Angela Moreland, Ph.D., is an Assistant Professor at the National Crime Victims Research and Treatment Center (NCVC) at the Medical University of South Carolina (MUSC). She earned her Ph.D. in clinical psychology from Purdue University in 2009 and completed her pre-doctoral clinical internship and post-doctoral research fellowship at the NCVC. Dr. Moreland’s research interests focus on dissemination and implementation of evidence-based practice for victims of interpersonal violence, as well as primary and secondary prevention of child abuse and risk factors for maltreatment among parents of young children, with particular focus on high-risk, disadvantaged families. Dr. Moreland also examines the link between early victimization and high-risk behaviors, such as substance use and delinquency, among adolescents. She serves as the evaluator of Project BEST and the Program on Adolescent Traumatic Stress (PATS), through the National Child Traumatic Stress Network, as well as serving a primary role on several other projects focused on exposure to violence among adolescents, and associated consequences and high risk behaviors. In addition, Dr. Moreland held a leadership role on a policy project entitled *Vision 21* through the Office of Victims of Crime at the Department of Justice, which focuses on transforming victim services to better meet the needs of trauma victims and their families.
Meet Elizabeth Evans, LISW-CP

Elizabeth Evans is the owner and clinical therapist at Therapeutic Counseling South Carolina, Inc. on Daniel Island, and is also a member of the department’s Community Practitioners Advisory Board. Elizabeth provides behavioral therapy services, specializing with children aged 3-13. Her areas of clinical interest include ADHD, pediatric bipolar disorder, autism spectrum disorder, anxiety disorders, and trauma.

Elizabeth has 15 years of experience providing therapy to children and families. She has worked in elementary schools, hospitals, non-profit agencies, outpatient clinics, community college, family court, group homes, and residential facilities. She also has experience in forensic interviewing.

Elizabeth has been in Charleston since 2002. She has two young children, two German Shepherds, and a Dachschund. She enjoys traveling and reading, and is convinced that her career is a key component of her life’s purpose.
Dr. Blanco-Centurion completed his postgraduate studies in Physiology and Neurosciences at the National Autonomous University of Mexico and postdoctoral studies at Harvard University. Dr. Blanco-Centurion is an Assistant Professor within the Department of Psychiatry and Behavioral Sciences. The main focus of Dr. Blanco-Centurion’s research has been studying the neural network that modulates sleep and wake states using laboratory rodents as good models for understanding normal and pathological aspects of these behavioral states. In the past, he took advantage of selective and multiple brain lesions to propose the existence of a wider neuronal network upholding the waking state. He has also made important insights into the adenosinergic modulation of sleep in connection to cholinergic basal forebrain neurons and the endocannabinoid system. Dr. Blanco-Centurion has also studied the critical role of exercise restoring healthy sleep-wake patterns and speeding up postsurgical recovery of the aging brain. Over the past few years, his focus has shifted to the field of gene therapy and optogenetics. In particular, he has studied how transfecting the orexin gene into surrogate neurons constitutes a feasible approach to treat the cardinal symptoms of narcolepsy; i.e. cataplexy. Using optogenetics tools, he is now looking at the role of Melanin-Concentrating Hormone (MCH) neurons as a novel and important modulator of sleep. He is also collaborating with researchers in the Alcohol Research Center. This collaboration rests on the strong comorbidity between drug abuse and sleep disorders. A product of this collaboration, Dr. Blanco-Centurion and Dr. John Woodward recently published a study highlighting the role of the endocannabinoid receptor 1 in sleep modulation. Dr. Blanco-Centurion was recently awarded with a Pilot Project by the ARC and is also currently investigating whether MCH would be useful to treat the sleep disorders observed in an animal model of alcohol dependence. Dr. Blanco-Centurion is coordinating a weekly seminar that focuses on reviewing the most relevant scientific literature in sleep science particularly in connection to major psychiatric disorders. Dr. Blanco-Centurion has been working at MUSC since 2011 and can be reached at blancoce@musc.edu.
Meet Barbara Melton, LPC, LPCS, CAC-II

Barbara Melton is a member of the Community Practitioner’s Advisory Board for the Department of Psychiatry and Behavioral Sciences. She received her Master’s Degree from the Citadel in 1991 in the Clinical Counseling Program, and has been in private practice in downtown Charleston since. She also teaches part time at Webster University and has contracts to supervise clinicians at the Dorchester Alcohol and Drug Commission and Clarendon Behavioral Health in Manning. Aside from being a Licensed Professional Counselor (LPC), an LPC Supervisor, and a Certified Addictions Counselor II (CAC), she is also a South Carolina Supreme Court approved mediator in family matters and has conducted mediation trainings.

Barbara’s specialty areas in private practice include: working with clients with self-injurious behaviors; working with clients with serious mental illness; working with trauma survivors; working with clients with substance or process addictions; and working with couples. She regularly conducts and sponsors trainings in various topics and has presented at both national and international conferences.
FROM THE CHAIR’S OFFICE

In the upcoming weeks, the Chair’s office will be going through a transition due to Audrey Kobayashi and Kristen Mulholland going out on maternity leave and hiring a new Administrative Assistant. We are in the process of hiring a new Administrative Assistant as Audrey will not be returning to MUSC. Kristen will return late December/early January. Jennifer Winchester will be assisting Dr. Uhde during Audrey and Kristen’s maternity leave. We are hopeful that the new Administrative Assistant will start on August 25, 2014. We ask that you please be patient with our office as we work through the process of hiring and training a new Administrative Assistant.

DROP-IN TOWN ALL

Our next Drop-in Town ALL will be held Monday, August 18 from 2-3pm in the IOP auditorium. During drop-in Town ALL’s open forum will be held for those individuals who have questions or issues that need to be addressed. Members of the Administrative Leadership Committee of the Departmental Council will be on hand to answer any questions you have during the drop-in open forum. Please contact psychall@musc.edu if you have any questions.

KUDOS/WINS

Dr. Gregg Dwyer was an invited speaker for the Low Country Crisis Negotiator Team Training in Charleston: Law Enforcement Personnel: Stress Reactions and Coping Mechanisms.

Dr. Gregg Dwyer presented “The Legal Profession Under Stress: Understanding Reactions and Coping Mechanisms” at the 2014 Annual South Carolina Judicial Conference in Columbia, SC. He was invited by a state Supreme Court Justice to speak on stress management for judges and their staff.
Meet Susan Watson

Susan Watson is Dr. Uhde’s new Administrative Assistant. Susan is a graduate of North Carolina State University, with a Bachelors degree in Psychology. Susan worked in the field of mental health and substance abuse addiction for the past five years, serving as the Assistant Director of Admissions at Discovery Institute for Addictive Disorders in New Jersey. Susan is new to the Charleston area, and excited to be a part of MUSC’s prestigious legacy. Welcome Susan! Please stop by Dr. Uhde’s office to introduce yourself to Susan.

SEMINAR

Dr. Vincent P. Clark
Professor
Department of Psychology
University of New Mexico

“Neuroimaging Combined with Neuroenhancement for Basic and Clinical Research.”

Applicant for MUSC SmartState Endowed Chair of Translational Neuroimaging

Monday, September 22, 2014
9am
10P Auditorium
SELECTED PUBLICATIONS


Gros DF, Sarver NW. J Anxiety Disord. 2014 Apr;28(3):283-90. *An investigation of the psychometric properties of the Social Thoughts and Beliefs Scale (STABS) and structure of cognitive symptoms in participants with social anxiety disorder and healthy controls.*


Title: “Lunchtime Losers” – MUSC’s team-based weight loss class starts 9/15/14

The MUSC Weight Management Center is about to begin our 22nd “Lunchtime Losers” weight loss class! We started offering this very popular class back in 2008. To date, our Lunchtime Losers have lost over 2,000 lbs and an impressive average of 4%... in just 10 weeks!

Now, what is “Lunchtime Losers?”...

• 10-week weight loss class/competition
• $98 for the entire 10-week program... you can even payroll deduct over 3 months! (including for the cost of meal replacements, if you decide to incorporate them into your eating plan)
• 1-hour weekly meetings over your lunch break (12:00-1:00)
• You can attend in-person or online (in real-time); can even attend on your smartphone or tablet! Lessons are recorded for those who might not be available during class time, so you’ll never miss class content.
• Led by weight management professionals from the MUSC Weight Management Center (i.e., team of registered dietitians, psychologists, exercise physiologists)
• Emphasis on healthy eating, exercise, and other sustainable healthy lifestyle behaviors; we will help you create individualized diet and exercise plans
• Prizes for top individual and team weight losers

CLASSES START: Monday, Sept 15th. Classes will be held at the MUSC Weight Management Center (located in the MUSC Institute of Psychiatry, Ste. 410 South). Classes will meet for 10 Mondays starting 9/15/14.

Email Josh Brown (browjosh@musc.edu) if interested. We’d love to have you, your coworkers, family, and friends join us!
This week, the country is mourning the loss of Robin Williams, a truly inspirational actor and comedian who in so many ways brought laughter and self-reflection into our lives. While most people will remember his extraordinary wit, I’ve always been impressed by the thoughtful, caring, and sobering side of his creative works.

Through his intelligent humor and improvisation, Mr. Williams was able to stimulate serious discussions about controversial social issues. Part of his creative genius was his ability to make each of us confront our own personal biases and prejudices in a non-threatening manner. For me, Mr. Williams often elicited “Why am I laughing” questions. His humor did not denigrate other people in a hurtful manner, as can sometimes be the case in comedy; but rather his work often challenged us to scrutinize our own beliefs, life struggles, and insecurities. Perhaps more effective than many psychotherapeutic modalities, Mr. Williams was able through his characterizations to promote self-exploration and encourage us to consider other possibilities without our even knowing that this was taking place. And, he accomplished this for so many of us for only the price of a movie ticket or a cable subscription, which is considerably less expensive than psychotherapy.

Mr. Williams’ death elicits sadness and anger. I get the sadness! But why does his death from depression elicit anger? Maybe because:

1) Our society fails to recognize that depression is a serious, disabling, potentially life-threatening medical illness;  
2) There is a public perception that depression is a personal weakness, rather than the 8th leading medical cause of death in the United States;  
3) Only a minority of people suffering from major depression, including those with a past history of suicide attempts, are able to obtain and/or receive evidence-informed treatments;  
4) Insurance providers fail to abide by the true intent of the federally mandated Mental Health Parity and Addiction Equity Act, which, if appropriately enforced, would “really” provide improved access to mental health care;  
5) Highly creative people have an increased prevalence of mood disorders (including, and perhaps, especially, Bipolar Disorder), and we as a society fail to provide appropriate mental health care;  
6) There remains, even among health care providers, a stigmatization about mental illness as well as mental health providers themselves, which leads to a failure in seeking and providing satisfactory mental health care; and  
7) There has been a decrease in research funding to study and to develop more effective treatments of medical mental illnesses.

In Robin Williams, we have lost a creative genius who was killed by a medical disorder, depression. If he had remained with us, he perhaps one day would again (Good Will Hunting) have been able to employ his creativity, humor, and intelligent wit to uncover and reduce our society’s widespread harmful and largely oblivious prejudice against those suffering from major depression, addictions, and other mental illnesses.
"Making Tobacco History: Accelerating Efforts to Reduce the Harm Caused by Tobacco"

2014 Fall Scientific Retreat on Tobacco Related Research

Thursday, October 30th
9:00AM - 4:30PM
MUSC Bioengineering Building (BEB) Auditorium
Reception from 4:30PM - 6:00PM in the BEB Lobby

—— Keynote Speakers ——

John R. Seffrin, PhD  
Chief Executive Officer, American Cancer Society, Inc

Jonathan M. Samet, MD, MS  
Senior Editor, Surgeon General's Report 2014, Distinguished Professor and Chair, Department of Preventive Medicine, University of Southern California

Register NOW at sctr.musc.edu
Registration is free but required.
Potential presenters & attendees should register by September 12, 2014.

—— Retreat Sponsors ——

SCTR  
MUSC Hollings Cancer Center
South Carolina Tobacco-Free Collaborative
Join us for one full day of education and networking as we address the most current issues and hot topics facing social workers today. This year’s conference will be held just outside of Charleston at the Daniel Island Club, a state-of-the-art facility in a beautiful Lowcountry setting. Topics include working with combat veterans, cultural competency, working with LGBT youth and community, and stress inoculation therapy and self-care in social work practice.

The SC Board of Social Work Examiners will approve 7 hours of designated credit.

General Registration: $110 | MUSC Employees & Retirees: $80 | BSW/MSW Students: $30
Fees increase October 1. Fee includes materials, continuing education credit processing, breakfast and lunch.

Questions? Call (843) 792-0175 or e-mail psych-events@musc.edu.
For conference details and to register online, visit musc.edu/psychevents.
Motivational Interviewing (MI) is a collaborative conversation style for eliciting and strengthening a person's own motivation for change. It is an evidence-based, guiding method of communication, which has been shown to be successful in research methodologies. People are more likely to make changes if they perceive they have control and choice, and MI is a language that draws upon the patient’s own expertise for solutions. This exciting training brings together psychiatrists, psychologists, social workers, counselors, primary care physicians, and other helping professionals with an interest in increasing patient engagement and empowering lasting behavior change. Our MINT-certified trainers have developed a hands-on workshop incorporating lectures, breakout groups, roundtable discussions, and video presentations to present a complete introduction to Motivational Interviewing.

For workshop details, click here.
A Randomized Controlled Trial of Varenicline for Adolescent Smoking Cessation
This is a 12-week trial of varenicline versus placebo, added to smoking cessation counseling, for smokers ages 14-21.
Phone 843-792-4097, e-mail smokingstudy@musc.edu

Gender, Hormones, and Stress-Related Smoking
This project is designed to examine relationships between gender, reproductive hormones, and smoking behaviors in the laboratory and natural environment.
Phone 843-792-4097, e-mail smokingstudy@musc.edu

ACCENT: Achieving Cannabis Cessation—Evaluating N-Acetylcysteine Treatment
This is a 12-week multisite trial of N-acetylcysteine versus placebo, added to contingency management, for cannabis-dependent adults ages 18-50.
(MUSC is leading the study but is not among the enrollment sites)
Phone 843-792-8894, e-mail accent@musc.edu

Group Motivational Interviewing (GMI) For Homeless Veterans In VA Services
The proposed study will investigate the effectiveness, implementation process, and cost estimate of Group Motivational Interviewing (GMI) for Veterans with SUDs receiving VA housing services. Outcomes will be assessed at multiple time points using a multi-modal approach. The ultimate goal of this research is to establish the basis of a GMI dissemination and implementation course of action for highly vulnerable homeless Veterans in VA housing for achieving their greatest success in attaining housing stability.
Contact: Elizabeth J. Santa Ana, Ph.D., 843-789-7168

Oxytocin in Cocaine Dependence
This is a non-treatment study investigating the effect of oxytocin on stress response and brain activity in response to cocaine cues. Participation involves 6 outpatient visits, including 2 fMRI scans. Cocaine dependent individuals between 18 and 65 years old may be eligible to participate.
Contact: Lisa Nunn, 843-792-0476

Exploring Sex Differences in the Neural Correlates of PTSD: Impact of Oxytocin
This is a non-treatment study investigating gender differences in the effect of oxytocin on neural circuitry related to PTSD. Participation involves 3 outpatient visits, including 2 fMRI scans. Individuals between 18 and 50 years old who experienced traumatic or stressful events in childhood may be eligible to participate.
Contact: Todd LeMatty, 843-792-8179

The Effects of Oxytocin on Couples’ Conflict-Resolution Interactions
The aim of this study is to examine the extent to which oxytocin improves conflict resolution skills and mitigates craving and subjective, physiological, and neuroendocrine reactivity in response to dyadic conflict among couples with substance use problems. Couples will complete a psychosocial assessment and two 10-minute videotaped conflict resolution tasks. Using a double-blind design, both partners within each couple will be randomly assigned to receive either intranasal oxytocin or saline spray. We examine measures of change in each partner’s conflict resolution skills, craving, and subjective, physiological, and neuroendocrine responses to the conflict resolution tasks.
Contact: Dr. Julianne Flanagan, 843-792-5569
Integrated Treatment of OEF/OIF Veterans with PTSD and Substance Use Disorders

In comparison to the general population, U.S. military and Veterans are at an increased risk for developing both substance use disorders (SUD) and Post Traumatic Stress Disorder (PTSD). Current research has shown that there is a high comorbidity of SUD and PTSD, and although there are a number of treatments for SUD and PTSD independently, there are very few effective methods to simultaneously treat both disorders. Because of this substantial gap in the treatment of both SUDs and PTSD, it has become essential to develop a combined treatment that would address and treat both disorders. Individuals, specifically U.S. military and Veterans, with SUD/PTSD have unique needs that require a specialized treatment approach. This designed approach would employ cognitive-behavioral therapy (CBT) to treat the SUD, in conjunction with Prolonged Exposure therapy to treat the PTSD. Prolonged Exposure (PE) is an empirically supported and evidence-based treatment that is currently regarded as the "gold standard" psychosocial treatment for PTSD. In combination with CBT, this treatment would address both disorders in hopes of reducing substance use and PTSD symptomatology.

Contact: Frank Beylotte  843-792-2522  beylott@musc.edu

Laboratory Study of the Influence of Oral Cannabidiol on the Subjective, Reinforcing and Cardiovascular Effects of Smoked Marijuana

Cannabidiol (CBD) is an antagonist at the CB-1 and CB-2 receptors. Pre-clinical work indicates that CBD blocks the actions of tetrahydrocannabinol (THC) and therefore may be an oral candidate for the treatment of marijuana dependence. This Phase 1 human laboratory study seeks to determine the ability of CBD to diminish marijuana smoking and establish further safety information. Subjects will be given oral CBD or placebo to see if marijuana smoking is reduced in a laboratory setting.

Contact: Melissa Michel  843-792-1901

A Pharmacokinetic Comparison of Immediate Release N-Acetylcysteine With extended Release N-Acetylcysteine In Healthy Adults

The specific aim of this research plan is to confirm in human volunteers that the pharmacokinetic characteristics of NAC following administration of the new oral extended release formulation will support once daily dosing in clinical trials involving patient populations. This proposal is to conduct a relative bioavailability study to compare plasma drug concentrations of NAC following a standard immediate release formulation of four 600 mg tablets (single 2400 mg dose) with concentrations from a single administration of six 400 mg dosage forms (2400 mg dose) of the test formulation. Each subject will serve as his/her own control and receive both formulations. The immediate release formulation will always precede the new experimental formulation.

Contact: Melissa Michel  843-792-1901

N-acetylcysteine for Relapse Prevention to Cocaine Use

The purpose of the study is to assess the safety and efficacy of extended release N-Acetylcysteine (NAC) in preventing relapse to cocaine use. Subjects must be abstinent from cocaine use prior to entering into the study. The study has two working hypotheses. First, NAC will decrease relapse to cocaine use, based on multiple time-to-event measures of relapse in a group of cocaine-dependent individuals with at least 7 days of confirmed abstinence from cocaine before medication initiation. Second, the NAC group will show sustained efficacy over placebo in the 4-week follow-up period after medication is discontinued. The rationale for investigating the efficacy of NAC in the treatment of cocaine addiction was initially based on animal data that pointed to perturbations of glutamatergic brain circuitry after chronic operant exposure to cocaine. NAC ameliorated glutamatergic deficits and inhibited cocaine and cue induced reinstatement of cocaine seeking behaviors. Recent preclinical work strongly suggests that NAC will be most effective as a relapse prevention agent after a brief period of abstinence from cocaine.

Contact: Melissa Michel  843-792-1901
Vitamin D and Type 2 Diabetes Study (D2d)
The goal of the Vitamin D and type 2 diabetes (D2d) study is to determine if vitamin D supplementation works to delay the onset of type 2 diabetes in people at risk for the disease and to gain a better understand how vitamin D affects glucose (sugar) metabolism. Researchers at twenty US sites will enroll people with pre-diabetes (people who have higher than normal blood glucose level but not high enough to meet the diagnosis of diabetes). The study will enroll participants over approximately 2 years and participants will be followed for approximately 4 years. Participants will receive either Vitamin D or a placebo by chance. Participants will take 1 pill a day for the duration of the study. Participants will visit the study site for up to 13 scheduled visits during their participation.
Contact: Suzanne Kuker 843-792-5427

Genetic and Brain Mechanisms of Naltrexone’s Treatment Efficacy for Alcoholism
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 (placebo is a capsule that looks the same as the investigational drug, but has no real medication. It is a “sugar pill”). 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.
Contact: Konstantin Voronin 843-792-2727

Impulsivity and Drinking/Craving: Effect of a Dopamine Stabilizer Medication
MUSC Center For Drug And Alcohol Programs is conducting an alcohol research study investigating 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.
Contact: Mark 843-92-1222.

Sleep Research Data Repository (SRDR)
The aim of this study is to develop a data warehouse of biological and psychological information related to sleep and sleep disorders. Data being collected include sleep physiological measurements and the results of interviews, questionnaires, and laboratory tests obtained from both healthy subjects and patients with psychiatric and medical conditions, focusing primarily on narcolepsy with cataplexy, recurrent isolated sleep paralysis, and sleep panic. SRDR data will be made available to current and future IRB-approved investigators who wish to investigate sleep across a large spectrum of medical conditions.
Contact: Kim Leslie 843-792-0403

Enhancing Disrupted Reconsolidation: Impact on Cocaine Craving, Reactivity & Use
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.
Contact: Amanda Smith 843-792-6984
**ONGOING STUDIES**

**Reducing Smoking Cue Reactivity and Behavior via Retrieval-Extinction Mechanism**
This study will examine the effects of a brief behavioral intervention, retrieval-extinction training, on the cue reactivity and smoking behavior of nicotine dependent participants making a quit attempt. All participants will receive two laboratory-based ‘extinction’ sessions that involve protracted exposure to multiple sequences of smoking cues. Half of the participants will be shown a video containing smoking content prior to extinction and the other half will be shown a video with no smoking content. The smoking video combined with extinction is postulated to alter memories for learning that support smoking cue reactivity and behavior. Therefore, participants shown the smoking video prior to the extinction are expected to exhibit reduced craving and smoking behavior at post-treatment follow-up time points (i.e., 24 hours, 2 weeks, and 4 weeks).

Contact: Amanda Smith 843-792-6984

**Transcranial Magnetic Stimulation (TMS) for Nicotine Smoking Cessation**
TMS administered over the prefrontal cortex in an effort to produce a reduction in nicotine cravings

Contact: Jkeonye Moss 843-876-5141

**TMS in conjuction with Mood stabilizers for Bipolar Depression subjects**
TMS stimulation is deeper in the brain to target neuronal pathways while participants continue mood stabilizer medication

Contact: Jkeonye Moss 843-876-5141

**TMS in Depressed Adolescents**
Noninvasive TMS using magnetic fields to stimulate brain nerve cells affection depression & mood

Contact: Jkeonye Moss 843-876-5141

**Focal Electrically-Administered Seizure Therapy (FEAST) - Unilateral ECT for Depression**
Focalized seizure induced to prefrontal cortex with similar efficacy to traditional ECT

Contact: Will DeVries 843-876-5141

**TMS for treatment of Burning Mouth Syndrome (BMS)**
TMS will be used to interrupt chronic pain associated with burning mouth syndrome

Contact: Jkeonye Moss 843-876-5141

**Integrative Risk Reduction and Treatment for Teen Substance Use Problems and PTSD (RRFT)**
The National Crime Victims Center is offering a therapeutic research program for adolescent victims of sexual abuse/assault that may also use alcohol or other substances to help them cope. Teens and caregivers are matched with a clinician to receive weekly trauma-specific treatment. Compensation is available for time devoted to ongoing research assessments. Therapy: Individual and group trauma-focused treatment options; average length of treatment is 3-4 months. Age Requirements: 13-18

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

**Better Resiliency Among Veterans with Omega-3s (BRAVO)**
The BRAVO study is investigating whether supplementation with omega-3 fatty acids will reduce the risk for medically serious suicidal behaviors, depression, PTSD, and substance abuse in a Veteran population. Volunteers who take part in this study would drink smoothies high in Omega-3 HUFAs three times per day for 6 months. They continue current mental health care and are also seen and evaluated by the BRAVO study 6 times over the 6 month period.

Contact the BRAVO referral line at 888-322-6884 or email: BRAVO@MUSC.EDU