adults.

**Title:** A novel approach to reduce the use, misuse and abuse of prescription opioids in pregnancy  
**Contact:** Connie Guille, guille@musc.edu, 843-792-6489  
**Description:** The aim of this study is to gather feedback from pregnant women using prescription opioids who participate in a Cognitive Behavioral Therapy for Chronic Pain program for the reduction of use, misuse and abuse of prescription opioid medication(s).

**Title:** Adverse early childhood experience and risk for poor obstetric outcomes in African American women  
**Contact:** Connie Guille, guille@musc.edu, 843-792-6489  
**Description:** The aim of this study is to investigate the impact of early childhood adversity on a laboratory stressor and risk for poor obstetric outcomes.

**Title:** Testing a Promising Treatment for Youth Substance Abuse in a Community Setting  
**Contact:** Dr. Scott W. Henggeler, henggesw@musc.edu, (843) 876-1800  
**Description:** The overriding purpose of the proposed randomized trial is to examine the effectiveness of a promising outpatient treatment of adolescent substance abuse delivered in a community-based treatment setting.

**Title:** Family-Based Treatment for Parental Substance Abuse and Child Maltreatment  
**Contact:** Dr. Cynthia C. Swenson, swensocc@musc.edu, (843) 876-1800  
**Description:** The purpose of this randomized controlled trial is to examine the effectiveness of the Building Stronger Families Model versus standard services in Connecticut for physically abuse and/or neglected children whose parents are experiencing severe substance abuse. The study is being implemented through a community based mental health provider. Key outcomes under examination include child behavior, parent behavior, family relations, parent to child violence, reabuse, placement, and parental substance abuse.
**ONGOING STUDIES**

**Title:** Psychological First Aid for Victims of Crime  
**Contact:** Dr. Michael McCart, mccartm@musc.edu, (843) 876-1800  
**Description:** This study aims to implement and refine research protocols required for a full-scale randomized clinical trial of Psychological First Aid (PFA) for adult victims of crime. PFA is a promising acute intervention designed to reduce the severity and duration of trauma-related distress. Law Enforcement Victim Advocates are being trained to implement PFA with adult crime victims. A pilot trial is comparing PFA to usual services on key mental health outcomes from baseline through 4 months post-baseline.

**Title:** Synthesizing HIV Behavioral Intervention Effectiveness in Developing Countries  
**Contact:** Dr. Michael D. Sweat, sweatm@musc.edu, (843) 876-1800  
**Description:** This is a project in which we are conducting systematic reviews and meta-analysis on evidence of effectiveness of a variety of HIV behavioral interventions in developing countries.

**Title:** Phase II RCT of Comprehensive Triage HIV Prevention: Tanzania  
**Contact:** Dr. Michael D. Sweat, sweatm@musc.edu, (843) 876-1800  
**Description:** The purpose of this study is to conduct a rigorous 3-year Phase II trial of a promising HIV prevention strategy designed to significantly reduce population-level HIV incidence in rural developing country settings with severe generalized HIV epidemics.

**Title:** Community-Based Combination HIV Prevention in Tanzania Women at Heightened Risk  
**Contact:** Dr. Michael D. Sweat, sweatm@musc.edu, (843) 876-1800  
**Description:** This is a two-arm Phase II community randomized controlled trial of a community-based combination HIV prevention intervention among FSWs in Iringa, Tanzania. The combination package examined includes integrated biomedical, behavioral and structural components: The study will establish base rates of key outcomes including HIV incidence and viral load suppression, examine the socio-structural and behavioral pathways of the intervention, assess feasibility, acceptability and safety, and document preliminary effectiveness. (1) mobile HIV testing and risk reduction counseling; (2) service navigation to facilitate access to treatment and retention in care; (3) sensitivity training for HIV clinical care providers; (4) SMS text messages to promote adherence to care and ART; (5) venue-based peer education and condom distribution; and (6) a community drop-in-center to promote cohesion and collective action to reduce stigma and discrimination.

**Title:** Dyadic-Based Diagnosis, Care & Prevention for Discordant Couples in Tanzania  
**Contact:** Dr. Michael D. Sweat, sweatm@musc.edu, (843) 876-1800  
**Description:** The primary goal for the proposed study is to examine the feasibility, safety, and impact on improved care and prevention of novel strategies to identify and engage HIV sero-discordant couples in an integrated prevention and treatment intervention.
Title: Bringing South African Men into HIV Counseling and Testing (HCT) and Care
Contact: Dr. Michael D. Sweat, sweatm@musc.edu, (843) 876-1800
Description: The ultimate objective of this research is to provide evidence-based strategies to improve treatment of HIV+ men. Treatment as prevention (TasP) can only work through a three step process: (1) Testing a significant proportion of the population, (2) linkage to care and (3) maintaining in care a significant proportion of HIV+ individuals to the point of viral suppression. The benefits of increased testing, linkage to and maintenance in care for men would be enormous. We propose a study that combines structural and individual level interventions and integrates the results to address our overall objective of maintenance in care to the point of viral suppression. Aim 1: In a cluster-randomized study, we will investigate whether male-centered mobilization and testing increases the population-level percentage of men who have been tested (within the last 12 months) by more than 10 absolute percentage points. Aim 2: In the individually-randomized design, we will investigate whether POC CD4 testing and individualized case management improves linkage to care (immediately following diagnosis) and viral suppression (12 months later) over POC CD4 testing alone and standard of care. Aim 3: Integrate the results of the two trial components (Aims 1 and 2) to evaluate the joint effect of the interventions on the percentage of HIV+ men who are effectively tested, linked to care and maintained with undetectable VL. The benefits of increased testing, linkage to and maintenance in care for men would be enormous. Men would remain healthier longer, could work and support their families, contribute to rather than deplete household economic resources, raise their children, and they would be less likely to transmit HIV to female partners.

Title: A Pharmacokinetic Comparison of Immediate Release N-Acetylcysteine with Extended Release N-Acetylcysteine in Healthy Adults
Contact: Melissa Michel, michelm@musc.edu, 843-792-1901
Description: Healthy males and females between the ages of 18-50 years are asked to participate in a 12 day outpatient study. The purpose of the study is to determine if a newly developed extended release version of N-Acetylcysteine (NAC) will be acceptable to replace the currently available immediate release formulation of NAC.

Title: A Prospective, Longitudinal, Observational Study to Evaluate Potential Predictors of Relapse in Subjects With Major Depressive Disorder Who Have Responded to Antidepressant Treatment
Contact: Melissa Michel, michelm@musc.edu, 843-792-1901
Description: This study is being done to collect information related to Major Depressive Disorder (MDD). The purpose of this observational study is to identify if answers to self-reported questionnaires about your symptoms and functioning, information about your daily activity and sleep quality, and speech and voice characteristics can be used to predict worsening of MDD in the near future.
Title: A Phase 2, Efficacy, Safety, and Tolerability Study of ALKS 3831 in Schizophrenia with Alcohol Use Disorder.
Contact: Melissa Michel, michelm@musc.edu, 843-792-1901
Description: This study is designed to evaluate the efficacy, safety, and tolerability of ALKS 3831 in schizophrenia with AUD. ALKS 3831 is a combination of olanzapine, an approved antipsychotic treatment for schizophrenia, and samidorphan, a new medication. Potential subjects for this trial are adults with a diagnosis of schizophrenia and alcohol use disorder (AUD) with a recent change in symptoms. The study will test whether olanzapine with samidorphan will aide in lowering alcohol use for subjects at the same time that the combination of the two drugs lessens side effects of olanzapine such as weight gain.

Title: An Open-label, Long-term, Safety and Efficacy Study of Intranasal Esketamine in Treatment-resistant Depression
Contact: Melissa Michel, michelm@musc.edu, 843-792-1901
Description: The main purpose of this study is to assess the long-term safety, tolerability, and effectiveness of esketamine nasal spray plus a newly initiated oral (taken by mouth) antidepressant in patients with treatment-resistant depression. All patients in this study will be treated with esketamine nasal spray plus a new oral anti-depressant. The new oral anti-depressant will be one of the following approved and marketed oral antidepressants: duloxetine (Cymbalta), escitalopram (Lexapro), sertraline (Zoloft), or venlafaxine extended release (Effexor XR).

****Anticipated to start January 2016****